Thesis Title: The Meaning of Life for Elderly in a Nursing home

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Abstract

This thesis will explore the aspects of life that provide meaning to life for elderly in a Nursing Home. The elderly people range in age from mid sixties to late seventies. Each participant is of different background but are all native Irish. The study was carried out by using Qualitative Analysis which involved interviews each participant in relation to their sources to meaning of life. The study investigates the different views and attitudes the participants have towards the common themes which provide meaning to their lives. The common themes that were researched were the importance of family relationships, religion, activities, and staff relationships on the lives of the elderly participants. The results of the study showed participants to all find meaning of life through one or more of the common themes. It showed they are all happy as residents in the chosen Nursing Home and value their relationships with each other, family, and staff. This study adds to and related to the previous literature already published on this topic.
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Aims

This thesis aims to explore the different aspects that provide meaning to life for elderly in a Nursing Home. It will show that meaning to life varies between individuals and can change at different stages of life. As part of this thesis, it will show the relevance of the previous literature done on this topic and how it relates to this study. This study aims to show the importance of family relationships, religion, activities, and staff relationships to the participants meaning of life. While also discussing the main themes that the participants talk about and relating it to the previous literature already carried out it will also show if they and how they correspond to each other.
**Introduction and Background**

Ireland in the 21st century is going to witness a growth in the percentage of elderly people. With this growth in our elderly population there will inevitably be a corresponding need for an increase in the service for the aging population.

As we have seen from the later part of the 20th century and a beginning of this century the care of our aging population has shifted from the home to the nursing home.

This research study will endeavour to give an indebt summary of the trends and how the attitudes towards those trends have manifested in the writings and reports published by both theorists and government bodies.

One of the key achievements of the last century has been the improvements in the average life expectancy. Consistent with the other European nations, Irish society is aging (National Council on Ageing and Older People 2003) (NCAOP). In the mid 1990’s, 11% of the populations was over 65 years (14 % > 65 in the western Health Board). By 2030 this figure will rise to around twenty percent of the population (Department of Health and Children, 2001). Leahy and Wiley (1998) have edited ‘The Irish Health System in the 21st Century’ and the complete chapter of the book is now allocated to population ageing, showing that health care needs of the older population is viewed with great importance.

This is due to the current demographic trend, which will mean that Ireland will have increasing numbers of older people in the early 21st Century. Leahy and Wiley (1998 p186) suggests that after 2006 there is to be a rapid growth in the population of elderly people. This growth will continue to give rise to additional demands for services for older people (NCAOP, 2003).
In 1988 a report of Working Party on Services for the Elderly was published in Ireland. It was entitled ‘The Years Ahead’…a policy for the Elderly. This report agrees with Fahey (1998) and states that increasing numbers of elderly people, especially women are reaching advanced old age and more people in the future will live alone. This growth in the elderly population and changing age profile must be a major influence on the planning of health services.

A nursing home, according to the Nursing Home act 1990, is an institution for the care and maintenance of more than two dependent persons. According to a recent report carried out by the National Council on Aging and Older People which suggested ‘that long term care homes are not places to die but are place to live and live well’. The World Health Organisation defines quality of life as the individual’s own perceptions of their position in life as regards their values and beliefs system, goals, expectations, standards and concerns. (Szabo; 1996). According to the NHI (Nursing Homes Ireland), the number of people aged over 65 had increased by 7.3% since 2002 and is expected to increase to over 800,000 by 2025. In relation to the Central Statistics Office, life expectancy is increasing in Ireland and now exceeds the European Union average, as per the European Union (2005) the life expectancy of an Irish woman was 82 years of age and an Irish man was 77 years of age. Fortunately, life expectancy has been rising on average by 2.5 years per decade in Europe and Europeans enjoy some of the highest levels of life expectancy in the world: 75.1 years for men and 81.4 for women.

**Influence of move from home to Nursing home**

For the majority of older people, moving to a nursing home is necessary. This move can have a profound effect on the older people, especially those suffering from cognitive
impairment. After the initial moving in experience for the older person, the nursing home now becomes their home. Research done by the Health Service Executive in 2010 has shown that even when the old person goes on short visit to family member they will be keen to return ‘home’, as the nursing home provides them with security and comfort. Contrary to this, elderly people who are living in a Nursing home for years still don not feel as at ease as at home. These are the patients who provide challenges for the nursing staff. The never ending question of “when can I go home” shows the restlessness and aggravation of the person. According to the HSE (2010) research the main factors which promote a meaning of life for the elderly are family, religion, interactions with staff and keeping active. Residents value the frequent visits by their family while also valuing time alone. Even the visitors of the other residents play a significant part in their lives. Results from this study suggest that the ‘open door visiting policy’ should be encouraged in all Nursing Homes where possible. Also suggested by the HSE report (2010), Nursing home facilitators should where possible promote the involvement of family members in the life and culture of the Nursing Home. Another issue that was discussed in the report was the quality of the resident’s environment is while in the Nursing Home. The environment including sleep quarters and bedroom were identified by many as being important. For instance, single rooms are more personal and give a resident more privacy and help them feel more at home. Many of the residents that took part in the study spoke about the freedom of being able to return to their own room in the evenings or any part of the day when they needed to, has been of great importance to them and this sense of autonomy.

