

Equipping tertiary student volunteers to care pastorally for the elderly

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ABSTRACT

The focus of this study is on the spiritual and emotional well-being of the elderly who are not properly attended to at specific care facilities and how the training/equipping of tertiary student volunteers (from the North-West University's Potchefstroom's campus) can improve this situation. The study approaches this matter from a pastoral position and provides suggestions on how tertiary students may be better equipped as volunteers to care pastorally for the elderly. The study was done by using Osmer's methodology, which includes four tasks:

- The descriptive-empirical task: "What is going on?"
- The interpretive task: "Why is it going on?"
- The normative task: "What ought to be going on?"
- The pragmatic task: "How might we respond?"

An inductive qualitative approach was used for the completion of the descriptive-empirical task. The researcher sought to understand and identify the elderly's needs in order to find out if the tertiary student volunteers are adequately prepared to care for the elderly.

The researcher used the interpretive task in order to investigate the relevance between the empirical results and literature from other disciplines. The results of the empirical study were interpreted in the light of a literature study of relevant material in Social Work, Psychology, and Health Sciences by using the themes and subthemes identified in the descriptive-empirical task.

The normative task was done by using applicable passages from the Old Testament (*inter alia* Ge 15:15; Ex 20:20; Dt 5:33; Job 5:26; Job 12:12 and Pr 16:3) and New Testament (1 Tim 5:1-5) to gain normative insights into the needs and concerns of the elderly. By doing a grammatical and historical exegetical study on applicable passages in the Old Testament and the New Testament, the researcher found biblical principles regarding the elderly as well as what the Bible says about one's attitude towards the elderly.

Lastly, the pragmatic task was used in order to propose guidelines to equip tertiary student volunteers to care pastorally for the elderly. The proposed guidelines are divided into two categories, namely: training, and programs and activities.

Overall, this study has shown how tertiary student volunteers can be better prepared for their task of caring pastorally for the elderly. Therefore, the aim of this study was reached and the central theoretical argument was proven

Keywords: Gerontology, elderly, pastoral theology, volunteers, emotional needs of the elderly, social needs of the elderly, spiritual needs of the elderly, care, caring for the elderly

OPSOMMING

Die fokus van hierdie studie is die geestelike en emosionele welstand van bejaardes na wie daar nie behoorlik omgesien word nie en hoe tersiêre studentvrywilligers opgelei en toegerus kan word om die situasie te verbeter. Die studie is benader vanuit 'n pastorale perspektief en dui aan hoe tersiêre studente as vrywilligers toegerus kan word om pastoraal na bejaardes om te sien. Die studie is gebaseer op Osmer se vier take van praktiese teologie, naamlik:

- Die deskriptief-empiriese taak – Wat gebeur?
- Die interpretatiewe taak – Hoekom gebeur dit?
- Die normatiewe taak – Wat behoort te gebeur?
- Die pragmatiese taak – Hoe behoort ons te reageer?

Die deskriptief-empiriese taak is uitgevoer deur middel van 'n induktiewe kwalitatiewe benadering, waar die navorser gepoog het om die behoeftes van die bejaardes te identifiseer en te verstaan. Dit is gedoen om te bepaal of die tersiêre studentvrywilligers behoorlik voorberei word om na bejaardes om te sien.

Die navorser het die interpretatiewe taak gebruik om die verband te bepaal tussen die empiriese resultate en literatuur vanuit ander dissiplines. Die resultate van die empiriese studie is vertolk met behulp van 'n literatuurstudie van toepaslike materiaal uit Maatskaplike Werk, Psigologie en Gesondheidswetenskappe deur gebruik te maak van die temas en subtemas soos geïdentifiseer in die deskriptief-empiriese taak

Die normatiewe taak is uitgevoer deur gebruik te maak van toepaslike Skrifgedeeltes uit die Ou Testament (onder andere Gen. 15:15; Ex. 20:20; Deut. 5:33; Job 5:26; Job 12:12 en Spr. 16:3) en die Nuwe Testament (1 Tim. 5:1-5) ten einde normatiewe riglyne aangaande bejaardes te verkry. Deur 'n grammatikale en historiese eksegetiese studie van die toepaslike gedeeltes in die Ou Testament en Nuwe Testament uit te voer, het die navorser Bybelse riglyne van toepassing op bejaardes bepaal, asook wat 'n persoon se houding teenoor bejaardes moet wees.

Die pragmatiese taak is uitgevoer om riglyne te voorsien waarvolgens tersiêre studentvrywilligers toegerus word om pastoraal na bejaardes om te sien. Die voorgestelde riglyne is in twee kategorieë verdeel, naamlik: opleiding en programme en aktiwiteite.

Oorhoofs beskou het die studie bewys dat tersiêre studentvrywilligers beter voorberei kan word vir hulle taak. Dus is die doel van die studie bereik en die sentrale teoretiese argument is bewys.

Sleutelwoorde: Gerontologie, bejaardes, pastorale teologie, vrijwilligers, emosionele behoeftes van bejaardes, sosiale behoeftes van bejaardes, geestelike behoeftes van bejaardes, sorg, versorging van bejaardes

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CHAPTER 1: INTRODUCTION

1.1 Background and problem statement

1.1.1 Background

During her studies at the North-West University (NWU), Potchefstroom Campus, the researcher was part of the Student Rag Community Service (SRCS). SRCS is described by Stidworthy *et al.* (2011) as a registered welfare organisation of the NWU's Potchefstroom Campus which is managed by tertiary students on a voluntary basis. For the purpose of this study, tertiary students refer to fulltime students who are busy with their undergraduate and post-graduate studies. SRCS focuses on four main areas, namely early childhood development, child and youth development, outreach programs, and vulnerable youth and adults. The researcher was part of a project at a caring facility for the elderly. In her third year at the university, she was chosen to be in charge of the project. The researcher went through the SRCS's compulsory training for project leaders. The aim of the training was to help a project leader understand the project and set up a vision, mission, and goals for the project. The project leader had to develop a programme in order to meet the goals of the project. Having received the training, helped the researcher to select her vision, mission, and goals for her term, but it did not help her to fully understand the challenges she was going to face regarding the elderly. During her term as project leader, the researcher was constantly faced with the following questions: What do the elderly need? Why are some of them deteriorating physically and emotionally at a rapid pace? How can the tertiary students contribute effectively to the care of the elderly?

The researcher experienced that many tertiary students joined the SRCS's committees only to accumulate participation points in order to stay in the university's residences, and not because they have a heart for volunteer work. Some of these volunteers even demonstrated negative attitudes towards the elderly. Others, although they had a heart for volunteer work, did not know how to care for the elderly properly.

In her encounters with the elderly, the researcher experienced that the elderly enjoyed the visits by the tertiary student volunteers, no matter whether an activity was planned or not. They appreciated the company, a touch of the hand and a shoulder to cry on. This was sometimes all they needed as it made them feel like a person again. However, the elderly are faced with specific challenges that need to be taken into account when dealing with them. Weyers and Herbst (2012-2013:54) state in the SRCS's Manual that the elderly need to adjust to changing physical appearance and abilities, changing housing arrangements, changing life conditions and the death of a loved one, changing roles and activities, and changing relationships. In addition

to these challenges, Theron (2013:1) mentions that the elderly also have to cope with discrimination and prejudice based on age, the loss of a support system when children emigrate, financial problems, abuse, neglect, and emotions of fear. To add to these challenges, Koenig and Lawson (2004:22) discuss the challenge of “anomie”, which is a sense of painful isolation that can grow and lead to depression, substance abuse and the loss of purpose and meaning.

In retrospect, the researcher realises that she was ill prepared for her volunteer work with the elderly. She did not understand their changing reality and was not prepared for the challenges when working with them. She could not properly relate to them, could not fully comprehend what they were going through and was not equipped to successfully reach out to them to ensure their emotional, social, and spiritual well-being.

1.1.2 Problem statement

According to the South African demographic statistics, the country’s population is increasingly beginning to display an older age-profile. In 1996, 6.96% of the population was 60 years and older (Statistics, 2001:20). This has increased to 7.8% in 2013 (Statistics, 2013:3). Czaja and Sharit (2009:37) comment that as the elderly population increases, more people will need help with aspects of daily living. In this study, the elderly is defined as people who are 65 years and older (WHO, 2015). Although programs for the elderly are being developed worldwide by organisations such as the International Association of Gerontology and Geriatrics, it is evident that the elderly should receive more attention (IAGG, 2014; Theron, 2013:2; Weyers & Herbst, 2012-2013:55). The spiritual and emotional well-being of the elderly are not properly attended to and there is a lack of equipped social and spiritual leaders - even pastors feel ill prepared for their task to serve the elderly (Malan & Dreyer, 2009:1).

Elledge-Volker (2011:62) is of the opinion that pastoral theology can make a huge contribution to the field of gerontology and Theron (2013:7) shows in her article that gerontology is still an unexplored field for practical theology in South Africa. Malan and Dreyer (2009:1) also state that practical theology is the ideal discipline to lead the conversation in gerontology. The concepts of pastoral theology and gerontology will be defined later. According to Van Dyk (quoted by Mulenga, 2010), pastoral care and counselling are more holistic than any other approach as they facilitate the client’s ability “to explore and discover ways of living more fully, satisfyingly, and resourcefully” and also seek to impart hope (Louw, quoted by Mulenga, 2010). Pastoral theology, says Elledge-Volker (2011:61), can enrich individuals’ and faith communities’ capacity for adaptive coping and enables them to see the ageing process as a time filled with new adventures of grace. The researcher is thus of the opinion that this study should be

conducted in the realm of pastoral theology as it can contribute to a program to equip tertiary student volunteers in their task of caring for the elderly from a pastoral and biblical perspective.

According to Klapp (2003:69), the Hebrew Bible contains at least 250 references to old age. She says that recurrent themes and valuations of the elderly as esteemed and useful members of the community emerge from these texts. The passage in 1 Timothy 5:1-16 contains directions on how the community members should be managed. The instruction in the first verse is: "Do not rebuke an older man harshly, but exhort him as if he were your father...". Lange (2008) comments that these verses are to direct Timothy on how he must conduct himself towards the aged, young persons, and widows in the community. The Bible clearly states that the elderly should be treated with respect and honour (Ex 20:12; Le 19:32; Eph 6:1-3). Ageing should not be seen as something to dread or resent, says Klapp (2003:69), but rather as a blessing for keeping God's commandments (Ex 20:12; De 5:33; 1 Ki 3:14; Pr 16:31) and as a sign of wisdom (Pr 16:31). In this study, the Word of God will provide normative guidelines to tertiary student volunteers in their conduct towards the elderly.

In her encounters with the elderly, the researcher experienced that some of the older people have quite a negative view of life and she wondered whether this could not change by improving their quality of life. She is convinced that the tertiary student volunteers can contribute to the elderly people's quality of life by pastorally caring for them. Mukherjee (2013:450-451) mentions that quality of life is a subjective and multidimensional concept that is increasingly being recognised as a useful outcome in health and social care research. Quality of life is defined by the World Health Organisation (WHO) (2014:1) as:

"An individual's perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns."

Mukherjee (2013:451-452) indicates that the existing models of quality of life are rarely multidimensional and thus not holistic. Some models focus on the basic needs of the elderly, others on their objective needs, and still others on their subjective needs. There is a need for an integrated, multidimensional model to equip tertiary student volunteers to help them improve the quality of life of the elderly. It is not only necessary to investigate what affects the quality of life of the elderly, but also what can enhance their quality of life, for example: social engagement (Kiely *et al.*, 2000), communication (Williams, 2011:1), and 'being there' (Gennrich, 2004:47). Therefore, to equip tertiary student volunteers, a training programme needs to be developed that focuses on the spiritual, emotional and social needs of the elderly.

To determine the state of current research being done in volunteering with the elderly, an extensive electronic search of the following databases has been done at the theological library of the North-West University:

- NEXUS
- SACat
- SAePublications, RSAT
- EbscoHost
- ProQuest

The results of the database search reveal that extensive research has been done in the field of gerontology. This research includes:

- Caring for the elderly living at home (Castillo, 2008:334; Duggal, 2003:214; Glasgow & Brown, 2008:1; Podoba, 2005:290; Quail, 2008:352).
- Describing the elderly's social needs (Du Rand & Engelbrecht, 2001:10-16; Froneman *et al.*, 2004:413-429; Poole *et al.*, 2009:176-191) and their spiritual needs (Seicol, 2005:293-300).
- Elderly volunteers (Cattan *et al.*, 2011:328-332; Haski-Leventhal, 2009:388-404; Lie *et al.*, 2009:702-718; McDonald *et al.*, 2013:283-290; Muir, 2006:379-387; Peacock *et al.*, 2006:335-349).
- Caring for the elderly from a nursing perspective (Grau *et al.*, 1995:34-41; Wasserbauer *et al.*, 1996:232-238; Wilkes *et al.*, 2011:213-221); social work perspective (Fenge *et al.*, 2009:509-524; Jansen van Rensburg: 2009:134; Pinson *et al.*, 2010:188-203); practical theology perspective (De Wet, 2010:269; Malan & Dreyer, 2009:200-208; Watkins, 2003:225); from a nursing and pastoral care perspective (MacKinlay, 2009:131-148); and from a health care and religious perspective (Koenig & Lawson, 2004:1-201).

From the above, it is clear that extensive research has been done internationally regarding the elderly, their needs, and how to care for them or improve their quality of life. However, little research has been done in the field of gerontology in South Africa from a practical theological perspective. No research could be found to equip tertiary student volunteers in their volunteering and caring for the elderly from a pastoral theological perspective.

Therefore, the research question for this study is: **How can tertiary student volunteers be better equipped in caring pastorally for the elderly?**

From this general research question, the researcher will endeavour to answer the following specific questions in this study:

- How are tertiary student volunteers currently being prepared for their work with the elderly and how is it received at the caring facilities?
- What insights can be gained from other disciplines regarding the equipping of tertiary student volunteers working with the elderly?
- What normative guidelines can be identified concerning caring for the elderly?
- What guidelines can be formulated to better equip tertiary student volunteers in caring pastorally for the elderly?

1.2 Aim and objectives

1.2.1 Aim

The main aim of the research is to better equip tertiary student volunteers in caring pastorally for the elderly.

1.2.2 Objectives

In order to reach this aim, the following objectives will be pursued:

- To investigate how tertiary student volunteers are currently being prepared for their work with the elderly and how is it received at the caring facilities.
- To study other disciplines in order to gain insights regarding the equipping of tertiary student volunteers working with the elderly.
- To identify normative guidelines concerning caring for the elderly.
- To formulate guidelines to better equip tertiary student volunteers in caring pastorally for the elderly.

1.3 Central theoretical argument

The central theoretical argument of this research is that by giving tertiary student volunteers proper guidelines, they will be better equipped to care pastorally for the elderly.

1.4 Methodology

The pastoral study will be done from the Reformed theological perspective (which will be explained in the next paragraph) according to the methodology of Osmer (2008:4). The reason for using this methodology is that it provides a good framework for interpreting the research question from a practical theological perspective. Osmer visualises four tasks for a practical theological research project, namely: the descriptive-empirical task, the interpretive task, the normative task, and the pragmatic task.

The first objective will be reached by performing the descriptive-empirical task (Osmer, 2008:48), which includes investigating the state of the training given to the tertiary student volunteers at the NWU, Potchefstroom-Campus, participating in the SRSC program and how these student volunteers are perceived by the elderly and the care givers at the caring facility. A qualitative empirical study, according to the Grounded Theory methodology, will be done by using semi-structured questionnaires and interviews with current and old project leaders of the SRCS as well as with the elderly and staff of the nursing homes where the project leaders volunteered. It is necessary not only to look at the training of the project leaders and how they experienced their volunteer work at the nursing home, but also at how it was received by the staff and more importantly, how it affected the lives of the elderly.

The interpretive task consists of drawing on theories of other disciplines to understand and explain why certain patterns and dynamics concur (Osmer, 2008:4). To interpret the current state of care given to the elderly by the tertiary student volunteers and how their work was experienced by the nursing staff and the elderly, the results of the empirical study will be interpreted and further guidelines will be identified in the light of a literature survey of relevant material in social work, psychology and health science.

The formal dimension of the normative task is biblical and ethical interpretation (Osmer, 2008:139). The normative task will be done by doing exegesis according to the method of Janse van Rensburg *et al.* (2011) of applicable passages in the Old Testament (Ex 20:12; Le 19:32; 1Ki 3:14; Pr 16:31) and the New Testament (Eph 6:1-3; 1Tim 5:1-16) to uncover what the biblical principles are regarding the elderly as well as what the Bible says about one's attitude towards the elderly.

The pragmatic task consists of forming strategies of action (Osmer, 2008:4). The fourth objective can be accomplished by using information gathered from the empirical study, the literature study, and the normative study to establish guidelines for a programme that will help indicate how to improve the care given to the elderly by tertiary student volunteers from a pastoral perspective.

1.5 Concept clarification

1.5.1 Gerontology

Segal *et al.* (2011:4,17) describe gerontology as the field of study that deals with ageing and older adulthood. Atchley and Barusch (2004:2) describe the aim of gerontology as the understanding of ageing from various perspectives. For Johnson (2000:133), the biological, psychological, and social processes of ageing are important. This coincides with Aiken (1995:21) who suggests that gerontology is an interdisciplinary field where different disciplines

are seeking to address the problems associated with ageing. For this study, the researcher defines gerontology as a field of study that uses interdisciplinary perspectives to understand ageing and older adulthood.

1.5.2 Reformed tradition

The Reformational theological tradition recognises that the Word of God, the Bible, is inspired by the Holy Spirit and is therefore authoritative (Boice, 1999; Mohler, 2000; NWU, 2014). The main premise and highest principle of the Reformed theology is the sovereignty of God (Mohler, 2000; Slick, 2012). According to Vorster (2010:432), the character of the Reformed theology can be summarised by the five Latin expressions, namely: *sola Deo gloria* [glory to God alone], *sola gratia* [grace alone], *solus Christus* [Christ alone], *sola scriptura* [Scripture alone], and *sola fide* [by faith alone].

1.5.3 The relationship between practical theology and pastoral studies

Practical theology is one of the fields of theology (Heyns & Pieterse, 1990:7). According to Lotter (2007:4), practical theology consists of the following sub-fields: homiletics, liturgy, catechetical and pastoral. Practical theology is involved with not only integrating the knowledge within theological education, but also in facilitating the seminary, the congregation, and the wider society's interaction with one another. The focus of pastoral theology (pastoral studies), as one of the sub-fields of practical theology, is on caring for the community, the church and/or the individual as a shepherd would care for his flock and helping them deal with problems in their lives (Lotter, 2007:2).

1.6 Ethical considerations

This study will be done in accordance with the ethical guidelines set out by the North-West University in the Manual for Master's and Doctoral Studies and the NWU Ethics checklist available at the following websites:

- <http://www.nwu.ac.za/sites/www.nwu.ac.za/files/files/library/documents/manualpostgrad.pdf>
- http://www.nwu.ac.za/sites/www.nwu.ac.za/files/files/i-research-support/documents/Web_Docs/NWU_RS_Ethics_Checklist.pdf

The main ethical concern is never to cause harm to any persons or institution during or after the research. In this study, the empirical study is done using the qualitative method. Each participant signs a form of informed consent, which includes the aims, objectives, and the methodology of the research. The researcher ensures the anonymity of the participants by

keeping their names and their personal data and information confidential, therefore creating a safe and comfortable environment. The data gathered will be stored for five years in a secure manner. Data in digital format will be secured by using a protected password.

1.7 Classification of chapters

Chapter 1 consists of the research proposal that introduces the research topic and the research question. It also includes the aims, objectives, central theoretical argument, the methodology, ethical considerations, and the schematic presentation of the project.

Chapter 2 reports on the descriptive-empirical task. A qualitative empirical study is done by using semi-structured questionnaires and interviews with current and old project leaders of the SRCS as well as with the elderly and staff of the nursing homes where they volunteered. It is necessary to look not only at the training of the project leaders and how they experienced their volunteer work at the nursing home, but also how it was received by the staff, and even more importantly, how it affected the life of the elderly.

Chapter 3 deals with the interpretive task and investigates the current state of the training given to the volunteers and how their work was experienced by the nursing staff and the elderly. The results of the empirical study are interpreted in the light of a literature study of relevant material in social work, psychology, and health science.

Chapter 4 contains the normative task, which is done by doing a grammatical and historical exegetical study on applicable passages in the Old and New Testament, in order to see what the biblical principles are regarding the elderly as well as what the Bible says about one's attitude towards the elderly.

Chapter 5 consists of the pragmatic task and guidelines for a programme that is established in order to improve the training given to the volunteers and to better equip them for their task in caring for the elderly.

Chapter 6 contains a summary of the conclusions of the various chapters and recommendations for potential further studies in this field.

1.8 Schematic presentation

Table 1-1: Schematic presentation

| Research question | Aim and objective | Research methodology |
|---|--|---|
| How are tertiary student volunteers currently being prepared for their work with the elderly and how is it received at the caring facilities? | To investigate how tertiary student volunteers are currently being prepared for their work with the elderly and how is it received at the caring facilities. | A qualitative empirical study will be done by using semi-structured questionnaires and interviews with current and old project leaders of the SRCS as well as the elderly and staff of the nursing homes where they volunteered. |
| What insights can be gained from other disciplines regarding the equipping of tertiary student volunteers working with the elderly? | To study other disciplines in order to gain insights regarding the equipping of tertiary student volunteers working with the elderly. | To interpret the current state of care given to the elderly by the tertiary student volunteers and how their work was experienced by the nursing staff and the elderly. The results of the empirical study will be interpreted and further guidelines will be identified in the light of a literature survey of relevant material in social work, psychology, and health science. |
| What normative guidelines can be identified concerning caring for the elderly? | To identify normative guidelines concerning caring for the elderly. | The normative task will be done by doing a exegesis according to the method of Janse van Rensburg <i>et al.</i> (2011) of applicable passages in the Old and New Testament to uncover the biblical principles regarding the elderly as well as what the Bible says about one's attitude towards the elderly. |
| What guidelines can be formulated to better equip tertiary student volunteers in caring pastorally for the elderly? | To formulate guidelines to better equip tertiary student volunteers in caring pastorally for the elderly. | By using information gathered from the empirical study, the literature study and the normative study, guidelines for a programme can be established that will help indicate how to improve the care given to the elderly by tertiary student volunteers from a pastoral perspective. |

CHAPTER 2: USING THE DESCRIPTIVE-EMPIRICAL TASK TO IDENTIFY THE CARE GIVEN TO THE ELDERLY

2.1 Introduction

The Student Rag Community Service (SRCS) is a student body of the North West University (NWU) situated on its Potchefstroom Campus. The SRCS is a registered welfare organisation, which focuses on helping people, giving them hope and inspiring change (Weyers & Herbst, 2012/2013:8). It has been fully student driven for the past 35 years. The SRCS delivers support to existing NGOs, schools and other organisations in the community. The SRCS projects involve four main areas, namely: early childhood development, child and youth development, outreach programs, and lastly vulnerable youth and adults. Each student residence on campus has an SRCS project and the project leader is chosen by the residence or by the SRCS Executive Committee. These project leaders undergo training and choose a committee that consists of tertiary student volunteers. In this chapter, the effectiveness of the training given to the project leaders to equip them in working with the elderly will be investigated. To do this, the researcher will use the descriptive-empirical task, which is the first task used in the methodology of Osmer (2008:4).

2.2 Problem statement

The question under discussion is how well the project leaders and the student volunteers are prepared through their training program to address the challenges of working with the elderly. Is it possible that certain aspects are overlooked and mistakes are made by project leaders and student volunteers due to a lack of knowledge and improper training? Working with the elderly is no easy task - even clergymen have admitted that they are neither fully aware of the needs of the elderly nor are they properly prepared during their training to care for the elderly (Malan & Dreyer, 2009:1).

2.3 Aim

The overall aim of this practical theology study is to better equip tertiary student volunteers to care pastorally for the elderly. The aim of this chapter is to investigate the current state of the training given to student volunteers and how the student volunteers' caring for the elderly is experienced by the elderly and the caregivers at the care facilities.

2.4 Objectives

In order to reach this aim, the following objectives regarding the participants are pursued:

The elderly's perspective:

- To shed light on how they experience the students and the volunteer work they do.
- What their needs are and what challenges they face.
- What would improve their quality of life (and how can the students help to improve it).

The caregiver's perspective:

- Identifying the needs of the elderly.
- How the caregivers experience the student volunteers.
- How the student volunteers can improve in caring for the elderly.

The project leader's perspective:

- To evaluate the current training given.
- How they (the project leaders and student volunteers) experience the elderly.
- What can be done to improve the care they give to the elderly?

By investigating what the project leaders do at the care facility, how this is perceived by the elderly and caregivers, and what the impact this has on the care given to the elderly, the above-mentioned objectives will help the researcher gain insight into the training given to student volunteers.

2.5 Theoretical assumptions

In this study, the research uses Osmer's methodology. This methodology involves four tasks that form a hermeneutical cycle. These four tasks include: the descriptive-empirical task, the interpretive task, the normative task, and the pragmatic task. These tasks supersede each other and assist the researcher in interpreting the object of investigation systematically through practical-theological interpretation (Wilhelm, 2014:21). The first task set out in Osmer's methodology is the descriptive-empirical task (Osmer, 2008:4).

This task focuses on gathering data through 'being there' and practicing priestly listening in order to derive patterns and dynamics formed in certain contexts (Osmer, 2008:34). In this study, the participants who will be listened to are the elderly, caregivers, and the project leaders. By using the descriptive-empirical task, the researcher will determine 'what is going on'

from each of the participants' perspectives. This will help the researcher determine what the status of the training is and how effective it is. In this task, the researcher will gather information from the care facilities. Therefore, the data gathered will discern patterns in the current training done with project leaders and the impact it has on each group of participants as a whole and individually (Osmer, 2008:48).

2.6 Research methodology

2.6.1 Paradigm

In order to reach the proposed aim of the chapter, the researcher had to decide on a research design. Research follows mainly two types of designs, namely quantitative and qualitative research (Muijs, 2011:1). Quantitative research investigates a phenomenon by collecting numerical data and analysing it using mathematically based methods (Aliaga & Gunderson, 2000:3). On the other hand, qualitative research, according to Denzin and Lincoln (2011:3), enables the researcher to enter the world of the participants. The researcher will thus be able to observe and study the experiences and perceptions of the participants in their particular contexts from their perspectives. Each participant makes his/her own observation in his/her surroundings. Therefore meeting the participant in his/her 'world' will enable the researcher to describe and understand the participant's behaviour, experience or how he/she addresses specific problems (Babbie, 2014:151; Creswell, 2013:48).

For this reason, the researcher has chosen a qualitative approach for her empirical study. The researcher will use inductive reasoning while doing the qualitative study. Inductive reasoning consists of moving from an observation towards a general explanation, thus moving from a specific observation towards discovering a pattern (Babbie, 20014:23). Therefore, she can observe and gather data from the care facilities and draw conclusions from the data gathered (Delport & De Vos, 2011:49). The researcher wants to discover how the different groups involved perceive the training, what the impact of the involvement of the tertiary student volunteers with the elderly is, and how it can be improved.

2.6.2 Choosing a design for the qualitative study

Creswell (2013:11) mentions five designs when doing qualitative study. These designs are narrative research, phenomenology, ethnography, case study, and grounded theory. To determine which design is most suited for this study, a brief description and evaluation of the five approaches are given. According to Creswell (2013:70), narrative research is a method that begins with the collection of stories from individuals, which also includes documents and group conversations. Czarniawska (2004:17) defines narrative research as chronologically connected

spoken or written texts that give an account of an event/action or series of events/actions. Narrative research, as Creswell (2013:70) mentions, focuses on studying the stories of one or two individuals. The procedure entails collecting data through the participant's stories and reported individual experiences and subsequently ordering the meaning of the participant's experiences chronologically. The aim is to capture detailed stories or life experiences of a single individual or a small number of individuals (Creswell, 2013:74). As the researcher wants to gain insights from three groups of participants on various aspects and not focus on the stories and life events of the elderly, caregivers and the project leaders, this approach is not appropriate for this study.

Phenomenologists attempt to understand social and psychological phenomena from the perspectives of the people involved (Welman & Kruger, 1999:189). In contrast to the narrative approach that focuses on the individual's perception, phenomenology's basic purpose is to research and understand several individuals' "lived" experiences of a concept or event (a phenomenon) and explain the occurrence universally (Creswell, 2013:76; Lester, 1999:1). According to Lin (2013:470), a phenomenon can be seen as an emotion, relationship, an entity like a program, an organisation, or a culture. The researcher collects data from individuals who have experienced a phenomenon and uses the data to develop a collective description of the experience of all individuals (Creswell, 2013:76). Moustakas' (1994:60) work depicts that the description formed by the researcher contains 'what' the participants experienced and 'how' they experienced it. Although phenomenology provides a deep understanding of a phenomenon, the approach can be too structured and the researcher needs a basic understanding of philosophical assumptions (Creswell, 2013:83). Regarding Lin's (2013:470) definition of a phenomenon, it is the researcher's opinion that although the training is done by an organisation, it does not depict a phenomenon. Furthermore, the phenomenological approach focuses on a deep understanding regarding the phenomenon, whereas with this study, the researcher focuses more on what is being done and how it is perceived by the different groups involved and not specifically how each participant feels. Therefore, this approach is not applicable to this study.

Reeves *et al.* (2008:512) define ethnography as the study of social interactions, behaviours, and perceptions that occur within groups or communities. Creswell (2013:90-91) adds that ethnographers study the language and interaction among members of the culture-sharing group. Ethnographers will often immerse themselves in the group or community and they will interview the members of the group and observe their day-to-day lives. Their focus is on developing an intricate and comprehensive description of the culture of the group or community. According to Fouché and Schurink (2011:314), ethnography consists of observing the group/community and describing its actions and the meaning attached to those actions.

Therefore, ethnography involves extensive and prolonged fieldwork (Creswell, 2013:96; Patton, 2002:81). Furthermore, it requires an understanding of cultural anthropology and being sensitive towards the needs of the participants (Creswell, 2013:96; Patton, 2002:81). As ethnography involves the description of shared patterns of a group or a culture, as explained by Creswell (2013:104), this approach is not applicable to this particular study as the focus of the study is not on the cultural aspects of a specific ethnic group.

The case study approach is defined by Yin (2014:16) as two-fold. Firstly, the case study approach is an empirical study that studies a current phenomenon by taking the real-world context into account. Secondly, it deals with many variables, therefore multiple sources are used and the data needs to converge in a triangulating fashion (Yin, 2014:17). Therefore, case studies cannot create a theory and are rather used to disprove or contribute to an established theory (Rowley, 2006:220). The case study approach is the best approach when the researcher wants to provide an in-depth understanding of a case or cases (Creswell, 2013:104). This dissertation neither has an established theory to disprove or contribute to, nor does it need an in-depth understanding of a case or cases, thus making the case-study approach unsuitable for this study.

The fifth approach, namely grounded theory, uses empirical data collected from participants in order to conceptualize understanding and generate a theory (Bryant & Charmaz, 2008:1; Creswell, 2007:63; Gugushe, 2014:16; Patton, 2002:125). Grounded theory is not just one of the most popular research designs - it also takes the unique approach of using data to generate a theory rather than to test data against existing theory (Birks & Mills, 2011:1-2). According to Charmaz (2006:2), grounded theory methods have methodical guidelines to collect and analyse qualitative data in order to construct theories 'grounded' in the data. Due to its guidelines on collecting data and its relationship with qualitative coding (which leads to the forming of categories), this approach is well suited to this study.

While a theory will not be developed, the researcher will use grounded theory coding to formulate guidelines, which will help tertiary student volunteers in caring pastorally for the elderly. However, the chosen categories will be used to address the problems and formulate the guidelines. Thus, the grounded theory methods and the grounded theory qualitative coding will be used (and not the entire grounded theory approach).

2.6.3 Selection of participants

The researcher chose three groups of participants, namely the elderly, the caregivers at the elderly care facilities and the project leaders. The reason for choosing these participants and dividing them into these three groups is to shed light on the current training given by the SRCS to the project leaders and how the participants involved perceive it. The researcher used theoretical sampling to select her participants. The sample of participants were chosen to help the researcher understand the training given and the effect it has on the various groups of participants and to highlight the proposed guidelines to better equip tertiary student volunteers to care for the elderly (Neuman, 2013:2015).

