Power in Iranian Elders: Barriers and Facilitators

Potencjał osób starszych w Iranie: bariery i ułatwienia

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Summary

Introduction. Power and empowerment are well-researched concepts especially among people with chronic illness or older people. However, few researches focused on the barriers to and facilitators of empowerment in elderly people. Whilst powerlessness can have many adverse consequences for the elderly like lower levels of preventive health behaviors; empowerment of elders can increase quality of life and feelings of well-being. An adequate diagnosis of these, need an in-dept understanding of the meaning of power barriers and facilitators.

Method. In this descriptive qualitative study, 26 participants were interviewed from a purposive sampling; the interviews were analyzed using a content analysis method.

Results. Participants indicated emotional sensitivity, widowhood, retirement, worrying, losing physical ability, needs, and insufficient social support systems as barriers to sense of power and increased spiritual capacity, increased experiences, having control over resources, self-efficacy, having referring role, independence, coping with changes, satisfaction with past life and updated knowledge as facilitators in sense of power according to Iranian elderly.

Discussion. It seems that the sense of power was affected by many items which mainly rooted in cultural and personal beliefs. Spirituality and religious faith played a major role in powerfulness in the elders and worrying about unmarried children and also their disability had a powerlessness effect on them. Moreover, it appears that informants noticed not only the external systems and resources’ effects on the sense of power; but also considered their role as an important agent in this regard.

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Streszczenie

Wstęp. Potencjał oraz wzmacnianie własnych możliwości stanowią szeroko opisane koncepcje, szczególnie w populacjach pacjentów chorujących przewlekle oraz osób w wieku podeszłym. Prowadzono badania opisujące bariery i ułatwienia w procesie wzmacniania możliwości osób w wieku podeszłym. Kiedy redukcja potencjału może prowadzić do szeregu niekorzystnych konsekwencji dla osób starszych, jak choćby mniejsze zainteresowanie profilaktyką zdrowotną, wzmacnianie własnych możliwości może podnieść poziom jakości życia oraz poprawić samopoczucie. Dokonanie trafnej oceny tych czynników wymaga głębokiego zrozumienia znaczenia terminu „potencjał” osób starszych oraz wpływających na niego czynników, zarówno niekorzystnych [barier], jak i pożądanych [ulatnień].

Metoda. W opisowym badaniu przeprowadzono wywiad z wybranymi 26 uczestnikami; wywiady opracowano następnie metodą analizy treści.

Wyniki. Uczestnicy badania wskazali na: wrażliwość emocjonalną, wdowieństwo, przejście na emeryturę, zamartwianie się, utratę sprawności fizycznej, potrzeby oraz niewystarczające wsparcie ze strony systemu opieki społecznej – jako elementy stanowiące bariery w odniesieniu do pojęcia potencjału, natomiast wzrost potrzeb duchowych, doświadczenie, umiejętność sprawowania nadzoru, samowystarczalność, zdolność trafnego doradzania, niezależność, radzenie sobie ze zmianami, zadowolenie z dotychczasowego życia i zdobywanie nowej wiedzy określili jako ułatwienia we wzmacnianiu potencjału populacji osób w wieku starszym w Iranie.

Dyskusja. Wiele czynników wpływa na potencjał osób starszych, z których większość jest głęboko zkorzeniona w uwarunkowaniach kulturowych oraz osobistych przekonaniach. Duchowość i wiara odgrywają główną rolę we wzmaganiu potencjału osób starszych, podczas gdy obawa o dzieci pozostające w stanie wolnym i niepełnosprawność powodują jego obniżenie. Ponadto osoby biorące udział w badaniu wskazywały, że wpływ na potencjał wywierają nie tylko uwarunkowania zewnętrzne, lecz także postawy ich samych.

Introduction

The older adult population is increasing in the world and is estimated to reach over than the population of children under than 14 by the year 2050 for the first time in the history of the human being [1]. The percentage of individuals over age 65 is estimated to be about 25% comparing to 4% in 1900 and 13% these days in the United States [2]. According to the 1994 Consensus Bureau in Iran, approximately 6.6% of the whole population of 65 million people in Iran is over 60 year and predicted that it will be reached to 10 million by the year 2019 [3].

