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**GET YOUR 3F'S MEMBERSHIP FOR A SUCCESSFUL AGING  
JOURNEY**

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## “Get Your 3 F’s Membership for a Successful Aging Journey”

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Whenever our families plan vacations, we prepare for the journeys with a destination and luggage. We also make a call to the Triple A (American Automobile Association) for resources to

help us complete the trip. AAA has planning tools – maps, motel guides – and a number of strategies for us to use if we should experience a flat tire, a detour, a collision, etc.

Living toward aging may also be seen as a journey. A successful aging journey also involves some planning with destinations, baggage, and a membership in the “Triple F” – Faith, Family, and Friends. These three resources and a proven strategy can help people navigate the detours, collisions, and flat tires in life with positive outcomes.

Today we plan to share some experiences and stories that will encourage you in your personal aging journey as well as augment your role as a social worker who helps others in their aging journeys.

RESOURCES				
S T R A T E G Y		FAITH	FAMILY	FRIENDS/COMMUNITY
	VALIDATE			
	REASSURE			
	RE-DIRECT			

This matrix of Resources and Strategies helps demonstrate a process of role-re-identification that we suggest must take place for a person to go from the beginning of experiencing a life challenge or crisis to successfully moving on in the aging journey.

(At this point participants share definitions of a “successful aging journey” – either on 3x5 cards or orally or in groups of 2 or 3. And perhaps even name one thing that makes an aging journey “unsuccessful.”)

**Successful Aging Journey Defined:**

We describe a successful aging journey as

*navigating the challenges aging brings with an outcome of a positive role re-identification process.*

Challenges such as loss of health, spouse, job, home, or other relationships require an adjustment of role identification in order for the individual to maintain psychosocial well-being. Those with strong membership ties to faith, family, and friends/community are able to make the adjustment or accomplish role re-identification because all three resources share the important strategies of validation, reassurance, and re-direction. It is important for individuals to make a conscious effort to connect and maintain their membership in the FFF resources throughout the aging journey, understanding that the resources themselves may “change face” as the exchange continues between the individual and the FFF resources.

The aging journey may include some hazards and when these occur the elder is then at risk for an increase in “mood indicators”, disruptive behaviors, and isolation or loneliness. This risk is compounded when the individual has disconnected from one or more of the FFF resources or the resources have decreased over the years. A common response to increased mood indicators, bad behaviors, and isolation or loneliness by family members or staff of a care facility is to prescribe medications. However, if measures are taken to produce a successful role re-identification, the need for psychotropic medications can decrease or be eliminated altogether. An unsuccessful aging journey can be described as the outcome following a resistance or an inability to accomplish the role re-identification when changes or challenges occur.

## **The Components of the Matrix: Strategy and Resources**

### **The Strategy - Validation, Reassurance, and Re-direction**

Social worker, Belinda Peterson, was introduced to the 3-step strategy of validation, reassurance, and re-direction with reference to managing the behaviors of residents with dementia some time ago at the Mayo Clinic in Rochester, MN. Since then she has practiced the strategy and, on one occasion, learned that a resident who was calling out persistently could be re-directed if the caregiver took the time to practice the steps of validation and reassurance first. To simply tell the resident to “Stop that!” or to attempt to re-direct the behavior without the first two steps is almost always unsuccessful. However, if the caregiver takes the time to validate: make eye contact, use calm/gentle verbal tones, a touch to their arm or shoulder, or ask questions or repeat their concerns back to them, then the elder feels their concern was treated as important. Once the elder feels validated, they are open to the next step: reassurance. Using words like, “I will help you” or “It’s been taken care of” or “I will call your family and let them know” gives the resident the feeling of hope that the problem will be taken care of. Sometimes reassurance requires the caregiver to enter the reality of the elder at that moment and words of reassurance would take the form of that reality: “I will call the hired

hand and make sure the cows are milked’ or “It’s Saturday and you do not have to go to work today.”

Once the resident is experiencing reassurance, then the step of re-direction can occur. After receiving the necessary validation and reassurance, the elder with dementia can be re-directed to a favorite activity such as music, TV, eating, visiting another resident, resting, etc.

About a year ago, Belinda had an epiphany moment when she realized this same 3-step strategy happens in all aspects of her own life when there’s a change or challenge to be resolved, and that it’s Faith, Family, and Friends that implement the strategy. As in the case of the calling-out behavior, life challenges and changes in health, relationships, jobs, and living arrangements all “cry-out” for a strategy where the positive result of role re-identification occurs so the aging journey can continue successfully.

This 3-step strategy will be better understood when one reviews how the FFF resources implement the validation, reassurance, and re-direction strategy. The connections with faith, family, and friends are built and maintained through communication of common life experiences. Once the connection is strong and active, the elder is able to receive the validation, reassurance, and re-direction needed to navigate the challenge successfully. That is, an adjustment of role identity occurs and the journey continues. Risks of mood disorders, disruptive behaviors, and isolation and loneliness are reduced or avoided all together.