2.6.3.1 *The elderly*

Eight participants were chosen from two care facilities and a semi-structured interview was conducted using a schedule as a guideline. The participants were women between the ages of 76-90 years. One participant was confined to her room, but the other seven were in good health. Three of the eight women, although living in a caring facility, lived in separate apartments. All of the participants were of sound mind, meaning not one participant had a neurodegenerative disease. In the section, where the results of the empirical study are given, the elderly participants are lettered A-G. Participants A-D lived in care facility 1 and participants E-G lived in care facility 2. Care facility 1 has a shared garden, a television-, dining- and living-room. It has double and single rooms and an infirmary. Care facility 2 has apartments inside the facility. Each apartment has its own bedroom, bathroom, kitchen, and living area. Some of the apartments have small gardens and a beautiful view. There is also a dining/activity room, an infirmary and a kiosk in the facility. Residents can choose if they want to either make their own food or have a dinner delivered to them. Church services and bible studies are held at both facilities and there are certain services rendered by people, like hairdressers, to the residents.

2.6.3.2 *The caregivers*

Caregiver is a term used in this study for anyone who works permanently at an elderly caring facility. The caregivers are registered nurses, staff nurses, and auxiliary nurses. Regarding the caregivers of the caring facility, the researcher asked eleven caregivers in the different facilities to fill out a schedule. One participant's results were discarded when it became evident that she was talking about the wrong type of students. She answered the questions about nursing students and not student volunteers. Thus, the participants consisted of nine women and one man. Work experience of the caregivers at the specific facility ranges from one to 13 years. When asked, two of the participants opted to have a semi-structured interview. In the section, where the results of the empirical study are given, the caregivers are numbered 1-10.

2.6.3.3 The project leaders

The researcher approached former project leaders from the SRCS, whose projects entailed working with the elderly in caring facilities. A schedule was given to them. Although ten schedules were distributed, only five were returned, perhaps because these project leaders have completed their studies, left the university, and entered the job market. In the section, where the results of the empirical study are given, the project leaders are numbered I-V.

2.6.4 Data gathering

After choosing the participants, the researcher collected data by means of semi-structured interviews with the elderly. The semi-structured interviews were more convenient for the elderly as most of them no longer have proper hand function and would find it difficult to write down any answers. For the caregivers and project leaders, schedules were distributed, which they had to complete. Greeff (2011:351) explains that a semi-structured interview is a way to gain a detailed picture of the participant's beliefs regarding a particular topic. Therefore, although the researcher had a list with predetermined questions, she had more flexibility to follow up on interesting paths that the participant took. This allowed the researcher to get fuller, more detailed descriptions from the participant (Greeff, 2011:352). The researcher used audio recordings, with the elderly's permission, during their semi-structured interviews. This ensured that nothing the elderly said was lost.

2.6.5 Data analysis through coding

After collecting the data, the researcher started with the coding process as set out by Saldaña's approach (2009:16). The researcher used the first step by arranging the collected data. This helped to ensure that no data went unseen. The researcher did not transcribe the semi-structured interviews with the elderly *verbatim* as she rather made a synopsis of the interviews. Thereafter pre-coding followed. This required the researcher to underline significant passages, as mentioned by Layder (1998:53), which helped to see what information emerged from the data. Saldaña (2009:51) considers six particular coding methods as part of the grounded theory-coding canon. These six include the first cycle methods, namely *in vivo*, process and initial coding, and the second cycle includes focused, axial, and theoretical coding. The first cycle methods are coding processes for the beginning stages of data analysis and split data into individually coded segments (Saldaña, 2009:51). The second cycle methods are for the latter stages that constantly compare and reorganise the codes. In this study, the researcher made use of initial coding as the first cycle method. The goal of initial coding, as set out by Charmaz (2006:46), is to remain open to all possible theoretical directions in which the reading of the data takes the researcher. Keeping this in mind, the researcher used initial coding to break down the data into separate sections, where she examined and compared the data to discover the

similarities and differences (Strauss & Corbin, 1998:102). Thereafter, the researcher used axial coding for the second cycle. Saldaña (2009:159) explains that axial coding extends on the work that was done in the initial coding process. It is used to strategically reassemble the split data from the initial coding process to form relevant categories (Strauss & Corbin, 1998:124).

2.7 Trustworthiness

Botma *et al.* (2009:232) states that truth-value, applicability, consistency, and neutrality are the four standards of trustworthiness. Truth-value is about discovering human experiences as lived and perceived by participants (Botma *et al.*, 2009:233). To ensure this, the researcher made certain that what the participants perceived was written and free from bias, and in doing so, the researcher ensured both truth-value and neutrality (Klopper, 2008:69-70). While coding, the researcher went back to the data continuously in order to saturate the data and ensure that the data showed applicability and consistency (Botma *et al.*, 2009:233).

Qualitative research entails reporting and understanding how the chosen participants perceive the social problem. Therefore, qualitative data needs to be trustworthy to ensure that the participants' meanings ascribed to a social problem is understood (Botma *et al.*, 2009:235)

2.8 Research ethics

Strydom (2011:113) states that research should be based *inter alia* on trust, acceptance, cooperation and well-accepted conventions and expectations between the parties involved. The concept "research ethics", according to Theron (2008:106), addresses aspects like voluntary participation, anonymity, and confidentiality. Furthermore, Mouton (2006:244) states that participants must be informed about the duration of the study, the aims of the study, the methods that will be used and the risks involved. To comply with these aspects, the researcher made sure that she complied with the ethical norms and standards as set out by the North West University. An ethical checklist was followed and ethical clearance was received. The researcher used informed consent to inform the participants about the aspects, aims, duration, and methods of the study (Mouton, 2006:244). Regarding the aspects as set out by Theron (2008:106), the researcher informed the participants verbally and in writing about their rights regarding the leaving of the study if they so wished. To uphold the anonymity and confidentiality, the researcher did not use the names of the participants, but rather numbered the participants. The names and personal information and data are confidential. The personal information, semi-structured interviews, audio recordings, and completed schedules are in the possession of the researcher. The data will be in safekeeping for five years in a password-protected file.

2.9 Findings

2.9.1 Themes and subthemes

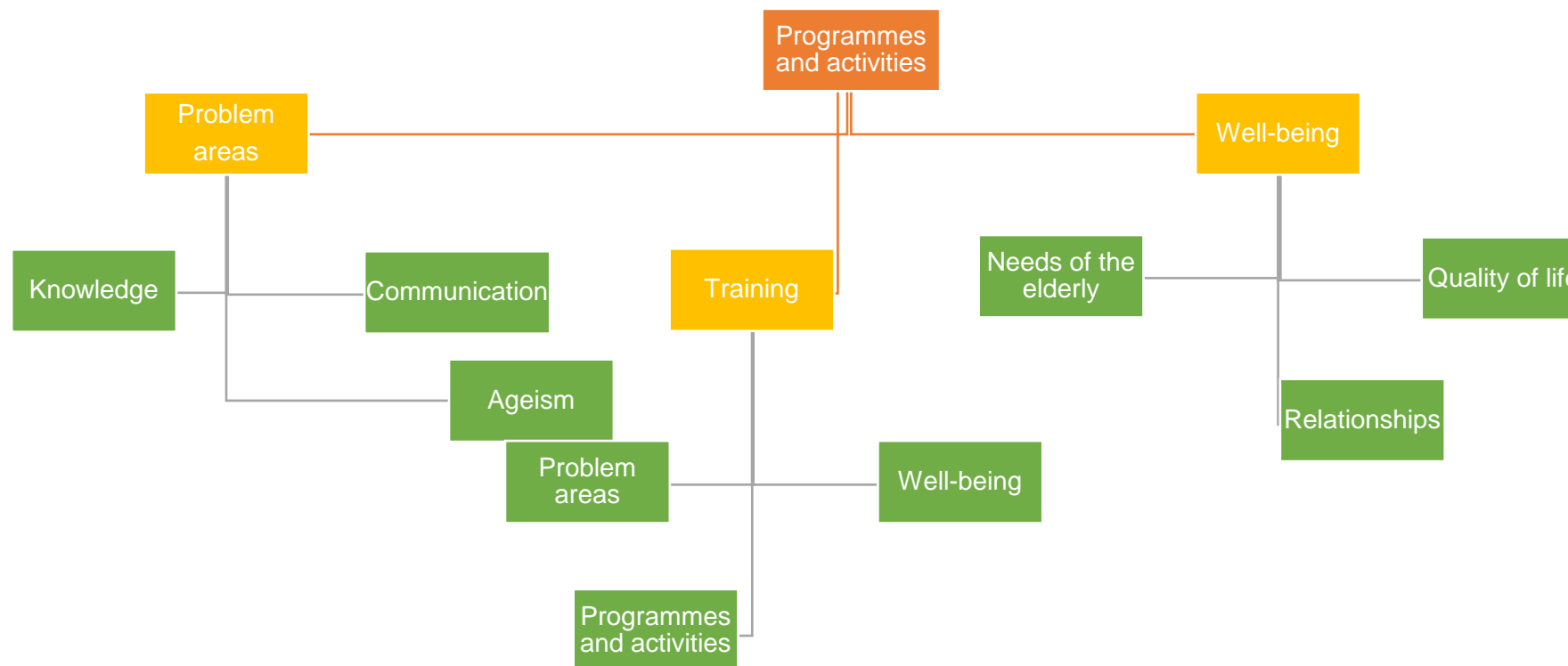


Figure 2-1: Schematic diagram of themes and subthemes

Based on the empirical results, the following themes and sub-themes were chosen:

- Problem areas, which include the sub-themes knowledge, communication skills, and ageism.
- Well-being of the elderly, with its sub-themes of relationships, needs of the elderly and quality of life.
- Programs and activities.

By choosing these themes and sub-themes, the researcher can evaluate the training given to project leaders by taking into account the different perceptions of the elderly, caregivers, and project leaders.

2.9.1.1 Problem areas

It was discovered that although the project leaders receive training, the normal tertiary student volunteers do not. Therefore, the student volunteers face numerous challenges due to the lack of knowledge and lack of training. The project leaders, who had training, believe that the information given to them about the elderly is not sufficient in preparing them for their task. Lack of knowledge led to the problem areas, which include knowledge, communication and preconceived ideas and bias attitudes towards the elderly (ageism).

2.9.1.1.1 Knowledge of the elderly and their circumstances

The project leaders and the caregivers feel that the student volunteers are not adequately prepared for their work with the elderly. Therefore, the student volunteers need to be better equipped by teaching them not only how to run a project administratively, but also what to expect from the elderly and what to do in certain cases. It was found that the student volunteers do not know about the needs of and challenges faced by the elderly. The student volunteers should therefore consult with the caregivers for background information on the elderly in order to understand any special needs they may have. Similarly, the project leaders believe that consulting with the caregivers is an important aspect for future project leaders to keep in mind. This will reduce the problem areas in the sense that by knowing the conditions of the elderly; student volunteers will not do certain things, such as talking loudly to the elderly who are not hard of hearing. They will not use the wrong language, meaning that some student volunteers talk to the elderly like babies and therefore infantilise them. They will also know who is diabetic and offer different treats to them.

It has also been found that the student volunteers forget to introduce themselves to the elderly. It must be kept in mind that some of the elderly have certain illnesses, which include Alzheimer's disease or dementia. Therefore, when working with the elderly who have these illnesses, student volunteers should introduce themselves and wear nametags. This will make

working with the elderly easier and will show them that the student volunteers are not threats. Furthermore, student volunteers need to improve their knowledge about elderly people with disabilities. Some of the elderly at the caring facility are bedridden and others simply cannot participate in every activity offered by the volunteers. Therefore, the activities and programs should be more accommodating to these elderly residents. It is thus imperative that the student volunteers have training on disabilities and illnesses as this will inform the student volunteers on what to expect and to incorporate certain activities in their programs.

Another problem area due to lack of knowledge is that student volunteers do not know how to offer care or support during grief. Two of the project leaders remarked that it was difficult for them to care for the elderly and offer support during grief as their training has taught them not to be too emotionally invested. However, according to Participant IV, she had to become a comforter for someone who had lost a loved one and she found it difficult to be supportive without becoming overly emotional. This is emotionally taxing for the student volunteers and it is therefore necessary to include in the training how to deal with or handle grief.

2.9.1.1.2 Communication

Communication plays a pivotal part in building a relationship with the elderly. The study found that according to four caregivers, the student volunteers communicate with the elderly with respect, engage in good conversation with them, and are always friendly and polite. However, part of the problem area is that the student volunteers do not know how to communicate appropriately regarding the elderly's abilities. This means that although a particular elderly person is not hard of hearing (for example), the student will continue to talk unnecessarily loudly. Some students are also prone to using "baby talk", meaning that they talk to the elderly like babies. Additionally, the student volunteers often forget to introduce themselves to the elderly, which is problematic when dealing with those who are suffering from Alzheimer's or dementia. Different disabilities indicate that students need to interact with the elderly in different ways. The student volunteers should find ways to improve the communication between the elderly and the student volunteers. In an effort to improve their communication skills, the student volunteers need to spend quality time with the elderly, learning about them and helping them to overcome their disabilities by being more empathetic and communicative.

Another important aspect of communication is that of the student volunteers and the caregivers. Participant II faced the challenge of having a contact person at the facility who constantly forgot about scheduled times. Another project leader feels as if the student volunteers irritate the caregivers because they interfere with the daily routine. However, the project leaders and the caregivers both believe that it is important to build a strong relationship with each other. Participant 3 of the caregivers remarked that it is highly important to communicate with the

nursing staff in order to relieve the nurses' stress. According to the project leaders, the caregivers and project leaders (and student volunteers) should communicate regularly, as this will ensure that the student volunteers know and understand the needs of the elderly.

2.9.1.1.3 Ageism

According to the empirical results, some of the student volunteers have preconceived ideas about working with the elderly. During the duration of the project leaders' terms, they reported that their and the student volunteers' attitudes towards the elderly changed.

According to Participant I, she was often confronted with human suffering and this made her uncomfortable. However, during her term, her view of the elderly changed and she discovered that the elderly are incredible people with wonderful stories to share. According to a number of participants, student volunteers are either scared of the elderly or love working at the facility, where they are extremely helpful and engaging. Participant 5 noted during the term how some of the volunteers were uncomfortable working with the elderly, which therefore inhibited them in providing proper care. Another participant (II) commented that the student volunteers often feel guilty and volunteering is the way in which they give back, although this participant also mentioned that he had a tough time keeping his student volunteers motivated. Participant III said that it took some time for the student volunteers to adapt to the environment in the care facility, but after a while, they became more comfortable working with the residents. Thus, time spent at the care facility changed the views of both the project leaders and the student volunteers. Their views changed from sympathy to empathy and they therefore learned to be compassionate and understand the elderly better.

2.9.1.2 Well-being of the elderly

This theme has three sub-themes, namely relationships, needs of the elderly and quality of life. Quality of life is based on the needs of the elderly and how they are being met; whereas relationships and the needs of the elderly have an effect on their well-being. Therefore, it is evident that the student volunteers have a large effect on the well-being of the elderly. If the elderly's needs are being met, their quality of life will improve, which consequently has a positive effect on the well-being of the elderly. This is also true for the opposite. Therefore, this theme with its sub-themes needs to be taken into consideration in order to propose guidelines to equip tertiary student volunteers to care pastorally for the elderly.

2.9.1.2.1 Relationships

According to the elderly and the caregivers, most of the elderly residents' families do not visit them and they therefore do not get the love or care they deserve. This is why the elderly's relationships with the student volunteers and caregivers are of paramount importance. The elderly are grateful for the student volunteers, where three of the eight participants pointed out

that they had formed a bond with the student volunteers. One remarked that they were better than her own grandchildren were; whereas another said that, they were like grandchildren to her. It did not matter to the elderly which activity was offered, it only mattered that it was a break from their routine, that they were given attention and that they mattered to someone. Most of the elderly participants mentioned that they always had a good chat and laugh with the student volunteers. All of the participants, excluding one, acknowledged how grateful they are towards the student volunteers and how necessary their visits are. The researchers' empirical research, however, displayed mixed results when it came to the caregivers' perceptions of student volunteers. Although the elderly like the student volunteers, some of the caregivers do not share the same sentiment. Two caregivers said that the student volunteers irritate the elderly and that the elderly would rather work with people who are older and have experience. Conversely, the other caregivers said that the students make the elderly feel special, loved, and cared for and that the elderly are happy to see them.

According to the results of the research, the elderly feel that students treat them with respect and that they enjoy bonding with the student volunteers. Although the student volunteers should be more patient with the elderly, the elderly still perceive them as fantastic, precious, helpful, and hard working. According to the project leaders, the elderly view the students as entertaining as they offer them a break from their daily routine. Another project leader mentioned that the elderly in turn have a positive attitude regarding the student volunteers and they look forward to the student volunteers' visits.

The caregivers, however, are of the opinion that the student volunteers should build stronger relationships with them, because this would improve communication at the caring facility. This would also enable the student volunteers to be more open to ask the caregivers for help on how to work with the elderly.

2.9.1.2.2 Needs of the elderly

According to the project leaders, the elderly have physical, emotional, social, and spiritual needs. There is, naturally, a feeling of loneliness in the care facilities. The elderly, with their social and emotional needs, feel abandoned and the student volunteers offer a break from their dreary daily routine and help them to feel loved and appreciated. The results highlighted that although the elderly are grateful for the presents the student volunteers give; they are more grateful for the students' presence. From the caregivers' results, it is evident that the student volunteers are more than capable of uplifting an elderly person's mood. The project leaders' results indicate that the elderly are grateful for the students and are always happy to see them. In one of the care facilities, the elderly residents are so excited to see the student volunteers that they greet them with laughter and hand clapping. The majority of the project leaders feel

that it is important to focus on both group experiences and individual experiences with the elderly, which include one-on-one time and bonding opportunities. This, however, has also led to favouritism. According to one of the caregivers, the student volunteers do have their favourites and sometimes they only focus on them, leaving some of the elderly feeling left out. Therefore, it is necessary that student volunteers try to avoid favouritism at all costs. Having enough student volunteers for individual attention is also a crucial factor; however, most project leaders reported that they have trouble keeping their student volunteers involved. One of the elderly participants said that sometimes only two or three student volunteers show up, which is detrimental for giving individual attention to the elderly.

The elderly also have physical and psychological needs and according to participant 4, the student volunteers should evaluate each person's physical and psychological needs and improve on them, if possible. Although this is an unrealistic expectation from the caregiver, it is still important to remember that these needs cannot be overlooked. Each elderly person has his/her own personality, worldview and own needs.

2.9.1.2.3 Quality of life

According to the caregivers, it is the task of the student volunteers to improve the quality of life of the elderly by looking after their well-being and meeting their needs. Therefore, through the training program, the problem areas will be discussed in order to train student volunteers to care for the elderly properly as this will improve their quality of life.

2.9.1.3 Programs and activities

It is evident from the answers of the participating project leaders that the training lacks certain crucial elements. Participant I said that the training was an enriching experience because she learned about the three principles of the SRCS, how to do the administration for the project, and how to determine needs. However, she also stated that the training given was too general and there was no focus on the needs of the elderly or how to communicate with the elderly with disabilities. She had to acquire that knowledge independently. For participant II, the training was interesting, but he never used it. He further mentioned that the training did not prepare him and that he obtained knowledge from the previous project leader. Participant III declared that although the facilitators of the training session were people with a vast amount of knowledge, the training itself was problematic because it covered a broad range of charities and did not give enough training to help with the specific project of caring for the elderly. Participant IV suggests that the training be improved in an attempt to help project leaders better their communication skills and working relationships with both student volunteers and management. Participant IV further highlights how the training is too child-centric, with too little focus given on how to care for the elderly. She also stated that although the training helped her in other areas,

she was completely ill-equipped to deal with those who had suffered the loss of a loved one and therefore needed comforting.

Although the training is helpful with administration details and general knowledge about project management, it lacks specific knowledge on how to work with the elderly. All the participants agreed that the training can definitely be improved. Participant IV suggests that the training should better equip project leaders on how to manage student volunteers and have better working relationships with management at the caring facilities. Participant V was of the opinion that the training gave a good overview of charity work and its function, but in his opinion, it did not contain enough information about the elderly. He recommends that further info on cognitive, emotional, and physical stimulation be provided. Furthermore, additional group specific training should be given during the training.

According to the project leaders, programs and goals are developed at the beginning of their term. For the term under investigation in this study, the group of project leaders chose to focus on the spiritual, emotional/social, or physical aspect of the elderly. The spiritual aspect of the elderly was taken care of by handing out Bibles, reading from the Bibles, singing songs or getting someone to have a Bible study with them. The other activities were based on giving the elderly pleasure, breaking their routine; having fun and making the elderly feel special and loved. Lastly, some of the programs included raising funds for repairs in the facility. The project leaders attempted to share their vision for the project (including the activities) with the student volunteers. They kept their overhead goals in mind when planning the activities. Interestingly enough, the results showed that only participant III worked with the caregivers and talked to the elderly in order to understand the needs of the elderly and what activities they could and could not participate in. It is clear that this should not be an isolated incident, but rather something all project leaders and student volunteers should do. It is recommended that before planning the programs and activities and after the needs assessment, a project leader should have a meeting with staff of the caring facility and integrate the caregivers' assessments of the elderly with his/her own. Furthermore, a focus group of the elderly residents can be formed to find out what they would want to do, what their interests are, and what kind of mental or physical state each elderly person is in. Another major problem that the results highlight is that only a few of the project leaders properly prepared the student volunteers for working with the elderly.

The empirical results indicated that the student volunteers are not properly prepared for their work with the elderly. This has resulted in events that could have and should have been prevented. According to the project leaders, the following information needs to be included in the training programme:

- Contact numbers of people who can help with different needs.

- What the needs of the elderly with certain disabilities are and how to work with them.
- How to communicate effectively with elderly persons who have certain disabilities/diseases.
- How to build a relationship with an elderly person and how to make them feel comfortable.
- Study cases with examples of situations and the correct way to handle them.
- More practical training, where students are taken to a project and the specific needs of the care facility are discussed with them. This includes focusing on the general needs as well as the specific needs of the care facility.
- The caregivers know the challenges the elderly face, therefore, they should facilitate a session with student volunteers.
- Ways on managing personnel at an institution when the caregivers think student volunteers are an irritation.
- Common diseases associated with the elderly. For example, Alzheimer's disease, Parkinson's disease, and dementia.
- How to handle or work with people with the aforementioned diseases.
- Help on supporting the elderly when they lose a loved one.
- A list of tried and tested activities.
- More information on cognitive, emotional, and physical stimulation regarding elderly and vulnerable adults (this includes but is not restricted to elderly with physical or mental disabilities or illnesses).
- Training that is more focused on the specific projects.
- Student volunteers should be prepared for what they can expect at the care facilities to avoid shock. This can be done by using videos in training and previous project leaders can also be part of the training team.
- More details on how to get the community involved.
- How to create programs that are sustainable.

- How to be supportive but not too emotionally invested.
- Creative ways to get the elderly exercising.
- How to be innovative to keep the students motivated for the project.

2.10 Discussion regarding training

The training the project leaders received was an enriching experience. General training does not offer project leaders insight into the elderly and their needs. Although the facilitators of the training session were extremely knowledgeable and that the training itself was interesting; it was simply not group specific and too broad in its discussion of other charities. This left the project leaders unable to pass on knowledge (and train) their committee (tertiary student volunteers). Another critical problem for the project managers is that the training did not prepare them on how to cope and communicate with elderly residents who are disabled. As previously mentioned, only one project leader took the time to talk with management and the elderly to try to comprehend the elderly's needs.

Regarding training on project management and administration, the project leaders felt they were adequately prepared. The real problem lay in practically dealing with the elderly's needs. Most of the project leaders felt that the training should have included specific topics to help them identify and understand the elderly's needs. This would have helped the leaders equip their committee and adjust their programs and activities so that they were tailored to the elderly's needs. Therefore, the empirical results have shown that the student volunteers are not properly prepared for their work with the elderly. This results in occurrences that could have been prevented.

2.11 Summary

From the above-mentioned themes and sub-themes, it is evident that there is a need to improve the training of project leaders. In addition to this, the training given is only for the project leaders and does not include the student volunteers. There are thus a number of problems that need to be addressed in order to help both students and project leaders in their preparation of caring for the elderly.

The focus of this study is to prepare tertiary student volunteers to care pastorally for the elderly, which is not currently part of the project leaders' training. The project leaders simply do not know how to comfort an elderly person who is mourning the loss of a loved one and this therefore needs to be included in the training program. In an attempt to propose guidelines for

a training program specifically for the elderly, the researcher will include the above-chosen themes. The student volunteers need a better understanding of how to work and communicate with the elderly and they need to be made aware that their preconceived ideas about the elderly need to be left behind when working with them. This is to avoid ageism and stereotypical behaviour, which may hinder the caring process.

It is recommended that the training be improved by incorporating knowledge of the well-being of the elderly and learned skills in order to take care of the problem areas. Through the study, it was found that although the student volunteers have a good relationship with the elderly residents; this can be improved upon by recognising and understanding the needs of the elderly. Students need to engage with both the elderly and caregivers more and find out about their likes and dislikes. This, in turn, will improve the quality of life of the elderly as their needs will be met. Additionally, it is also important that the working relationship between caregivers and project leaders is addressed and improved upon.

Regarding the programs and activities, the results from the themes and sub-themes should be incorporated into the programs and activities. This can also be included in the training program so that project leaders can better understand the real needs and challenges of the elderly and incorporate them into the programs in order to make the programs more sustainable. Thus, the guidelines will include how to prevent the problems, what aspects are overlooked, and how to improve upon the established programs and activities. Seeing that student volunteers do not receive training, these guidelines can be used to help the project leaders to prepare themselves and their student volunteers in caring for the elderly.

CHAPTER 3: THE INTERPRETIVE TASK - LITERATURE REVIEW

3.1 Introduction

The purpose of this chapter is to situate the empirical results within the context of literature from other disciplines. This chapter deals with the interpretive task as suggested by Osmer (2008:4) and investigates the relevance between the empirical results and literature from other disciplines. This interaction will determine the perspectives from other disciplines in order to gain a better understanding of the empirical results. Thus, the results of the empirical study will be interpreted in the light of a literature study of relevant material in Social Work, Psychology, and Health Sciences by using the themes and subthemes from the previous chapter. Both the literature review and the normative results will be used to create a hermeneutical interaction in an attempt to create guidelines for better equipping tertiary student volunteers to care pastorally for the elderly. Within this chapter, preliminary strategic pointers will be shown after the discussion of each specific theme.

3.2 Aim and goals

The aim of this chapter is to determine the insights that can be gained from other related disciplines including, but not limited to, Social Work, Psychology, and Health Sciences regarding the equipping of tertiary student volunteers working with the elderly.

3.3 Theoretical assumptions

The second task, as set out by Osmer (2010:33-135), consists of the **interpretive task**. The interpretive task consists of drawing on theories of other disciplines to understand and explain why certain patterns and dynamics occur (Osmer, 2008:4). This task asks “why is this happening?” Therefore, for the purpose of this chapter, the question that needs to be addressed is: “Are the elderly getting the care they deserve?”

In order to answer this question, the results of the empirical study (themes and sub-themes) will be interpreted and further guidelines will be identified in the light of a literature survey of relevant material in Social Work, Psychology, and Health Sciences. This will assist the researcher in better understanding if the elderly are getting the care they deserve. Along with the empirical research (Chapter 2) and normative results (Chapter 4), this will enable the researcher to create guidelines (Chapter 5), which will better prepare and help tertiary student volunteers in caring pastorally for the elderly.

3.4 Themes and subthemes

During the empirical study, the following themes became evident:

- Problem areas, with its subthemes of knowledge of the elderly and their circumstances, communication, and ageism.
- Well-being of the elderly, with its subthemes of relationships, needs of the elderly, and quality of life.
- Programs and activities, which have no subthemes.

These themes and subthemes will be used as indicators in order to gain insights from relevant literature.

3.4.1 Problem areas

The empirical results have revealed that during their term at the care facility, the tertiary student volunteers had certain problems whilst caring for the elderly. According to the caregivers and the project leaders involved, the student volunteers did not have the proper knowledge of the elderly or their circumstances. Furthermore, the student volunteers had some communication problems, such as not re-introducing themselves to those with Alzheimer's disease and using elderspeak (which is similar to baby talk). Lastly, there are negative stereotypes regarding the elderly and this often leads to ageism. Taking the three sub-themes of problem areas into account, the researcher consulted relevant literature regarding knowledge of the elderly and their circumstances, communication, and ageism.

3.4.1.1 Knowledge of the elderly and their circumstances

Mukherjee (2013:452) postulates that the increase of the population of older persons will also increase the number of people with physical and social disabilities. These disabilities result in lower quality of life and it strains the limited resources for assistance, care, and rehabilitation (Mukherjee, 2013:453). Due to the increase in physical and social disabilities, sources of assistance, care and rehabilitation is limited. Therefore, the need for informal caregivers (volunteers) is crucial. Cottle and Glover (2007:501) mention that there is a need for individuals who possess an accurate understanding of the ageing process as well as a positive attitude towards the elderly. Therefore, it is necessary for student volunteers to receive training regarding the ageing process.

Knowledge of the elderly is about understanding the process of ageing and the attitudes student volunteers have about them and growing older. Cottle and Glover (2007:501) are of the opinion that ageism exists due to people's lack of understanding of ageing. According to O'Hanlon and Brookover (2002:712), there are links between knowledge in the area of gerontology and

changing attitudes towards ageing. This knowledge bridges the gap between changing the attitudes of the elderly and enhancing the care given to them. In order to create guidelines specifically for caring for the elderly, it is necessary to understand the elderly's characteristics and tailor activities or programs to their specific skills and needs (Gonçalves, 2009:218).

Although the empirical studies revealed that the student volunteers had good intentions, they did not know how to work with the elderly, especially those with disabilities or illnesses. With the elderly, the spectrum of disabilities and illnesses include but are not limited to metabolic diseases (i.e. diabetes and joint diseases such as osteoporosis), cancer, hearing and visual impairments, cardiac diseases, apoplexy, depression, Parkinsonism, dementia and Alzheimer's disease (Maderer & Skiba 2006:127-128). According to Sijuwade (2007:280), mental health is also a major issue for the elderly. While mental illness can be related to physical health, which includes age-specific loss of roles, income or physical health; it is also independent of biological ageing (Sijuwade, 2007:280).

Shaffer and Kipp (2014:5) suggest that humans develop holistically and it is therefore necessary to focus on physical growth and development, cognitive aspects, and psychosocial aspects. MacKinlay (2009:143) and Mukherjee (2013:455) add spirituality as an important part of holistic care. According to the empirical results of this study, the student volunteers wanted to connect with the elderly on an emotional, social, physical, and spiritual level, but they did not fully comprehend what such connections entail. In keeping with MacKinlay (2009:143), Mukherjee (2013:455), Shaffer and Kipp (2014:5), and the empirical results, a short discussion will be given on each of these aspects to obtain the necessary knowledge.

3.4.1.1.1 Physical development of the elderly

According to Akman (2009:415), a general decline in functional ability is accompanied with ageing. Yasamy *et al.* (2013:4) confirm that the elderly have special health challenges. As they grow older, the elderly lose their independence and require some form of long-term care because they have limited mobility or other mental or physical health problems (Yasamy *et al.*, 2013:4). Furthermore, ageing affects hearing, vision, and the nervous system (Akman, 2009:415). Midha and Malik (2015:47) highlight that although hearing loss is often ignored and poorly managed in care settings, it is one of the most prevalent chronic conditions affecting the elderly. Akman (2009:416) states that 75% of elderly people between the ages of 75-79 have difficulty hearing, whereas at the age of 80, about 25% of speech is not heard. Sadock and Sadock (2015:1206) say that by the age of 60, 25% of the elderly show hearing loss, whereas by the age of 80, 65% of hearing is lost. Hearing loss affects the development of social isolation (Mick, 2014:378). Elderly persons who suffer from hearing loss can feel embarrassed about their hearing abilities; therefore, hearing loss interferes with interpersonal relationships (Akman,

2009:416; Mick, 2014:378-379). Hearing loss is also associated with accelerated cognitive decline and an increased risk of dementia (Lin *et al.*, 2013:293; Mick, 2014:383). Due to their hearing loss and the factors associated with hearing loss (such as social isolation), the elderly's quality of life is greatly affected.

