Ageing Transitions: Exploring the experiences of older adults adapting to residential care home life

Research questions:

- How do older adults make sense of and navigate their care home transition?
  1. From the individual’s perspective, which factors help a transition to be successful?
  2. From the individual’s perspective, which factors cause problems in transition?
  3. Are identifiable strategies employed by the older adults to make sense of their transition?
    - If so, what do those strategies tell us about ageing transitions more generally?

Key aims:

This PhD will explore the experiences of older adults as they adapt to the residential care home environment. An overarching intention is to situate the individual undergoing the transition as the primary source of knowledge in order to gain an understanding of this process derived from experience. By carrying out this research, contributions will be made to the knowledge base regarding ageing transitions; specifically that relating to residential care homes. It is hoped that through the research process, influential components and coping strategies employed by the older adults to successfully navigate this transition will be uncovered.

Literature review:

A tentative exploration of the literature reveals an apparent fixation on the experiences of those who could be classified as being in the periphery of the care home transition; such as family members of the individual (Eika et al, 2013; Kellet, 1999) or care home staff (Bauer,
These individuals can occupy a primary role in assisting older adults make a successful transition (Brandburg, 2007), therefore, their perspectives are undeniably important and worthy of academic study. However, the focus of this thesis will be to explore such transitions from the perspective of the individual actually experiencing it. Indeed, circumnavigating the perceptions of the individual and focusing upon the impact this transition has upon those around them could be said to perpetuate the ‘burden’ rhetoric which continues to surround the idea of ageing within contemporary society (Walker, 2014).

Examination of older adults’ experiences in residential care homes is not a new line of enquiry. From the classic sociological accounts of Townsend (1962), Booth (1985) and Willcocks et al (1997) to more practitioner-focused studies (Brooke, 1989; Chenitz, 1983; Iwasiw et al, 1996; Patterson, 1995; Porter and Clinton, 1992; Wilson, 1997), a considerable body of work has contributed to knowledge in this sphere. However, it could be argued that the individual studies have lost a measure of contemporary relevance. An amalgamation of social changes such as improvements in public health, living standards and developments in health services have altered the structure surrounding these institutions (Victor, 2005). At the same time, ideas surrounding ageing have been reconceptualised; although undue emphasis continues to be placed upon the negative impact an ageing population may have upon society (Seabrook, 2003). An evolving academic notion within the social sciences challenging this negativity and reformulating assumptions held about growing older is the concept of ‘active ageing’ (Bowling, 2008; Walker, 2002; Clarke and Warren, 2007). Nevertheless, analyses by other commentators (Higgs and Gilleard, 2015) offer persuasive evidence of the emergence of a ‘fourth age’ which embodies the most feared and marginalised aspects of old age. As a ‘social imaginary’ that is shaped and maintained by social, cultural and political discourses and practices dividing later life, it is important that its significance is also considered in the context of transitions into residential care. In addition, a locally-based study of such
transitions would be welcome since much of the research focusing upon the individual experience of the residential care home transition appears to have been undertaken outside the United Kingdom.

While exploration concerning older adult transitions to residential care home life peaked in the 1990s and has continued to diminish in prominence (Brandburg, 2007), recent population projections for the United Kingdom suggest it to be an increasingly significant area of study. More than 1 in 12 of the population are expected to be 80 years old or over by mid-2039, situating older adults as an increasingly prominent feature of our society (Office for National Statistics, 2015). Previous research has shown that 18.2% of older adults aged 85 years or over live in residential care homes (National Institute on Aging, 2006), with 1.5 million of the 1.6 million care home residents at the time of measurement being 65 years or older (Jones, 2002). Utilising these statistics relating to ageing and the projection that the overall population in the United Kingdom should reach 74.3 million by mid-2039 (Office for National Statistics, 2015), one can calculate that potentially 1,126,883 older adults will have to experience this transition themselves by 2039. Following these suggestions, it becomes apparent that a lack of conversant academic research within this area results in a relatively unchartered life stage transition from the individuals’ perspective which must be addressed in order to reflect the ageing population in which we find ourselves.

In response to growing costs of residential care support and the preference of many older people to remain, with care support, in their own homes there has been a policy swing in recent years towards providing assistance for older people in order for them to live independently at home for longer (Department for Communities and Local Government et al, 2012; Department for Communities and Local Government et al, 2015). Although it must be noted that despite this adjustment, the residential care home population for those aged over 65 years has remained relatively stable since 2001 (Office for National Statistics, 2014).
Despite this population stability, policy changes surrounding the experiences of older adults remain important as a possible explanatory tool. Specifically, these changes may constitute an important aspect in understanding this transition from an individualised perspective by exploring the opposition between individual agency and societal constraint. In addition, the association of residential care homes as ‘dying spaces’ (Hockey, 1990; Hockey, 1999) ought to be a facet of investigation. It is believed that framing this phase as a dying transition somewhat undermines the experiences of the individuals’ whilst actually living within the care homes. Indeed, care homes as a place of death accounted for only 12.1% of deaths for people aged 75 years and over in England between 2006 and 2008; with hospitals accounting for 58.4% and an individuals’ own residence accounting for 15.5% (National End of Life Care Intelligence Network, 2010). The very definition of ‘transition’ refers to ‘the process or period of changing from one state or condition to another’ (Oxford Dictionaries, 2015; emphasis added) thereby meaning the move from an individual’s previous residence to a care home ought to be defined and explored as a life stage transition rather than just an end point. Although it is recognised that a transition of this kind is often initiated due to a point of crisis within an individual’s care, challenging this pervasive assumption of the care home environment as simply a place of death is an underlying research objective.