Activities provide the residents of the Nursing Home with great stimulus and relieve boredom for those who participate. Activities that take the elderly out door are particularly enjoyed especially when they get to met people or go places that were enjoyed from their
previous lives. Practicing their religion either through pray, mass or rosary is deemed very important to the majority of residents which the HSE report (2010) included. The HSE urges Nursing Homes to allocate regular and appropriate times for religious practices. As for interaction with nursing staff, residents liked the staff to take a ‘person centered approach’ to their care, treating them with respect and honoring the privacy, empathizing with their feelings and displaying total positive regard for them not just as residents. Results showed that residents with low cognitive impairment placed high regard for their privacy and intimacy. Also relationships with outsiders were just as important. Some residents express their enjoyment of seeing new faces coming into the Nursing home. The HSE report (2010) recommends that Nursing Homes facilitate these relationships by introducing voluntary workers or students on placement and suggesting to residents to sustain relationships with significant people outside the environment of the home. Finally noted in report was the importance of companionship to the residents. Having somebody to confide in, or just someone to talk to and the possibility to be able to enjoy a good social life were important components of having a meaning to life.

Quality of Care in Elderly Homes

Quality of care for older adults is often compromised by longer waiting times, less attention to detail, and less choice in treatment options, reported by Birmingham (2006) in ‘The State of Ageing and Health in Europe’. This report also focuses on ‘forgotten’ groups of older people who are at greater risk of ill-health. A recent study done by Ozer (2004) stated that aging is presumed to be a process starting from infancy and continuing until death. Generally, the age of 65 or above is considered the beginning of elderliness. Being elderly is an unpreventable process that has biological, chronological and social aspects and
problems. The policy for health service users for improving care for older people states that, most elderly people are independent and active; however for some aging bring frailty and chronic illness. Older people are significant users of health services and in the coming years population growth continued with aging will mean that a greater number of older people will need access to health and community care services. (Ozer, 2004).

Demand for long term care for older people is set to rise steeply in OECD countries as the baby boom generation reaches old age, according to a recent study in improving quality of life and care for older people in long term care in Ireland. The report on quality of life in Nursing homes by Ronneberg (2008) stated that only rarely do nursing homes meet all the psychological needs of their residents. Ronneberg carried out her study in two nursing homes in Iceland with eight participants to find out what matters most in relation to their quality of life. Here she found that feeling safe and secure in the nursing home, having a place and time to be alone with their thoughts and to be fully prepared for death were the three most important aspects in relation to the quality of life for the residents.

The nursing home support scheme act 2009 defines long term residential care services as, ‘maintenance, health or personal care services or any combination therefore provided by or on behalf of the Executive to person, whilst the person resides in or is maintained in a facility’.

Elder mistreatment is a recognised social problem of an increasing magnitude, between 1 and 2 million Americans 65 years and older have been injured, exploited or otherwise mistreated by someone on whom they depend on for care and or protection. (Pillemer and Finekelhor, 1988; Pavilk et al., 2001) As our population ages, the number of cases of elder abuse will undoubtedly increase. Elderly who live in settings other than their
homes such as long term care settings are more at risk of abuse or neglect. This can be due to the many reasons why they were admitted to the care setting in the first place, such as impaired cognitive functioning or chronic illness and are unable to report this neglect or mistreatment. (Hayley et al; 1996)

‘The Elderly in skilled nursing facilities are among the most vulnerable members of our society, they are dependent on the nursing staff for food, medicine and most importantly a roof over they head.’ (Shapira 2000)

In 2003 the North Western Health Board (NWSB) set up an approach to improve quality of life and care for older people in long term care settings called ‘CHOICE’. The NWSB examined how services were being delivered to older people within the Leitrim/Sligo area. A survey of 113 elderly people from the area found the 97 per cent of the sample wanted to stay at home. As a result of these findings, the CHOICE approach was set up. This approach is based on providing care for older people while respecting their wishes and choices and while also responding to their needs. The National Council for the Aged, which is now known as the National Council for aging and older people, carried out a research study in the mid 1980’s on the quality of life in private and voluntary nursing homes. (O’Connor and Walsh; 1986) In this study many issues arose surrounding the quality of life for older people in these long term care homes. Some of the specific indicators of poor quality of care included a failure to meet the needs of the residents, and failure to create an environment to maintain independence for sick or immobile residents. These issues are still relevant a decade or so later. On the 3rd of March 2008, the National Quality Act (NCA) set out 32 quality standards which detail the rights of residents in the areas of protection, health and social care needs, quality of life and staffing, reported by the National Quality Standards for Residential Care Settings for Older People in Ireland. Under
the protection section, the standards stress that each resident should be free from neglect, harassment and protected from bullying. The standards set out by the National Quality Act (2008) “Aim to prevent all forms of abuse”. Between 2004 and 2008, eight nursing homes have been successfully prosecuted in the courts due to their failure to abide by the standards set out.