Regarding the vision of the elderly, changes in eyesight are common during ageing and affect the psychological well-being of the elderly (Akman, 2009:415-416). The elderly lose their ability to see detail and they also experience slower adjustment speed when light changes. Sadock and Sadock (2015:1206) indicate that the elderly's optic lens thickens, which leads to reduced peripheral vision. There is also a change in colour perception, making it difficult for the elderly to distinguish colours at the blue end of the spectrum, which results in the elderly needing glasses and brighter light to see clearly (Akman, 2009:415-416). Further eyesight conditions that can affect the vision of the elderly include cataracts, glaucoma, or muscular degeneration. Liu *et al.* (2016:33) comment that when an elderly person's vision becomes impaired, it can add limitations to his/her daily life. Vision impairment is associated with anxiety and depression (Bernabei, 2011:467) as the elderly's sensory loss negatively affects their functional ability and quality of life (Liu *et al.*, 2016:30).

The ageing process causes the brain and nervous system to undergo large changes. The elderly lose brain and spinal cord nerve cells and weight (Martin, 2014), which consequently leads to a loss of neurons in the central nervous system and slower reaction times (Akman, 2009:416; Martin, 2014). Another problem the elderly face is the onset of chronic illnesses (MacKinlay, 2009:143). According to Akman (2009:417), most people over the age of 65 suffer from one or more conditions, which affect their health as well as their functionality. As previously mentioned, common illnesses of the elderly may include: arthritis, hypertension, hearing loss, vision impairment, and diabetes. In addition to this, Sadock and Sadock (2015:1206) state that biological changes associated with ageing affect the immune system, musculoskeletal system, integument, genitourinary, special senses, memory, neurotransmitters, brain, cardiovascular system, gastrointestinal system, endocrine system, and the respiratory system. Other impairments that can cause discomfort to the elderly's living conditions are fall-related injuries (Akman, 2009:416-417).

According to MacKinlay (2009:143), the elderly go through physical changes. However, the importance lies in how the elderly deal with these physical and biological changes. The student volunteers therefore need to consider these changes when planning programmes and activities for the elderly.

Provisional strategy

Ways to obtain knowledge about the elderly and face misconceptions, negative stereotypes and increasing positive attitudes about the elderly can be done by incorporating tool kits and games during training sessions. Tool kits should include material on memory loss, urinary incontinence, depression, falls, heart failure, and persistent pain management. These kits should also include information on specific topics, local resources, assessment guidelines, educational information to patients and caregivers, and practical suggestions (Levine *et al.*, 2007:1281). Furthermore, ways to increase student volunteers' awareness about physical changes include the use of Schuldberg's (2005:441) simulation kit. This kit replicates different types of the elderly's impairments, which include hearing, seeing, and physical impairments. With Schuldberg's kit, students, in groups of three, are required to wear gloves to simulate arthritis and different glasses to replicate the different types of vision impairments. This therefore enables the students to register their own reactions and the reactions of the other group members. There is a similar exercise, according to Varkey *et al.* (2006), called the Ageing Game. The game simulates ageing-related losses and is implemented with students from medicine to develop empathy and increase awareness on the difficulties the elderly experience.

3.4.1.1.2 Cognitive aspects

The American Psychology Association (2005:1) and WHO (2016) report that the elderly are prone to developing mental health or neurological disorders. According to WHO (2016), the most common neuropsychiatric disorders faced by the elderly are dementia and depression. Depression and anxiety in late-life can be caused by coping with physical health problems, caring for a spouse with dementia or physical disability, grief, and managing conflict with family members (American Psychology Association, 2005:1). Mental health problems have an impact on physical health, just as physical health has an impact on mental health. According to Yasamy *et al.* (2013:4), elderly people who are physically unwell will have poorer mental health. They further explain that elderly people, who have both depression and a chronic disease, are more likely to have complications, lose productivity, and have an increased risk of death. Furthermore, they indicate that mild depression leads to the lowering of the person's immune system and this compromises their ability to fight infections and diseases. Liu *et al.* (2014:1) state that loneliness is commonly experienced by the elderly and is an important predictor of depression. The elderly with high levels of loneliness show more negative emotions and a high dissatisfaction in life (Liu *et al.*, 2014:1). Thus, anything that affects the emotional and social well-being of the elderly can result in poor mental health (Yasamy *et al.*, 2013:4).

The elderly with symptoms of anxiety or depression have an increased risk of cognitive decline, mild cognitive impairment, and dementia (Shimada *et al.*, 2014:149). Dementia is an umbrella term used for a group of symptoms and conditions that develop when neurons die or do not function properly (Alzheimers.net, 2016; Alzheimer's Association, 2013:209; Healthline Editorial Team, 2013). Dementia is defined as "a progressive impairment of cognitive functions occurring in clear consciousness" (Sadock & Sadock, 2015:664). Thus, dementia affects communication, performance of daily tasks, and mental tasks, such as memory, reasoning, behaviour, thought, and language. Communication between caregivers and the elderly with dementia is important. Waugh *et al.* (2013:8) describe ways to make communication easier and let the elderly with dementia keep their independence. When dealing with elderly persons suffering from dementia, the student volunteers, should (among other things) listen carefully, use a calm, gentle manner with open body language, speak slowly and clearly, and not succumb to elderspeak. Moreover, student volunteers need to use positive facial expressions, short familiar words and simple sentences. The student volunteers will also have to repeat themselves frequently in order to remind the elderly of who they are and help them understand that they are not a threat (Waugh *et al.*, 2013:8). The Alzheimer's Association (2013:209) states that in order for a person to be diagnosed with dementia, the decline in cognitive abilities must be severe enough to interfere with the person's daily life. The DSM-5 categorises dementia as a neurocognitive disorder (NCD). (Alzheimer's Association, 2016:1). Below is a list of the six cognitive domains (according to the DSM-5) that may be affected by dementia (Alzheimer's Australia, 2015:2):

- **Complex attention**, which includes the elderly's ability to pay attention and their information-processing speed.
- **Executive function**, which includes *inter alia* decision making, planning, working memory, and mental flexibility.
- **Learning and memory**, which deals with the elderly's ability to recall and retain information.
- **Language**, which includes the elderly's ability to speak coherently or understand written or spoken language;
- **Perceptual-motor function**, which comprises the elderly's visual perception, visuoconstructional reasoning, and perceptual-motor coordination.
- **Social cognition**, which includes the elderly's ability to recognise emotions, theory of mind, and insight.

The most common causes of dementia, according to Diniz *et al.* (2013:331) and Sadock and Sadock (2015:664), is Alzheimer's disease, vascular dementia, and mixed vascular and Alzheimer's dementia. In accordance with this, the Alzheimer's Association (2013:208) states

that Alzheimer's disease is the most common type of dementia. The Healthline Editorial Team (2013) describes Alzheimer's as a progressive (and ultimately fatal) disease of the brain. Alzheimer's disease slowly impairs memory and cognitive function and during its course, it impairs the elderly's ability to perform basic bodily functions, such as walking and swallowing (Alzheimer's Association, 2013:208). According to the Alzheimer's Association (2013:209), a person with Alzheimer's disease will, among other things, display the following symptoms:

- Challenges planning and solving problems
- Difficulty completing familiar tasks
- Confusion with time and place
- Memory loss
- Inability to retrace steps

Although the elderly can have mental health disorders, not all elderly people are cognitively affected. According to Sadock and Sadock (2015:1206), the average IQ of the elderly remains stable until the age of 80. Furthermore, although it may take longer for the elderly to learn certain material, complete learning can still take place. Morelli and Dilani (2005:289) opine that mental and intellectual needs do not decrease with old age and therefore, mental stimulation is important to ensure overall good health in the elderly (Jansen van Rensburg & Strydom, 2012:1).

3.4.1.1.3 Psychosocial aspects

Psychosocial aspects refer to pleasure, stress, worry, and other positive or negative emotional states such as self-respect and the respect and interaction with the outside world (Mukherjee, 2013:454-455). The elderly have an increasing likelihood, according to Fees *et al.* (1999:231) and Karki (2009:6), of experiencing loneliness. Mukherjee (2013:454-455) explains that loneliness is an unpleasant experience in which a person's network of social relationships is lacking in either quality or quantity. Therefore, it is important that the elderly take part in social activities.

According to Oerlemans *et al.* (2011:1), social activities satisfy the need for relatedness. Relatedness forms part of the self-determination theory, which claims that humans have three innate psychological needs, namely competence, relatedness, and autonomy (Deci & Vansteenkiste, 2004:25). In order for the elderly to obtain competence, they need to feel that they are being optimally challenged and that they are capable of achieving goals (Ferrand *et al.*, 2012:216). Relatedness refers to the need of humans to interact, connect, and experience caring for others (Deci & Vansteenkiste, 2004:25). Regarding autonomy, a person needs to decide upon his/her own course of life, thus the elderly should feel as though they have a choice in their lives as well (The Eden Alternative, 2012:6). According to the empirical research of this dissertation, most of the elderly residents at the care facility simply sit around and wait

and follow the daily routine of the facility. Therefore, in order for the elderly to achieve relatedness needs, the student volunteers should focus on the different areas surrounding the self-determination theory. Relatedness can be achieved by social activities, or challenging activities (which satisfies the elderly's need for competence), where the elderly (in an attempt to be more autonomous) can set own goals and be part of a project.

3.4.1.1.4 Spiritual aspects

Spirituality refers to a personal search for meaning and purpose in one's life (Tanyi, 2002:690; Reinert & Koenig, 2013:2623). Mukherjee (2013:455) believes that spirituality is about seeing religion and truth objectively and is an integral part of being human. Although religion and spirituality are used interchangeably, they are different. For some people, spirituality is related to religion; but for others, it is not (Reinert & Koenig, 2013:2623; Tanyi, 2002:690). Pike (2011:746) comments that although religion and spirituality are used interchangeably, care should be taken when applying religion, because those who are not religious might be excluded from receiving spiritual care (Holloway, 2006:834). Therefore, it is necessary to distinguish between religion and spirituality. Religion refers to an organised entity, which has rituals and practices about a deity. According to Koenig (2008:11), religion is a system of beliefs and practices that is observed by a community. Religion is also supported by rituals that acknowledge, communicate with, or approach a divinity. Koenig (2008:11) comments that in Western culture, a divinity refers to the Sacred, the Divine, or God; whereas in Eastern cultures, it refers to Ultimate Truth, Reality, or Nirvana. Spirituality lies at the core of each person's being and refers to the search for the meaning of life and finding a sense of hope, strength, and security (MacKinlay, 1998:36; Mukherjee, 2013:455). According to MacKinlay (1998:36), spirituality, on a fundamental level, consists of religious practices, a relationship with God in any way the person perceives God or ultimate meaning, and in relationships with others. Thus, spirituality is about personal and private experiences (Narayanasamy, 2004:116).

Sherwood (2000:159) asserts that spiritual well-being affects the health care experience and healing. Therefore, it is necessary to look at how spirituality can help as a coping mechanism to enhance the care given to the elderly. Narayanasamy (2004:116) remarks that spiritual coping mechanisms, such as connectedness with God, are effective. Bullis (2013:2) comments that spirituality refers to a relationship a person has with something or someone that transcends his/her being. Therefore, connectedness as part of spirituality refers to the connections people have with something or someone that transcends their beings, giving people a sense of hope, strength and security (Narayanasamy 2004:116, Sherwood, 2000:160). According to Narayanasamy (2004:116), believers share a connectedness with a god or a higher power (depending on their belief system); whereas non-believers share this experience with their family or friends. It should be kept in mind that each caring facility does not have a

homogenous group; therefore, in each caring facility, there will be believers (from different religions) and non-believers. However, this does not mean that non-believers should not receive spiritual care, but rather that one should attempt a transcultural approach (Holloway, 2006:834). A transcultural approach will help treat an individual's (whether believer or non-believer) spiritual needs.

A transcultural approach attempts to gain knowledge about the social, economic, and political factors that may influence minority ethnic groups (Culley, 2006:146). This is done to create better care and not alienate the 'other'. However, according to Culley (2006: 146), attempting a transcultural approach can be seen as contributing to a racialising agenda, because it promotes superiority about a dominant group needing to gain knowledge and categorises the differences of non-dominant groups (Gustafson, 2005:12). There is the danger of using a transcultural approach by only categorising different ethnic groups as a way of gaining superiority. The counterargument to this would be that a transcultural approach helps explore the different and common understandings of a wide spread of religions and cultures in order to give specialised spiritual care instead of generic care (Holloway, 2006: 834). Therefore, a transcultural approach treats the elderly's individual spiritual needs. When spiritual needs are met, Sherwood (2000:161) asserts that it will give meaning and fulfilment to a person's life. However, Sherwood (2000:161) further explains that unmet needs lead to a person feeling isolated, lonely, and alienated and can also lead to impaired healing and dissatisfaction with life. Therefore, it is necessary that the elderly's spiritual needs are met in order to ensure a better quality of life and well-being.

Spiritual well-being is accomplished through relationships with one's self, with one's community, the environment, and a higher power (Sherwood, 2000:161). According to Mukherjee (2013:459), forgiveness, which is an important part of spirituality, is a good coping mechanism. Forgiveness is a central part in Christianity and Western culture and can cause and maintain satisfaction and peaceful interpersonal relationships between people (Denton, 2016:3). Forgiveness is also related to positive well-being and decreased grief. Furthermore, spirituality helps the elderly deal with illnesses or crises (Narayanasamy 2004:116; MacKinlay, 2009:140-141; Sherwood, 2000:159). Recognising the need to meet the elderly's individual spiritual needs, MacKinlay (2009:137) says that knowledge and skills of ageing and spirituality are necessary to provide effective spiritual care for the elderly. MacKinlay (2009:140) adds that each elderly person's own perspective on faith should be acknowledged, supported, and respected. Therefore, the elderly will benefit from interventions, which are sensitive, supportive, and responsive to their spiritual needs (Narayanasamy 2004:117).

3.4.1.2 Communication

According to Carstensen (2009:7), ageing well is neither due to genetics nor good luck. In order to age well, Ouwehand *et al.* (2007:874) recommend a psychosocial process of pro-active coping, which entails the construction of environments that make it possible to deal with losses due to ageing effectively. One way of coping with ageing is through a communicative process - it is through communication that one can construct environments to promote or hinder well-being in later life (Fowler *et al.*, 2015:432). Pinquart and Sorensen (2002:453) have found that preparing for future care needs are associated with lower levels of anxiety and depression among older adults. Therefore, discussing future care needs with others is a potential means of helping individuals feel they can cope with ageing. However, according to Williams *et al.* (2003:242), communication in nursing homes often reveals failure to meet the residents' need for affiliation and social support.

As defined by Jacobson (2009:9), communication is the process of exchanging ideas and imparting information. In caring facilities, good communication is necessary in order to improve socialising skills and participation in activities. Good communication within care facilities can lead to the improvement of quality of life. Jacobson (2009:12-18) proposes six elements of communication, namely: the sender, encoding, the message, the medium, decoding, and the receiver. According to Jacobson in De Wet (2010:3), the sender communicates with the receiver through text (or other mediums). The reception of the text can only succeed when both the sender and the receiver have the right code and both agree on the context. The transfer of the text takes place through a particular channel. Due to the nature of the communication process, it is easy to misinterpret or misunderstand someone. Therefore, a failure in any of the elements in the communication process will lead to failed communication (Jacobson, 2009:10). Another element that can hinder effective communication is that many elderly people experience changes, hearing, and vision impairments, slower processing of information and memory difficulties that threaten their communication skills (Ryan *et al.*, 1995:69). Furthermore, neurological illnesses, depressive illnesses, physical illness, and medications can also influence the elderly's ability to communicate. Lack of social interaction, including reduced contact with loved ones or friends, limits the elderly's opportunity to practice their communication skills (Ryan *et al.*, 1995:69).

According to the empirical results, the caregivers felt that during their term of volunteer work, the student volunteers did not properly communicate with the elderly, with many adopting the use of 'baby-talk' or 'elderspeak'. This is a common phenomenon not only where tertiary student volunteers are involved, but also between young and older adults in settings where the elderly is provided with health care (Williams *et al.*, 2004:18). Simpson (2002) and Smith (2009) explain that people often revert to baby-talk when communicating with the elderly and this is called

elderspeak. Therefore, elderspeak consists of using baby-talk, which is often used by a child or while communicating with a child. According to Williams *et al.* (2009:12), elderspeak is based on stereotypes that the elderly are less competent than younger communication partners are and nursing staff often use it. The use of elderspeak includes a slower rate of speech, exaggerated and elevated pitch, and volume, greater repetitions, using a simpler vocabulary and grammar than normal adult speech, and inappropriate intimate terms of endearment (Williams *et al.*, 2009:12).

According to Williams *et al.*, (2004:18) elderspeak is an attempt to communicate effectively and show care, but research suggests that this communication style influences the elderly by reinforcing dependency and causes isolation as well as depression (Williams *et al.*, 2003:242). Williams *et al.* (2003:247) postulate that in minimising elderspeak by educating caregivers about the negative impacts about elderspeak, communication in nursing homes will be enhanced. This in turn could potentially improve cognitive and functional levels and thereby increase the satisfaction of the elderly's life. Optimal communication can contribute to higher levels of well-being (Williams *et al.*, 2003:247) and tertiary student volunteers therefore need to be adequately trained on how to communicate effectively with the elderly in their care. In addition to this, Midha and Malik (2015:47) explain how various studies have shown that the inability to communicate affects the way people socialise, their independence and their participation in activities in their daily lives. Communication directly affects the elderly's well-being, thus a lack of or a decrease in communication skills or the inability to properly communicate can lead to a reduced quality of life.

According to Watzlawick *et al.* (cited by Robinson & Turner, 2003:230), messages contain content and relationship information. Furthermore; Robinson and Turner (2003:230) add that the relationship information provides the context necessary to understand the content of the message. Therefore, by changing the context of the message, the meaning of the message is affected. Thus, one must consider the content of the message as well as the relationship between the sender and the receiver in order to understand the effectiveness of social support. In her article about befriending the elderly, Shilling (2014) emphasises that everyone has a story to tell if one knows which questions to ask. Thus, it is through communication that the elderly can share their stories.

Communication is vital in meeting the elderly's needs. Albrecht *et al.* (1994: 421) state that supportive communication influences how providers and recipients view themselves, each other, the relationship between them, and their situations (Kim *et al.*, 2013:1107). Communication is also the main process that individuals use to coordinate their actions in support-seeking and support-giving encounters (Albrecht *et al.*, 1994:421; Kim *et al.*, 2013:1107). This implies that through communication, the elderly can receive or give the

support they need to. Cutrona and Russell (1990:322) have identified six common dimensions or types of social support that have been uncovered in the literature, namely: emotional support, social integration support, esteem support, tangible support, informational support, and support of others.

Emotional support occurs when one individual goes to another during a time of difficulty to be empathetic and offer comfort so that the other feels cared about (Baym, 2015:83; Cutrona & Russell, 1990:322; Hoghughi & Long, 2014:317). Social integration support refers to the feeling of being included by others in a group during recreational or social activities. Esteem support occurs when a person receives feedback showing that he or she is capable or competent (Baym, 2015:84; Cutrona and Russell, 1990:322). Making the elderly feel competent can lead to the enhancement of the elderly's efficacy and feeling of self-worth. Tangible support refers to concrete instrumental assistance such as financial aid or helping someone with his or her groceries or giving someone a ride. Therefore, tangible support (Baym, 2015:85) refers to helping someone who cannot solve the problem without assistance. Cutrona and Russell (1990:322) explain that giving someone information, advice, or guidance is called informational support (Baym, 2015:84). Lastly, Cutrona and Russell (1990:322) and Baym (2015:85-86) discuss the sixth form of social support, which refers to the support of others. Support of others occurs when an individual offers help or support to others. Supporting others is based on the belief that people have the need to be needed by others and by helping others, the individual feels better about himself or herself. According to Robinson and Turner (2003:228), successful social support can only take place when the support needed by the individual is the same support given. For example, if the elderly needs informational support and the caregivers or student volunteers provide emotional support, the social support given will not be of benefit to the elderly. Therefore, it is necessary for the caregivers and student volunteers to communicate effectively with the elderly to understand the need of the elderly. Thus, student volunteers should receive communication skills training during a training program to improve the way they communicate with and understand the requirements of the elderly.

3.4.1.3 Ageism

Simply put, ageism is prejudice against others because of their age (Vitman *et al.*, 2013:3; Wurtele, 2009:1026; Yasamy *et al.*, 2013:4) and is defined as discrimination or stereotyping based on age (Cherry and Palmore, 2008:849-850; Yasamy *et al.*, 2013:4). According to Barrett and Cantwell (2007:2), misconceptions among college students and the general population of the elderly and the ageing process are widespread. According to Yasamy *et al.* (2013:4), ageism serves as a social divider between the young and the old. The negative images associated with the elderly include: being seen as invalids, impotent, ugly, senile, useless, isolated, mentally slow, physically slow, helpless and depressed (Palmore, 1999 cited by Barret

& Cantwell, 2007:2; Yasamy *et al.*, 2013:4). As Stahl and Metzger (2013:198) highlight, several studies confirm the presence of positive and negative attitudes toward older adults, however, different studies show mixed results. Studies done by Gellis *et al.* (2003) and Stuart-Hamilton and Mahoney (2003) found that younger adults showed negative attitudes toward the elderly; whereas studies done by Narayan (2008) and Gonzales *et al.* (2010) revealed that college students reported positive attitudes toward the elderly. Studies done by Funderburk *et al.* (2006) as well as Koren *et al.* (2008) found that undergraduates held neutral attitudes towards older adults. However, based on the empirical results done in this study, the student volunteers showed both positive and negative attitudes towards the elderly. Therefore, it is necessary to explain why these attitudes exist.

Factors that influence students' attitudes towards the elderly include society's views, especially the media's description of the elderly, direct contact with the elderly and past relationships with elderly people (Cummings *et al.*, 2005:645; O'Hanlon & Brookover, 2002:712). The media is also a communication method that may increase ageist attitudes and behaviour. This is done by using birthday cards, advertisements, and films (Barret & Cantwell, 2007:327). According to Wurtele (2009:1030), society contributes to the elderly's social isolation and loneliness by income disparities, lack of public transportation, lack of opportunities for paid work, or volunteering. Furthermore, Wurtele mentions that students' infrequent contact with the elderly can be explained by their fear of death and their generalisation of the oldest-old (85 years and older) and young-old adults (65 to 74 years). This coincides with Vitman *et al.* (2013:4) who indicate that younger people use management theory in order to protect themselves by applying stereotypes to the elderly; meaning they distance themselves from the threat of becoming weak, frail and ultimately, dying.

Lack of knowledge and negative attitudes lead to ageism and this affects the elderly's well-being. Wurtele (2009:1030) comments that it is necessary for all members of society to have valid knowledge about and positive attitudes towards the elderly. Vitman *et al.* (2013:4) hypothesise that if a neighbourhood has less prevalence of ageism then that specific neighbourhood will have better social integration with older inhabitants. This corresponds with Yasamy *et al.* (2013:4) who write that ageism is a social divider and therefore prevents social participation. Therefore, it is clear that ageism has a negative impact on the elderly's well-being, which can lead to depression, loneliness and other mental and physical ailments. The researcher thus far (bearing in mind the literature study) suggests that if student volunteers have the basic knowledge, they will have a better understanding of the elderly, which could lead to cognizance, which refers to not just knowledge, but awareness of and appreciation for the elderly. The student volunteers may be able to comprehend the situation of elderly people and also take into account the individuality of each elderly person.

3.4.2 Well-being of the elderly

According to Zikmund (2003:402), well-being and quality of life are closely related, because both focus on the satisfaction of material, biological, psychological, social, and cultural needs of individuals in order to reach satisfaction in their lives. Well-being is the state that is experienced immediately; whereas quality of life is a more complex condition, which enables one's satisfaction with life. According to the Eden Alternative (2012:3), well-being is based on a holistic understanding of the needs and capacities of humans and quality of life refers to what an individual can do and what he/she can offer his/her communities. Student volunteers should use well-being as frame of reference, because it requires them to focus on strengths, possibilities, dreams, and goals of the elderly. Thus, in order for the elderly to achieve well-being, their quality of life may be improved by focusing on their needs. Subsequently, in having their needs fulfilled, the elderly will be able to become everything that they are capable of becoming and therefore achieve self-actualisation (Huitt, 2007:1; Maslow, 1943:382; McLeod, 2014:1). Furthermore, according to Deci and Vansteenkiste (2004:33), studies have shown that there is a direct link between basic need satisfaction and well-being. Oerlemans *et al.* (2011:2) affirm this link by stating how research has shown that cognitive activities, social relationships, and physical activities have a positive effect on the well-being of the elderly. In line with the research referred to earlier in this chapter, spiritual well-being (Sherwood, 2000:61) of the elderly should therefore be added to their care. Due to their closeness to quality of life and needs of the elderly, cognitive activities, social relationships, physical activities, and spiritual well-being will be discussed in the following sub-themes detailed in the paragraphs below.

3.4.2.1 Relationships

According to Maslow's Hierarchy of Needs, each person has the need to belong and therefore to be loved and accepted (Karcher *et al.*, 2011:656; Maslow, 1943:379; McLeod, 2014:2; The Eden Alternative, 2012:7). The elderly therefore have affiliation and relationship needs (Grau *et al.*, 1995; Huitt, 2007:1), which make life worth living as relationships offer social and emotional support (Kane, 2001:297). It is important to keep in mind that the quality of social relationships is more important than the quantity of social interaction (Hsu & Chang, 2015:1131). In addition to this, Hsu and Chang (2015:1131) have found that social relationships formed by the elderly outside their existing social network can increase their happiness. It is necessary to bear in mind that the elderly who move to facilities have to make social adjustments. Social adjustments refer to those relationships which involve the adapting of a person to his/her circumstances in his/her social environment to satisfy his/her needs or motives. These social adjustments have social and emotional aspects that have an impact on the elderly's well-being (Mukherjee, 2013:455). Therefore, it is necessary for the elderly to be encouraged to participate in group and other social activities. Social interaction (i.e. emotional social support

and social participation) is related to happiness and may consequently lead to a higher quality of life. This in turn leads to a decrease in loneliness and an increase in the elderly's dignity (Hsu & Chang, 2014:1136). However, it is still important to mind the elderly's need for autonomy by letting them make their own decisions while still encouraging and motivating social interactions.

3.4.2.2 Needs of the elderly

According to Latham and Pinder (2005:487), needs are a fundamental determinant of human behaviour. Maslow (1943:372-386) defines five hierarchically-ordered needs. These needs include physiological/biological needs, safety needs, love needs, esteem needs, and the need for self-actualization. McClelland *et al.* (1953:110-111) extend Maslow's theory by expressing that humans have the need for achievement, affiliation and power. Hogan and Warremfeltz (2003:77) postulate in their socio-analytic theory that humans have innate needs for acceptance and approval, status, power, control of resources, predictability, and order. According to Latham and Pinder (2005:488), these needs translate into behaviours that help humans get along with other people, get ahead in terms of status, and make sense of the world. Referring once again to the self-determination theory, humans have three innate psychological needs, namely: competence, relatedness, and autonomy (Deci & Vansteenkiste, 2004:25). According to Kane (2001:298), autonomy is important to the well-being, mental health, and physical health of the elderly.

By using Maslow's Hierarchy of Needs as a foundation block for a quality of life domain, Kane (2001:297) and Kirkevold (2014:4403) mention these following needs: physical comfort, meaningful activity, functional competence, dignity, confidence, individuality, privacy, autonomy, and spirituality. Physical comfort includes being free from physical pain and discomfort and the biological needs the elderly have (Maslow, 1943:372). These biological needs include *inter alia* hunger, thirst, and bodily comforts (Huitt, 2007:1; McLeod, 2014:2). Physical comfort also includes being comfortable in terms of body position or temperature. According to Kane (2001:297), physical comfort means that the elderly's pains and discomfort are being noticed and addressed. This is where communication between the caregivers and student volunteers comes in to fill the gaps. When student volunteers notice discomfort, they should notify caregivers immediately.

3.4.2.2.1 Meaningful activity

Concerning meaningful activity, the elderly's daily routine is repetitive, mundane and can leave the elderly feeling demotivated and apathetic. Meaning is therefore important to counter these effects. Meaning refers to hope, value and purpose and can be gained by relationships or meaningful and interesting activities (Kane, 2011:297; The Eden Alternative, 2012:9).

According to Merriam and Kee (2014:132), any kind of activity may be related to quality of life. However, what the elderly find meaningful will differ from person to person as meaning is a subjective experience. The elderly's physical status will also determine in which activities they will participate. Additionally, the elderly can still contribute towards their family, nursing homes, or communities. Bjorklund (2011:371) comments that the elderly can contribute to the well-being of the community through intergenerational and community activities. Stim and Warner (2008:2) suggest that being involved in activities will bring the elderly joy. Joy is seen as a primary domain of well-being as suggested by the Eden Alternative. Joy refers to happiness, pleasure, delight, contentment, or enjoyment, but is deeper and more encompassing than happiness and fills the elderly with hope and love (The Eden Alternative, 2012:9). Other needs that will bring the elderly joy include money, good health, and a network of family and friends (Stim & Warner, 2008:2).

3.4.2.2.2 Relationships

Another crucial need of the elderly is relationships (The Eden Alternative, 2012:8; Oerlemans *et al.*, 2011:2). Kane (2001:297) mentions that relationships make life worth living. Every individual has the need to belong and love; therefore, each individual has the need to affiliate with others and be accepted (Huitt, 2007:1; McLeod, 2014:2). The elderly have a need for connectedness, which refers to the state of being connected, being alive, or belonging (The Eden Alternative, 2012:7). According to the Eden Alternative (2012:8), staying connected with one's environment or loved ones has physical and emotional benefits for the elderly. Connectedness may also refer to belonging, being part of something, being in meaningful relationships with others, or simply being surrounded by personal things that have meaning to an individual. Connectedness for the elderly also means looking forward to the future (but still remembering and knowing their past). Loss of connections can lead to the elderly's daily lives becoming lonely and monotonous, which may subsequently lead to feelings of helplessness and despair. These feelings of loneliness, boredom, and helplessness can lead to the elderly becoming disconnected from their physical environment and social environment (Eden Alternative, 2012:8). Grau *et al.* (1995) therefore opine that relationships with staff members are critical for nursing home residents as relationships give social and emotional support.

3.4.2.2.3 Functional competence

Functional competence is another need and according to Kane (2001:297), it is necessary for the elderly to be independent as far as their physical and cognitive abilities allow them to be. De Wet (2010:110) mentions that independence is a precious aspect of human dignity. Every elderly person has the need to be treated with dignity, whether they can perceive this dignified treatment or not. The Eden Alternative (2012:7) suggests that dignity is an expanded need of safety needs (Maslow, 1943:376; McLeod, 2014:2). In Kane's (2001:297) research, one of his

participants mentioned that a major problem within his nursing home was that caregivers and volunteers treated the elderly like children. This resonates with the literature regarding elderspeak as identified by Williams *et al.* (2004:18).

3.4.2.2.4 Privacy

The next need is privacy. Privacy refers to experiencing a sense of privacy concerning being alone when desired, being alone with others, or simply being in control about information about oneself (Kane, 2001:298). Westin (1967:31) lists four aspects of privacy: solitude, intimacy, anonymity, and reserve (Elder *et al.* 2015:8). There are four reasons given as to why these aspects are needed. Firstly, these aspects are important for exercising autonomy and maintaining individuality. Secondly, they are needed to achieve emotional release, which is important when a person has to deal with times of shock, loss, or sorrow. Thirdly, they are important in order to conduct self-evaluation. Thus, privacy is needed for a person to process private information and reflect. Lastly, through privacy, one can achieve limited and protected communication (Elder *et al.* 2015:8; Westin, 1967:31). According to the Eden Alternative (2012:7), feeling certain, safe, and having privacy, dignity and respect is linked to having security. According to Maslow's (1943:376) Hierarchy of Needs, security needs need to be met before further needs can be fulfilled. Security needs include the security of home and family and having freedom from anxiety and fear.