Power plays a significant role in human encounters. A perception of powerlessness also can happen to all people regardless of age. However, the problems associated with powerlessness can be greatly exacerbated among elderly persons, who tend to have fewer resources and a much weaker power base to rely upon for support [4]. Power is the ability to influence what happens to oneself [5]. Power is both a relatively concrete and objective phenomenon, and a subjective one which is created by personal feelings [4]. Power is one of the important elements of quality of life [6]. Feeling of power often become eroded from loss of control, stress, grief, loss of loved one, complications of the aging process, loss of resources, and disabling illness which leads to feelings of powerlessness. Increased powerlessness accompanies deterioration in health status and is predictive of increasing health problems. Just as powerlessness tends to increase feelings of inadequacy, increasing feeling of power can have an empowering and positively uplifting effect [4]. Without a clear conceptualization of what is meant the barriers and facilitators of power among elders, it is difficult to convincingly argue that one form of intervention or nursing practice is more or less empowering than others. Therefore, the purpose of the current study is to obtain a more in-depth understanding of the barriers to and facilitators of power in Iranian elders. So that culturally sensitive health care and culturally relevant empowering strategies may be promoted by health care providers.
Method

There were totally 26 informants participated in this descriptive qualitative study. The data were gathered mainly from the community dwelling elders. Age over 60 years, having the ability and interest to explain about their experiences, were used as criteria to select these participants. One advantage of using a qualitative approach was that it is concerned with the people’s real world and world views rather than the abstract world and is an ideal way to encourage participants to freely describe their feelings, experiences and actions [7].

Purposive sampling was used to understand the nature of the phenomenon under study. Duration of each interview session varied between 30 to 90 minutes, based on the participants’ tolerance and interests. The interviews were tape-recorded and transcribed verbatim. The initial interview question was broadly focused to encourage participants to speak freely and to recount their personal experiences of daily living with regard to the concept of power. Then some questions were specific to enable the researcher to explore the issues the participants raised in the interview. The analysis stages include: finding meaning unit, condensing, abstracting, content area that address a specific topic in an interview, emerging codes, category and themes [8]. So, each transcript was read many times to enable the researcher to become familiar with the data (immersion). The codes were putted in categories. When all the data had been coded and categories condensed, each category was assessed and compares to determine whether it was saturated. Credibility was enhanced through validation of emerging codes and categories in subsequent interviews, and debriefing with the supervisors. Using member checking, peer checking and maximum variation of sampling attested to the conformability of the findings [9].

The participants were informed about the study both verbally and in writing and were assured of confidentiality and anonymity. It was made clear that they could withdraw from the study at any time. They gave written consent.

Results

Emotional sensitivity, widowhood, retirement, worrying, losing physical ability and insufficient social support systems were emerged as barriers to sense of power and increased spiritual capacity, increased experiences, having control over resources, self-efficacy, having referral role, independence, coping with changes, satisfaction with past life and updated knowledge were facilitators in sense of power according to Iranian elderly which has been shown in Figure 1.

**Emotional sensitivity.** The informants said their emotions had been changed compared to their youth; they have become very sensitive to undesirable conditions and can not easily tolerate them. They need more attention and like that the others behave with respect and consider their dignity. One widow said: “I’m significantly changed compared to my youth. I’m too impatient to deal with complicated problems and can not tolerate others indignity or ill behaviors”.

**Worrying.** Some other, also pointed out to other effects related to aging such as fear for disability in last years of life, being lonely, worrying about their family. Especially they worried about becoming disabled in such away that they would become dependent to others’ help.

Many of informants talked about their unmarried children and worrying about it, especially among the widows who had unmarried girls. They consider the responsibility of their children to themselves and against different factors may prevent from happening the marriage; they eagerly wished to be reassured about their children marriage before they die. On the other hands, the elders whose all children had been married feel empowered.

**Widowhood.** Losing the partner was very downing for elders. They described this situation such as losing half of their body, confusion how to cope with their daily living, and losing their past friends and communication. One old widow said: “I feel when my husband was alive, I had much more pride and respect among our friends; I had more communication with them”. 
Retirement. Decreasing social position specially due to being retired was very important to the men and they tried to find another part time work instead. Although it was not the same for old women, even for the ones who had a job before; they stated that having a job gave them both old men and women a sense of empowerment which decreased by retiring and in some cases act as a barrier to feel powerfulness especially in the first years of retiring.

Losing physical ability. The informants said that their physical strength have been decreased due to cellular aging compare to their youth. They couldn’t move around easily and should be cautious whenever want to do some hard works. One old man said:“Aging means the beginning of the pain, the old pain in each part of the body gradually enhances and you convert into the prisoner of the pain”.