Meaning in Life in Nursing Homes

Meaning is a common human quest for a map that gives coherence to life, which guides decisions and actions and shapes behavior in relation to common and uncommon challenges of life. (Simmon; 1998). A recent study carried out by the seniors support research group in 2004 concluded that ‘to have a sense of meaning and purpose for living provides opportunities for older persons to find meaning in day to day experiences and to transcend difficult life experiences’. (Moore et al; 2004) There is diversity in perspectives regarding how to achieve meaning in life, there is no one meaning which can fit everyone’s life. Each individual must create meaning in his or her own life whether it is through the pursuit of important goals (Battista & Almond; 1973) or the development of a coherent life (Kenyon; 2000). (Moore et al. 2004)

Having a meaning of life is associated with the ability to overcome hardship. In the words of philosopher Friedrich Nietzsche, found in Frankl’s ‘Man’s Search for Meaning’, (1963) ‘He who has a why to live can bear almost any how’. What gives life meaning varies between individuals with the most typical sources being human relationships, work, individual goals and social causes. For many seniors, meaning of life is expressed in religious beliefs, values and practices while also wishing to offer hope in the face of death.
Research done by Blazer and Palmore sourced in “Aging and meaning of Life” (Moore et al, 2004) found that the link between emotional well-being and religious commitment is strongest among senior’s ages 75 years or older. An explanation for this research is offered by Harold Koenig, James Kvale and Carolyn Ferrel (2004), which as the other factors diminish as life progresses; religion is the one constant that stays with them to supply a social support. Between 1943 and 1954 Abraham Maslow developed a hierarchy of needs model. The model shows that each individual is motivated by needs. Maslow’s hierarchy of needs theory was one of the first frameworks on assessing how individual’s quality if life is related to how well their needs are being met (Timonen & O’Dwyer; 2009).

A recent study done in Hungary by Szeman (2007) found that the existence or absence of strength by elderly to accept the role of being an ‘old person’ depends on finding a meaningful life goal with ‘self-fulfilling daily social activity, on being instrumental in initiating new social roles, and last but not least, on feeling satisfaction in one's way of life’. This investigation was done by measuring 75 elderly people (over the age of 65 years) with the meaning of life sale and through semi-structured interviews. During the investigation the researchers focused on the satisfaction with family relationships, social activity, regrets of events in the past and judgment of state of health. The results showed that marriage and their relationship with children /grandchildren was the most important factor.

Victor Frankl (1905-1997), a German psychiatrist, developed the treatment method called ‘logotherapy’. Logotherapy is striving to find a meaning in one’s life as a primary force. Frankl believes his therapy works as a treatment in improving ones health by helping them find a meaning to their lives. Author Leo Missinne applied Frankl’s theory in
‘Reflections of the meaning of life in older age’ concerning meaning of life to specific problems and needs of the elderly. To determine what gives meaning of life for elderly in day to day life, a group of elderly were interviewed using the Purpose of Life test. Findings indicated that Frankl’s theory is particularly relevant in relation to older people and their need for spiritual belief.

Research has shown that residents in long term care settings place great importance in the fulfillment of their psychological and physiological needs. Meaning of life differs from man to man, day to day and hour to hour. Frankl, therefore states that what really matters is not that meaning of life in general but the specific meaning of a persons life at any given moment. (Frankl 1963: 113) A study done in France involving a public poll showed that 89% of the people surveyed admitted the man needs ‘something’ in which to live for. (Frankl 1963; 105) Social Science students of John Hopkins’s University, America, surveyed 7,948 students over 48 colleges and when asked on what is important to them, 78% answered finding a purpose and meaning to life. (Frankl 1963; 105) According to ‘Logotherapy’ we can discover the meaning of life in three different aspects of life, through creating or doing a deed, one could imagine for a moment the residents could achieve this by taking an active role in the activities at the centre by experiencing something or someone residents could achieve this by forming meaningful relationships with other residents, their families and the staff of the nursing home and/or by the attitude we take when dealing with unavoidable suffering (Frankl 1963; 115). While the modern day nursing home environment does not appear to be one where suffering is prevalent but it has to be stated however, that due to circumstances outside of their control they find themselves with no other option but to live within the confines of the nursing home. Ultimately it is how they deal with this new found situation in a positive frame of mind that
can deliver for them a meaning to live.

Robichaud et al (2006) found that the three most important quality of life indicators for residents was to be treated with respect, access to relationships and positive attitudes received from staff. (Timonen & O’Dwyer; 2009) Another Canadian study, Guse & Masesar, 1999 showed that interaction with family and friends, personal comfort and mental stimulation as other important factors in relation to quality of life in long term care. (Timonen & O’Dwyer, 2009) A research study carried out by Takkinen and Ruoppila on elderly people with high cognitive functioning found that having a sense of coherence and a zest for life were factors related to the sense of meaningfulness in life. A recent report in the Journal of Counseling Psychology argued for the understanding and assessment of the well being variables such as meaning in life in order to promote client growth and recovery. (Lent; 2004)