3.4.2.2.5 Individuality

Individuality is the next need as set out by Kane (2001:298). This need is concerned with an elderly person's sense of being known as a person and expressing his or her identity. Identity refers to being well known, having personhood and a history, being an individual and being treated as such. The elderly's identity is socially constructed and their well-being is made up of essential components, which include identity, history and sense of self (The Eden Alternative, 2012:4-5). According to Kane (2001:298), autonomy is an extremely crucial need. It refers to the elderly feeling as though they can still make choices and decisions (Deci & Vansteenkiste, 2004:25; The Eden Alternative, 2012:6).

3.4.2.2.6 Spiritual well-being

The last need as set out by Kane (2001:298) is spiritual well-being and is an important domain in quality of life. Spiritual well-being can be both incorporated with and independent from religiousness (Kane, 2001:298; Narayanasamy, 2004:116). According to Sherwood (2000:161), a person's spiritual needs include the desire each human has for support, compassion, and knowledgeable care. Furthermore, each human has the need for hope, love, trust, and forgiveness. The spiritual dimension becomes important in later life. However, there is unfortunately a lack of real content about spirituality in the education of those who work with the

elderly (MacKinlay, 2009:137). Therefore, in order for holistic care to take place, spirituality needs to be included into mainstream care (MacKinlay, 2009:137). Not meeting the needs of the elderly will consequently lead to an unfilled life for the elderly, which will ultimately have an impact on their quality of life. According to De Wet (2010:108), the decrease of physical strength/energy creates an opportunity for spiritual growth and wisdom. It is here, at this stage of an elderly person's life, where the elderly person should grow in the Holy Spirit (De Wet 2010: 108). Louw (2008:509-511) suggests that vulnerability and the awareness of mortality can be met with a positive outlook and with humour. Spiritual well-being is also associated with health outcomes - spiritual distress can cause mental illness, which reflects on the elderly's well-being (Adams *et al.*, 2015:12; Kane, 2001:298; Sherwood, 2000:159).

The last factor that needs to be taken into consideration is the late stage of life in Erickson's Psychosocial Model of development. The late stage of life is the eighth stage of Erikson's model and refers to the 'integrity versus despair' stage (Fleming, 2004:9-17; Sadock & Sadock, 2015:161). During the stage of 'integrity vs despair', the elderly will ask themselves if their life was fulfilling and evaluate their accomplishments. If the elderly feel they have lived a fulfilling, accomplished life, they will feel satisfied and thus experience 'integrity'. However, if this is not the case, the elderly person will feel despair. According to Erikson's theory, integrity implies acceptance of a well-lived life and despair can result from feeling that one has not reached one's full potential or a feeling that one has wasted one's life and there is therefore no hope or personal redemption (Fleming, 2004:9-17). However, Erikson emphasises that life is not over during this stage and that this stage can be filled with productive years. A fulfilled life does not mean one has led a perfect life. It simply means that one has come to grips with one's shortcomings, has practiced self-forgiveness and has taken both positive and negative factors from the past into account. Alternatively, as Louw (2008:509-511) mentions, the elderly, during this particular life stage, should make peace with the life lived and accept and embrace the forgiveness as given by Christ.

3.4.2.3 Quality of life

As mentioned previously, the foundation block for quality of life is the fulfilment of needs (Kane, 2001:297). According to Lakić (2012:257), the main concept of quality of life is to understand a human being and his/her needs from different perspectives. Furthermore, according to the holistic-ecological approach, it is important to keep in mind that humans are in constant interaction with their surroundings (Lakić, 2012:257). Goel and Singh (2007:258) state that a decreased physical, social, and psychological well-being is a characteristic of the geriatric population, which naturally leads to reduced quality of life. According to Cheung *et al.* (2005:293), chronic illnesses and the quality of health and social services can affect the quality

of life of the elderly. Due to the ageing process causing health and social problems, the elderly is forced to confront certain difficulties and obstacles (Arslantas, *et al.*, 2009:127).

The elderly's quality of life is dependent on their well-being. Physical changes during the process of ageing affects the elderly's psychological well-being (Akman, 2009:416). Other factors that affect the elderly's well-being include negative stereotypes (ageism), which lead to social isolation and thus affects the elderly's mental and physical health (Yasamy *et al.*, 2013:4). The elderly in caring facilities often experience loneliness, depression, and isolation due to physical changes and the development of disabilities, such as hearing loss (Akman, 2009:415; Midha & Malik, 2015:47) and impaired vision (Akman,2009:415-416; MacKinlay, 2009:143). Due to emotional situations, such as the loss of a loved one, losing independence (Unalan, 2015:323) and unmet spiritual needs, the elderly are left to feel isolated, lonely, and alienated (Sherwood, 2000:161).

Social support and interaction affect the quality of life of the elderly (Unalan, 2015:323; Williams *et al.*, 2003:242). According to Unalan (2015:320), social support helps the elderly deal with health issues and the losses that accompany ageing. Alternatively, a lack of social support, diseases, loss of a loved one, insufficient financial conditions, lack of daily activities, and depressive symptoms that result in emotional and physical suffering all have drastic effects on the quality of life of the elderly (Arslantas *et al.*, 2009:127; Unalan, 2015:320-323). Sadock and Sadock (2015:1209) draw attention to a study where it was found that wisdom bears a stronger relation to life satisfaction in the elderly than other variables such as finances, health, and living situation. However, according to Ramaprasad *et al.* (2015:32), quality of life ultimately depends on how individuals use their capacities and skills, as well as the opportunities and resources available to them in order to fulfil their needs and attain their life goals. Thus, in order to help the elderly fulfil their needs and attain their life goals, sufficient social support, interaction, and sufficient opportunities including activities and resources should be made available to the elderly.

3.4.3 Programmes and activities

Activity theory is based on the premise that ageing is an adjustment process in which adjustments are made with help from activities (De Wet, 2010:107). Activity theory was the first to mention that participation in activities contributes to happiness (Oerlemans *et al.*, 2011:1), makes it easier for the elderly to adjust to their new role, and positively affects the elderly's health (De Wet, 2010:107). Activities such as social engagements (i.e. social activities), productive activities (i.e. when the elderly provide a service or produce a product), helping activities, leisure, and formal and informal learning are positively linked to physical and mental health (Herzog *et al.*, 2002:595; Merriam & Kee, 2014:131-132). Adding to this, Sadock and

Sadock (2015:1209) state that maintaining social activities increases emotional and physical well-being.

In a study done by Oerlemans *et al.* (2011:7), it has been shown that time spent on social, physical, and cognitive activities relates positively to state of happiness among the elderly. In order to care for the elderly, an individualised care plan with activities is needed and must consider individualised needs, strengths or skills, preferences, goals, and growth (Gonçalves, 2009:218; The Eden Alternative, 2012:5). The participation in daily activities is important for an elderly person's happiness, which is of great importance as happiness is an indicator for quality of life (Tadic *et al.*, 2012:1509). Sadock and Sadock (2015:1209) state that maintaining social activities increases emotional and physical well-being; whereas a lack of daily activities leads to a decline in the elderly's quality of life (Arslantas *et al.*, 2009:127). Oerlemans *et al.* (2011:2) propose that being active in old age helps regulate the elderly's mood and satisfies personal needs. Social activities increase well-being, because they satisfy the elderly's need for relatedness (Deci & Vansteenkiste, 2004:25; Oerlemans *et al.*, 2011:2). In turn, relatedness makes the elderly feel connected, recognised and valued and when relatedness occurs, the result is that the elderly experience the sense of belonging (Karcher *et al.*, 2011:656).

Physical activities, namely exercise, are critical in old age due to their connection with well-being (Oerlemans *et al.*, 2011:7). Regular exercise relates to physical health and happiness (Hsu & Chang, 2015:1135; Oerlemans *et al.*, 2011:1; Sadock & Sadock, 2015:1208) and has many benefits (Curtler-Lewis, 2003:252). As Oerlemans *et al.* (2011:1) explain, physical exercise is related to a sense of personal achievement or mastery, which makes the elderly feel good about themselves. Sadock and Sadock (2015:1208) state that moderate daily physical exercise has a positive impact on the health of the elderly. Cutler-Lewis (2003:252) and Sadock and Sadock (2015:1208) suggest that regular exercise enhances and improves cardiovascular function, leads to reduced cardiovascular diseases, decreases incidence of osteoporosis, improves respiratory functions, helps maintain the elderly's general weight, improves balance and endurance, and helps the elderly with daily activities. In Sadock and Sadock's (2015:1208) opinion, every biological change associated with ageing is affected positively with diet and exercise. Curtler-Lewis (2003:525) recommends that elderly persons with osteoporosis should do weight-bearing exercises, like bicycling, walking, climbing stairs, dancing, and weight training. Weight-bearing exercises should take place three to four times weekly from 45 minutes to an hour (Curtler-Lewis, 2003:252). Other physical activities include aerobics (Curtler-Lewis, 2003:252) and gardening (Adams *et al.*, 2015:10; De Wet, 2010:107; Gerkin 1997: 208-214). Gardening forms a fundamental component of ongoing health and well-being for the elderly. It is both a physical and cognitive activity and leads the elderly to emotional and spiritual connections on numerous levels (Adams *et al.*, 2015:10).

Cognitive activities, like puzzle solving or studying a new topic, satisfy the elderly's need for competence and curiosity (Oerlemans *et al.*, 2011:1). Learning enhances both the personal well-being of the elderly (Field, 2009:5) and that of their community (Merriam & Kee, 2014:134). The learning of health literacy skills is of the utmost importance in maintaining quality of life (Wister *et al.*, 2010:828), as health literacy skills will help the elderly understand the diagnosis, treatment, and management of health problems. Ways to obtain health literacy skills include formal and informal learning (i.e. self-directed learning projects, leisure reading, and library usage), the use of the internet, and volunteering (Merriam & Kee, 2014:134; Wister *et al.*, 2010:831). According to Dench and Regan (2000:1), learning has a positive impact on the elderly's enjoyment of life, their self-worth, their self-confidence, satisfaction in other areas of life, and the elderly's ability to cope (Merriam & Kee, 2014:136). In a study done by Chu *et al.* (2013:8), the inclusion of group music therapy intervention had a positive effect on depression on elderly with dementia.

Spiritual activities should be added to the care of the elderly due to the empirical results of this dissertation, which revealed that the elderly residents enjoy spiritual activities like Bible study. The reason spiritual activities play an important role in the elderly's life is because these activities enhance social interaction, sense of belonging and gives the elderly meaning and purpose (Tanyi, 2002:690; Reinert & Koenig, 2013:2623). Through spiritual activities, the elderly will find a sense of hope, strength, and security (MacKinlay, 1998:36; Mukherjee, 2013:455).

According to Arslantas *et al.* (2009:127), a lack of daily activities leads to a decline in quality of life. Therefore, activities have a direct influence on the well-being and lives of the elderly. In addition to this, it must be noted that these activities can also influence community life. According to Merriam and Kee (2014:131), the level of activity and social integration is linked to quality of life and community well-being. The elderly contribute to the well-being of the community through service learning, intergenerational activities, civic engagement, and volunteering (Merriam & Kee, 2014:136). Furthermore, the elderly make substantial contributions in unpaid work, i.e. volunteer work, informal sectors, and agriculture (WHO, 1999:16; Merriam & Kee, 2014:131). Studies have shown that volunteering improves physical and mental health (Merriam & Kee, 2014:136). According to Diggs (2008:80), successful ageing involves taking on productive roles in society, such as membership in organisations (like gardening clubs, luncheon clubs, community centres, or senior centres), volunteering, and participating in social groups or activities (such as interacting with family and friends). Social interaction, as previously mentioned, is linked to quality of life. Sadock and Sadock (2015:1209) state that contact with younger people is valuable for the elderly. When the elderly have contact with younger people, they can pass on cultural values or provide the younger people with care services. This social interaction of passing on knowledge, values, and care services will help

the elderly maintain a sense of usefulness, which contributes to their self-esteem. Newman and Hatton-Yeo (2008:31) comment that elderly people or grandparents enjoy imparting their wisdom and play an important role in continuing the values, culture, and the uniqueness of their families. The passing on of knowledge or sharing stories therefore satisfy the elderly's need to be needed (Baym, 2015:85-86; Cutrona and Russel, 1990:322).

3.5 Discussion

Regarding the results of the empirical study conducted for the purpose of this dissertation, having proper **knowledge** about the elderly and their needs is a problem area. Student volunteers need to have basic knowledge and understanding about the elderly's physical development, cognitive aspects, psychosocial aspects, and spiritual aspects. This will help increase the elderly's well-being as it will help the student volunteers determine the elderly's needs and enhance their quality of life. Regarding **communication** as a problem area; communication often fails and this leads to the elderly's need for social support and affiliation not being met (Williams *et al.*, 2003:242). With proper knowledge, student volunteers will be able to communicate properly with the elderly and shy away from the use of elderspeak. By enhancing the communication in nursing homes, there will be a marked improvement of the elderly's social skills and participation in activities. Discussing future care needs lowers anxiety and depression, and helps the elderly cope with the ageing process (Pinquart & Sorensen, 2002:453). According to Fowler *et al.* (2015:432), communication is the link to constructing environments that promote well-being. Communication is thus needed to lower anxiety levels and depression, give, and receive support. Hence, communication enhances the elderly's social skills, participation in activities and relationships with others

Another problem area that can affect the elderly's well-being is **ageism**. According to Vitman *et al.* (2013:3), ageism is the prejudice against the elderly because of their age. They (2013:4) comment that ageism is a social divider and influences how the elderly are treated by younger generations. Having proper knowledge and understanding of ageing will enhance the communication between student volunteers and the elderly. Basic knowledge and understanding will also reduce negative stereotypes and prejudice. Ageism isolates the elderly and negatively affects their well-being, which includes the need to belong and be accepted and can cause depression and loneliness. Depression and loneliness affects the elderly's mental health and physical health (Yasamy *et al.*, 2013:4). Thus, it is ultimately evident that knowledge is the key between understanding and caring for the elderly properly and addressing critical problem areas.

Concerning the theme well-being of the elderly, it can be seen that its sub-themes (i.e. relationships, needs of the elderly, and quality of life) are all linked. **Relationships** and

affiliation are not just important to the elderly – they are a primary and critical need of the elderly (Huitt, 2007:1; Karcher *et al.*, 2011:626; Maslow, 1943:379). According to Mukherjee (2013:455), relationships offer social and emotional support and affect the elderly's well-being. Relationships increase happiness in the elderly and decrease loneliness, which affects the elderly's quality of life (Hsu & Chang, 2014:1136). Furthermore, relationships, social interaction, or social isolation affects the well-being of the elderly, because they affect the needs of connectedness, meaning, and joy (The Eden Alternative, 2012:7-9). The following sub-theme, **needs of the elderly**, includes the previous sub-theme, relationships. This, however, is not the only need of the elderly. Their needs include physical needs including biological needs, meaningful activity, functional competence, dignity, privacy, security, individuality, autonomy, and spiritual well-being. These needs are directly linked to quality of life and well-being. (Latham & Pinder, 2005:487; Stim & Warner, 2008:2). The last sub-theme, namely **quality of life**, is linked to relationships (Hsu & Chang, 2015:1131; Kane, 2001:297; Mukherjee, 2013:455), needs of the elderly (Kane, 2001:297), and well-being of the elderly (Goel & Singh, 2007:258; Zikmund, 2003:402).

Participating in programmes and activities can increase the elderly's happiness and give the elderly joy (Oerlemans *et al.*, 2011:7; Stim & Warner, 2008:2). Happiness is an indicator for quality of life (Tadic *et al.*, 2012:1509) and joy is a primary domain in well-being (The Eden Alternative, 2012:5). According to Bjorklund (2011:371), the elderly can contribute to their own and the communities' well-being by participating in intergenerational and community activities. Participating in activities can enhance the elderly's well-being by satisfying the elderly's needs and improving their social participation. In order to successfully provide the elderly with activities, proper knowledge is needed of their needs as well as their capabilities. Encouraging the elderly to take part in activities and by providing the elderly with suitable programs and activities will enhance their quality of life as well as their well-being.

3.6 Conclusion

By using Osmer's task to support what was found in the empirical task (Chapter 2), the interpretive task was utilised to indicate that student volunteers do not have the proper knowledge to care for the elderly. Student volunteers need to have adequate knowledge and experience of the elderly and show sensitivity in their interpersonal relationships with the elderly. One way of enhancing the interpersonal relationship between student volunteers and the elderly is by using proper communication skills. By knowing and understanding the elderly and the elderly's basic needs, ageism (including negative stereotypes and elderspeak) will be reduced and interpersonal relationships will subsequently flourish. Furthermore, by having proper knowledge and communication skills, student volunteers will be able to tailor activities and programs to the specific needs of the elderly. The elderly have physical needs, cognitive

needs, social needs, as well as spiritual needs. Physical needs of the elderly include biological needs and physical exercise and activities (such as gardening). Cognitive needs include feeling competent and being curious, puzzle solving and lifelong learning. Social needs refer to social integration, social support, being needed, and belonging, which all serve to enhance well-being and reduce feelings of isolation and depression. Lastly, the spiritual needs of the elderly increase with ageing. Spirituality gives the elderly purpose and helps them find hope, meaning, and security. In order for the elderly to enhance their well-being, their needs need to be met. This can be done through tailored activities and improving their quality of life.

CHAPTER 4: **NORMATIVE PERSPECTIVES REGARDING THE ELDERLY**

4.1 Introduction

In chapter 1 subsection 2.2, the following overarching research question was formulated for the normative task: **How can tertiary student volunteers be better equipped in caring pastorally for the elderly?** This chapter focuses on answering this question by using normative perspectives. Additionally, the aim of this chapter is to answer the question: *What normative perspectives may be identified concerning caring pastorally for the elderly?* Thus, the purpose of this chapter is to situate the empirical results and the literature study within the context of Osmer's (2010:4) normative task, which include Scripture as the basis for theological interpretation, ethical reflection, and establishing models of good practice. The normative task investigates the relevance between the empirical results, relevant literature, and applicable passages in the Old and New Testament. In doing so, the researcher can determine what biblical principles regarding the elderly can be taken into account when caring pastorally for the elderly. In Chapter 1, the researcher explained that pastoral theology is the ideal field to contribute to caring for the elderly (*cf.* Elledge-Volker, 2011:62; Malan & Dreyer, 2009:1). Furthermore, pastoral care and counselling should have a holistic approach, which facilitates the exploration of ways of living fully, satisfyingly, resourcefully and hopefully (Mulenga: 2010). Pastors are providers of hope (Capps, 1996:325; Krause & Hayward, 2012:305) and pastoral theology can therefore enrich the capacity of individuals and faith communities for adaptive coping and enable them to see the ageing process as a time filled with new adventures of grace (Elledge-Volker, 2011:61). In addition to this, as Baloyi (2015:6) suggests, theology needs to play a part when using a multidisciplinary approach.

In this chapter, pastoral theology as a discipline is used to reinforce the idea that God's Word is given to His people. In using Osmer's normative task, the methodology of Janse van Rensburg *et al.* (2011) on how to do exegesis will be applied. Janse van Rensburg *et al.* (2011) propose steps on how to do exegetical work on the relevant scripture chosen. Keeping this in mind, the researcher will use the Old Testament and the New Testament as scriptural reference in order to understand the place of the elderly in communities, as well as what can be gathered concerning the elderly. Thereafter, the researcher will use Janse van Rensburg *et al.* (2011) as a guide for the understanding of Scripture to determine how the elderly should be treated. The specific passage 1 Timothy 5:1-5 will be used.

4.2 Aims and objectives

The aim of this chapter is to identify normative perspectives by using relevant Bible passages and principles gathered from these passages as part of the strategic aim to show how tertiary student volunteers may be equipped to work with the elderly.

4.3 Theoretical assumptions

The formal dimension of the normative task is biblical and ethical interpretation (Osmer, 2008:139). The normative task involves *prophetic discernment* (Osmer, 2010:133). According to Osmer (2008:133), the prophetic office concerns the discernment of God's Word to the covenant people in a particular time and place. Prophetic discernment involves divine disclosure and the human shaping of God's Word (Osmer, 2010:134-135). In order to do this, a prophetic attitude must be adopted by listening to God and His intended Word for His people. Prophetic discernment consists of three methods to discover God's word, namely: theological interpretation, ethical reflection, and good practice (*cf.* Smith, 2010:107).

Using the methodology of Janse van Rensburg *et al.* (2011:7) in using exegesis and applying the Bible, four phases are distinguished which entail 24 steps. The four phases consist of the exploration phase, intensive phase, formulation phase, and the final phase. During this study, the researcher will only use the first two phases (i.e. the exploration phase and the intensive phase). The exploration phase involves steps two to four, which include: choosing a passage, determining the place of the passage and its place in the Bible, and lastly determining the genre of the book in which the passage is found. The intensive phase consists of steps five to sixteen. According to Janse van Rensburg *et al.* (2011:53), these steps include:

- Studying the text of the passage;
- analysing the thought structure of the text;
- evaluating different translations of the passage;
- determining the key verse and determining the passage's socio-historic context;
- doing word studies of important concepts in the key verse;
- determining the revelation historical place and meaning of the passage;
- determining the revelation of God in the passage;
- determining the facts and calling of the passage;
- determining the communication purpose of the text;
- consulting exegetical sources; and
- understanding the context of the listener.

During this study, the researcher will not use steps five to ten, as it is not necessary for the researcher to do exegesis of the passage. The researcher will rather determine what can be offered as normative perspectives by determining the *context* of the passage. Furthermore, the researcher will not use steps seventeen to twenty-four, which are focused on creating a sermon and are therefore not applicable to this study.

The normative task will be done by using the Old Testament as scriptural reference in order to understand the place of the elderly in communities, as well as what can be gathered concerning the elderly. Afterwards, the researcher will apply the method of Janse van Rensburg *et al.* (2011) to gain insight into relevant passages in the Old and New Testament in an attempt to uncover the biblical perspectives regarding the elderly as well as what the Bible indicates about one's attitude towards the elderly.

4.4 Old Testament perspectives of the elderly

Ageing should not be seen as something to dread or resent, says Klapp (2003:69). In order to understand how the elderly should be properly cared for, it is necessary to consult God's Word. According to Infante (2011:4), God's Word provides the light of truth that enables the elderly to live their lives to the fullest. Therefore, the Word of God regards old age as a gift that renews and each day should thus be lived with an openness to God and others (Infante, 2011:7). The book of Sirach 25:4-6 states, "*How fine a thing: sound judgement with grey hairs, and for greybeards to know how to advise! How fine a thing: wisdom in the aged, and considered advice coming from people of distinction! The crown of the aged is ripe experience, their glory, the fear of the Lord.*" Although this is an apocryphal book, Infante (2011:4), a Catholic sister known for her work with the elderly, uses this book not only to describe the elderly, but also how to care for the elderly. An apocryphal book, which comes from the Greek word meaning "hidden things" (van der Watt & Tolmie, 2005:11), has not been included in the canon of the Bible. The book of Sirach will be used as an ethical approach and a way to gain wisdom regarding the elderly. The book, however, will not be used as a primary source but rather as support.

Side note: Regarding the authenticity of the book, the author Ben Sira was a devout man of wisdom and a teacher (Flint, 2013:89). The book of Sirach's Hebrew text was uncovered in the Cairo Geniza, at Masada, and in three Dead Sea Scrolls at Qumran (Goff, 2007:248). Although the book was not chosen by the Rabbis for the Scripture list, it was still well known in the early centuries of the Common Era (Flint, 2013:89). The Book fits Wisdom literature, because the first 43 chapters of the Book provide moral instruction and common sense gained from experience (Bala, 2014). Therefore, although it is an apocryphal book, it can still be used to gain knowledge, insight and wisdom regarding the elderly.

People were created in the image of God. Therefore, as special creations of God, every person's life is precious and sacred (Davies, 2008:275; Gen 1:26-28). Throughout the Old Testament, the elderly are seen as esteemed and useful members of the community (Klapp, 2003:69-70). Considering the Old Testament and relevant Scripture chosen concerning the elderly, four sub-themes regarding ageing in the Old Testament were identified by the researcher. These sub-themes include *ageing as blessing, ageing as a sign of wisdom, treating the elderly with respect and honour, and caring for the aged.*

4.4.1 Ageing as blessing

In the Old Testament, ageing is seen as a blessing for keeping God's commandments. Ex 20:12 declares, "*Honour your father and your mother, so that you may live long in the land the LORD your God is giving you*" (Bible, 1995). According to Baloyi (2015:7), this commandment was given to counter the historical tendencies that promoted that the elderly were burdensome. This law is linked with a promise that for honouring the elderly, a person's days will be lengthened (Infante, 2011:11). Deuteronomy 5:33 commands, "*Walk in obedience to all that the LORD your God has commanded you, so that you may live and prosper and prolong your days in the land that you will possess*" (Bible, 1995). Ageing is seen as a special favour from God (Davies, 2008:277; Klapp, 2003:70) and it must be kept in mind that during these Biblical times, the infant mortality rates were high and thousands died in wars and of starvation. Therefore, ageing is also seen as an achievement (Davies, 2008:277). In Genesis 15:15, the Lord said to Abraham: "*You, however, will go to your fathers in peace and be buried in a good old age*" (Bible, 1995). This was God's covenant with Abraham, promising him that he will live a long life. The fulfilment of God's promise to Abraham may be seen in Genesis 25:7-8. Referring to Genesis 15:15, Theron (2014:9) comments that the Hebrew word *šēbā* ("to be old") usually indicates that God blesses the person with a long life.

To live to a good old age is seen as a fulfilment of a promise, a special favour, a blessing, and a reward for true devotion (Davies, 2008:277). Keeping in line with ageing as a blessing, Tremper Longman III (2012:130) believes that the book of Job confirms that a long life is a reward for a godly life. Job 5:26 says: "*You will come to the grave in full vigour, like sheaves gathered in season*" (Bible, 1995). Jamieson *et al.* (2013) explain how Job 5:26 considers old age as a blessing to the godly. This is also in accordance with Genesis 15:15, Proverbs 16:31, and Proverbs 20:29.

The Wisdom literature also refers to ageing as a blessing for leading a righteous life and keeping commandments (Proverbs 3:1-2; 21:21). According to Davies (2008:278), the Wisdom literature looks favourably on ageing, saying that it symbolises a righteous life and that the elderly person is worthy of honour. This is written in Pr 16:31, which states: "*Grey hair is a*

crown of splendour; it is attained in the way of righteousness" (Bible, 1995). The picture is that of a king receiving a crown and 'splendour' indicates the high degree of esteem that should be given to the elderly (Davies, 2008:278). Proverbs 20:29 reads that the glory of young men lies in their strength, but grey hair is the splendour of the old. The elderly are no longer known for being strong or agile, but for their knowledge, wisdom, experience, and wise counsel (Menn, 2014:35).

4.4.2 Ageing as a sign of wisdom

The book of Job confirms that with ageing comes wisdom. Job states in Job 12:12, *"Is not wisdom found among the aged? Does not long life bring understanding?"* (Bible, 1995). In Job 32:6-7, Elihu says that age should speak and that increased years should teach wisdom. Although this is not always the case - not all elderly are wise, as seen in Job 32:6-7. Wegner (1997a:1136) and Theron (2014:6) comment that the elderly have gained wisdom from which others can benefit. The gift of ageing is gaining wisdom. Therefore, the researcher will postulate that wisdom is granted with old age (*cf.* Job 12:12).

Wisdom or knowledge can be gained by listening to the elderly and by learning from them, for with age comes understanding (Job 12:12). According to Theron (2014:5), old age is positively portrayed in Job 12:12, because great wisdom is gained during this time. Infante (2011:7) comments that Psalm 90:12 teaches that one should seek and pray in order to gain wisdom. Adding to this, Wegner (1997b:553) comments that wisdom results from a lifetime of observing and evaluating the actions of God. The elderly are seen as wise, experienced and having wise counsel. Although it cannot be naturally assumed that all elderly possess wisdom (Klapp, 2003:70; Yarhouse *et al.*, 2016:399), Infante (2011:7) comments that in the Bible, the gift of longevity is wisdom and that wisdom is a gift from God.

Due to the wisdom that the elderly possess, the elderly should be seen as teachers. Wegner (1997a:1136) and Theron (2014:6) comment that the elderly have gained knowledge and wisdom, and that the elderly are valuable sources of oral history and traditions. Infante (2011:4) suggests that not only do the elderly possess wisdom; they also have the task of teaching new generations the Word of God. Therefore, the elderly have been entrusted to recite God's Commandments and His works to younger generations (Klapp, 2003:71). In accordance with this, Psalm 44:2 reads: *"O God, we have heard with our own ears; our ancestors have told us the deeds you did in their day, with your own hand in days of old"* (Bible, 1995). In order for wisdom to pass from one generation to the next, younger generations have the obligation to listen to the elderly. Listening to the stories of the elderly and the importance of them being listened to was reflected in the empirical results of this study. Deuteronomy 32:7 reads: *"Ask your father and he will inform you, ask your elders and they will tell you"* (Bible, 1995).

Therefore, this important task of the elderly should be respected and received by younger generations and the wisdom gained by the youth from the elderly's life experiences should be used (Baloyi, 2015:9).

4.4.3 Treating the elderly with respect and honour

The elderly should be treated with adoration, respect and honour (Davies, 2008:277; Infante, 2011:5). Respect and honour for the elderly is in accordance with Leviticus 19:32, which declares, "*Stand up in the presence of the aged, show respect for the elderly and revere your God. I am the LORD*" (Bible, 1995), and the law given in Exodus 20:12 and Deuteronomy 5:16, which state: "...*honour your father and your mother*". This command shows that honouring the elderly is having honour for God. God is honoured by the elderly and it is therefore, imperative that one honours and shows reverence to the elderly (Davies, 2008:277; Keil & Delitzsch, 1950:237).

The Fifth Commandment is linked to a promise, which states that a person will receive the gift of longevity if one 'honours one's mother and father' (Theron, 2014:5; Dt 5:16; 1 Ki 3:14; Pr 10:27). Davies (2008:278) suggests that honour is demonstrated by positive actions, including meeting the elderly's needs, listening to their advice, and recognising their worth. These positive actions are in accordance with Leviticus 19:32, "*Stand up in the presence of the aged, show respect for the elderly*" (Bible, 1995) and Proverbs 23:22, "*Listen to your father, who sired you, and do not despise your mother when she is old.*" (Bible, 1987). According to Huber (1995:287) and Davies (2008:278), the burdens of the elderly are made lighter when they are honoured and cared for by the young. Davies (2008:278) states that the elderly are valued by the young when the young are sensitive to the elderly's physical, material, socio-material, and spiritual needs.

From the above-mentioned passages, it is clear that the elderly should be treated with honour and respect. This, however, is not always the case. In Psalm 71, the pleas of the older man suggest that respect and honour were not given to him (Davies, 2008:279). In Biblical times, many elderly people were rejected and cast off whenever they were regarded as a burden – this was therefore a disregard for the Fifth Commandment (Davies, 2008:279). According to Baloyi (2015:7), the Fifth Commandment was given to counter the beliefs that the elderly were a burden. This commandment directs adult children to show respect for and honour their parents. It is their responsibility to take care of their elderly parents, which includes taking care of all their parents' needs (Hess, 2008:748; Theron, 2014:6). By taking care of their parents, the current generation sets an example for the next generation (Biddle, 2003:112-113).

It is common knowledge that many elderly people today are abused or neglected (Baloyi, 2015:7; Theron, 2014:2) and do not receive the honour and respect they deserve. The Bible makes it clear that the elderly should receive honour and respect by virtue of their age. This is

clear in Pr 16:31: “*Grey hair is a crown of splendour; it is attained in the way of righteousness*” (Bible, 1995). ‘Splendour’ or the word *hâdâr* הָדָר derived from הָדַר (*hâdar*) which has its roots in the term ‘magnificence’, means to favour or honour. Therefore, *hâdâr* is translated to ornament or splendour, which refers to beauty, comeliness, glorious, glory, honour, or majesty (Strong 1890:350; Takore, 2013:26; Vines, 1996:188). According to Davies (2008:278), the word is frequently found in the Wisdom literature and is mostly reserved for God alone. Here, however, it is given to the elderly, because they have achieved old age. Therefore, it is clear that all elderly people deserve honour and esteem, but special honour should be given to the elderly who live righteous lives (Davies, 2008:278; Dt 5:16; 1 Kgs 3:14).