### **Resources: Faith, Family, and Friends/Community**

#### **Faith**

This presentation presumes the Christian faith as the resource discussed in this matrix both because of the context of this conference and our personal experiences. However, the faith used as part of this strategy need not be Christian nor even tied to a formal religious base.

Faith is the most powerful and intimate resource on the matrix. Both resources of family and friends can access the faith component and use that as a motivator and power source for their exchange with the elder. Faith is described as the most intimate, because this relationship does not depend on the presence of others in order for the exchange of communication to occur. It can take place in a church setting, but it can also take place when one is alone in bed at night and unable to sleep or when one is walking on a woodland path. The term spirituality may be one that is more comfortable for some.

In the Christian faith, one connects with their creator, God, in such a way that they experience His forgiveness, promises, guidance, comfort, and presence through the Holy Spirit. This relationship is strengthened and grows when a two-way communication occurs through prayer, reading the Bible, singing hymns, and maintaining a fellowship with other believers.

The social worker who is both compassionate and service-oriented may be the one most able to encourage and augment the resources of faith. Drawing on one's own faith as an example and encouraging the relationships with others of faith in the facility or those in community churches and the use of chaplain's services all contribute to a successful journey. An example from a student's conversation with one elder (*shared with permission*):

*"I talked a little bit about my religious upbringing and the struggles and conflict that I have had with my faith and asked if he had ever struggled with his faith. He confided in me that he was sort of struggling with it currently and we talked a little bit about death and heaven. I was really tempted to make a suggestion to help with the "strange" way he had been feeling lately but then I remembered that focusing on feelings was the most important thing in this stage of our relationship so I just listened and asked more questions about what it was like for him to be struggling at this point in his life. He seemed relieved to be talking about it and that made me really happy." (L.C., 10/13/2011)*

When a crisis/challenge occurs in the aging journey such as the man in the example was experiencing, elders can be guided to use the faith resources in their lives to receive validation, reassurance and re-direction. Validation examples may come from faith resources including scripture (Psalm 139:13-14, John 3:16, Isaiah 41:10, Psalm 23), music that declares God's love and care for us, the faith community's acts of kindness, and answered prayer. Reassurance examples include scripture (Hebrews 13:5b, John 14:25-27, Galatians 5:22-23, Romans 8:28), music that conveys the message of God's help and transforming the trials into something good, words of encouragement from the faith community, and answered prayer. Re-direction examples include scripture (Exodus 20:1-17, Galatians 6:9, Colossians 3:1-17), music that encourages us to change from a destructive behavior or attitude to one that is pleasing to God, the support of the faith community coming alongside to help the needed change to take place, and answered prayer. As the one in crisis seeks meaning and relief through their faith resource, not only do they experience the strategy components that adjust their identity role, but they also strengthen the connection. This then makes the faith resource an even stronger component for the next challenge or crisis in the aging journey.

Faith may not always be a positive resource. Baggage from negative religious experiences or from times when the elder felt "let down" or "left out" by a religious community may stymie efforts to help the elder draw on faith as a resource. In these instances connecting with a more general spirituality may be useful.

## Family

This resource may be those connected to the elder by blood, marriage, or an association with a level of intimacy that exceeds the resource of friendship/community. This connection is also very powerful in the elder's life, and sometimes can be wielded in a negative way such that a harmful identification role is caused. If the elder identifies the family influence as baggage rather than a resource, the social worker may have to focus on helping the elder release or resolve this history for a successful aging journey to continue. The strengths found in faith and/or friends/community could be a means of counter-acting this harmful self- image. Forgiveness is a value exchange that is particularly helpful when family members are unable to mend the past and move toward healing.

When the family connection is a positive one, the elder can experience promises/commitment, comfort, guidance, and presence through this resource as well as through the resource of faith. Like faith, this connection is maintained and strengthened through communication exchanged between the elder and their family members or those who act as family. This communication can take place through verbal, non-verbal, written, and electronic exchanges. The non-verbal messages from touch, tone of voice, eye contact, and body stance are especially powerful in communicating validation and reassurance. Written communication has the advantage of giving the elder the opportunity to "re-live" the exchange as often as they choose to read it. For example, one resident in the nursing home with a severe hearing deficit keeps a binder of the e-mails sent to her from her son. Even with the adaptive telephone equipment, she finds the written word much more effective as a source of validation and reassurance.