Baumeister 1991 proposed that a feeling of meaning can be attained by first meeting one’s values, purpose efficiency and self-worth. Meaning of life has being directly equated with authentic living (Kenyon 2000) (Steger et al; 2006). Frankl (1963) argues that humans drive to find meaning and significance in their lives and are characterized by a ‘will to meaning’; failure to achieve meaning results in psychological distress. Lent also argues that greater inquiring into well being could lead to a development of models of mental health. Madeli (1970) argues that the search for meaning in life is a fundamental human motivation. (Steger et al; 2006)
Social Policy and Older People

Social policy making is often based on a set of assumptions and attitudes which can influence and shape older people’s lives. Elderly people have always been an important group in society regarding social policy (Quinn et al, 2005; 206). Convery (1987) reported that a weakness in the long term care system had been that ‘day services’ for older people had not been adequately developed. A year later, The Years Ahead report (1988) was published, its overall objective was to enable older people to live at home and when this was no longer possible, to receive care as near as possible to their home. This report followed on from the ‘Care of the Aged’ report, which was published in 1968, it has the radical view

‘That it is better and probably much cheaper, to help the aged to live in the community than to provide for them in hospitals or other institutions’

(Cited in The Years Ahead 1988 Ch.1)

The complex phenomenon of ageism was introduced in the 1960s through Butler (1975) with its ‘working definition’ being stated as ‘a set of beliefs originating in the biological variation between people and relating to the aging processes.’ (Quinn et al, page 206) The policy planning report The Years Ahead (1998) suggests that old ages demands our special respect and that when elderly are admitted to long term care settings as a final option that they should receive care of the highest standard and the care should respect the dignity and individuality of the elderly person.

The majority of knowledge surrounding elderly people relies on professional expertise and is interested in the state of the elderly as objects (Quinn et el; 2005). It is
evident from the writings of the many theorists and subsequent government reports that meaning to life becomes increasing important with age. According to the report 1988 major planning of health services must be put in place to allow for the increasing percentage of our aging population. This review has looked at Irish and International literature on meaning of life within Nursing homes. However there has been little Irish research carried out in this area as it a new position Ireland finds itself in and can be traced back to the outcome from the baby boom of the 1960’s. Older people are a heterogeneous group and their physical health status, emotional and psychological needs and interests vary (NCAOP; 2003). Therefore our response to this must take account of the carried needs of this aging group.
Methodology

The research method used in this study was qualitative. The reason qualitative was chosen was due to the study focusing on the meaning of life for elderly in a nursing home in Ireland and Qualitative research methods were chosen as it produces data rich material. Semi structured interviews were carried out as this would allow participants to express themselves freely and also made sure certain questions were being answered for the purpose of the research.

Participants

The participants used for this research were both male and female. They included two males and four females. For confidentiality reason the participants interviews will be labelled using letters (Interviews A-F). Access to the participants was gained through informal contact. In order to gain access to the participants the researcher contacted the local public care home and asked for permission to interview six of their residents. The participants were made of both male and female to allow for a varied response in relation to the research topic, by doing this potential gender bias was eliminated. The age profile of the participants varied between the ages of mid sixties to late seventies. Many of the participants who were approached to take part in the interviews refused as they felt they were incapable of participating to the best of their ability due to age and health issues. Even though all participants are residents of the Nursing Home they all come from a varied background. Each participant was informed of the layout of the interview and why it was
being conducted before research was carried out as many were concerned about confidentiality issues.

**Apparatus**

All interviews were conducted using a tape recorder. This was the most appropriate and effective way of gaining the data needed to carry out the research study. By using a tape recorded it was insured that the data was assimilated accurately and consequently transmitted in an effective manner.

**Procedure**

The study aimed to find out the different meanings of life that elderly people have in a certain Nursing Home in Ireland.

The interviewers were conducted in the Nursing home as it would not have being possible to expect the participants to come to the researcher. Before the interviews were carried out the interviewer gave the participants a brief introduction as they had already been informed in detail about the study. Each interview had met the interviewer previous to this so there was already an informal relationship was already formed. Previous to the interview date each participant was asked to sign a confidentiality form and these were collected before the interviews began. Each participant was informed that at any time they could stop the interview for any reason. To carry out the interviews each was participant was interviewed on their own for privacy and confidentiality reasons. Each participant was brought into a room on their own with the interviewer and the interviews began. The interview was recorded using a Dictaphone as this was the best way to collect the data precisely. Each participant was asked the same 14 questions for fairness and accuracy. As the participants were of old age they was no time limit on the interviews, this was to allow for any
difficulty with understanding the questions, or other issues which may have arose.

This research was carried out by looking at the main topics which give meaning to life for elderly. The main topics that were covered during the interviews were

1. Family Relationships
2. Importance of Religion
3. Activities
4. Importance of Relationships with Staff

Limitations

There were many limitations while conducting this study. Firstly as the participants were chosen by the Nursing Staff of the Nursing Home the sample was not random it was hand picked. Also as the sample was small it can not be considered completely representative of meaning of life for elderly as a whole as only six people were interviewed. The participants were of old age so their communication ability was not as strong of that of a younger age group and at times it proved difficult for them to express themselves.