4.4.4 Caring for the aged

The elderly are often ‘treated like waste’ (Theron 2014:1) and this was not intended in the Bible. The Bible is clear on the punishment for those who mistreat the elderly. Exodus 21:15 reads that those who physically abuse their parents should be put to death. Likewise, Exodus 21:17 indicates that whoever curses (e.g. verbal abuse) their parents should also be put to death. Leviticus 20:9 describes a person, who curses his parents, as having his ‘blood guiltiness’ upon him (Bible, 1995) and Deuteronomy 27:16 says that those who dishonour their parents are cursed. Proverbs 20:20 warns that those who curse their parents will have their lamp put out in times of darkness. This is the curse given to those who dishonour their parents and they will not receive a long life. The counterpart of the curse is the blessing of longevity, which is given to those who honour their parents.

The Bible bestows honour and blessing upon those who revere the elderly. They will receive the gift of longevity for their reverence. It is clear from the passages referred to above that the Bible has given special honour to the elderly. Not only is ageing a blessing from God, but those who receive the gift of longevity also receive wisdom. The elderly should be honoured, respected (Ex 20:12; Dt 5:16), and listened to (Dt 32:7; Ps 44:2, Pr 13:1; 19:20; 23:22). In his analysis of Exodus 20:12, Henry (*cf.* Meyer, 2014) says that children should strive to provide for and comfort and support their parents in every way possible. Hess (2008:748) and Theron (2014:6) agree that it is the children’s responsibility to take care of the elderly. Taking care of the elderly means to honour and respect them, to listen to them, and to support and provide for them in their time of need (*cf.* Chapter 2 and Chapter 3).

According to research, women across the world outlive men (Nauert, 2015). Therefore, the widows are a special group among the elderly. According to Gloer (2010:181), throughout the Old Testament, the care of widows was a prominent concern (*cf.* 4.6.2.1.2). God has always been the defender, protector, and supporter of widows (Dt 10:18; 24:17, Ps 68:5, Ps 146:9). Countless times, God has ensured that the widows are taken care of and has shown special

concern for them (Ex 22:22; Dt 10:18; 14:29; Mal 3:5; Zec 7:9-10). Patterson (1973:228-228) describes that the concern for the widow, the orphan, and the poor can be seen in the covenant made in Sinai between God and His people before entering Canaan (Ex 22:21-24; 23:6). *“He defends the cause of the fatherless and the widow, and loves the foreigner residing among you, giving them food and clothing.”* (De 10:18). Here, God is seen as the supreme judge who defends and provides for the needy and the abandoned. By the special regulations of Israel’s religious and social life, God ensured that these groups were taken care of and provided for (De 14:28-29; 24:17-22; Patterson, 1973:228). The law safeguards and protects the needy and vulnerable and imposes strong penalties to those who oppress the weak (Dt 27:19; Martin, 2014:7). God has given the widows and the elderly special honour and has promised to take care of them. Psalm 91:16 reads that the Lord promises that with the length of days, He would satisfy the elderly and show them His saving power (Bible, 1995). Psalm 71:18; 92:12-15 emphasises that though a person’s body may fail, God will never forsake the elderly (Nsiku, 2006:841; Theron, 2014:9). Isaiah 46:4 echoes this by saying, *“Even to your old age and grey hairs I am He, I am He who will sustain you. I have made you and I will carry you; I will sustain you and I will rescue you.”* (Bible, 1995). Old age is a time of hope and growth, as highlighted in Psalm 92:14: *“They will still bear fruit in old age, they will stay fresh and green”*. Isaiah 46:4 and Psalm 92:14 make it clear that the Lord will care, provide for, and support the elderly. Throughout the Old Testament, God is seen as a provider for, supporter, and judge of the elderly. God has made it clear that the elderly should be honoured and respected (Ex 20:12; Dt 5:16) through care and support.

4.5 Characters of the Old Testament

4.5.1 Elderly characters

- According to Genesis 18:11, Abraham and Sarah were very old and Sarah was past her child-bearing years. Yet the Lord promised them a son and according to Genesis 21:2-3, Sarah gave birth. Abraham became a father at the age of 100 and lived for 75 years after that (Genesis 25:7-8).
- At the ages of 80 and 83, Moses and Aaron were chosen by God to lead the Israelites out of Egypt. According to Ps 90:10, this surpasses the average life span of humans.
- During the last thirty years of his life, Joshua led the Israelites to Canaan. According to Joshua 24:29, Joshua lived until the age of 110.
- Caleb, originally one of the scouts sent out by Moses, said on his 85th birthday that he was still as strong as the day he was commissioned by Moses (Jos 14:11).

- Copeland (2006:24) comments that Daniel was over eighty when he was serving as one of three governors over the kingdom of Babylon (Dan 6:1-3) and thrown into a lion's den (Dan 6:4-27).
- Referring to the graphic below and according to Genesis 5, the genealogy records patriarchs as having long lives (Adapted from Taylor, 2011:102).

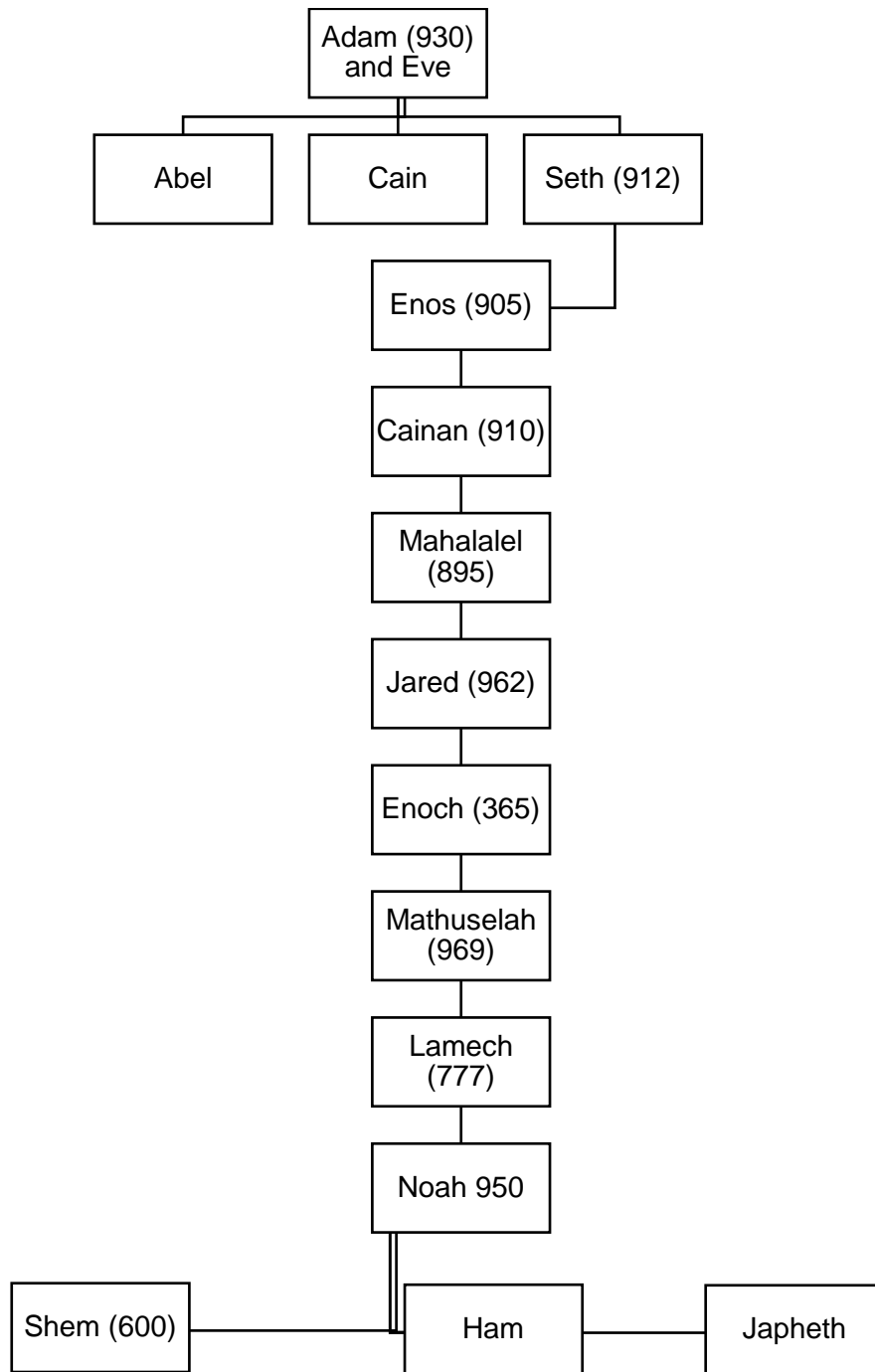


Figure 4-1: Genealogy (Genesis 5)

- According to Genesis 11, the genealogy continues with the patriarchs ageing well. (Adapted from Taylor, 2011:102)

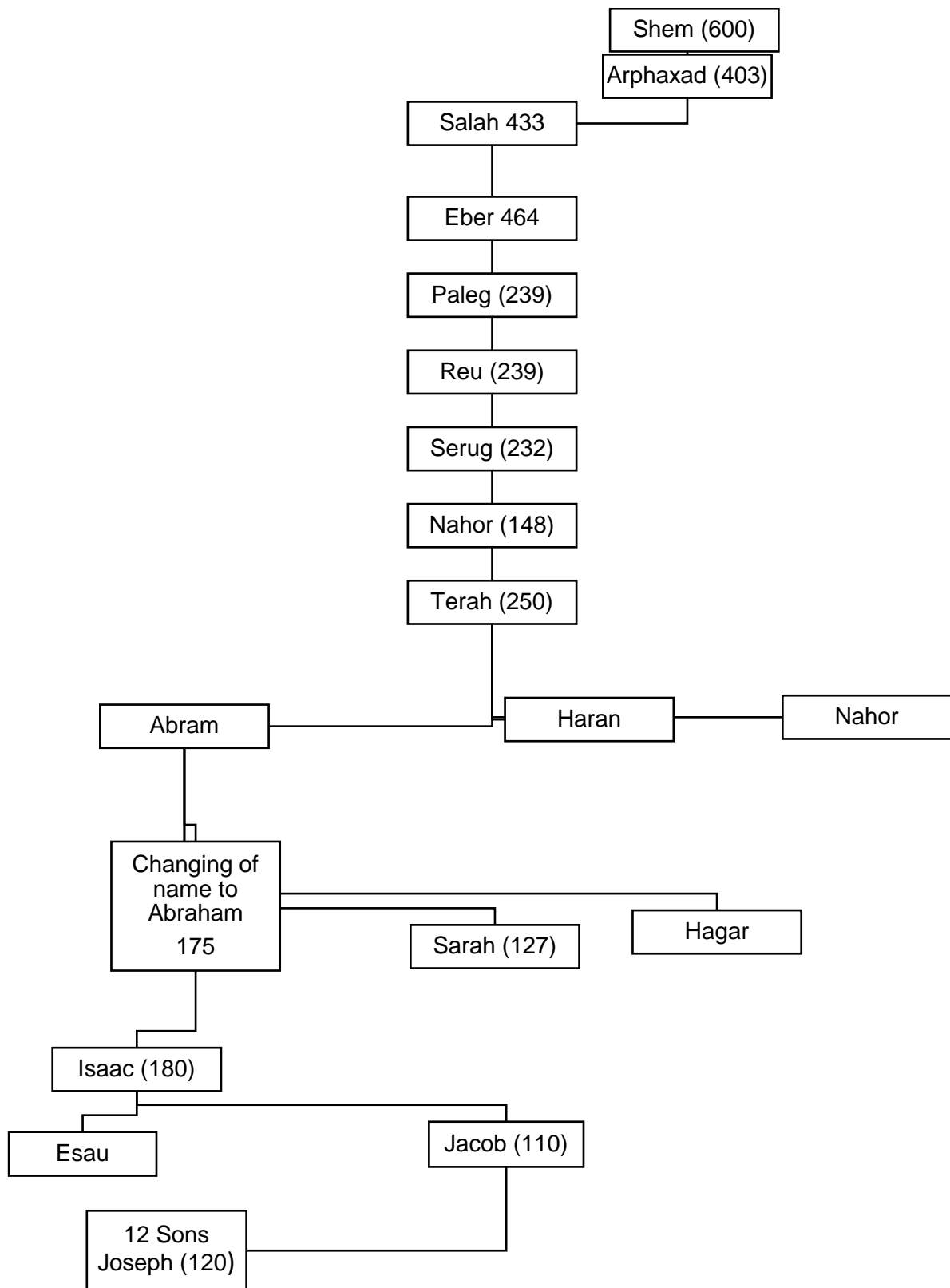


Figure 4-2 Genealogy (Genesis 11)

4.5.2 Characters in Old Testament caring/showing honour to the elderly

- Joseph (Gn 45:10–11; 47:11–12)
- Rahab (Jos 2:13)
- Ruth (Ruth 4:15)
- David (1 Sm 22:3)

4.6 New Testament perspectives of the elderly

The researcher will use 1 Timothy 5:1-6 as an indicator to propose that the elderly should be treated like mothers and fathers. When working with the elderly, people must be careful not to be harsh or disrespectful towards the elderly; but rather encourage and support them. Lastly, Tim 5:1-6 tells people to care for the widows (including the poor and all elderly). By using Janse van Rensburg *et al.*, (2011), the researcher will attempt to propose normative perspectives by using two specific phases.

4.6.1 Exploration phase

The exploration phase consists of steps two to four. During the exploration phase, one should attempt to explore the passage without preconceived ideas. It is during this phase where one should listen and be led by the Holy Spirit in order to understand the content of Scripture (Janse van Rensburg *et al.*, 2011:31).

4.6.1.1 Step 2: Choosing a passage

The scripture chosen is 1 Timothy 5:1-5 and was selected based on Paul's instruction to Timothy on how to deal with the elderly. The Scripture takes into account both old men and women and focuses on treating the elderly with respect, kindness and purity. Furthermore, the passage explains the duties of the family in caring for the elderly (e.g. the widows) and recommends that the elderly's children and grandchildren should put their religion into practice (verse 4) by caring for the own family and paying back their parents and grandparents.

1 Tim 5:1-5: "Do not rebuke an older man harshly, but exhort him as if he were your father. Treat younger men as brothers, ² older women as mothers, and younger women as sisters, with absolute purity. ³ Give proper recognition to those widows who are really in need. ⁴ But if a widow has children or grandchildren, these should learn first of all to put their religion into practice by caring for their own family and so repaying their parents and grandparents, for this is pleasing to God. ⁵ The widow who is really in need and left all alone puts her hope in God and continues night and day to pray and to ask God for help." (Bible, 1995).

4.6.1.2 Step 3: Determining the place of the passage and its place in the Bible

The passage is found in 1 Timothy in the New Testament. Timothy occupies a unique position within the body of letters, which are ascribed to Paul (Bassler, 1996:17). The following presentation is adapted from the Life Application Study Bible (2004:2055) and places the chosen text in the passage:

| | |
|---|---|
| Instructions on right belief | 1 Timothy 1:1-20 |
| Instruction for the church | 1 Timothy 2:1 – 1 Timothy 3:16 |
| Instruction for elders | 1 Timothy 4:1 – 1 Timothy 6:21 |
| However, concerning the passage, an adaption from Gloer (2010) and Bassler (1996) was created to illustrate further the place of the passage. | |
| Epistolary salutation | 1 Timothy 1:1-2 |
| Opening exhortation | 1 Timothy 1:3-11 |
| Thanksgiving / Exordium | 1 Timothy 1:18-20 |
| Why Timothy must teach these things | 1 Timothy 2:1-3:13 |
| The charge to Timothy | 1 Timothy 4:1-16 |
| Faithfully pastoring different groups in the household of faith (1 Timothy 5:1-6:2) | Age groups (1 Timothy 5:1-2) Widows (1 Timothy 5:3-16) Elders (1 Timothy 5:17-25) Slaves (1 Timothy 6:1-2) |
| The charge continues | 1 Timothy 6:3-10 |
| The good fight | 1 Timothy 6:11-16 |
| A brief refrain | 1 Timothy 6:17-19 |
| The final charge and benediction | 1 Timothy 6:20-21 |

From the above presentation, the chosen passage falls under the instruction given to Timothy from Paul to pastor faithfully to various groups in the community. Specific groups of the elderly, as described in the list below, are mentioned in this passage:

- The older male is mentioned in verse 1: “Do not rebuke an older man harshly” but rather as a ‘father’”.
- Verse two refers to older women as ‘mothers’.
- Special regard is then given to the widows, which is in line with the Old Testament’s special concern for the widows (Ex 22:22; Dt 10:18; 14:29; Mal 3:5; Zec 7:9-10).

According to Paul, the caring of the widows (and the elderly) is the family’s responsibility (Gloer, 2010:181).

4.6.1.3 Step 4: Determining the genre of the book in which the passage is located

The genre of this book along with Timothy 2 and Titus are collectively classified as Pastoral letters (Belleville, 2009:3; Just, 2016). According to Belleville (2009:3), they are called Pastoral Epistles because they are addressed to individuals, who were charged with the oversight of certain churches, and they thus share certain subject matter. Keeping this in mind, the letters are sometimes also seen as simple letters, but due to the characteristics they have, they demand careful attention. For example, Titus and 1 Timothy share similarities and 2 Timothy is set apart and has a nature of its own. 1 Timothy has often been seen as early church orders or a handbook on church polity. However, it is addressed to an individual rather than to a church or communities and does therefore not specifically fit the genre. Halcomb (2012:150) proposes that 1 Timothy shares more similarities with a *mandata principis*.

Mandata principis refers to a royal correspondence where a superior gives specific orders to his delegates. 1 Timothy and Titus refer to Paul being the superior and giving specific instruction to Timothy and Titus, who are the delegates.

4.6.2 Intensive phase

As previously mentioned, the intensive phase consists of steps five to sixteen (Janse van Rensburg *et al.*, 2011:53). Since the purpose of this study is to offer guidelines in caring for the elderly and not to write a sermon, steps five to eight will not be used due to their technicalities. Furthermore, this phase will not support or offer the researcher additional information as to what normative perspectives may be identified concerning caring pastorally for the elderly.

4.6.2.1 Step 9: Determining the passage's socio-historic context

4.6.2.1.1 Audience/ First listeners

Due to its resemblance to a *mandata principis* and its quasi-public nature, the first audience of the passage was Timothy and the church in Ephesus. According to Biblica (2016) and Bible History online (2016), Paul had instructed Timothy to care for the church in Ephesus. Timothy was Paul's trusted companion and friend and Paul calls Timothy his "son in gospel" (Bible History online, 2016). Timothy was also Paul's helper during the three years he was at Ephesus (Bible History online, 2016). Milne (1996:9) comments that Paul gave instructions to Timothy, with the task of reforming the church in Ephesus. The city of Ephesus was located on the western coast of Asia Minor (modern day Turkey). It was similar to Corinth, seeing that the city's location was along a major trade route. Ephesus was a centre of pagan worship and was famous for its cult and temple dedicated to the Greek goddess Artemis (Köstenberger *et al.*, 2009:642). Paul was concerned about the church in Ephesus, its organisation, and the faithfulness to the work that he had begun there (Biblica online, 2016). Furthermore, according to Biblica online (2016), the church had a major problem with heresy that combined Gnosticism, Judaism, and Asceticism. Therefore, seeing that Paul realised that he might not return to Ephesus, he instructed Timothy by letter to refute false teachings (1 Tim 1:3-7; 5:20-21) and to supervise the affairs of the growing church (Biblica online, 2016).

4.6.2.1.2 The widows

Concerning the widows, from the time of Israel's inception, God has always been the defender of widows (Dt 10:18; 24:17). Therefore, the care of widows has been a prominent concern throughout the Old Testament (Gloer, 2010:181). The early church also took up this responsibility (Acts 6:1; Gloer, 2010:181). Milne (1996:89-90) comments that in the word given by Paul 'giving proper recognition' means to honour, which brings the Fifth Commandment to the fore. Paul's word does not simply mean to honour or respect the elderly, but also means to offer practical help. To "honour" widows (1 Tim 5:3), therefore, refers to the offering of help with material support (Menn, 2014:37).

Paul thus addresses the issue of caring and supporting the widows. He also lists criteria regarding which widows in the church should be helped. According to Milne (1996:89-90), there were a large group of widows during that time, but there were also 'counterfeit' widows, who extorted the church for their own selfish gain. Thus, Paul gives the following criteria, which define the characteristics of 'real widows': widows should have no family members that are able to care for her, the widow must possess certain spiritual qualities, and she must be of a certain age (Nelson, 2013:1892). The task of caring/supporting the widows falls firstly on the shoulders of families. This is emphasised in 1 Timothy 5:4: "*But if a widow has children or grandchildren, these should learn first of all to put their religion into practice by caring for their own family and*

so repaying their parents and grandparents, for this is pleasing to God” (Bible, 1995). When a family member does not take care of the widow, he or she is seen by Paul as worse than an unbeliever and has therefore denied his or her faith (Gloer, 2010:183). According to Hess (2008:757), Parry (2010:151) and Longman III (2012:202), the people of Israel naturally respected and honoured the elderly. The reason for this was because God blessed them with longevity if they kept the Fifth Commandment (Ex 20:12). By taking care of the elderly, younger generations can gain knowledge and wisdom as the elderly are valuable sources of history and traditions (Theron, 2014:5; Wegner, 1997a:1136). However, according to Luke’s narrative in Acts, the church had a problem in dealing with the correct practice of caring for the widows. This problem arose due to the church’s failure to care for the Hellenistic widows (Gloer, 2010:182).

4.6.2.2 Step 10: Word studies of important concepts in the key verse

Considering that no key verse was suggested but rather a key passage, the researcher has produced key words from different parts of the passage. From 1 Timothy 5:1-5, the following words were chosen:

*1 Tim 5:1-5: “Do not **rebuke** an older man harshly, but **exhort** him as if he were your father. Treat younger men as brothers, ² older women as mothers, and younger women as sisters, with absolute purity. ³ Give proper **recognition** to those widows who are really in need. ⁴ But if a widow has children or grandchildren, these should learn first of all to **put their religion into practice** by **caring** for their own family and so repaying their parents and grandparents, for this is pleasing to God. ⁵ The widow who is really in need and **left all alone** puts her hope in God and continues night and day to pray and to ask God for help.”* (Bible, 1995)

4.6.2.2.1 Rebuke

According to Mounce (2006:831), the verb ‘rebuke’ means ‘to inflict blows upon, to chide, to reprove’. According to Ellicott’s Commentary for English Readers (*cf.* Bible Hub, 2016a), Paul warns Timothy against misplaced zeal and urges him to behave appropriately. In accordance with this, the Benson Commentary comments that the phrase used is ‘rebuke not’ or ‘rebuke not severely’ where the phrase **μη επιπληξης** has both literal and metaphorical meaning. Literal reference to ‘do not strike’ and metaphorically to ‘do not sharply remove’, which also furthers to 2 Tim 2:24-25, means that an older person who is a believer (although he may be a sinner) must be shown respect and must not be addressed with harsh words (*cf.* Bible Hub, 2016b; Cayce, 2016).

4.6.2.2.2 Exhort

Exhort is also translated to 'entreat' or 'to implore', 'to call upon', or 'to be persuaded' (Mounce, 2006:871). According to the Gill's Exposition of the Entire Bible (*cf.* Bible Hub: 2016c), Timothy should entreat (exhort) an older man as if to entreat a father, who is a sinning believer. This highlights the Fifth Commandment of the law (Ex 20:12), which commands Timothy to give the elderly honour and respect, fear and reverence, and beseech the older man to stop sinning and return to the right path. Cayce (2016) refers to the word 'intreat' (entreat/ *parakalei/ παρακάλει*) as a word that is related to a title for the Holy Spirit (*paráklētos/ παράκλητος*). *Paráklētos* refers to an advocate, comforter, or helper (Strong's Concordance *cf.* Bible Hub, 2016d). Cayce (2016) further demonstrates that the word refers to coming alongside a person to help, which, according to Cayce, can be best translated as 'strengthen'. Timothy (and believers) should strengthen fellow believers (Gal. 6:1-2), just as the Scripture and the Holy Spirit strengthen a person (Cayce, 2016).

4.6.2.2.3 Recognition

The word 'recognition' is also translated to 'honour' in the King James Version: "*Honour widows that are widows indeed.*" (Bible, 1999). The Greek word used is *tima/ τίμα* and according to Mounce (2006:900), *tima* refers to value at a price, or to estimate, and/or to honour, or revere. Gloer (2010:181) comments that *tima* means reverential respect, which refers to caring support. *Tima* is often used for financial obligation or support for the elderly, widows, and orphans (Takore, 2013:26). Therefore, according to Cayce (2016), to honour, or 'to show respect or care', 'to support', or 'to treat graciously' includes meeting all kinds of needs, but Cayce comments that Paul primarily meant financial support.

4.6.2.2.4 Caring/shew piety

"...*their religion into practice by caring for their own family*" (Bible, 1995). Other versions of this verse read as: "first to shew piety at home" (Bible, 1999). The Greek word used is *eusebein/εύσεβεί*. The word *eusebein* is the verb form of the word 'godliness'. It can refer to either 'to honour a deity' (to worship) or it can (in an ethical sense) refer to 'to fulfil one's obligations'. In the case of 1 Timothy 5:4, it refers to one's religious duty to one's family. According to Paul, children, who fulfil their obligations by taking care of their parents, also fulfil their obligation towards God (Gloer, 2010:182).

4.6.2.2.5 Left all alone

Left all alone also translates to desolate. Paul describes the real widow as someone who has no one to look after her. Being left all alone or being the desolate widow, means that she has no one to care for her, support her. She has no one to depend on for material support and is therefore helpless (Gloer, 2010:182; Menn, 2014:37). According to Cayce (2016), desolate refers to a permanent condition of being forsaken and left without resources. Therefore, the widow is 'really' a widow, since she has no one to depend on or to support her.

(See next page for Step 11)

4.6.2.3 Step 11: Determining the revelation historical place and meaning of the passage

The revelation historical place is formulated in the table below by the researcher:

Table 4-1 Revelation historical place and meaning of 1 Timothy 5:1

| Theme | Scripture | Relevance and the place in the historical revelation |
|---------------------------|---|---|
| An older man 1 Tim 5:1 | Lev 19:32 <i>“Stand up in the presence of the aged, show respect for the elderly and revere your God. I am the LORD.”</i> | <p>Relevance: This verse adheres to how the elderly should be treated: with honour and respect. Paul further mentions in verse 5 that when the elderly are looked after, it pleases the Lord.</p> <p>Place: The verse is found in the third book of the Old Testament. Leviticus was a handbook for the priests on how to conduct themselves; whereas 1 Timothy is a letter to Timothy on how to conduct himself and how to treat various groups of people.</p> |
| | Titus 2:2 <i>“Teach the older man to exercise self-control, to be worthy of respect, and to live wisely.”</i> | <p>Relevance: The verse focuses on how an older man should behave himself.</p> <p>Place: Titus is a book in the New Testament and is a Pastoral letter from Paulus, which is addressed to Titus. This is a letter to Titus advising him on his responsibilities towards the church on the island of Crete. The book Titus is similar to that of Timothy.</p> |
| | Titus 2:6 <i>“The elder must live a blameless life. He must be faithful to his wife and his children must be believers who don’t have a reputation for being wild and rebellious.”</i> | <p>Relevance: Although the verse refers to elders (deacons), it also refers to how an elder should live, which also indicates how Christians should live.</p> <p>Place: (cf. Titus 2:2)</p> |

Table 4-1 (cont.) Revelation historical place and meaning of 1 Timothy 5:1

Conclusion: The historical revelation of 1 Tim 5:1

The above-mentioned passages can be traced to 1 Timothy 5:1 where Paul instructs Timothy on how to treat the elderly. These passages can also be traced to the Old Testament, where Lev 19:32 says that the elderly should be treated with respect and honour. However, Titus 2:2 and Titus 2:6 in return show how the elderly should behave. Titus 2:2 and Titus 2:6 declare that the elderly should live a life worthy of honour and respect. Therefore, this indicates that the passages are twofold: the elderly should be treated with respect and honour, as this pleases the Lord; but the elderly should also live blameless lives and be an example for future generations.

(See next page for Table 4.2)

Table 4-2 Revelation historical place and meaning of 1 Timothy 5:4

| Theme | Scripture | Relevance and the place in the historical revelation |
|-----------------------------------|---|---|
| The role of children 1 Tim 5:4 | <p>Eph 6:2-3 <i>“Honour your father and your mother’. This is the first commandment with a promise. If you honour your father and mother things will go well for you, and you will have a long life on the earth.”</i></p> | <p>Relevance: This verse adheres to how the elderly should be treated. The elderly should be treated with respect and honour.</p> <p>Place: The verse is found in the New Testament. Ephesians was written by Paul to strengthen and encourage the church in Ephesus.</p> |
| | <p>1 Timothy 2:3 <i>“This is good and pleases God our Saviour.”</i></p> | <p>Relevance: The verse is used by Paul to explain that praying and living godly lives are good and pleasing to God. These exact same words are used when Paul refers to Christians who take care of their parents in 1 Tim 5:3.</p> <p>Place: Timothy is a book in the New Testament and is a Pastoral letter from Paulus to Timothy. This is a letter to Timothy advising him on his responsibilities towards the church.</p> |

(See next page for Table 4.3)

Table 4-3

Revelation historical place and meaning of 1 Timothy 5:4

| Theme | Scripture | Relevance and the place in the historical revelation |
|---|---|---|
| | <p>Ex 20:12 <i>“Honour your father and your mother.”</i></p> | <p>Relevance: This is the original commandment to which Paul refers in 1 Timothy 5:4. This verse is the Fifth Commandment and has a promise connected to it. When children obey this commandment, they will be given a long life on earth.</p> <p>Place: The book of Exodus is found in the Old Testament. Exodus contains the Ten Commandments that were given by God to Moses and the Israelites.</p> |
| <p>Conclusion: The historical revelation of 1 Tim 5:4</p> <p>These passages can be traced to 1 Timothy 5:4 where Paul refers to the Fifth Commandment found in Exodus. Paul refers to this verse in Ephesians 6:2-3 and in 1 Timothy 5:4. Paul refers to this verse in order to make it clear that the Fifth Commandment is still applicable. Secondly, Paul makes it clear that it is the children’s responsibility to take care of their parents/grandparents.</p> | | |

(See next page for Table 4.4)

Table 4-4 Revelation historical place and meaning of 1 Timothy 5:5

| Theme | Scripture | Relevance and the place in the historical revelation |
|--|---|--|
| The widow 1 Tim 5:5 | <p>Luke 2:36-37 <i>“Anna, a prophet, was there in the Temple. She was a daughter of Phanuel, from the tribe of Asher and she was very old. Her husband died when they had been married for seven years.”</i></p> | <p>Relevance: This verse adheres to how widows should conduct themselves. Anna is a good example on how widows should live their lives.</p> <p>Place: The verse is found in the gospels of the New Testament. This verse is before Jesus was born.</p> |
| <p>Conclusion: The historical revelation of 1 Tim 5:5</p> <p>Paul says that it is the obligation of the church to take care of the ‘real widow’. He then further gives criteria on what classifies as a ‘real widow’. However, he says that although it is the church’s responsibility, the obligation is still towards the children of these widows to take care of them, as this pleases the Lord. It has always been God’s will that the widows be taken care of and provided for.</p> | | |

(See next page for Step 12)

4.6.2.4 Step 12: Determining the revelation of God in the passage

The revelation of God in the passage of 1 Timothy 5:1-5 was formulated by the researcher and is as follows:

Table 4-5 Revelation of God in 1 Timothy 5:1-5

| | Father | Son | Holy Spirit |
|---------------------------|---|--------------|--------------------|
| Explicit | | | |
| Who is He? | Not explicit | Not explicit | Not explicit |
| What does He do? | Not explicit | Not explicit | Not explicit |
| What does He say ? | Not explicit | Not explicit | Not explicit |
| Implicit | | | |
| Who is He? | He is a caring and providing God. | Not implicit | Not implicit |
| What does He do? | He cares and provides for widows. | Not implicit | Not implicit |
| What does He say ? | That it is pleasing to Him if one does his/her religious duty e.g. care/support and provide for family. | Not implicit | Not implicit |

4.6.2.5 Step 13: Determining the revelation facts and calling of the passage

Redemption facts: Just as Timothy was instructed on how to care for the elderly, so are people of today instructed. Firstly, the elderly should be shown respect and honour. The elderly should be treated as mothers and fathers and this brings the Fifth Commandment into the picture: '*Honour thy father and thy mother*' (Ex 20:12). It has a blessing and a curse connected to it. Those who honour their mother and father and 'repay' the debt they owe them (caring for them and raising them, thus children and grandchildren have the obligation to care for their parents/grandparents) will be blessed with longevity. Considering 1 Timothy 5, *repaying their parents* does not mean children are doing their parents a favour by taking care of

them. Repaying their parents refers to children repaying a debt (Ngewa, 2009:114). For those children, their days on earth will be lengthened (ageing is seen as a blessing). However, those who strike their parents should be put to death (Ex 21:15).