All forms of communication build a history between the elder and their family so that when a crisis/challenge occurs, the strategy of validation, reassurance and re-direction can take place. Over time, the elder will develop a role identification that helps them adapt to the change the challenge brought and continue their successful aging journey. For example, a health challenge places an elder in a nursing home for a long-term stay. The social worker may need to guide the family in using verbal and non-verbal communication that validates and re-assures the resident, because the family may be experiencing fear, doubts and guilt about the nursing home placement. If key family members transfer their negative personal emotions to the resident, intentionally or not, it will hinder the process of role re-identification that must occur for that resident. If the family member cannot accept the physical decline of the resident and their need for skilled-nursing care, then the resident will feel like a burden or worse, yet, a failure. The social worker will need to identify these dynamics and perhaps focus on the other FFF resources to assist both the resident and the family with necessary role re-identification for all. Validating the family members' feelings and reassuring them with information will re-direct

them to a place where they are more confident in the care given to their resident. This in turn will make them stronger advocates for the resident's transition.

### **Friends/Community**

This resource is usually the least intimate of the three. It is developed in a setting such as the school yard, neighborhood, work place, or a regular community gathering. With less intimacy comes a lesser power, but it also can provide key exchanges where validation, reassurance, and re-direction can occur. Friends may be those of long-standing or may be newly developed; the community may be a home-town or the community of the nursing home.

Sometimes differences in cultures can inhibit the exchanges with this resource. However, a positive exchange of validation, reassurance, and re-direction can bring out the strength of diversity, making it a more powerful resource component in the matrix. For example, if an elder was able to develop a relationship with a member of their community that is unlike their faith or unlike their family, then they already have the advantage of experiencing role adaptations which are constant in the aging journey. If their motivation for having a positive exchange with someone or some group different from themselves came from their faith and family resources, the friend/community component grows even more powerful in the exchange towards role re-identification strategy.

Like the faith and family resources, a strong friendship or community tie can also include forgiveness, promises/commitment, comfort, guidance and presence. The social worker would be wise to guide the elder in exploring the aspects of the community that are available to assist them in their transitions. In the nursing home, there are volunteers, church groups, civic groups and school children who are invited to "grow" this resource for the resident.

### **Two examples: Gen and Loyal**

The stories of two individuals demonstrate the exchange and process of the elder with the matrix for a successful/unsuccessful aging journey.

Gen, age 82, was a secretary who never married. She experienced physical limitations of low vision. She attended church but it seemed out of habit or obligation. Nieces, the daughters of her twin sister, are her only family and visit infrequently. Gen's judgmental nature and desires to control everything limit her enjoyment of community situations. It is clear that limits of Gen's FFF resources make it less likely that she will have a successful aging journey unless significant interventions are made.

Loyal, age 82, was a Lutheran pastor and bishop. He enjoys strong bonds with his parents, wife, children and grandchildren. He is wheelchair bound with right side weakness. He is actively



connected to St. Olaf College and the Northfield community. He finds opportunities to spread joy through small acts of kindness daily and rebounds from the “road hazards” that have come his way, in large part because of the strength of his Triple F resources.

### **Roles of Social Work and Social Work Education**

We’ve mentioned the role of the social worker in support of a successful aging journey and now would like to elaborate. The primary task of the social worker is to identify the active FFF resources in the elder’s life, to assess their strengths, and then create strategies to strengthen those resources that are weak or non-existent. Weak resources may be strengthened and resources that are missing may be replaced with new relationships. The social worker will guide the elder through the strategies of validation and redirection to role re-identification whenever the “road hazards” in the journey appear. And at every turn the social worker can help the elder cope – and assist other resources to help cope – with the “baggage” that works against a successful aging journey.

Social work education can also include this approach to resources and strategies when preparing students to help elders have a successful aging journey. The profession of social work increasingly includes faith, spirituality, and religion as factors to be considered among a client’s strengths. It has emphasized the role of spirituality in assessment and encouraged programs to teach students to expand the bio-psycho-social assessment to include the spiritual resources. Students must be introduced to persons in many stages of life including the young old, the well-elderly, and the frail elders. Students must be helped to understand the roles of elders in families and communities and how they, as social workers, will be working to maintain those connections. It is also beneficial to help students prepare for their own personal aging journeys and to encourage them to give thought in their younger years to the ways in which they will develop their Triple F resources so that when they encounter the hazards of life’s journey they will be able to grow stronger through them.

A group of senior social work students who interviewed elders in nursing facilities in Northfield, Minnesota, last spring found “that relationships with family and friends are one of the most important aspects of aging.” These two F’s were rated as the two most important factors in the aging process by interviewees. A quote that was representative of attitudes about friendship is: “I guess I’d enjoy meeting new people; I miss friends who have passed away. You have to learn to accept life and death.” Spirituality was also significant for this group. Practices of spirituality – attending church, reading devotional literature, and praying – were very important to many of those interviewed.

It should be noted that the social worker should make a determined effort to maintain a personal FFF membership to empower their journey. Using the validation, reassurance, and redirection strategies in relation to each resource can help the social worker guard against job hazards such as burn-out, depression, and over-load.

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