Ethical Concerns

While conducting the research study, ethical concerns arose for the participants. All participants raised concerns about who would have access to their interviews and as a result their personal information. Before undergoing interviews, each participant was given confidentiality forms which were signed by the researcher, which informed the participants that no copies of the recordings of their interviews would be passed on and that was only being used for research matters. As part of the confidentiality forms it states that the
participants names will be referred to as letters (A-F) and the Nursing Home would not be named in the study. They were also informed why they were asked to part take in the study, and that it was an opportunity to give an insight into what provided elderly people with a meaning to life. A copy of the confidentiality form can be found in the Appendix. Participants were informed that at anytime through out the interview it could be stopped if they felt uncomfortable and/or no longer wished to continue.

**Data Analysis**

The research will be analysed using Thematic Analysis as it is a ‘method for identifying, analysis, and reporting themes within data’ (Braun and Clarke, 2006; 79).

Thematic Analysis (TA) is the chosen research method as the researcher is inexperienced in the area and TA is relatively easy method to learn and use. The main benefit of using TA is the data that is retrieved by the researcher is rich and detailed. The method for using TA is set in clearly outlined steps and so is easy to produce thematic analysis (Braun and Clarke, 2006). TA is the fundamental form of Qualitative Analysis. The method of TA is used in this study as it is used as it can be an essentialist or realist’s method, it is being used to carry out this particular study as it reports on experiences, meaning and reality of the participants (Braun and Clarke, 2006; 81). The main process involved in TA is coding. A code identifies an area of the data that is interesting to the analyser and organises the data into meaningful groups. From using the method of thematic analysis, themes were drawn which are seen as being important and having high value and meaning to the participants lives. These themes can be categorised under the following headings, family relationships, religion, staff relationships, activities, and staff relationships.
Results Section

In this section the results from the study will be analysed. It is important to note that due to the participant’s old age at times they struggle to hear or understand the questions being asked during the interviews. However they could express their views and thoughts very clearly when relating to their personal life experiences. While conducting the interviews the researcher noted that the importance of family relationships, lifestyle in Nursing home including activities and socialising, importance of religion, and relationships with nursing staff kept arising and were common themes throughout the participants’ replies. All these are a source of strength for the elderly people.

A majority of the participants described their backgrounds as being part of low to middle class family and never felt deprived of anything. “Looking back now I guess I was from a less well off family but sure I guess all families in my area then were the same”. Participants have expressed during the interviews that from a young age family relationships were of great influence on the upbringing. “I always had a very good relationship with my parents especially my mother and this relationship influenced how I bonded with my own children”

Family Relationships

The one theme that kept arising for the participants was the importance of family visits and how they were a source of strength for these elderly people. “My favourite day of the week is a Thursday when my son and his family come to visit me”. Participant F also gets visits from her family on regular basis and sees this to be the highlight of the day. “...I have a
large family I am very lucky to have a visitor at some stage of every day and because of this I feel like I have something to look forward to”. However Participant E had to move into the Nursing home as he had no family to take care of him anymore so he sees family visits as something he wishes he could have. “Ah yeah I do get very lonely when I do see all they others getting visits from their children and I’ve nobody to look forward to seeing but I enjoy talking to other peoples visitors”. One can only wonder the void the lack of family visits leaves on his life. Not only do family relationships provide the participants with company, they have someone to confide in and share their feelings with but they also receive the updates on their friends and local community, they hear the news from home, for them family visits is about bringing a ‘part of home to them’ “It does be great to see the children coming in not only to see new faces but to get an awl update on the community and what’s happening”. Many of the participants are grandparents and high point of their week is being visited by their grandchildren, and to hear their grandchildren’s stories from school and they in return can also pass on traditions to their grandchildren, “Aw yes seeing my grandchildren make me so proud and to hear their stories is my favourite part of week”. So it would seem moments of closeness have meaning to life no matter what the setting.

Some of the participants said that in collaboration with the staff of the Nursing Home sometimes their families take them home out for the day, and they could be looking forward to this for months. Participant D recalls the most recent time he was brought out of the Nursing home for the day. “It was about 3 months ago, it was my granddaughters wedding and I was looking forward to it for nearly a year, it was great to be out meeting new and old faces”. Participant B also gets this privilege but more regularly. “I do be able to go to my son’s house every Sunday for dinner as he only lives down the town, it does be my highpoint of the week”.

For this elderly group, family visits fulfil the need for the love of family, companionship
and the linking of the past and the future.

**Religion**

Each participant that took part in the study came from different backgrounds, as they are elderly people they have very traditional backgrounds but one need that was evident is their will to hold onto their Catholic upbringing which gives them meaningful purpose in their life. “Growing up as a young girl I always went to mass on a Sunday”. For all participants religion still has a very strong impact on their lives in the Nursing home, they were proud of their religion and proud of the fact that they carried it on in hard times. Participant C says that the high point of her day is “going down to the chapel in the home for an hour or so every day”. Participant A also empathises with this as she believes this to be her own time during the day where she is not disturbed, “I have time in the church to think and pray and not be interrupted by any of the others chatting”. Each participant finds meaning to life through religion and admits to it being one of the main reason why they get up in morning and the great comfort it gives to them. “My prayers are a really important part of my day and my strong faith gives me a reason to get up in mornings”. Religion is a major influence in the lives of the participants, due to their old age all participants have lost important family members to death. For the participants religion has been their main coping mechanism. Participant D expressed during the interview that their strong faith has helped them deal with their loss. “The loss of my wife about 10 years ago was obviously devastating but my faith in God and knowing I will be reunited with her has giving me a reason to live”. All participants expressed that religion offers them a hope in the face of death. “I don’t have a fear of dying at all, but without my faith in God I definitely would”. They also felt that their role in life was to pray for their children and grandchildren, for God
to keep them safe and direct them from harm. “I pray that my grandchildren will be safe on the roads and that I will live long enough to see them make their First Holy Communion”. This role also gives meaning to their life.