Calling: People should be treated with love. Paul instructs Timothy to treat the elderly men as fathers, the elderly women as mothers, young men as brothers, and young women as sisters. This calls into action Jesus' words that people should love their neighbour (Mt 22:39; Mk 12:31; Gal 5:14). However, regarding the elderly, this shows that they should be treated with honour and respect, and that they must be looked after by their own (children/grandchildren). In the case where there is no one to care for them or provide support, the church has a duty towards them.

4.6.2.6 Step 14: Determining the communication purpose of the text

The letter to Timothy in its entirety was to instruct, guide, and encourage Timothy to fulfil his obligations as leader of the church in Ephesus. When relying on the socio-historic context of the church, Paul sent Timothy there to counter the false teachings. According to Moore (2004), the purpose of 1 Timothy is clearly set out in 1 Timothy 1:3 where Paul expresses that he left Timothy in Ephesus to instruct people not to spread false teachings. Paul wanted the false teaching to stop and he wanted Timothy (his stand-in) to put a stop to it. Therefore, Paul called Timothy "an apostle of Christ Jesus" (1 Tim 1:3), thereby strengthening Timothy's authority in the eyes of the church and encouraging him to act accordingly (Belleville, 2009:26). Paul emphasises sound teaching and strong leadership. Paul also had an evangelistic mind; therefore, his main goal was, and still is, to lead others to salvation (Moore, 2004).

1 Timothy is thus a personal letter and can be viewed as a "handbook" of church administration and discipline (Life Application Study Bible, 2004:2054). 1 Timothy 5:1-5 relies on the socio-historic context, although it is still applicable to the current church. The purpose of 1 Timothy 5:1-5 is for Paul to instruct Timothy on how to treat different members of the church in Ephesus, specifically the elderly (verse 1; 4-5). Thus, the communication purpose of the passage is: *Paul instructs Timothy on caring for the church.*

4.6.2.7 Step 15: Consulting exegetical sources

The following entries from exegetical sources offer additional information needed to gain further insight about 1 Tim 5:1-5.

When Paul instructs Timothy not to rebuke an elder (1 Tim 5:1), he specifically means an older man. According to Cayce (2016), an older believer, who sins, should not be harshly rebuked. Timothy, although he was younger, had to confront the sinning older man with deference and honour, as this follows the principles from the Old Testament (Le 19:32; Job 32:4; Pr 16:31). Guzik (2014) explains that Timothy had to shepherd the church faithfully, but had to have respect for the years of the older men. Paul further says that Timothy had to 'entreat him as a father'. According to Gill (*cf.* Biblehub (c)), this means to give the older man honour, respect, fear, reverence, and persuade the older man to cease sinning and return to the right path. Cayce (2016) explains that the word entreat is related to a title for the Holy Spirit (*cf.* 4.6.2.2.2), where Paul encourages and instructs Timothy to strengthen fellow believers and help them (rather than to rebuke them) (*cf.* 4.6.2.2.1).

Concerning the widows (1 Tim 5:3-6), widows are seen as older women and should be treated as mothers and given the respect and honour due their age (Guzik, 2014). Furthermore, widows refer to the 'widows who are really widows' (*cf.* 4.6.2.1.2). As previously mentioned, Paul lists certain criteria that widows had to have in order to receive help from the church. However, Paul also states that it is firstly the obligation of the family to care and provide for the widows. According to Gloer (2010:181,) there was, during Biblical times, a Roman providential system, according to which the city-state was obligated to support destitute widows financially. In contrast to this, Guzik (2014) explains that in the days when the New Testament was written, the widows did not receive any help from the government, because there was no social assistance system to offer support. Whether there was support or not, Gloer (2010:182) states that Timothy was instructed to ensure that the children and/or grandchildren took care of and offered financial support to their parents/grandparents, as this was pleasing to the Lord. Gloer (2010:182) explains that in many cultures, the idea of children repaying their parents is prominent, as these cultures believe that children owe their lives to their parents. Therefore, the responsibility to take care of, honour, and support the widows falls firstly on the widows' family and secondly on the church, with the general principle being that the church should help those who are truly in need (Guzik, 2014).

Gaebelein (*cf.* Meyer, 2014) says that according to the criteria that Paul gives regarding what constitutes a 'real widow', these elderly women should devote themselves to prayer and works of mercy, which include ministering to the sick, teaching younger Christian women, and winning over women unbelievers to the Christian faith.

According to Gaebelin (*cf.* Meyer, 2014) and the Old Testament, the elders are viewed as teachers (Infante, 2011:4). It is clear that during old age, a person's work on earth is not done. As the children/youth have a responsibility to take care of, honour, support and listen to the elderly, so too do the elderly have certain obligations to fulfil. These include the elderly:

1. Teaching and passing on knowledge/wisdom,
2. Praying and interceding in prayer for those who are in trouble,
3. Living holy lives and guiding younger Christians,
4. Ministering to the sick, and
5. Making disciples.

4.6.2.8 Step 16: *Understanding the context of the listener*

The primary listeners in this empirical study are the tertiary student volunteers, who need adequate training in order to help care pastorally for the elderly. It was initially found in the empirical research and the literature study that ageism exists and that the elderly are not always properly taken care of. Some of the elderly living in the caring facilities (studied in this research) do not receive support or visits from their family members. In addition to this, Theron (2014:1) argues that the elderly are often treated like 'human waste'. Theron (2014:2) comments that the elderly (especially widows) are at risk and that abuse in the form of assault, robbery, rape, and murder often happen within a relationship where there is an expectation of trust (Ferreira & Lindgren 2008:94; Theron, 2014:2). What further causes concern, according to Baloyi (2015:2), is that the elderly are forced to spend their pensions on other family members instead of their own comfort and well-being, which is in contrast to the mandate of Scripture that says widows are to be cared for (Ex 22:22-24; Dt 27:19, Is 1:17; 1 Tim 5:3). Paul's words to those who do not take care of their parents are that they are worse than an unbeliever because they have 'denied their faith' (1 Tim 5:8). The elderly are not receiving the honour, respect, and support that they should. Although it is the responsibility of the families to provide care for the widowed and elderly (1 Tim 5:4), churches, charities and NGOs have had to intervene. However, due to neglect and lack of support, these parties also face challenges. These parties should only be providing secondary support, but are more often than not having to provide primary support, which should come from families. It is not the will of God to have the elderly neglected. As Paul instructed Timothy on how to take care of the elderly by honouring them as fathers and mothers (1 Tim 5:1), so too is the instruction given to the tertiary student volunteers (including the caring facilities). The tertiary student volunteers should honour the elderly as fathers and mothers, as this is God's commandment (Ex 20:12). Although it cannot be expected of them to financially support the elderly, they can, however, raise funds to help caring facilities and the elderly.

The secondary listeners are the elderly. The tertiary student volunteers should inspire and create opportunities for the elderly to fulfil their roles as teachers, storytellers, and prayer warriors, who live holy lives, minister, and make disciples. The elderly should be given a new perspective on ageing and should be treated with respect and honour. In doing this, the elderly will touch the lives of younger men and women. God has always cared for the widows and He grants old age as a blessing (Dt 5:33; 1Ki 3:14; Ps. 71). God also promises renewal: *“For which cause we faint not; but though our outward man perish, yet the inward man is renewed day by day.”* (2 Co 4:16).

4.6.3 Characters of the New Testament

4.6.3.1 Elderly characters

- Zacharias and Elizabeth were both advanced in age (Lk 1:7). Zacharias was still serving in the temple at that time (Lk 1:8-9). Zacharias and Elizabeth share the same testimony as Abraham and Sara of the Old Testament, who bore a child well after their childbearing years. Elizabeth gave birth to John the Baptist.
- Anna is introduced in Luke 2:36 as a prophetess. She was 84 years of age and this and her widowhood did not prevent her from serving “night and day with fasting and prayer” in the temple (Luke 2:37). When she saw the baby Jesus, she came forward and thanked God.
- Simeon was an old, righteous, and devoted man. According to Luke 2:26, the Holy Spirit was upon him and he would not die before he had seen the Messiah. When Simeon saw Jesus, he took him in his arms and proclaimed: *“Sovereign Lord, as you have promised, you may now dismiss your servant in peace. For my eyes have seen your salvation, which you have prepared in the sight of all nations: a light for revelation to the Gentiles, and the glory of your people Israel.”* (Lk 2:29-32). He bore witness and blessed Jesus’ household during Jesus’ circumcision (Luke 2:25-35).
- In Philemon 1:9, Paul describes himself as an old man, yet it is known that according to Ephesians, Colossians, Philippians, and Philemon, he was busy writing letters (while in prison). After being released from prison, Paul was found traveling to and visiting churches, while encouraging them. Paul also wrote letters to Timothy and Titus teaching them how to treat other members in the church (including the elderly) and encouraging them.
- John, Jesus’ beloved disciple, lived a long life. According to tradition, John died in Ephesus sometime after 98 AD at an old age (Peach, 2014; Zahn, 1953:203).

4.6.3.2 Characters in New Testament caring/showing honour to the elderly

- According to Klapp (2003:74-75), Jesus had great empathy and love for the poor and widows. Klapp (2003:75) continues by saying that Jesus acted as a defender, provider and carer. According to Markus 7:9-13, Jesus defends the plight of the elderly and considers it as more sacred than the vow of Corban. The vow of Corban refers to the Greek word '*korban*' and is related to the term *korbanas*, which signifies the 'temple treasury'. The term corban suggested that the elderly's financial resources belonged to God and was therefore considered a vow. However, during Biblical times, people started using this vow as a scheme to avoid their financial responsibility to their elders (Jackson, 2016). Thus, Jesus said that they neglected their responsibilities towards their parents, therefore, not obeying God's law according to the Ten Commandments. Concerning Jesus as carer, Jesus gave John charge to take care of his mother. According to John 19:26-27, Jesus said unto his mother and John: "*Woman, here is your son, and to the disciple, 'Here is your mother.'* From that time on, this disciple took her into his home" (Bible, 1995). This shows Jesus' commitment to God's law. By providing his mother with a new son, he ensured that Mary was taken care of. This is in line with the Fifth Commandment (Ex 20:12), where children should honour their parents, which includes caring for them and providing for them. Jesus sets the ultimate example for caring for elderly parents, when He was no longer able to care and provide for His mother, He ensured that she was taken care of.
- Paul in his letter to Timothy wrote and taught his younger companion how to treat the elderly. 1 Timothy 5:1-5 explains to Timothy how to care for and treat the elderly. Paul was also Timothy's mentor.

4.6.4 Mentorship in the Bible

From the above, it is clear that Paul was Timothy's mentor. Borek *et al.* (2005) comments that when Timothy joined Paul's mission, that is when their relationship started. Paul became a leader, confidante, and role model for young Timothy. According to Maxwell (2007:1402), a strong bond was formed between Paul and Timothy and Paul continued the work the women in Timothy's life began. Paul was a mentor that led people into a dynamic relationship with God (Sweet, 2008:92). Paul modelled an example of faith, patience, love, and perseverance throughout his prosecution for Timothy to follow (Borek *et al.*, 2005; Maxwell, 2007:1327; Smith, 2015:149).

Mentorship consists of a relationship between two people, where one leads, teaches, and acts like a role model and offers advice to another person. According to Smith (2015:134),

mentorship is a prominent principle in the Old Testament and the New Testament. The following relationships can be seen as examples of mentorship in the Bible.

- Jethro and Moses (Exodus 18:14-27)
- Moses and Joshua (Numbers 27:15-23)
- Eli and Samuel (1 Samuel 3)
- Samuel and Saul (1 Samuel 9)
- Elia and Elisa (2 Kings 2:9)
- Naomi and Ruth (Ruth 1-4)
- Elizabeth and Mary (1 Lucas 1:39-45)
- Barnabas and Saul (Acts 9:26-30)
- Paul and Timothy (Acts 16:3; Philippians 2:19-23; 1 & 2 Timothy)
- Jesus and his disciples

4.7 Conclusion

The Old Testament sets an example for how the elderly should be treated. Firstly, according to Genesis 1:26-27, everyone is made in the image of God; therefore human life is sacred. Secondly, taking the law into consideration, it is morally and socially wrong to harm others. The Fifth Commandment states that a person should honour his/her father and mother, for this is pleasing to God. There is a blessing and a curse connected to the Fifth Commandment. For those who regard the Fifth Commandment, they will be granted the gift of longevity. However, for those who disregard the commandment, they will be cursed. Not only is God the provider and supporter of the weak, oppressed and needy, He is also their judge. He makes provisions for the elderly by His laws. He expects people to show their righteousness by putting their religion into practice by obeying His commands. He grants the gift of ageing to those who care, provide, honour, and respect the aged. He also grants wisdom to the aged and gives them special honour.

Jesus continues the Old Testaments' example in the New Testament. Matthew 22:39 reads "love your neighbour as you love yourself"; this should be the basis of all relationships, especially regarding the elderly. Furthermore, the New Testament keeps up with the sentiment of caring for the poor, the orphaned, and the widowed.

The Bible teaches on how the elderly should be treated and how the elderly should behave.

Table 4-6 Normative guidelines concerning the elderly

| Old Testament | New Testament |
|--|---|
| <p>How to treat the elderly</p> <p>People were created in the image of God, therefore all life is precious and sacred.</p> <p>Ageing is seen as a blessing.</p> <p>Ageing is seen as a sign of wisdom.</p> <p>The elderly should be honoured, adored, and respected.</p> <p>Listen to the elderly (and their instructions).</p> <p>The law protects and cares for the needy, poor, and vulnerable.</p> <p>The elderly should be seen as esteemed and useful members of the community.</p> <p>People (children) are not allowed to curse or physically assault their parents.</p> <p>Biblical instruction for the elderly</p> <p>The elderly should gain wisdom, teach the younger generations and be esteemed and useful members of the community.</p> | <p>How to treat the elderly</p> <p>Love the elderly as you love yourself.</p> <p>Honour and respect the elderly.</p> <p>Do not sharply rebuke the elderly.</p> <p>Help and care for the elderly (especially the widows) financially and in other regards.</p> <p>People are not allowed to take advantage of the elderly.</p> <p>Listen to the elderly.</p> <p>Biblical instruction for the elderly</p> <p>Teach pass on knowledge/wisdom.</p> <p>Pray and intercede in prayer for those who are in trouble.</p> <p>Live holy lives and guide younger Christians.</p> <p>Minister to the sick and make disciples.</p> |

Thus, what the normative guidelines have identified is that the elderly are useful and esteemed members of the community. The elderly are worthy of respect and honour. They are esteemed and useful members of the community. The elderly should be looked after and cared for. In return, the elderly should use their time on earth to gain wisdom and pass it on to future generations. The elderly are teachers and it is their duty to teach. It is thus the duty of the younger generations to listen to the elderly. How the current generation treats their elders will reflect on how the future generations will treat their elders.

Regarding the normative guidelines and the insights gained from the empirical research and the literature review, the following chapter will propose guidelines for tertiary student volunteers. Using normative guidelines and the insights will help propose guidelines that will help the current generation treat the elderly in such a way that sets an example for future generations.

CHAPTER 5: PRAGMATIC TASK: CREATING PRACTICAL GUIDELINES

5.1 Introduction

In the previous chapters, the empirical task (Chapter 2), the interpretive task (Chapter 3), and the normative task (Chapter 4) were discussed. In this chapter, the questions ‘what is going on?’, ‘why is it going on?’ and ‘what ought to be going on?’ are answered in hermeneutical interaction in order to propose the pragmatic task. This chapter will also attempt to answer the following question, as set out by Osmer (2008:4): “How might we respond?” This question aims to answer the research question: **“How can tertiary student volunteers be better equipped in caring pastorally for the elderly?”** Therefore, the purpose of this chapter is to bring the empirical-, literature-, and normative- results together in interaction and to propose practical guidelines, by using the themes and sub-themes in a hermeneutical interactive way, in order to show how student volunteers can be better equipped in caring pastorally for the elderly.

5.2 Aims and objectives

By integrating the previous chapters, the aim of this chapter is to formulate guidelines, which can be used to help tertiary student volunteers care for the elderly.

5.3 Theoretical assumptions

The last task as set out by Osmer (2008:178) seeks to answer the question: “How might we respond?” This task focuses on helping to bring about change (Smith, 2010:109).

The purpose of this study is to guide tertiary student volunteers by creating guidelines that will help them care pastorally for the elderly. Gardner refers to ‘endstates’ to describe knowledge, attitudes, and skills that are valued and necessary for a community to carry out certain roles (Osmer, 2008:220). The pastoral counsellor has the role of using ‘endstates’ to help change the care given to the elderly. The purpose of this chapter is thus to investigate how change in the care for the elderly can be managed.

Counselling guidelines can be used when working with both the elderly and the tertiary student volunteers. Thus, by using the previous chapters as a foundation, a strategic plan needs to be made in order to assist tertiary student volunteers, who care for the elderly.

5.4 Role of pastoral counsellor

In this study, the researcher proposed that pastoral counselling is the area that is needed to bridge the gap between tertiary student volunteers and their work with the elderly. Both the elderly and tertiary students have needs of their own, and it is the obligation of the tertiary student volunteers to help fulfil the needs of the elderly. Pastoral counselling focuses on a holistic approach towards the counselee. In this study, however, both the tertiary student volunteers and the elderly are the 'counselees'. Tertiary student volunteers need guidance and the elderly have specific needs. Therefore, it is the role of the pastoral counsellor to identify the needs (of the elderly and the tertiary student volunteers) and create guidelines for the tertiary student volunteers to follow. In creating guidelines for tertiary student volunteers, the need for adequate training, orientation, and supervision can be fulfilled (Bartyzal *et al.*, 2015:4), and a program that is specifically designed for the needs of the elderly can be followed.

The role of the pastoral counsellor is thus to link these two age groups by helping to train the tertiary student volunteers and aiding in caring for the elderly in a distinct pastoral manner using a pastoral approach (i.e. situation, tradition, and Bible and prayer (*cf.* 5.6.2.3)). In this chapter, the researcher will therefore propose potential guidelines that can be created for the tertiary student volunteers to follow and will focus on showing what necessary tools may be given to the tertiary student volunteers in order to care pastorally for the elderly.

5.5 Counselling skills

The best way to give counselling to the elderly is to adhere to the following:

- **Self-examination:** During self-examination, the counsellors should question their own attitude towards the elderly. The counsellor can therefore determine his or her negative association to/negative stereotypes of the elderly.
- **Physical examination and counselling:** The counsellor should encourage the elderly to go for regular physical examinations by a competent physician. Collins (2007:303) suggests that when proper medical treatment is given, the elderly will feel better both physically and (in some cases) psychologically.
- **Individual counselling:** The elderly can benefit from talking about their problems to a counsellor or a health care professional. The following fields can be helpful during counselling sessions:
 - **Supportive counselling:**
The elderly can benefit from supportive counselling, as it helps the elderly cope with their fears and concerns. Supportive counselling does not encourage

complaining or self-pity. Instead, it offers the elderly a safe place to share their feelings and helps them cope with their daily living.

Supportive counselling does not necessarily mean a face-to-face session with the counsellor. Telephone calls and visits to the counsellor's office are both effective. However, supportive counselling works best when the elderly receive support and care from a group of friends or fellow believers. Social engagement and support helps the elderly when they are weak and encourages them.

- **Educative counselling**

Educative counselling is needed to help the elderly battle misconceptions concerning ageing. As mentioned earlier in Chapter 3, open communication regarding changes the elderly can expect is often needed. Cognitive behavioural approaches can be helpful for the elderly. Furthermore, discussions regarding ageing reduce anxiety and give reassurance. These discussions can contain facts regarding ageing, which would include facts about physical satisfaction or daily living arrangements.

- **Retirement counselling**

Retirement can either be something to dread or to look forward to. For the elderly, it is a time of great change. Retirement counselling consists of helping the elderly find something meaningful and productive to do. Furthermore, it helps the elderly adjust to change, develop skills, and rekindle old relationships and encourages them to be a mentor to the tertiary student volunteers.

- **Life review counselling**

Life review counselling includes reminiscence. Reminiscence involves listening to the elderly's stories, where the elderly are encouraged to re-examine the past, deal with previous frustrations, reflect on their accomplishments and failures, and get more of a balanced perspective on the past and the future. Life reviews enhance quality of life, due to the decrease of depression and the improvement of self-esteem.

- **In-depth counselling**

The elderly can benefit from in-depth counselling with a counsellor if the approach is supportive, structured, and provides helpful changes in the environment. Regarding in-depth counselling, the counsellor should set

boundaries within counselling sessions and see the counselee as a counselee and not as a mother or father figure. This is true for the opposite, where the elderly should see their counsellor as a counsellor and not as a son or daughter figure.

Other counselling the elderly can receive includes: Family counselling (*cf.* 5.6.4.1), spiritual counselling, group counselling, and environmental counselling (Collins, 2007:303-307).

Although the tertiary student volunteers will not give counselling to the elderly directly, they need to know that the elderly may have a need for these types of counselling. If such an occasion arrives, the tertiary student volunteers can help the elderly get in touch with a counsellor. The counsellor will be able to help the elderly prevent problems later in life by:

- Stimulating realistic planning, including retirement planning.
- Stimulating realistic attitudes.
- Stimulating education and growth.
- Stimulating spiritual growth.

(Collins, 2007:307-310; 312)

5.6 Proposed guidelines for tertiary student volunteers

To propose guidelines for equipping tertiary student volunteers to care pastorally for the elderly, the proposed themes and sub-themes from Chapter 2 and Chapter 3 will be considered. These themes are *problem areas*, *well-being*, and *programs and activities*.

Taking these themes into consideration, the proposed guidelines will be divided into two categories, namely: training and programs and activities. The training will focus on guidelines, which will be given to tertiary student volunteers during their mandatory training. Thereafter the theme of program and activities will propose certain activities to help tertiary students to care pastorally for the elderly. However, considering the themes and sub-themes, basic training is necessary in order for the student volunteers to gain basic knowledge regarding the problem areas, the well-being of the elderly as well as what programs and activities can be used to increase the well-being of the elderly. Therefore, training will be added as sub-theme for programs and activities.

5.6.1 Schematic diagram

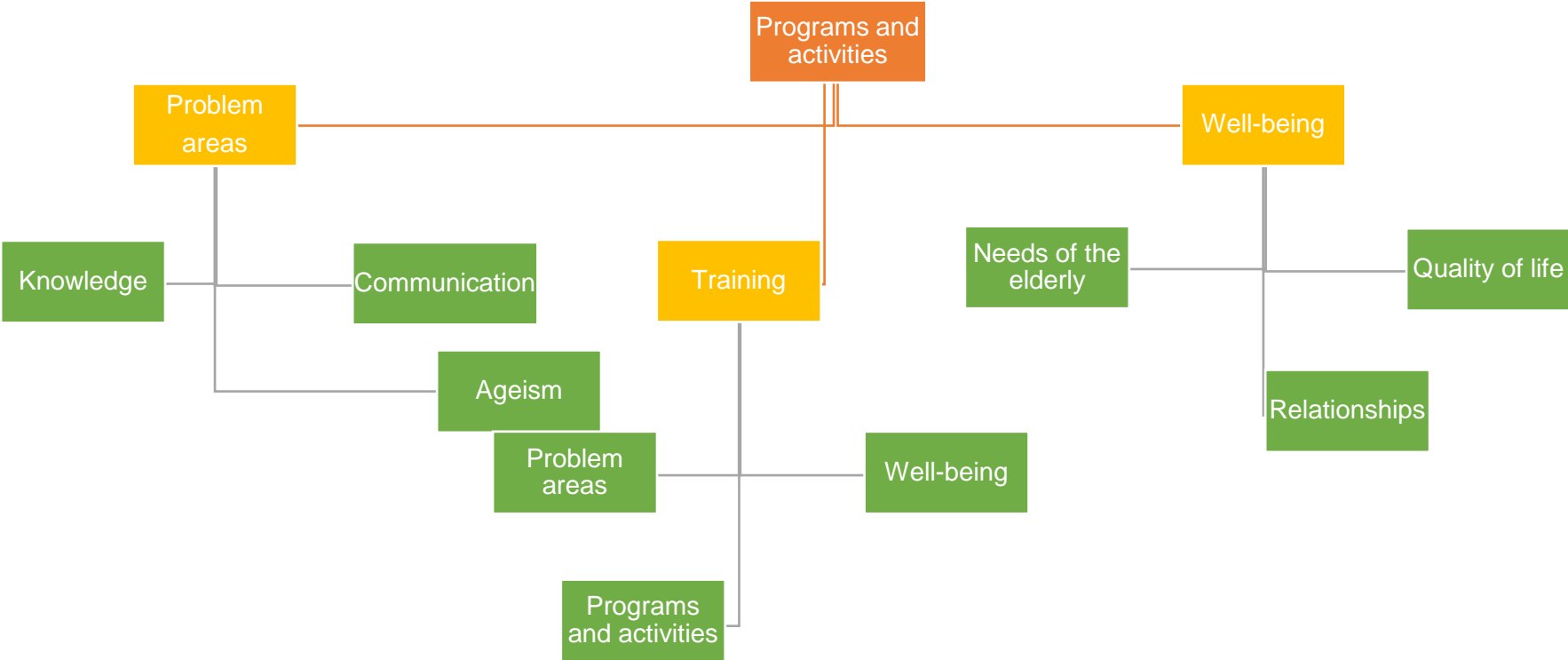


Figure 5-1 Schematic diagram of proposed guidelines

- **Schematic presentation of training**

Through training, basic knowledge can be gained in order to reduce problem areas, understand the elderly, counter ageism, and communicate properly. Furthermore, it is through training that tertiary student volunteers can gain insight into the elderly's well-being and what it entails. Lastly, although programs and activities are the link to reducing problem areas and improving well-being, training regarding types of programs and activities is needed.

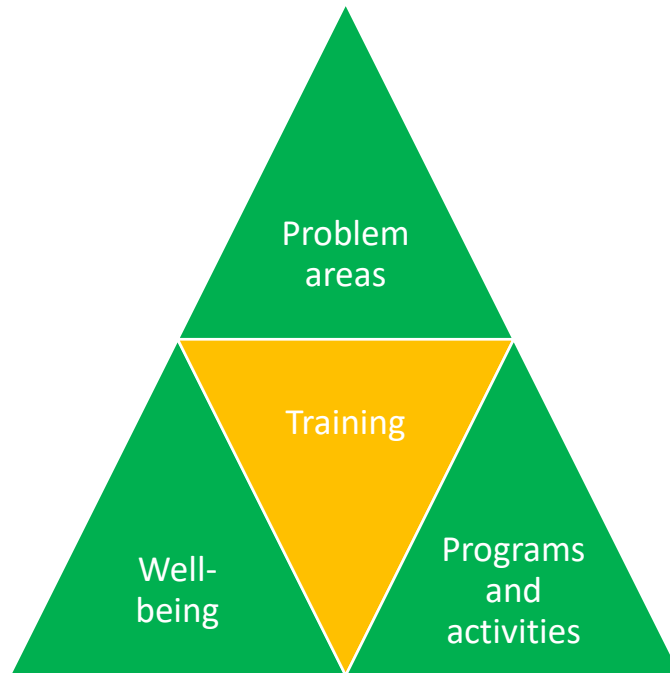


Figure 5-2 Schematic presentation of training

5.6.2 Training for tertiary student volunteers

Concerning the problem areas (namely knowledge of the elderly, communication, and ageism), the literature suggests that these problems arise due to a lack of knowledge (*cf.* Chapter 3 see Cottle and Glover 2007:501). According to O'Hanlon and Brookover (2002:712), there is an important link between knowledge and the changing of attitudes towards ageing. Furthermore, it is necessary to understand the elderly's characteristics and tailor the activities or programs to the elderly's specific skills and needs (*cf.* Chapter 3 see Gonçalves, 2009:218). Orientation and training can ensure that a new volunteer is properly introduced to the organisation and knows how to work with the elderly (Bartyzal *et al.*, 2015:11). Therefore, in order for tertiary students to care pastorally for the elderly, they should first receive **training**. As mentioned in earlier chapters, only the project leaders receive training and the researcher therefore proposes that training is needed for each individual tertiary student volunteer. Acquiring knowledge helps the tertiary student volunteers have a basic understanding of the elderly and their needs and helps them to empathise with them and guide them.

5.6.2.1 Proposed guidelines regarding training for tertiary student volunteers

5.6.2.1.1 Gaining knowledge

Bartyzal *et al.* (2015:4) comment that volunteers want and expect proper orientation and training before entering a volunteer assignment. Regarding training, the researcher, from research gathered, proposes the idea of providing courses on ageing to the tertiary student volunteers. These potential courses would either be given by a lecturer or done online, where both courses would include workbooks and activities. Once the student has completed the course, he/she would then either receive certification or credits, which could be useful in a degree program.

Other strategies for gaining knowledge could include workshops, seminars, breakfasts, in-house training or conversing with the elderly in old-age homes. According to the Corporation for National and Community Service (2016:25), a combination between formal training and hands-on experience with volunteer stations works well. Using active learning techniques, *inter alia* simulations and games, provide more structured opportunities for tertiary student volunteers to understand the elderly's various challenges, which are functional, physical, and environmental in nature (Hong, 2015:1). Therefore, the provisional strategy given in Chapter 3, which includes ways to obtain knowledge about the elderly, battle misconceptions, negative stereotypes, and increasing positive attitudes about the elderly, can be used by incorporating tool kits and games during training sessions. Referring to the *Provisional strategy* (*cf.* Chapter 3), tool kits can be customised to include material on memory loss, urinary incontinence,

depression, falls, heart failure, and persistent pain management. These kits may also include information on specific topics, local resources, assessment guidelines, educational information to patients and caregivers, and practical suggestions.

Furthermore, student volunteers' awareness about physical changes may be increased by the use of Schuldberg's (2005:441) simulation kit. This specific type of kit replicates different types of the elderly's impairments (visual, audio or physical). When using Schuldberg's simulation kit, the student volunteers would have to divide themselves into groups of three, where each group would assume one of three roles in rotation, namely: 1) the elderly person, 2) the caregiver, and 3) the researcher (Hong, 2015:3; Through Their Eyes Project, 2016). Once the groups have been divided into three, the simulation can begin. Using Hong (2015:3), Schuldberg (2005:441) and Through Their Eyes Project (2016), the tertiary student volunteers can:

- Wear gloves to simulate arthritis.
 - Whilst wearing gloves, tertiary student volunteers can try to take off their shoes, untie the shoes, and put their shoes back on.
 - The above-mentioned activity can be done using a coat with a zipper as well.
 - Tertiary student volunteers can try drinking coffee whilst having gloves on.
 - Tertiary student volunteers can try typing on computers and finding information on ageing.
- Wear different glasses to replicate the different types of vision impairments the elderly experience.
 - Tertiary student volunteers can go to the library with different glasses and see if they can find information on ageing on the computers.
 - While wearing glasses, the tertiary student volunteers can go out and buy coffee and try to read the menus of different shops.
- Put a small handful of chickpeas into their shoes and walk with a walker or cane (this should be done at a slow pace, where caregivers can remind the tertiary student volunteers to slow down).
- Use earplugs and try and have a dialogue with the caregiver and try to follow the conversation.
 - Using earplugs, tertiary student volunteers should call a friend or a family member and try to explain what they are doing.