**Impact:**

The findings of such research may be of interest to scholars examining contemporary ageing transitions, charities and organisations who provide advisory services to older adults, individuals employed within residential care home environments and older adults themselves. It would be an underlying aim of the project to make the findings as accessible as possible for those who may benefit from them.
Methodological framework and methods:

Having already established the overarching motivation for conducting research concerning this particular theme and population, it becomes necessary to reflect upon how this can be suitably accomplished. Due to the nature of the research, an inductive qualitative approach is proposed because it is not possible to identify key variables which shape older people’s experiences from existing outdated research (Terre Blanche, Durrheim and Painter, 2006). Furthermore, a qualitative approach is best suited to explore the complex reality of older adult transitions in residential care home environments whilst allowing for the topic to be investigated thoroughly (Ritchie and Lewis, 2003). In order to provide the project with contextual and nuanced data, an ethnographic immersion within the social milieu alongside semi-structured interviews - with those willing and able to participate - is considered the most appropriate combination of methods for this topic and purpose. This approach is deemed as particularly suitable due to the experiential emphasis within the project which requires both important situational aspects of the transition (Pawluch, Shaffir and Miall, 2005) and the richness of individual experiences to be captured (Labuschagne, 2003). Semi-structured interviews in particular ensure a level of fluidity is retained allowing the researcher to continually fine-tune and refocus the interviews based upon emerging themes (Marshall and Rossman, 2011) whilst also attempting to maintain a greater level of reliability and continuity between the various interviews (Silverman, 2011). An initial interview will gather relevant information about the participant such as biographical details, previous residency information, the conditions surrounding the decision to move and their initial reaction to the care home environment. A further interview will be carried out with the individual after approximately one month in order to explore the research questions more fully.

Conducting the interviews themselves within the care home environment is particularly important and will allow for the social milieu of the home to be incorporated into the
experiences reported by the individuals interviewed. Additionally, one would hope that the care home would provide the participant with a more comfortable interview environment while minimising effort to participate thereby increasing likelihood of contribution (Belza, 1996). Observations undertaken while conducting the ethnography and inspection data provided by the Care Quality Commission (2015) will combine with the interview data in order to gain wider contextual information about the environment within which the older people live.

Sample:

Access to a suitable sample would be achieved through the systematic identification of residential care homes within a specified research area (i.e. Yorkshire). Once a sampling frame of participatory organisations is collated, five residential care homes will be chosen from this longer list of residential homes in order to initiate fieldwork. Bearing in mind that residential care home admissions vary considerably, it is hoped that alongside the ethnographic aspect of the project; four interview participants will be identified within each of the five homes. This particular number of sites was chosen in order to ensure a level of variability whilst also remaining manageable in terms of conducting the ethnographic and in-depth interview elements. The purpose and nature of this project does not lend itself to rigid and systematic sampling as such, resulting in more of a grounded approach being implemented in this instance (Glaser and Strauss, 2012). Additionally, the ‘appropriateness’ of the participant will inevitably be negotiated with a knowledgeable gatekeeper of the organisation (King and Horrocks, 2010) whilst also ensuring the individual is either a new resident post contact or one who has been living within the care home for only a short period of time. These conditions are implemented to ensure that interviews are carried out in a timely manner, while initial transitional experiences are prominent.
Ethical considerations:

Appropriate sections of ‘Research Ethics: General Principles and Statements’ as provided by the University of Sheffield (2015) will be observed. However it must be acknowledged that within such a research environment, and considering the transition these individuals are undergoing, one must be particularly mindful to ensure participants are well aware of the ‘voluntariness’ of taking part so they do not feel obliged to contribute (Jamieson and Victor, 2002: 211). Other ethical considerations will be a process of ongoing renegotiation due to the complex and shifting research setting; with the wellbeing of participants at the forefront of consideration (Birch and Miller, 2005).

Resources:

Previous experience of using qualitative analysis packages as a data management tool proved very successful therefore it would be an intention to source access to ATLAS.ti which will significantly aid thematic analysis of ethnographic data and interview transcripts. Using this package will support the development of a ‘grounded theory’ approach allowing for data to be conceptualised and categorised appropriately thereby creating a robust foundation for theory building (Corbin and Strauss, 2014). It is hoped that funding can be secured in order to overcome practical obstacles in accessing resources, such as financing fieldwork travel and any other associated costs.

Proposed PhD timetable:

A standard three year programme will be suitable due to previously completing an ESRC recognised Master’s degree prior to commencement of the PhD.
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