Needs. everybody has lots of needs; but according to the informants it seems the elders’ need has formed redistribution. Spirituality needs, communication, respect, dignity, others attention to their experiences consist of high importance to them. In such a way that if these needs have not met, will act as a barrier and cause them feel powerless.

Insufficient social support system. Many elders complaint about insufficient social support system. They explained this as a barrier to sense of powerfulness. They need to be supported economically and socially by government. They wanted some special facilities in public transportation, health care programs (routine check up), and more attention to get some facilities to do their religious and recreational activities much more easily.

There were also some facilitators to powerfulness which participated elders explained about them.

Increased spiritual capacity. Some informants felt they found a special affinity or interest into spirituality, religion and to God, which gave them a sense of being empowered. An old man explained: „At this age, praying becomes more and purer”. They said at this age their religious activities and observance the principals are more precised than the youth age; then, they rely on God more than before, like to help the others to overcome their problems, encourage to have more attention to these principals, and obey them in their lives.

Increased experience. Some elderly stated they felt more experienced than before and compared to youth. An old gentleman said:“Because of many problematic situations in the past we, as elders, are well experienced and others can get our help to solve their problems”. Reflecting on past events during the life and gain experience based on cognition, knowledge, and thought from them and evaluating the results, helps the elders convert to an experienced one who can find the best solutions for their problems or the others through give them consultations.

Control over resources. There are many resources in the family and community. Some elderly felt empowered by owning or having control over people in their family or community. Having control over oneself as a resource to pursue desired goals until achieving them was very important according to many elders. One of them said:”I feel I have enough power to accomplish the programs that I have been planned. In some cases I fail to meet them, I feel powerless”. Also, having their families’ integrity under their self-control, having mastery over their positions in their families or their local societies; all were some other items that the elders in this study had pointed out as facilitator for being empowered.

Self-efficacy. Some elderly said they felt able to cope with their daily activities. For example they adjust their diet according to physical conditions or best way of drug consumption with considering the side effects on them. Some of them feel themselves capable enough to adjust their drugs diet and discuss with their doctors about them. A widow said:“If I success to do all my daily living activities, I will feel powerful. I know myself better than anybody else. If there is a problem especially about my health I like to participate in the treatment decisions. I adjust my diet myself”. In the other aspects some elderly who had positive concepts of themselves felt powerful. One old lady mentioned: „My self-esteem is very high. I dare to take risks. By repeating the statement „I can do it” to myself, I feel empowered”.
Referring Role. Some elderly imagined themselves as a referring resource for their families and somehow for their local communities, in solving problems and lead their families; as if this position gave them a sense of being in power. One old gentleman said: “An elder is different from whom he was at a younger age. He becomes the person whose family and the community could lean on”.

Satisfaction. The others explained about the success they had gained in their lives, being helpful for the others act as a facilitator to sense of powerfulness. An old gentleman said: “I’m satisfied with my life, I have a good social background, I had raised very good children, I was successful in my jobs and all people who worked with me still have good memories of me.”

Independence. One of the important facilitators emerged from the data was independence, which was related to sense of empowering in participants. Most participants valued and wanted themselves to think, decide, choose, plan and solve the problems and have an independent place for living and enough money. One participant mentioned: “it’s not pleasant that the others decided in my place”.

Coping. It seems some elderly used different Strategies to cope with problems they experienced and finally maintained or promoted their power. Some of them said although their ability to do things has been diminished, they tried to get things done through different ways or fight with the obstacles to reach what they want.

Updated knowledge. The informants tried to keep themselves in the mainstream of society. They tried to learn how to work with computer, send SMS by mobile phones, read newspapers, and following up news. These all gave them sense of powerfulness.

Discussion

It appears that there are some factors that facilitate to or barrier from sense of power in Iranian elders who participated in this study. One of these facilitator factors was independence. Smith (1999) defined independence as having the right of choosing, how to live according to the individual’s meanings under their values and beliefs and consider many dimensions for this such as: social independence, economical independence, physical independence and subjective independences like as the ability of problem solving [10]. Rodwell (1996) in an analysis of the concept of empowerment found freedom to make choices as one related category to power [11]. Also, independence versus dependence was a factor as an interpersonal relationship in a variety of social situations effects on the sense of elders [12].

Spirituality and religious faith played a major role in powerfulness in the elders. Kyung Rim shin et al. (2003) stated that people, through aging, tended to pursue a meaning in life and that religion played a major role [13]. It is also said that there was an increased spiritual awareness and consciousness as one aged and that religion is a powerful cultural force in the lives of older clients [2]; which supported increasing spiritual capacity as a facilitator to powerfulness in our informants.