Use a wheelchair and ask where the nearest bathroom is in an attempt to see if the bathroom is easily accessible. By using a combination of a few of the above-mentioned simulations, ageing simulation equipment can be used to give the tertiary student volunteers a sense of what ageing entails. (cf. Figure 5-3 Example of ageing simulation equipment (Hong, 2015:4))



Figure 5-3 Example of ageing simulation equipment (Hong, 2015:4)

Simulations enable the tertiary student volunteers to register their own reactions, whilst also being observed by their group members (Hong, 2015:4). In their groups of three, the caregiver (2) would assist the ‘elderly person’ (1), whilst the researcher (3) would take down detailed notes and narrative descriptions given by the ‘elderly person’ (1) during the simulation sessions. These simulations are done in order for the tertiary student volunteers to experience the ageing process in relation to sight, dexterity, grip strength, and hearing. After the simulation sessions, the students would then reflect on their experience during focus groups. Thereafter, the tertiary student volunteers would complete a post-test survey or write a short essay on their experience (Hong, 2015:4; Through Their Eyes Project, 2016).

5.6.2.1.2 Mentorship

As mentioned earlier, Bartyzal *et al.* (2015:11) comment that new volunteers should receive orientation, training, and supervision to ensure that they are adequately prepared for their work in the organisation. After receiving an introduction course on caring pastorally for the elderly, the tertiary students can decide if they would like to further their training. Following the introductory course, tertiary student volunteers could potentially complete an advanced course, which would enable them to mentor other tertiary student volunteers in order to equip the younger volunteers to care pastorally for the elderly. Mentorship refers to a person who teaches, helps or gives advice to a less experienced or younger person. Traditionally, it is a hierarchical relationship where an individual is more experienced and provides guidance for a less experienced individual over a period. Therefore, those who have completed the advanced course can become a mentor to new tertiary student volunteers. This is referred to as peer mentoring. In this context, peer mentoring refers to mentoring between two tertiary student volunteers, where one is more experienced and helps and guides the less experienced volunteer (Bryant *et al.*, 2015:259). This can lead to the Byrne and Keefe’s (2002) “mentoring forward” model. The “mentoring forward” model consists of a former mentee becoming a mentor to the next mentee.

Mentoring can also take place between a senior, referring to an elderly person being matched with a tertiary student volunteer. By placing an elderly person with a tertiary student volunteer, the volunteer can increase his/her knowledge of the elderly and the ageing process. Senior mentoring can lead to the improvement of attitudes towards elderly persons, which in turn decreases ageist behavior and negative stereotypes. Furthermore, it improves respect for the elderly and enhances skillsets required to work with the elderly, namely assessment, listening, and communication (Basran *et al.*, 2012:305).

5.6.2.1.3 Communication

Communication was identified as a problem area in the earlier chapters. The elderly have a decreased ability to hear high frequencies, which therefore interferes with communication between the elderly and tertiary student volunteers. During Chapter 3 (*cf.* 3.4.1 Communication), the research suggested that regular and proper communication lowers anxiety levels and depression, due to emotional support given. Communication is needed for the elderly to give and receive support; therefore, communication enhances the elderly's social skills and participation in activities. With increased participation in activities, the elderly become more sociable and enhance their relationships with others, which ultimately affect their well-being. Conversely, a lack in communication can lead to the increase of loneliness and depression.

5.6.2.1.3.1 Communication strategies

- An open dialogue evening with the elderly, where tertiary students can freely ask questions on ageing.
- Role playing, which is not to be confused with ageing games. Role playing allows the student volunteers to be empathetic, as they are placed in a certain position.
- Training on communication should be mandatory in order to improve the tertiary student volunteers' communication skills.

According to WHO (2007:3), *Through Their Eyes* (2016) and the Gerontological Society of America (2012:1), the following can be done to ensure proper communication takes place:

- Tertiary student volunteers should avoid elderspeak and negative stereotypes (*cf.* 3.4.1 **Communication**) and make their own assessment of the elderly's physical ability.
- Tertiary student volunteers should sit at face level and talk face-to-face with the elderly. This ensures that the elderly person can clearly see the tertiary student volunteer, enabling the elderly person to lip-read, if needed.
- Tertiary student volunteers should avoid covering their mouths.

- The students should avoid shouting, as this increases the pitch of their voices, making it harder for the elderly to hear.
- When speaking with the elderly, tertiary student volunteers should avoid background noises.
- Using cues when talking to the elderly are important. For example, the tertiary student volunteers can point to a glass of water, when asking the elderly if they want a sip of water.
- Other visual aids like diagrams and pictures should also be utilised.
- Asking open-ended questions when talking to the elderly can be beneficial, and tertiary student volunteers should remember to listen genuinely to the elderly's answers.
- When speaking to the elderly, tertiary students should remember to speak slowly, use simple words and short sentences. If or when the elderly person does not understand, tertiary student volunteers should try rephrasing their sentences.
- Tertiary student volunteers should also encourage the elderly to use a hearing aid, if necessary.
- Other techniques, as mentioned in the previous chapters, include tertiary student volunteers listening carefully, using a calm, gentle manner with open body language, and speaking slowly and clearly (without succumbing to elderspeak). Furthermore, student volunteers need to use positive facial expressions, short familiar words, and simple sentences. The student volunteers will also have to repeat themselves and remind the elderly who they are (Waugh *et al.*, 2013:8).

5.6.2.1.3.2 Skills and values to improve communication and relationships with elderly

Egan (2015:46) suggests that a professional person should adhere to specific values, which include respect, empathy, a pro-active appreciation for diversity, self-responsibility together with client-empowerment, and a bias toward action. These values have been adapted for the purpose of this study. The first value that Egan (2013:46) encourages is the showing of respect and tertiary students can do this by:

- Being and becoming competent and committed.
- Being genuine and sincere.
- Making it clear that they are 'for' the elderly, and therefore not a threat.
- Assuming the client's goodwill.

Conversely, tertiary student volunteers should avoid the following:

- Doing harm (i.e. the tertiary student volunteers should try not to harm the elderly in any way).
- Rushing to judgment. This is a mistake that counsellors often make. Therefore, the tertiary student volunteers should try to understand the elderly's view, even if they disagree.

The next value Egan (2013:49-51) discusses is empathy. Empathy is the bond between counsellor and counselee. Below is a list of what a counsellor should strive to do when counselling.

- The counsellor should understand the counselee's perspective and emotion behind his/her viewpoint, and communicate understanding towards this.
- The counsellor should try to understand the counselee inside of the counselee's context.
- It is necessary for the counsellor to comprehend the difference between the elderly's viewpoint and reality.

Diversity is the next value Egan (2013:52-54) highlights. This value is applicable to this study as it forces the counsellor to understand the elderly and the negative stereotypes surrounding them. Diversity forces the counsellor to determine his/her own negative stereotypes regarding the elderly and the different cultural groups to which the elderly belong. In order for the value of diversity to be present in counselling sessions, the counsellor must adhere to the following:

- Knowledge and understanding of diversity.
- Appreciation for diversity.
- Focus intervention on specific cultures.
- Viewing the elderly counselees as individuals and avoid stereotyping.
- Communicating properly with people from different cultures. This is referred to as diversity competence.

Self-responsibility together with client-empowerment also form an integral part of Egan's (2013:59) values. Responsibility falls on both the counsellor and the counselee. In order for responsibility to take place, the following instructions should be followed.

- Counsellors should begin with the assumption that the counselee can change (if he/she wishes to do so).
- The counselee is not a victim; therefore, the counsellor should not view him/her as such.
- Counsellors must not make judgments or be fooled based on a counselee's appearance.
- The counsellor should offer and share helpful strategies with the counselees.
- Counsellors should try to help the counselee see sessions as work sessions and not counselling sessions.

- Counsellors must taking on a coaching/ consultant role by being supportive and motivational.
- Help is a natural two-way influence; therefore, the counsellor can accept and offer help.
- Counselling sessions should focus on learning and not helping.
- Counsellors should avoid focusing on a counselee's weaknesses and brokenness.

The last value as set out by Egan (2013:62) is bias toward action:

- According to Egan (2013:62), there is a need for behavioural activation. Behavioural activation is also called "activity scheduling" and is a treatment for depression. Egan (2013:62) and Polenick and Flora (2013:45) suggest that with an increase in contact and activities that are beneficial and positive, depressive symptoms will decrease. The activities will increase positive feelings and thoughts.
- During behavioural activation (activity scheduling), the counsellor helps the elderly to identify activities they find pleasing and rewarding. The counsellor then schedules the activities and increases the positive activities within the elderly's environment. The counsellor will move from easy activities to activities that are more difficult and rewarding to the elderly.

Bias toward action and behavioural activation (as a treatment for depression and avoidance) correlates with this study. Through activities, the elderly can gain knowledge, be more social, receive social, emotional, and spiritual support, and decrease social isolation (and therefore depressive symptoms). Participating in desirable activities can lead to a decrease in depressive behaviour (Polenick & Flora, 2013:45). In participating in daily activities, the elderly will increase their quality of life (and well-being) and will feel a sense of belonging. Therefore, activity scheduling on a larger scale should take place in a nursing home or facility. The problem with this, however, is that time and resources are precious. The caregivers do not always have the time, money, or resources to implement a daily activities program. Tertiary student volunteers and charity organisations can therefore offer these necessities. By training the tertiary student volunteers and including Egan's (2013-46-62) values, the organisations and nursing homes can ensure that the elderly are offered programs and activities that increase their quality of life and decrease loneliness, social isolation, and depression.

5.6.2.2 *Spiritual communication*

The elderly need a safe place to communicate their feelings. Considering 5.5 (Counselling skills), the elderly can receive different types of counselling from a counsellor. As previously mentioned, these include:

- Supportive counselling
- Educative counselling
- Retirement counselling
- Life review counselling
- In-depth counselling
- Family counselling
- Spiritual counselling
- Environmental counselling

Regarding therapy with a counsellor, the elderly will benefit from the above-mentioned counselling types. However, it is important for the elderly to talk about certain changes or fears, irrespective of whether a counsellor or therapist is available. Therefore, it is important for the elderly to attend group therapy or a support group. During these sessions, the elderly would be able to talk openly about their fears regarding living with ageing bodies (including what it entails, especially regarding physical changes, or caring for an ageing spouse). Furthermore, open discussions regarding death and dying can be done from a spiritual aspect.

The elderly often experience angst due to unanswered questions, such as: What happens after death? What is going to happen to me? Will there be pain? The fear of the dying process is often greater than the fear of death (Van Niekerk, 2012:22). Since the elderly are nearing death, there is a great possibility that they want to speak about the life hereafter. Some may also experience peace about dying, while others will experience angst and struggle in this regard. The elderly need to be listened to, even if the listeners do not have the answers.

This study is focused on the pastoral dimension and it is therefore crucial that this aspect is incorporated in the training of the tertiary student volunteers. During the empirical research, the one project leader said that she felt that she could not help the elderly deal with their loss or give them comfort regarding this matter. Discussions on faith should be part of any pastoral approach. Therefore, it is crucial to equip the tertiary student volunteers with enough background knowledge and proper training to be able to assist the elderly, since the tertiary student volunteer might be the only one in whom the elderly confide.

5.6.2.3 Method for providing pastoral comfort

The elderly often confide in the tertiary student volunteers. Thus, it is necessary to equip tertiary student volunteers with a method they can use to give pastoral comfort to the elderly. Therefore, the following method, i.e. the pastoral approach (Van Niekerk, 2012:73-74), can be used to provide comfort and care to the elderly.

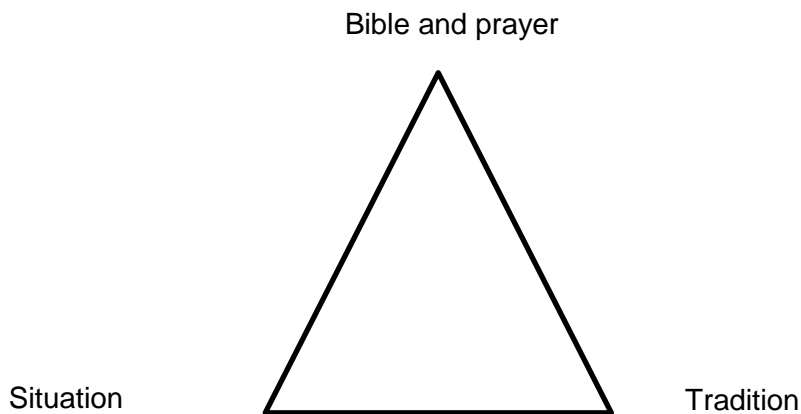


Figure 5-4 Pastoral approach (Van Niekerk, 2012:73-74)

The first step in this pastoral approach is to analyse the situation. The most important part of analysing the situation is *listening*. The pastoral conversation about death starts with listening. It is important for the counsellor not to make judgements or to make observations without fully understanding what the elderly person means. Furthermore, it is important to ask the nurse or caregiver what the elderly person's situation is. This could include the elderly person's prognosis, what the elderly person knows about his/her condition, if he/she is terminally ill, and what the ideal time to visit him/her would be. The second step is the tradition, where a person needs to rely on his/her instincts, training, insights, and experience. Only after this step can a counsellor or tertiary student volunteer decide which part of God's Word applies to the elderly person (see Van Niekerk, 2012:73-74).

The counsellor or tertiary student volunteer cannot offer help with a preconceived idea, formulated prayer, or (already selected) Scripture passages. He/she must first analyse the situation; focus on tradition, and then offer Scripture and prayer. Therefore, knowing applicable verses and scriptural references is crucial. Scriptures are important as authoritative guides on life after death and they demand preparation and readiness at all times (Firth, 1999:174; Holloway, 2006:835). The tertiary student volunteer may be equipped to provide certain comfort using Scripture verses. These verses should be applied in context and not as a "plaster" or quick fix.

Table 5-1 Scripture verses providing comfort

| Verse | Comfort for the elderly |
|---|--|
| <p>John 14:1-3</p> <p>“Let not your hearts be troubled. Believe in God; believe also in me. In my Father's house are many rooms. If it were not so, would I have told you that I go to prepare a place for you? And if I go and prepare a place for you, I will come again and will take you to myself, that where I am you may be also.”</p> | <p>The elderly can take heart that God chose them. Jesus prepared a room for them in His Father's house where they will be with Him.</p> |
| <p>Ecclesiastes 12:7</p> <p>“And the dust returns to the earth as it was, and the spirit returns to God who gave it.”</p> | <p>The elderly will return to God.</p> |
| <p>John 11:25</p> <p>“Jesus said to her, ‘I am the resurrection and the life. Whoever believes in me, though he die, yet shall he live...’”</p> | <p>Even though death will someday come, those who believe in Jesus will be with him and have eternal life</p> |
| <p>John 3:16</p> <p>“For God so loved the world, that he gave his only Son, that whoever believes in him should not perish but have eternal life.”</p> | <p>Even though death will someday come, those who believe in Jesus will be with him and have eternal life.</p> |
| <p>Matthew 10:28</p> <p>“And do not fear those who kill the body but cannot kill the soul. Rather fear him who can destroy both soul and body in hell.”</p> | <p>The elderly should not fear death, only the Lord.</p> |

Table 5-1 (Cont.)

Scripture verses providing comfort

| | | |
|-------------------------------|---|---|
| <p>1 Corinthians 15:51-54</p> | <p>“Behold! I tell you a mystery. We shall not all sleep, but we shall all be changed, in a moment, in the twinkling of an eye, at the last trumpet. For the trumpet will sound, and the dead will be raised imperishable, and we shall be changed. For this perishable body must put on the imperishable, and this mortal body must put on immortality. When the perishable puts on the imperishable, and the mortal puts on immortality, then shall come to pass the saying that is written: ‘Death is swallowed up in victory.’”</p> | <p>The elderly should take heart that this world is only part of the journey and not their final destination. Though their bodies may fail, they will one day be immortal and live eternally with the Lord.</p> |
| <p>Luke 23:43</p> | <p>“And he said to him, ‘Truly, I say to you, today you will be with me in Paradise.’”</p> | <p>There is life after death, eternal life for those who believe in Jesus. Believers will be with Jesus in Paradise after death.</p> |
| <p>Psalms 23:1-6</p> | <p>“The Lord is my shepherd; I shall not want. He makes me lie down in green pastures. He leads me beside still waters. He restores my soul. He leads me in paths of righteousness for his name's sake. Even though I walk through the valley of the shadow of death, I will fear no evil, for you are with me; your rod and your staff, they comfort me. You prepare a table before me in the presence of my enemies; you anoint my head with oil; my cup overflows.”</p> | <p>The Lord comforts and protects.</p> |

Table 5-1 (Cont.)

Scripture verses providing comfort

| | | |
|----------------------------|--|--|
| <p>1 John 4:16-21</p> | <p>“So we have come to know and to believe the love that God has for us. God is love, and whoever abides in love abides in God, and God abides in him. By this is love perfected with us, so that we may have confidence for the day of judgment, because as he is so also are we in this world. There is no fear in love, but perfect love casts out fear. For fear has to do with punishment, and whoever fears has not been perfected in love. We love because he first loved us. If anyone says, ‘I love God,’ and hates his brother, he is a liar; for he who does not love his brother whom he has seen cannot love God whom he has not seen.”</p> | <p>God is love and He loves His people perfectly. Perfect love casts out fear, therefore, one not need to fear death, for God’s love overcame death.</p> |
| <p>1 Corinthians 15:55</p> | <p>“O death, where is your victory? O death, where is your sting?”</p> | <p>Death has no victory or glory for the battle was won. Those who believe in Jesus will have eternal life.</p> |
| <p>Philippians 3:20-21</p> | <p>“But our citizenship is in heaven, and from it we await a Savior, the Lord Jesus Christ, who will transform our lowly body to be like his glorious body, by the power that enables him even to subject all things to himself.”</p> | <p>The elderly should take heart that even though life on earth is only temporary and there is suffering and injustice in this world, one day they will be transformed and live forever.</p> |
| <p>Romans 8:38-39</p> | <p>“For I am sure that neither death nor life, nor angels nor rulers, nor things present nor things to come, nor powers,³⁹ nor height nor depth, nor anything else in all creation, will be able to separate us from the love of God in Christ Jesus our Lord.”</p> | <p>Nothing can separate the elderly from the love of God. Death need not be feared, for nothing can separate the elderly from God’s love.</p> |

(Bible, 2008)

Other verses that can be used for the elderly are, *inter alia*:

- 2 Corinthians 5:6-8
- 1 Thessalonians 4:13-18
- John 5:28-29
- Psalm 154:20
- Romans 8:11
- 1 Corinthians 15:22
- John 3:3
- Matthew 25:46
- Hebrews 9:27
- Romans 6:23
- Revelation 14:13
- John 10:27-29
- Psalm 49:15
- Galatians 6:8
- John 3:17
- John 5:51

The Greek word used for the Holy Spirit in the New Testament (*Parakletos*) translates to comforter. He is seen as the comforter. Venter (1988:32) comments that the Holy Spirit is central to the pastoral conversation. Counsellors must ask the Holy Spirit to lead and guide them during the pastoral approach and their prayers. Prayer is an important part of the pastoral process, therefore, tertiary student volunteers can also pray for the elderly

According to Firth (1999:174), religion is not a part-time activity but a way of life. By adopting a transcultural spirituality approach, the tertiary student volunteer can meet the elderly in their specific religion, spiritual practice, or culture. A generic model for a transcultural spiritual approach on death and dying is not possible. The transcultural spiritual approach seeks out the means to access strengths from each person's tradition. Thus, the tertiary student volunteer can meet the elderly person in his/her religion, spiritual practices, or cultural practices.

In order to help the elderly deal with their fears regarding death and dying, it is necessary to consider the following aspects regarding counselling or having a conversation with the elderly about death and dying. The elderly need security, love, basic respect, and autonomy. The elderly need to know someone is there during those final hours and that they are receiving good care. It is important to treat the elderly with respect and dignity and to remind them that they have autonomy. One way of having autonomy is through a 'living will'. A 'living will' refers to a set of instructions that determines what type of action should be taken when the elderly person is no longer able to make his/her own decisions due to death or disability. The instructions can also include a person who should act on behalf of the elderly person regarding any medical or other decisions (Freer & Clark, 2012; Van Niekerk, 2012:157).

The elderly deserve to be taken care of. Helping the elderly face the uncertainty of death and dying through spiritual communication (using a pastoral approach) is an integral part of caring for them. By equipping tertiary student volunteers with a basic understanding of the pastoral approach and scriptural references, they will be able to care pastorally for the elderly. It is important to remember that although the tertiary student volunteers will not guide an elderly person through a counselling session, they need to incorporate Egan's values and norms and a pastoral approach when caring for the elderly. Furthermore, the tertiary student volunteers need to be informed that the elderly will have the need to talk about death and dying. If the student cannot provide comfort when this subject is broached, he/she must inform the elderly person that there is someone else or a support group available for the discussion of such a topic.

Tertiary student volunteers form a relationship with the elderly and communication plays an important part in these relationships. Therefore, equipping tertiary student volunteers with a specific skillset will help them better relate to and care for the elderly.

5.6.3 Programs and activities

By gaining knowledge about the elderly's specific needs by interacting with them, tertiary student volunteers will have a better understanding of the elderly's specific needs. After the needs are identified (see research (Chapter 2) and Chapter 3, (cf. 3.4.2.2 Needs of the elderly)), specific programs and activities can be created.

According to Tesnear's research (2012:9), a leisure activity pyramid can be formed, with social activities forming the foundation of this pyramid. From this foundation, other activities including, physical, general, outdoor, cultural, and traveling leisure activities can be developed. Stumbo and Peterson (2004:9) believe that meaningful leisure activities will lead to the improvement of

the elderly's health, well-being, and quality of life. When the elderly are involved with desirable activities, they will experience the following physiological benefits:

- Improved circulation
- Improved respiration
- Greater flexibility
- Greater strength
- Greater endurance
- More energy
- Lower blood pressure
- Lower cholesterol
- Improved mobility
- Greater physical independence
- Increased longevity
- Improved general health
- Reduced risk of osteoporotic fractures
- Reduced risk of falls
- Reduced risk of various diseases, including dementia

(Festini *et al.*, 2016:2; Leitner & Leitner 2012:17; Sadock & Sadock, 2015:1208)

The elderly, through participation in activities, will also experience the following social, emotional, and psychological benefits.

- Greater psychological well-being
- Higher quality of life
- Higher morale and life satisfaction
- Higher self-esteem, self-concept, and self-efficacy
- Improved cognitive abilities and brain vitality
- Delayed cognitive decline
- Feelings of achievement and accomplishment
- Greater optimism
- Greater levels of social interaction
- Laughter
- Increased happiness
- Lower anxiety and hostility independence
- Lower incidence of loneliness and depression
- Improved perceived health
- Reduced fear of falling

(Festini *et al.*, 2016:2; Leitner & Leitner, 2012:17)

Therefore, programs and activities, which focus on the needs of the elderly and improve their well-being, should be proposed.

5.6.4 Incorporating the previous chapters to create guidelines regarding the elderly and activities

The most important part of incorporating guidelines is to ensure that care takes place and that Jesus's example is followed. Firstly and most importantly, people should love their neighbour (Mt 22:39; Mk 12:31; Gal 5:14). Jesus is seen as a defender, provider, and carer for both the elderly and widows (*cf.* 4.4.9.2). Jesus, as is evident in Mark 7:9-13, defends the plight of the elderly and considers this as more sacred than the vow of Corban. Jesus says that those who do not take care of their parents neglect their responsibility and are disobeying the Ten Commandments. Referring to John 3:3, Jesus granted an ageing Nicodemus his greatest need and longing: to see the kingdom of God. Therefore, Jesus is seen here as a provider. When Jesus gave John charge to take care of his mother (John 19:26-27), He ensured that Mary was cared for and showed his commitment to God's laws. This signifies Jesus' role as carer.

Therefore, Jesus's love for the elderly should reflect in the work the tertiary student volunteers do with the elderly. Regarding the elderly being active, the Bible suggests that the elderly must live a certain way (and behave accordingly) and lead active lives. The Old Testament (*cf.* 4.5 Conclusion) says that the elderly should gain wisdom, teach the younger generations and be esteemed and useful members of the community. The New Testament suggests that the elderly teach, pass on knowledge/wisdom, pray, intercede in prayer for those who are in trouble, live holy lives and guide younger Christians (become mentors), minister to the sick, and make disciples. Therefore, the task of the student volunteers is to incorporate activities and programs that will help the elderly complete these tasks. Both the Bible and the literature reviewed in this study encourage the formation of relationships and being active in old age. Thus, referring to the elderly's tasks as set out by the Bible, the following activities can be recommended.

5.6.4.1 Family

Counselling including family counselling for residents at caring facilities can be beneficial for both the elderly and their families. During family counselling, the family of the elderly and the elderly can plan financial strategies as suggested by Collins (2007:307). This helps the elderly feel as though they can contribute and have a say, whilst feeling as though they are not a

burden. Counselling will also help the family members adhere to their responsibilities as set out in the Bible (*cf.* 4.4.8.1.2 The widows and 4.4.5.7 Step 15: Consulting exegetical sources).

The Old Testament says that children have a responsibility towards their parents (Ex 20:12). The elderly should be honoured (Ex 20:12; Dt 5:16) and the Bible gives honour and blessing to those who honour the elderly. Baloyi (2015:7) mentions that the Fifth Commandment was given to counter historical tendencies that the elderly are burdens. Henry (*cf.* Meyer, 2014), in reference to Exodus 20:12, comments that children should strive to comfort and support their parents in every possible way. Those who honour their mother and father and 'repay' the debt they owe them (for caring for them and raising them, thus children and grandchildren have the obligation to care for their parents/grandparents) will be blessed with longevity.

Regarding 1 Timothy 5:4, *repaying their parents* does not mean children are doing their parents a favour by taking care of them. Repaying their parents refers to children repaying a debt they owe them (Ngewa, 2009:114). Caring for the elderly refers to fulfilling their needs. The responsibility to take care, honour, and support the elderly, falls firstly on the family of the elderly. Paul says those who do not adhere to their responsibilities are denying their own faith (1 Timothy 5:8).

The elderly should be shown respect and honour and should be treated as mothers and fathers. This places emphasis on the Fifth Commandment, which commands a person to '*honor thy father and thy mother*' (Ex 20:12). This commandment has both a blessing and a curse connected to it. For those children who honour their parents, their days on earth will be lengthened. However, those who strike their parents should be put to death (Ex 21:15). Leviticus 20:9 describes a person who curses his parents as having his 'blood guiltiness' upon him (Bible, 1995) and Deuteronomy 27:16 exclaims that those who dishonour their parents are cursed. Proverbs 20:20 declares that for those who curse their parents, their lamp will go out in times of darkness, meaning that they will not receive the gift of longevity.

It is the family's responsibility to take care of the elderly, yet the elderly still often feel alone, which increases loneliness and depression. The Bible demonstrates its care for the elderly person (especially widows) throughout both the Old and New Testaments. The Bible commands its readers to help and care for the elderly; which includes financial help and emotional and social care. Tertiary student volunteers should create activities or programs that are focused on the inclusion of family members, as this provides the opportunity for bonding in a different setting other than a room in a nursing home/care centre. Therefore, the following programs and activities can be implemented in which family members can participate.

5.6.4.1.1 Day Centres

Day Centres or adult day groups focus on maintaining the elderly's ability to live at home in the community by providing a planned program of activities directed at enhancing important skills. Day Centres offer the elderly and their family members/caregivers a break from their daily routine and provide social and emotional support for the elderly and their family. Letting tertiary students volunteer at Day Centres will increase their knowledge and empathy towards the elderly.

5.6.4.1.2 Family Day

Offering a Family Day filled with various activities gives the elderly and their families a chance to spend time together in a fun environment. It also gives family members a chance to get to know other elderly people and their families, therefore enhancing their support system. When the family feels supported, they can offer support to their mothers/fathers/grandmothers/grandfathers. Family Days offer family and the elderly an opportunity to bond and spend quality time together, thus enhancing the elderly's happiness and ultimately, the elderly's quality of life. Tertiary student volunteers can work at different stations that host activities, such as tombola, bingo, wheelchair racing, and craft activities. Other tertiary student volunteers can help sell the elderly's crafts, like jewellery boxes, key chains, mosaics, woodwork, or wool work, such as doilies, slippers, baby wear, and gloves (that they make during creativity sessions). Selling their projects helps the elderly raise money for themselves, increases their independence, and gives them a purpose.

5.6.4.1.3 Karaoke or bingo nights

Karaoke and bingo nights help the elderly and their family socialise and form important bonds. These activities promote social inclusion, happiness, belonging, and well-being,

5.6.4.2 Volunteering

The Bible encourages widows to be actively involved in their communities (cf. 4.4.8.1.2 The widows and 4.4.5.7 and Step 15: Consulting exegetical sources) by teaching the younger women in their communities, passing on knowledge and wisdom, making disciples and ministering to the sick. Thus, the Bible recommends that the elderly lead an active life and impart their wisdom on the next generation. Literature research also agrees with this statement. According to Baym (2015:85-86) and Cutrona and Russel (1990:322), passing on knowledge or sharing stories is important in the elderly's life, as it satisfies the elderly's need to be needed.

Volunteering has many fields. For example, the elderly can become mentors (cf. 5.6.2.1.2 and 5.6.4.3) by helping the next generation by imparting wisdom. This not only helps to reduce

ageism and negative stereotypes, but it offers the elderly a chance to be actively involved in their communities. Being actively involved gives the elderly a purpose, and relates to the elderly's need to belong and to be needed. When volunteering, the elderly can become part of various organisations or start their own with the help of tertiary student volunteers. The elderly can become foster grandparents to youth. In volunteering with youth, the elderly can help children learn how to read and provide one-on-one tutoring. Further volunteering opportunities include mentoring troubled teenagers or young mothers, caring for premature infants or children with disabilities, helping children who have been abused and neglected, and assisting elderly members who are not able to perform daily activities. The elderly, who are still able to drive, can drive other elderly members to different shops on specific days (tertiary student volunteers can also volunteer their services here). Being involved in the church is also another way for the elderly to do volunteer work by participating in activities, which include holding luncheons, teaching younger women how to cook, bake, and knit, and teaching Sunday School.

5.6.4.3 Mentorship

Proverbs 20:29 says that '*grey hair is the splendour of the old*' and Job 12:12 remarks that wisdom is with the old. According to Menn (2014:35), the elderly are known for their knowledge, wisdom, experience, and wise counsel. Due to the wisdom that the elderly possess, the elderly are entrusted to recite God's Commandments and His works to younger generations (Klapp, 2003:71). The elderly should be seen as teachers and should therefore be listened to (Dt 32:7; Ps 44:2, Pr 13:1; 19:20; 23:22). Mentorship is a common occurrence in the Bible, as is seen through the relationships between Jethro and Moses (Exodus 18:14-37), Moses and Joshua (Numbers 27:15-23), Naomi and Ruth (Ruth 1-4), Elizabeth and Mary (1 Luke 1:39-45), and Paul and Timothy (Acts 16:3; Philippians 2:19-23; 1 & 2 Timothy).

As previously mentioned in Chapter 3, wisdom bears a stronger relation to life satisfaction in the elderly than other variables such as finances, health, and living situation. Chapter 4 discussed the importance for the elderly to impart wisdom and teach younger generations. Mentoring can also be part of the elderly's volunteer work (*cf.* 5.6.4.2). By becoming mentors, the elderly will benefit socially, emotionally, psychologically, and adhere to the biblical norms as set out in Chapter 4. Newman and Hatton-Yeo (2008:31) comment that the elders or grandparents, in addition to sharing their wisdom, play an important role in continuing the values, culture, and the uniqueness of their families.