A common thread among the participants on religion is their unwavering testimony to their God, and their staunch belief in the good their faith will bring to themselves, their family, and the wider world. They feel they are not alone anywhere when they have their religion. Religion is undoubtedly a reason and a meaning for their Life.

Activities

During the interviews the research found that as part of the participant’s daily routine the occupational therapist visits them in the Day Centre to do activities with them. The participation in these activities is optional and not all of the interviewees take part. When asked on what the participants thought of the activities they all had different opinions. Participant C found them to be of great benefit to her and her life in the Nursing home. “O yes I do very much enjoy going down to the centre to met Sandra and she does organise lovely things for us to do after lunch”. While participant D felt that the activities were not any benefit to him but does see a lot of his fellow residents enjoying them “well now love they wouldn’t be my cup of tea but a few of the lads enjoy playing the bingo and what not”. When asked about their hobbies and interests before they moved into the Nursing home and if they still had the opportunity to continue many said they did. One in particular was an Art teacher and was thrilled when the Nursing home was able to meet this need. “…I was an Art teacher most of my life and do really look forward to art and crafts on Tuesday and Thursday afternoons, it does be good my arthritis too”. Participant C also agrees with this as she always had a keen interest in nature and gardening as loves that the Nursing home
can keep this interest alive for her. “Before I moved into this place, my garden was my pride and joy so it’s great that we have a lovely garden here and get the opportunity to take part in the care of it”.

The other participants looked forward to their daily chats with other residents who they have formed bonds with while being in the Nursing Home. “What I do really look forward to is meeting up with the other lads who do be interested in the hurling like me and watching the matches on the telly most Sundays with them”. Similar to this, participant D said he enjoyed going for a cigarette with the others. “We wouldn’t be allowed very often but when we do, I do love getting brought down to the smoking room with the others for a sneaky smoke”. During the interview it was noted that all the participants enjoy the traditional Irish evenings that are organised for them by the Nursing Home. Participant B gives an account of the Irish traditional evening when asked on his favourite activity in the Nursing Home. “On Wednesday evenings a few of the locals come up to the Centre and play for us and we have an awl dance and sing-along, it does be great fun”. From conducting the interviews the researcher found that activities with other resident’s with similar interests are of great importance to the participant’s daily lives.

**Importance of Relationships with Staff**

All participants believed that from their stay in the Nursing Homes whether short or long have formed good relationships with the staff. Each participant considers a good relationship with the staff of the Nursing Home to be of great importance. “O god yes, having a good bond with the nurses is great as they’d help you out that little bit more”. None of the participants in the interview expressed any problems with the staff and spoke about them in highest regard. “Ah now all the staff here are great, they’d have an awl
laugh with you as well”. Participant B has never in her time in the Nursing home ever felt deprived of anything. “No, now I could never say I have had to go without here, I do get all meals when I need them have a lovely comfortable be, safe environment and great trust in the people around me, sure what else do you need”. Participant F agrees with this but sometimes feels frustrated of his lack of independence at this final stage of his life. “No I wouldn’t say I have any problem with the staff, just some days I do get a small bit annoyed that I’m not able to do anything without their permission”. The participants admit to having better relationships with some members of staff then others but this is understandable. “Of course now we’d all have our favourites, I do get on well now with one of the older nurses as we are from the same area so we’d know a few of same people so we can have the odd chat about them”. One of the main issues that arose when speaking about the staff to the participants was the informal relationships they have with each other. “I know I’m not here as long as some of the others but I do like they way all the staff know my name and care for me in very friendly way”. Having staff, who show an interest in the participant’s lives outside the home came up in majority of the interviews. Participant D during the interview said he like that the nurses knew that he really enjoyed his desserts and has a sweet tooth. “... at dinner time I do get seconds dessert and biscuits with my tea after, I feel like the nurses really know me well” As the participants are residents of the Nursing Home and this is now their new home they feel it is vital they are treated by the staff with respect. “This is place is now our home so it wouldn’t feel right at all if the staff didn’t treat us well”.
Discussion

The section will be used to examine and analysis the findings of the study. It will then draw conclusions building from what has been learned through doing this research study.