Coping resources are those which are available to help persons to master, tolerate, or reduce a problem or demand. Problem solving attitude is a perspective of active resourcefulness in confronting problems. Individuals use their unique coping strategies when the power resources are compromised [14]. An individual who is successfully coping is seen as being calm, in control and making rational decisions [15].

Participation in their own activities and feel success in accomplishing them, gave our study elders’ sense of self-efficacy. In one study functional capability like successful participation in daily activities was identified as a key factor influencing perception of safety, confidence, and efficacy [16]. As people age, their self-care ability may be weakened by one or more functional limitations. This is particularly important for Iranian elders whose caregivers demonstrate respect by performing those self-care activities the elders could not perform for themselves; the same as what is for Chinese elderly [17]. Forbes (2001), according to her study proposed: Being sensitive to the abilities of older adults and allowing them to continue the use of their skills will enhance their sense of coherence and mastery. For example,
individuals with dementia may still be able to perform such tasks as drying dishes or sorting laundry, if given the opportunity [18]. Also, increased self-esteem due to some other items like greater income, education, informal social support, are more likely to have a strong sense of coherence [5].

Satisfaction with life roles, activity levels and social supports leads to life satisfaction in elders. Bandura(1982, 1995) recommended the following factors to be included in programs aiming to change health behaviors: skills development and practice, mastery experiences, exposure to positive role models, coping with grief and role loss, information provision, self-affirming verbal persuasion (assurance of an ability to carry out behaviors), and development of social supports [16]. The elders in this study considered themselves as having some roles in their families or community. In the referring role they believed that an elder could be able to solve the other’s problems, being confident, and have leadership ability. They counted themselves as a support to others. The ability to feel power and to empower others may be derived from referent power [4].

According to Matteson et al, social support includes many resources such as contact with children, siblings and friends, number of close friends, mediating support elements, bureaucratic organization like health care agencies, and religious organs. They present guidance and solutions to their problems to promote sense of control over their situations. These supporting systems become very important at old age [19].

The need to respect and dignity is also mentioned by elders from other cultures and nations. Shin et al. (2003), in their article pointed out that „elderly of Aesop’s fables despite of declining physical strength, gained knowledge, dignity, wisdom and leadership as they became older.” Also as South Korean adults grew older, they felt a strong responsibility for their children and tried to live an honest and respectable life [13]. Butcher (2003), explained within a unitary perspective of aging, elderhood becomes a time when elderly work as mentors to share their wisdom and transmit a legacy to future generation. Elderly would be seen as the mentors, story-tellers, vocational counselors, and conservator of family traditions [20].

Understanding the powerful and powerless factors could help health care professionals especially nurses to have better assessment of the elders’ needs and preparing much suitable care to them which facilitate the process of empowering and promote their quality of life. In a study on a group of elderly patients in medical and surgical wards depicts that dealing with most common needs like problems in memory, distress, mobility and looking after home can reduce the likelihood of readmission to hospital and improve quality of life [21].

Worrying about unmarried children and also their disability in last years of life had a powerlessness effect on informants. Many resources [2, 4, 13, 14], confirm the findings about physical, social and psychological decrease capacity along with aging. The findings revealed that if the elders are aware of their changes by getting old as barriers to or facilitators in their power capacity they can maintain and promote their potentials and use their abilities in the best way. Adjustment to physical, emotional and socioeconomic limitations in old age and the new problems that frequently are encountered due to aging add to the variety of causes for anxiety [22].

**Conclusion**

Our findings provide increased in-depth understanding of this study informants’ perception of power in their lives. By applying the empowering factors as a proactive means, elderly people can achieve primary prevention from becoming powerless. It appears that informants noticed not only the external systems and resources’ effects on the sense of power; but also considered their role as an important agent in this regard. The goal of empowering reflects a lifelong concern for helping people to live healthy and choose healthy environments in which to do so. Educational interventions based on the elders’ needs for empowering by health care professionals, comprise a major part of wellness approaches.
The findings of the study can provide nurses and other health care professionals with deeper understanding of elders’ perception of power facilitators in order to empower them; and provide a foundation for future research on the culture to develop effective health promotion interventions for larger aging populations and developing an empowering model for elders.

Fig. 1. The barriers and facilitators of power in Iranian elders

Rys. 1. Bariery oraz ułatwienia w odczuwaniu potencjału u osób starszych w Iranie

References


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