Furthermore, considering Chapters 2-4, activities that increase the elderly's social participation, decrease social isolation, and promote their quality of life must be provided. By focusing on improving the elderly's quality of life and their well-being, the researcher will propose a guideline and comment on the activity in the 'Reason' column.

Table 5-2 Proposed guidelines for programs and activities

| Program or activity | Reason |
|---|---|
| <p>Mentorship between an elderly person and a tertiary student volunteer.</p> | <p>Mentorship improves knowledge and therefore reduces negative stereotypes and ageism.</p> <p>It improves communication between the elderly and the tertiary student volunteers.</p> <p>Mentorship increases social activity, which leads to an increase in social well-being and in turn reduces loneliness and therefore, depression, which is also linked to dementia.</p> <p>Mentorship focuses on the desire to be needed, which focuses on the emotional well-being and social well-being of the elderly. The need to be needed must be met before actualization can take place.</p> |
| <p>Role playing</p> | <p>Roleplaying increases social participation, which leads to an increase in social well-being and emotional well-being. Therefore, it reduces depression and loneliness.</p> <p>Roleplaying can increase knowledge and reduce negative stereotypes, thereby reducing ageist behaviour and improving communication.</p> |

Table 5-2 (Cont.) Proposed guidelines for programs and activities

| | |
|--|--|
| <p>Physical activities such as aerobics, walking, swimming pool exercises, and chair exercises.</p> <p>Elderly with osteoporosis should do weight-bearing exercises, like bicycling, walking, climbing stairs, dancing, and weight training. Weight-bearing exercises should take place three to four times weekly from 45 minutes to an hour (Curtler-Lewis, 2003:252).</p> | <p>According to Groot <i>et al.</i> (2016:14), physical activity enhances brain vitality in the elderly and increases the physical well-being of the elderly. Therefore, physical exercise has a positive impact on the health of the elderly. These benefits include improved circulation, respiration, and cardiovascular function, which leads to reduced cardiovascular diseases. Physical exercises also decrease the incidence of osteoporosis, maintain the elderly's general weight, improve balance and endurance, and help the elderly with daily activities. The elderly will also experience greater flexibility, strength, and endurance. When doing physical activities, the elderly will also be more energetic, have lower blood pressure and their general health will improve (Cutler-Lewis, 2003:252; Sadock & Sadock, 2015:1208).</p> <p>Social and emotional well-being will also improve due to the increase of endorphins, self-esteem, self-concept, and self-efficacy (Hsu & Chang, 2015:1135; Oerlemans <i>et al.</i>, 2011:1; Sadock & Sadock, 2015:1208). Furthermore, physical exercise is related to a sense of personal achievement or mastery and therefore the elderly will feel good about themselves (Oerlemans <i>et al.</i>, 2011:1).</p> |
|--|--|

Table 5-2 (Cont.) Proposed guidelines for programs and activities

| | |
|---|---|
| <p>Gardening</p> | <p>Gardening forms a fundamental component of ongoing health and well-being for the elderly. Gardening is both a physical and cognitive activity and leads the elderly to emotional and spiritual connections on a number of levels (Adams <i>et al.</i>, 2015:10).</p> |
| <p>Music (Including playing instruments, making instruments, drumming sessions, starting a choir, karaoke nights, inviting tertiary hostels to perform at the nursing home or care centers).</p> | <p>The elderly can participate in social activities, which include musical activities, arts and crafts. These activities stimulate creativity and increases feelings of happiness. Happiness leads to an increase of quality of life and well-being.</p> |
| <p>Religious activities (Bible studies, letting the elderly lead Bible studies, prayer circles, Sunday luncheons at churches and support groups)</p> | <p>Religious activity increases spiritual well-being. Spiritual well-being increases the quality of life of the elderly person. Spiritual/religious activity also increases the social well-being of the elderly, seeing that they partake in social interaction, which reduces loneliness. The elderly feel that they belong to a group and have a support system, which shares the same core beliefs. Therefore, through spiritual/religious activities, the elderly will be able to meet their emotional and social needs.</p> |
| <p>Clubs</p> | <p>Belonging to clubs and participating in activities that the elderly enjoy increases the social and emotional well-being of the elderly.</p> |

Table 5-2 (Cont.) Proposed guidelines for programs and activities

| | |
|---|--|
| <p>Day Centres</p> | <p>According to Tse and Howie (2005:134), Day Centres offer the elderly activities and programs directed at enhancing the elderly's skills, in order to improve their daily lives. The activities focus on social participation and interaction and social support and offer the elderly and their carer relief.</p> |
| <p>Volunteering (elderly volunteering)</p> | <p>Volunteering satisfies the need to be needed and belong. Volunteering offers the opportunity for physical activity and social interaction. This leads to a decrease in loneliness and depression, which leads to an increase of social support and self-image, self-esteem and self-efficacy. Volunteering helps the elderly feel as though they are making a contribution to society, which in turns helps them develop a healthy sense of self-worth and confidence. Thus, volunteering increases quality of life and well-being.</p> |
| <p>Creativity activities (Arts and crafts, including but not limited to mosaic, painting, finger painting, oil painting, painting boxes, jewellery making, woodwork, and all other crafts)</p> | <p>Activities that promote creativity have numerous mental and cognitive benefits. Creativity activities improve the elderly's self-esteem, sense of accomplishment and confidence. Creativity activities also provide social interaction between elderly people, therefore, decreasing their loneliness, giving them a support system, and increasing happiness, which is directly linked to well-being and quality of life.</p> |

Table 5-2 (Cont.) Proposed guidelines for programs and activities

| | |
|-----------------------------|---|
| Getting the family involved | Family counselling and family activities provide the elderly with an opportunity to spend time with their families. The elderly often feel alone and neglected. Family Days, family counselling, and family activities involve the elderly's family members and increase social interaction. |
| Life review counselling | In this form of counselling, the elderly person shows the tertiary student volunteers photographs, diaries or any other memorabilia and tell stories about the chosen memorabilia. According to Collins (2007:305), this activity helps the elderly reflect on the past, think through their memories and reflect on tensions from the past. This helps the elderly to get rid of guilty feelings, accept failures, solve conflicts, and learn coping mechanisms. In the end, the elderly person is motivated to write or record his or her own autobiography. This activity is done in order to improve self-esteem, reduce depression, and improve the elderly's quality of life. |

5.6.5 Discussion regarding activities and programs

Introducing desirable activities and programs into the elderly's world will help them become more active. These activities are only given as a guideline and tertiary student volunteers can use their own discretion when choosing activities. The only criteria activities need to fulfil include:

- Is it a desirable activity for the elderly?
- Do the elderly have the physical or mental capacity to do this activity?
- Will the elderly need assistance from a third-party member in order to do this activity?
- Does it promote the increase of quality of life and well-being of the elderly?
- What is the reason for this activity? (How does it benefit the elderly?)

Therefore, all activities that are fun, creative, and interesting can be done, as long as they focus on the elderly and improve their quality of life. However, it is important for the elderly to have a choice in which activities they participate. Tertiary student volunteers can encourage participation, but it should never be forced upon the elderly. Having a choice and choosing the activities they are involved in satisfies the elderly's need for identity and autonomy (*cf.* 3.3.4.2 Needs of the elderly).

5.6.6 Conclusion

In this chapter, the researcher suggested that the tertiary student volunteers should receive proper training, which should comprise knowledge-based course material regarding the elderly and practical work *inter alia* role-playing, ageing games, and simulations. Ageing games that tertiary student volunteers could potentially use include:

- Wearing gloves to simulate arthritis.
- Wearing different glasses to replicate the different types of vision impairments the elderly have.
- Putting a small handful of chickpeas into their shoes and walking with a walker or cane.
- Using earplugs and having a dialogue with the caregiver.
- Using a wheelchair to see if a bathroom is easily accessible.

Furthermore, regarding the acquiring of crucial knowledge, the researcher suggested mentoring. Mentoring can take place between an elderly person and a tertiary student volunteer or between peers. Peer mentoring works when one of the tertiary student volunteers completes the training, works with the elderly, and becomes a mentor to the new tertiary student volunteer.

The next suggestion the researcher made concerns communication. Three strategies regarding communication were given. These are listed below.

1. Open dialogue evening with the elderly, where tertiary students can freely ask questions on ageing.
2. Role playing, which is not to be confused with ageing games. Role playing is crucial for empathy, as it places the tertiary student volunteers in certain types of positions.
3. Offering training on communication is crucial in order to improve the tertiary student volunteers' communication skills.

Due to negative stereotypes and ageism, elderspeak often takes place. However, gaining knowledge and the following skills as set out by Egan (2014:46-62) will help the tertiary student volunteers. These five values are respect, empathy, a pro-active appreciation for diversity, self-responsibility together with client-empowerment, and a bias toward action. When following these values, the tertiary students can improve their attitudes toward the elderly and have fewer communication problems. Further ways to better communication with the elderly include:

- Avoiding elderspeak and negative stereotypes
- Sitting at face level and talking face-to-face with the elderly. This ensures that the elderly person can clearly see the tertiary student volunteer, enabling the elderly person to lip-read, if needed.
- Avoiding covering mouth.
- Avoid shouting.
- Avoiding background noises.
- Using cues.
- Using visual aids
- Asking open-ended questions
- Speaking slowly, using simple words and short sentences. If or when the elderly person does not understand, tertiary student volunteers should try rephrasing their sentences.
- Encouraging the elderly to use a hearing aid, if necessary.
- Listening to the elderly, using a calm voice, having an open body language and gentle manner, using positive facial expressions, using short familiar words and if necessary, repeating sentences.

Spiritual communication

Religion and spirituality play an important role in the elderly's life. The elderly may confide in the tertiary student volunteers and it is therefore necessary for these volunteers to have a basic understanding of the pastoral approach. The pastoral approach has three steps, namely situation, tradition, and Bible and prayer. The situation of the elderly is analysed by listening and asking appropriate questions. Thereafter, tradition follows, where the tertiary student volunteer has to rely on training, instincts, and experience. Only after this can the tertiary student volunteer focus on the appropriate and applicable scriptures to provide comfort to the elderly person.

However, not all elderly persons are Christian and a transcultural spiritual approach is often necessary. If the elderly person is not a Christian or has a different belief, it may be helpful to approach a spiritual leader of that religion to visit the elderly person. Alternatively, this spiritual leader can be asked for guidelines on how to help guide the elderly person in question. The elderly person, however, should still be aware that the trainee works from a Christian perspective and although his or her own views will not be forced upon the elderly, they will be used for support and encouragement. Regarding the activities or programs, tertiary student volunteers should focus on social, emotional, spiritual, physical, cognitive, and creative activities or programs. Tertiary student volunteers should base their decision to do an activity with the elderly on the following criteria:

- Is it a desirable activity for the elderly?
- Do the elderly have the physical or mental capacity to do this activity?
- Will the elderly need assistance from a third-party member in order to do this activity?
- Does it promote the increase of quality of life and well-being of the elderly?
- What is the reason for this activity? (How does it benefit the elderly?)

Keeping this in mind, tertiary students should encourage participation but not force the elderly to participate in any activities. The elderly who are involved with desirable activities will have physiological, social, emotional, and psychological benefits. However, the elderly need to decide in which activities they want to participate, as this is crucial for autonomy.

CHAPTER 6: SUMMARY AND CONCLUSIONS

6.1 Introduction

The focus of this study was pastoral in nature and was used to equip tertiary student volunteers to care pastorally for the elderly. The study was done by using Osmer's methodology, which included four tasks:

- The descriptive empirical task: "What is going on?"
- The interpretive task: "Why is it going on?"
- The normative task: "What ought to be going on?"
- The pragmatic task: "How might we respond?"

In this final chapter, the conclusion of each individual chapter will be organised, limitations of the study will be discussed, and further research suggestions will be made.

6.2 Conclusions

6.2.1 Descriptive empirical task (*cf.* Chapter 2)

The purpose of this chapter was to use the descriptive empirical task as set out by Osmer to answer the question: "**How are tertiary student volunteers currently being prepared for their work with the elderly in a pastoral manner and how is it received at the caring facilities?**" In addition to this question, the researcher sought to understand and identify the elderly's needs in order to answer if the tertiary student volunteers are properly prepared in caring for the elderly.

The empirical research was done using an inductive qualitative approach. Whilst doing the qualitative approach, grounded theory was chosen as the design. This approach was chosen in order to discover how different groups involved at the care facilities perceived the training and involvement of the tertiary student volunteers and how their care and training can improve. The researcher chose three groups of participants, namely the *elderly*, the *caregivers* at the elderly care facilities, and the *project leaders*. The reason for choosing these participants and dividing them into these three groups was to shed light on the current training given by the SRCS to the project leaders and how the participants involved perceived it. The researcher used theoretical sampling to select her participants.

Table 6-1 Participants

| Participant group | Participants | Method |
|---------------------|--|--|
| The elderly | Eight participants were chosen from two care facilities. | A semi-structured interview was conducted using a schedule as a guideline. |
| The caregivers | Eleven participants were questioned. One caregiver's answers were rejected when it became evident that she answered the questions regarding nursing students and not tertiary student volunteers. Therefore, the participants consisted of nine women and one man. | Schedules were distributed, which they had to complete. |
| The project leaders | Although ten schedules were distributed, only five were returned, perhaps because these project leaders have completed their studies, left the university, and entered the job market. | Schedules were distributed, which they had to complete |

The researcher did not transcribe the semi-structured interviews verbatim and rather utilised a synopsis of the interviews. The researcher made use of initial coding as the first cycle method of coding. Thereafter, the researcher used axial coding as the second cycle. Thus, the researcher used initial coding to break down the data into separate sections, where she examined and compared the data to discover the similarities and differences. Axial coding was then used to reassemble the split data from the initial coding process strategically and form relevant categories (themes and sub-themes).

The following themes and sub-themes were identified in Chapter 2:

- Problem areas
 - Knowledge
 - Communication skills
 - Ageism

- Well-being of the elderly
 - Relationships
 - Needs of the elderly
 - Quality of life
- Programs and activities

The themes and sub-themes were discussed in further detail in the subsequent chapters (especially Chapter 3).

6.2.2 The interpretive task: Literature review of empirical results (cf. chapter 3)

The purpose of the interpretive task was to situate the empirical results within the context of literature from other disciplines. The aim of this chapter was to answer the question: ***“Are the elderly getting the care they deserve?”***

Therefore, in Chapter 3, the empirical results (themes and sub-themes) were interpreted using a literature study of relevant material in **Social Work, Psychology, and Health Sciences**.

- **Problem areas:**
 - **Knowledge:** Having proper knowledge about the elderly and their needs was a critical problem area. Student volunteers need to have basic knowledge and understanding about the elderly’s physical development, cognitive aspects, psychosocial aspects and spiritual aspects. This will help increase the elderly’s well-being, as it will help the student volunteers determine the elderly’s needs and help to enhance their quality of life.
 - **Communication skills:** Communication often fails and this leads to the elderly’s need for social support and affiliation not being met. With proper knowledge and training, student volunteers will be able to communicate properly with the elderly and shy away from using elderspeak. Enhancing the communication in nursing homes will also improve the elderly’s social skills and participation in activities. Additionally, discussing future care needs lowers anxiety and depression, and helps the elderly cope with the ageing process.

- **Ageism:** Ageism is seen as prejudice against the elderly because of their age. Due to prejudice and negative stereotypes regarding the elderly, ageism is a social divider and influences how the elderly are treated by younger generations. Ageism isolates the elderly, negatively affects their well-being, threatens their need to belong, and can cause depression and loneliness. In turn, depression and loneliness affect the elderly's mental health and physical health.

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Concerning the above theme (i.e. problem areas), it is evident that having proper knowledge will enhance the care given to the elderly, improve communication skills, challenge negative stereotypes and consequently, improve the elderly's well-being.

- **Well-being of the elderly**

- **Relationships:** Relationships are a fundamental and primary need of the elderly. Relationships offer social and emotional support and affect the elderly's well-being. Relationships increase happiness in the elderly and decrease loneliness, which affects the elderly's quality of life. Relationships, social interaction or social isolation affects the well-being of the elderly, because they are directly linked to connectedness, meaning, and joy.
- **Needs of the elderly:** The elderly have physical, cognitive, social, as well as spiritual needs. Physical needs of the elderly include biological needs as well as physical exercise and activities (for example, gardening). Cognitive needs include feeling competent and being curious, puzzle solving and lifelong learning. Social needs refer to social integration, social support, belonging, and being needed, and enhances well-being and reduces feelings of isolation and depression. The spiritual needs of the elderly increase with age. Spirituality gives the elderly purpose and helps them find hope, meaning, and security. Other needs also include meaningful activity, functional competence, dignity, privacy, security, individuality, autonomy, and spiritual well-being. These needs are directly linked to quality of life and well-being and in order for the elderly to enhance their well-being, their needs need to be met.

- **Quality of life:** Quality of life is linked to relationships, needs of the elderly, and well-being of the elderly. Factors that can reduce quality of life are physical changes, social isolation (loneliness), needs not being met, depression, lack of emotional or social support, and ageism (and therefore, negative stereotypes). Quality of life ultimately depends on how individuals use their capacities and skills, as well as the opportunities and resources available to them in order to fulfil their needs and attain their life goals. Thus, in order to help the elderly fulfil their needs and attain their life goals, sufficient social support, interaction, and sufficient opportunities (including activities and resources) should be made available to the elderly.

- **Programs and activities:** Activity theory is based on the premise that ageing is an adjustment process in which adjustments are made with help from activities. Activities provide the link between the elderly's needs being met and enhancing their well-being by improving their quality of life. More time spent on social, physical, and cognitive activities relates positively to states of happiness among the elderly. In order to care for the elderly, it is important that an individualised care plan with activities is made focusing on needs, strengths or skills, preferences, goals, and growth. Therefore, programs and activities need to cater to the individual's needs. Programs and activities include:
 - Physical activities
 - Cognitive activities
 - Spiritual activities
 - Daily activities
 - Social activities

6.2.3 Normative perspectives regarding the elderly (cf. Chapter 4)

The purpose of this chapter was to situate the empirical results and the literature study within the context of Osmer's normative task. This chapter aimed to answer the question: ***What normative perspectives can be identified concerning caring pastorally for the elderly?***

The Old Testament sets an example for how the elderly should be treated. Genesis 1:26-27 declares that everyone is made in the image of God and human life is therefore sacred. Secondly, taking the law of God into consideration, it is morally and socially wrong to harm others. The fifth commandment states that a person should honour their father and mother, for this is pleasing to God (Ex 20:12). There is a blessing and a curse connected to the fifth commandment. Those who regard the fifth commandment will be granted the gift of longevity.

However, for those who disregard the commandment, they will be cursed. Not only is God the provider and supporter for the weak, oppressed and needy, He is also their judge. He makes provisions for the elderly by His laws. He expects people to show their righteousness by putting their religion into practice by obeying His commands. He also grants wisdom to the aged and gives them special honour.

Jesus Christ continues the Old Testaments' example in the New Testament. Matthew 22:39 reads, "love your neighbour as you love yourself". This should be the basis of all relationships, especially regarding the elderly. Furthermore, the New Testament keeps up with the sentiment of caring for the poor, the orphaned, and the widowed. In the chosen passage 1 Tim 1-5, guidelines are given on how to treat the aged.

The Bible offers the following summarised guidelines regarding the aged:

Table 6-2 Summary of normative guidelines

| Old Testament | New Testament |
|--|--|
| <p>How to treat the elderly</p> <p>People were created in the image of God; therefore, all life is precious and sacred.</p> <p>Ageing is seen as a blessing.</p> <p>Ageing is seen as a sign of wisdom.</p> <p>The elderly should be honoured, adored, and respected.</p> <p>Listen to the elderly (and their instructions).</p> <p>The law protects and cares for the needy, poor, and vulnerable.</p> <p>The elderly should be seen as esteemed and useful members of the community.</p> <p>People (children) are not allowed to curse or physically assault their parents.</p> | <p>How to treat the elderly</p> <p>Love the elderly as you love yourself.</p> <p>Honour and respect the elderly.</p> <p>Do not sharply rebuke the elderly.</p> <p>Help and care for the elderly (especially the widows) financially and in other regards.</p> <p>People are not allowed to take advantage of the elderly.</p> <p>Listen to the elderly.</p> |
| <p>Biblical instruction for the elderly</p> <p>The elderly should gain wisdom and teach the younger generations.</p> <p>The elderly should be esteemed and useful members of the community.</p> | <p>Biblical instruction for the elderly</p> <p>Teach and pass on knowledge/wisdom.</p> <p>Pray and intercede in prayer for those who are in trouble.</p> <p>Live holy lives and guide younger Christians.</p> <p>Minister to the sick and make disciples.</p> |

6.2.4 Pragmatic task creating practical guidelines

This chapter focused on the pragmatic task as set out by Osmer. The aim of this chapter was to answer the following question: **“How can tertiary student volunteers be better equipped in caring pastorally for the elderly?”** To answer the proposed question, the themes and sub-themes were used to propose guidelines. The proposed guidelines were divided into two categories, namely: training and programs and activities.

Training

In gaining the necessary knowledge, tertiary student volunteers will have a better, more comprehensive understanding of the elderly and their needs. Knowledge makes it easier for volunteers to understand the elderly and therefore empathise with them. The tertiary student volunteers can gain knowledge by being properly orientated and trained and participating in courses on ageing (which can be done online or with an appointed lecturer in a classroom setting). Courses will include workbooks and activities and the tertiary students can receive credits or a certificate for completing the course. Other training strategies include practical work, role-playing, ageing games, and simulations. Ageing games and simulations for tertiary student volunteers include:

- Wearing gloves to simulate arthritis.
- Wearing different glasses to replicate the different types of vision impairments the elderly have.
- Putting a small handful of chickpeas in their shoes and walking with a walker or cane (this should be done at a slow pace, caregivers can remind the tertiary student volunteers to slow down).
- Using earplugs so that tertiary student volunteers can have a dialogue with the caregiver and try to follow the conversation.
- Using a wheelchair and asking where the nearest bathroom is to see if it is easily accessible for the elderly.

Furthermore, regarding the gaining of knowledge, the researcher proposed using mentoring, which would take place between an elderly person and a tertiary student volunteer or between peers. Peer mentoring works when one of the tertiary student volunteers, who has completed the training and has worked with the elderly for a period of time, becomes a mentor to the new tertiary student volunteer.

The next suggestion made by the researcher on improving training concerns communication. Three strategies regarding improved communication were given, namely:

1. Having open dialogue evenings with the elderly, where tertiary students can openly ask questions on ageing.

2. Role playing, which is not to be confused with ageing games. Role playing helps student volunteers with empathy as they are placed into a certain position.
3. Training on communication in order to improve the tertiary student volunteers' communication skills.

Due to negative stereotypes and ageism, elderspeak is a recurrent phenomenon. However, gaining knowledge and certain skills can also help the tertiary student volunteers in this regard. These certain skills and values, as described by Egan (2014:16-62), include: respect, empathy, a pro-active appreciation for diversity, self-responsibility together with client-empowerment, and a bias toward action. When following these values, the tertiary students can improve their attitudes toward the elderly and have fewer communication problems. Further ways to better communication with the elderly include:

- Avoiding elderspeak and negative stereotypes
- Sitting at face level and talking face-to-face with the elderly. This ensures that the elderly person can clearly see the tertiary student volunteer, enabling the elderly person to lip-read, if needed.
- Avoiding covering the mouth.
- Avoiding shouting, as this makes it harder for the elderly to hear.
- Avoiding background noises when speaking with the elderly.
- Using cues.
- Using visual aids.
- Asking open-ended questions.
- Speaking slowly, using simple words and short sentences. If or when the elderly person does not understand, tertiary student volunteers should try rephrasing their sentences.
- Encouraging the elderly to use a hearing aid, if necessary.
- Listening to the elderly, using a calm voice, having an open body language and gentle manner, using positive facial expressions, using short familiar words and if necessary, repeating sentences.

Spiritual communication

Religion and spirituality are an important part of the elderly's life. The elderly may confide in the tertiary student volunteers and it is therefore necessary for them to have a basic understanding of the pastoral approach. The pastoral approach has three steps, namely: situation, tradition, and Bible and prayer. The situation of the elderly is analysed by listening and asking appropriate questions. Thereafter, tradition follows, where the tertiary student volunteer has to rely on training, instincts, and experience. Only after this, can the tertiary student volunteer focus on the appropriate and applicable scriptures to provide comfort to the elderly person.

However, it must be kept in mind that not all elderly persons are Christian and therefore, a transcultural spiritual approach is often necessary. If the elderly person is not a Christian or has a different belief, it may be helpful to approach a spiritual leader of that religion, asking him/her to visit the elderly or for useful guidelines. The elderly person, however, should still know that the trainees work from a Christian perspective and although his or her own views will not be forced upon the elderly, they will be given as support and encouragement.

Programs and activities

The most important part of incorporating guidelines is to ensure that care takes place and that Jesus's example is followed. Jesus says love your neighbor and is seen as the defender, provider, and caretaker of the elderly. Therefore, tertiary student volunteers should be mindful when creating activities and programs. Regarding caring for the elderly, the obligation falls firstly on their families. Therefore, it is necessary to involve family members through family counselling or family days.

The elderly have knowledge, wisdom, experience, and wise counsel and are seen as teachers. Due to their knowledge and wise counsel, the elderly can become mentors. They can also be actively involved in their community through volunteering. The Bible and literature suggest that the elderly stay active. Tertiary student volunteers should focus on social, emotional, spiritual, physical, cognitive, and creative activities or programs. These activities must meet the needs of the elderly. If these activities are desirable for the elderly, their quality of life and well-being may increase. Tertiary student volunteers should base their decision on doing an activity with the elderly on the following criteria:

- Is it a desirable activity for the elderly?
- Do the elderly have the physical or mental capacity to do this activity?
- Will the elderly need assistance from a third-party member in order to do this activity?
- Does it promote or increase the quality of life and well-being of the elderly?
- What is the reason for this activity? (How does it benefit the elderly?)

Keeping this in mind, tertiary students should encourage but not force participation in any activities. The elderly who are involved with desirable activities will have physiological, social, emotional, and psychological benefits. However, the elderly need to decide in which activities they want to participate.

6.2.5 Final conclusion

The comprehensive aim of this study was to identify how the tertiary student volunteers can be better prepared to care pastorally for the elderly. The sub-questions were answered through the above-mentioned chapters. Each of these answers was linked to the research question in order to answer how tertiary student volunteers can care pastorally for the elderly. In answering

the sub-questions in each chapter, the research question was answered and the aims and objectives were reached. Overall, this study has shown how tertiary student volunteers can be better prepared for their task. Therefore, the aim of this study was reached and the central theoretical argument was proven. This study can be enriched by referring to certain limitations of this study as well as providing further research suggestions.

6.3 Reflexivity and proposals for further research

6.3.1 Reflexivity

Although the aim of this study was achieved, certain limitations hindered the study's potential. By presenting these limitations, further research in tertiary student volunteers caring pastorally for the elderly may be pursued.

Reflections on possible limitations and strengths:

- Only elderly women were part of this study, which makes it difficult to understand elderly men's specific needs. The researcher wonders whether she tried hard enough to get elderly men involved.
- Two care facilities did not want to be part of the study. This was due to previous bad experiences they had with similar research in the past.
- The caregivers and project leaders were given schedules; therefore, the researcher did not personally meet all the caregivers and project leaders. Due to circumstances, it had to be done this way, but the researcher does wonder whether there would have been a greater impact on the study if more time were spent with the caregivers and project leaders.
- Regarding the project leaders, although ten were asked, only five returned their schedules.
- Project leaders, who graduate and leave university, make it difficult for the researcher to meet them personally.
- Only project leaders were asked to be part of the study. It would have been useful to question tertiary student volunteers in order to understand why they have misconceptions of the elderly.
- Not making enough contact with the participants led to details being lost or situations not being fully understood. To make up for this, the researcher tried contacting the participants and asking what was meant.
- Choosing a big sample size can lead to details and information being lost, whereas a too-small sample size can lead to a shortage of data.

Throughout the project, the researcher learned a great deal about the elderly and wished she had had this knowledge during her term as project leader. Pastoral counselling, gerontology, and specifically tertiary student volunteers caring for the elderly is still an open field of interest. Three years of hard work has paid off, because even though this thesis may not change the world, it did change the researcher's. Overall, the researcher gained knowledge on doing qualitative research and this was a learning experience, which will help her better conduct research in future endeavours.

6.3.2 Proposals for further research

This research study forms the basis for further research, namely:

- Equipping volunteers to care pastorally for the ageing man.
- The different needs associated with different gender groups and how it affects their well-being.
- Combating ageism and elderspeak in care facilities
- The task of the pastoral counsellor in caring pastorally for the elderly.
- Ageing and spirituality: How the elderly perceive spiritual activities and connectedness.
- Mentorship: Equipping the elderly for/with mentorship.
- The calling for the elderly to do volunteer work.
- Equipping the elderly for volunteer work.
- Family-planned care program for the elderly: Caring for an aged parent
- Creating a manual for tertiary student volunteers.

Research regarding the elderly and pastoral counselling is still relatively new. However, the elderly and how they are treated reflects on the younger generations. Furthering research in gerontology, practical theology, and pastoral counselling is essential for the elderly to get the care they deserve.

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ANNEXURE A: SCHEDULE FOR THE CARE GIVERS

Schedule for the care givers at the caring facility

Name:

Age:

Gender:

Occupation:

Number years working at the facility:

Name of facility:

1. What do you think is the task of student volunteers with the elderly?
2. In your opinion, do you think student volunteers succeed in their task? Motivate.
3. How do you experience the student volunteers? Are they contributing to the well-being of the elderly? Explain.
4. What are the common mistakes students make when volunteering with the elderly?
5. Can you tell me more about the students interaction/activities with the elderly? Name a few positive things they do and why they are positive, as well as the negative things.
6. What do you think about the activities/programme that the students offer for the elderly? How would you improve on it?
7. How do you think the elderly perceive the student volunteers?
8. What would you like to change about the volunteer work that the students do?
9. Would you briefly explain the needs and challenges of the elderly, things that you think should be addressed by the student volunteers in their programme to help caring for the elderly?
10. How can the student volunteers be better prepared for their voluntary work with the elderly?

ANNEXURE B: SCHEDULE FOR THE ELDERLY

Schedule for the elderly

Name:

Age:

Gender:

Care facility's name:

Contact details:

1. What is your opinion of the student volunteers?
2. In your opinion, are the activities/programmes useful for the elderly? Motivate your answer.
3. Do you participate in these activities/programmes? (If no, explain)
4. Would you please describe your experience with the activities/programmes?
5. How would you improve the activities?
6. Have you ever felt discriminated against, because of your age? Explain.
7. How would you describe the interaction between the elderly and the student volunteers in terms of the commitment, communication, relationship?

ANNEXURE C: SCHEDULE FOR THE PROJECT LEADERS

Schedule for the project leaders (student volunteers)

Name and surname:

Age:

Gender:

Project's name:

Project leader year:

Care facility's name:

Contact details:

1. How many years have you been a student volunteer, before becoming a project leader?
2. Can you give a description about your time and experience volunteering, regarding the following aspects; normal student volunteer and your project leader during that time and also then during your term, your committee.
3. Can you give a brief description of your project?
 - In short, please give a description of your vision, mission and goals for your project regarding the elderly?
 - Did you succeed in your goals?
 - What was your programmes during your term and describe them briefly
 - Looking back what would you do differently?
4. What do you think is your task as a project leader?
5. In your opinion, what are the challenges the elderly face?
6. What do you think about the training you received? What was helpful? What was lacking?
7. Did it prepare you for your contact with the elderly? Give an example
8. From the beginning of your term towards the end: How did your views regarding the elderly change?
9. What problems did you face during your term as project leader?
10. How do you think student volunteers are perceived by the elderly and the care givers at the caring facility?
11. How do you think the elderly is perceived by your fellow volunteers?
 - Did you have a strategy meeting with your committee explaining
 - Did they understand the challenges the elderly face?
12. How would you describe the communication between: yourself and the elderly? Your committee members and the elderly? The care givers and the elderly?
13. What advice would you give to the next project leader?
14. Name a few things that you think should be included in the training programme?