Meaning of life in Nursing Homes

Meaning of life for elderly is found in different aspects of each person’s life. Having a sense of meaning and a reason for living provides elderly with opportunities for finding a meaning to their live (Moore et al; 2004). Battista and Almond (1973) agree with this statement by Moore (2004) that no one meaning can fit everyone’s life. Szeman (2007) found during the investigation that satisfaction of life for 75 elderly came from

- Family Relationship
- Social Activity
- State of Health
- Marriage
- Relationship with Children/ Grandchildren

The most recent report on meaning to life for Elderly was carried out by the Health Service Executive in Ireland in 2010. These two reports show a comparison on the different aspects that are of importance to the elderly. From comparing the two reports it is evident that the aspects of life which are important to elderly are the same no matter which country they are in.
During the interviews the participants referred to family relationships and visits to be one of the important parts of their lives in a Nursing Home. It was clear from the interviews that family relationship provides the participants with company and strength. Guse and Maesear (1999) showed in their study that interaction with family members provide residents with ‘personal comfort and mental stimulation’. Baumeister (1991) argued that meaning of life can only be attained when all ones values, purpose efficiency and self-worth have been met. Maslow (1943-1954) developed a hierarchy of needs which shows that each individual is motivated by needs. In simple terms what Maslow suggests is that the individual must attend to their basic psychological needs in the first instance, which is food, water and sleep, the basic requirements for survival. As the results of the research show that the participant’s basic psychological needs are indeed met. The next stage in Maslow’s theory is that when the physical needs are satisfied then the look for their safety and wellbeing, which again in this research the participants’ state that they feel safe in the environment of the nursing home. After the psychological and safety needs have been met, the individual looks to a feel a sense of belonging and acceptance. This was very evident in the research carried out as all participants felt the need for a bond with nursing staff and the involvement in social activities with their peers.

The next level of Maslow’s theory looks at the individuals need for esteem and respect this was evident in the research where participants involvement in the care of the nursing home garden gave them a great sense of self esteem. The final step of Maslow’s theory in relation to self actualisation alludes to acceptance of individual’s situation and where they find themselves at their time in life, for the participants of this research they expressed that in the face of death, prayer was an important consideration. Each participant
expressed that all their basic needs were being met in their nursing home, so it can be suggested that from this they have the opportunity to look for meaning to life.

In 1980’s the National Council for aging and older people carried out a study on the quality of life in nursing homes. During this study many issues arose surrounding the quality of life for the residents. Some of these issues included failure to meet residents’ needs or to create an environment to maintain their independence. However during the interviews none of the participants expressed any worries about their quality of care and were very satisfied with the environment of their nursing home at present. All participants spoke highly about the Nursing staff in their home and believe they each have a good informal relationship with them. From this one can conclude that because some of the issues which arose in the national council for aging and older people in the 1980’s are not issues at present in so far as the researchers result can show. However the National Quality act 2008 concluded that some of the issues found during the 1980’s report were still relevant in nursing homes today. Resulting from this and despite the results of the researchers study the thirty two quality standards as detailed in the 2008 NCA should be implemented and aggressively monitored.

What gives meaning to life according to Frankl varies from one individual to the other, but the most distinct sources are human relationships, individual goals and work. For the participants of this study it was seen that the meaning of life gained from their activities could be equated with that which others achieve from work. According to the HSE (2010) report activities provide participants with an avenue to relieve boredom and also as a form of stimulus. Szeman (2007) suggested that lively and momentous social interactions and activities increase the belief of the participants in meaning of life. The participants said that
the activities which were supplied to them by the nursing home provided them with entertainment and a form of recreation.

Frankl (1963) found Religion to be one of the most central needs for any individual no matter what age. In 1985, Missinne applied Frankl’s theory in ‘Reflections of the meaning of life in older age’ linking meaning of life to problems and needs of the elderly. His findings indicated that Frankl’s theory is particularly relevant to older people and their need for religion. According to Koeing, Kvale and Ferrel (2004) religion is the one aspect of life that remains constant for the residents while other aspects such as, state of health, begin to diminish. Religion acts as a social support for the elderly. The participants acknowledged religion to be the one part of their lives that they felt they could totally rely on and the foundation from which all others such as marriage, and family relationships develop from. Frankl in his description of “will to meaning” suggests in his writings that man's search for meaning is the primary motivation in his life and not a "secondary rationalization" of instinctual drives. This meaning as expressed by Frankl is unique and specific in that it must and can be fulfilled by him alone; only then does it achieve a significance which will satisfy the persons will to meaning. There are some others who contend that meanings and values are “nothing but defense mechanisms, reaction formations and sublimations. But Frankl himself suggests that he would not be willing to live merely for the sake of my “defense mechanisms,” nor would he be ready to die merely for the sake of his “reaction formations.” Individuals, however, are prepared to live and even die for the sake of his ideals and values; Frankl argues that failure to achieve ‘will to meaning’ results in psychological distress for the individual. The will to meaning for these residents included relationships with family, children, grandchildren and staff, religion and social activities.
Viktor Frankl's theory concerning meaning of life is applied to specific problems and needs of the elderly. Four aspects of his theory are emphasized (a) the creation of meaning of life through choices made by the individual, this study concurs with this theory as the results show residents who partake in the activities find them to be meaningful to their life. (b) The importance of values as a basis for meaning, is evident in the results of this study as outlined by the great sense of meaning the participants get from passing on their sense of values and religion to their children and grandchildren. (c) The responsibility each person has for right action and conduct, this can be seen through the reflections of one of the participants during the interview on how the nursing home has become their ‘home’. (d) The concepts of both ultimate and provisional meaning are evidenced where participants speak of their daily dedicated times to connect with their God, while on some occasions this maybe time spent alone in the church of the nursing home. Interviews with older people were used as the foundation for further reflections on Frankl's theory and application of the four specific aspects as outlined above. They also indicate that Frankl's theory is particularly relevant to their need for spiritual values.

The HSE report (2010) suggests that companionship and a good social life were important components for having a meaning to life; the results showed that some of the participants looked forward with great eagerness to attending special family occasions and family visits. This psychological need proved to be met in this study and met well however, Ronneberg (2008) stated that only rarely do nursing homes meet all the psychological needs of their residents once again the research shows that one of the participants stated that some the organised activities did not have any perceived benefit or meaning for him. However all participants expressed the feeling that all their basic needs were being met in the nursing
home. Ronneberg (2008) also suggests that having a place and time to be alone with their thoughts was another very important aspect to the quality of life for residents again this research shows that some of the participants found great meaning in being able to be alone in the church allowing them time to think and pray. Hayley et al (1996) states that elderly living in settings other than their own homes such as the residents of this nursing, are at more risk of abuse or neglect, these results totally rebuke such findings as a lot of the participants attested receiving good care and having good relationships with the staff of the nursing home. In so far as some of the participants spoke of the highest regard by which they hold the members of staff, for example they stated about the way nursing staff would never deprive you of anything and indeed would have an awl laugh with you, and how the bed was always comfortable and their basic needs were met.

Szeman (2007) studies showed that for the older person, marriage and their relationships with children/grandchildren was the most important factor in finding a meaning for life, in this research it shows that it is related but not identical as marriage was not evident as factor for these participants. Robichaud et al (2006) found that the three most important quality of life indicators for residents were to be treated with respect. This research proved these findings as the participants stated it was vital that they be treated with respect. The policy planning report The Years Ahead (1998) suggests that old age demands our special respect and that when elderly are admitted to long term care settings as a final option they should receive care of the highest standard. A finding of this research suggests these participants are receiving that care.

The results of this research study have added to the previous literature while also reinforcing the previous finding surrounding this topic.
Appendix 1

*Interview Questions*

1. Hello ______, How are you today?
2. Do you mind if I ask you about your background and how you came to be here in this Nursing Home?
3. Are you originally from Loughrea or did you just move for the Nursing Home?
4. Approximately how many years have you been in the Nursing Home?
5. Would you mind describing, for me, an average day in the Nursing home?
6. What do you find to be your high point in an average day?
7. Do your family or friends visit you often, do you enjoy this?
8. What activities do this Nursing home offer, if you do participate which do you enjoy most?
9. Do you enjoy being here anything you dislike?
10. What is the one thing you look forward to every day?
11. Is the staff here at friendly and do you find you have a good relationship with them?
12. How do you feel you get on with other residents and do you find these relationships important?
13. Before you moved in to the Nursing home what was you main interest/hobby? Are you still able to enjoy this hobby?
14. Do you ever experience loneliness in St. Brendan’s? If so how do you overcome this loneliness?
15. Do you feel you have lost a sense of identity while living here? If not how have you maintained it?
16. Do you feel all your needs are being met here?

17. Anything you miss from your life before moving in to this Nursing home?

Appendix 2
Consent Form

To Whom It May Concern:

This research study is to be used for educational purposes only. All interviews will be safe guarded by the researcher and will be correctly disposed of after use. All participants will be given complete confidentiality and the area of the study will also be kept unnamed during this study.

If you are happy with all confidentially issues please sign and date.

Signed: __________________________________________

Date: _______________________

References for Literature Review

Books and Journals


**Report**

The Meaning of Life for Elderly in a Nursing home.

SARAH O’ ROURKE (1245233), NIALL HANLON

Abstract
This thesis will explore the aspects that provide meaning of life for elderly in a Nursing Home. The study investigates the different views and attitudes the participants have towards the common themes which provide meaning to their lives. The common themes that were researched were the importance of family relationships, religion, activities, and staff relationships on the lives of the elderly participants. The study was done using Thematic analysis.

Introduction
This research study will endeavour to give an indebt summary of the trends and how the attitudes towards those trends have manifested in the writings and reports published by both theorists and government bodies. The main theorists discussed are Frankl (1963) and Maslow (1943-1954).

Method
The research method used in this study was Qualitative Analysis. The Qualitative research method thematic analysis was chosen as it produces rich data material.

The number of participants interviewed to carry out this study was 6, the 6 elderly were made up of both male and female.

All interviews were recorded using a tape recorder. Each interview was conducted in the Nursing home. All interviews were conducted individually to allow for confidentiality of each participant.

Results
The study found that the there were four common themes discussed by the participants. Each participant expressed the importance of family relationship, religion, social activities and staff relationship as important factors is gaining their meaning of life in the Nursing home.

Discussion
Through analysis of the results the researcher found that results supported much of the previous literature however it can be suggested that there is a gap in the literature regarding Irish Nursing homes.

References
The key references used in this study are:
Frankl, V. E. (2004) Man’s Search for Meaning
