

MEANINGS, BELIEFS, AND WELL-BEING: A QUALITATIVE STUDY OF
SOCIAL SUPPORT AMONG AFRICAN AMERICAN ELDERS

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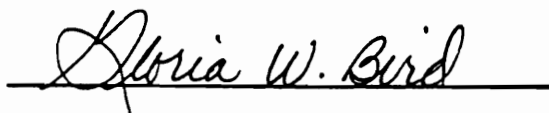
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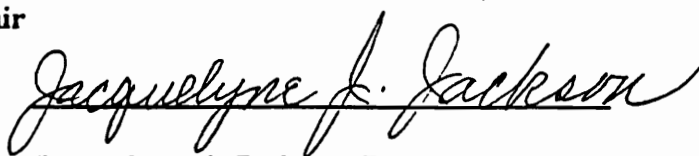


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By

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(ABSTRACT)

This study was designed to examine the concept of social support from the perspective of 30 African American elders, aged 70 years and above, with an age range of 70 to 99. Guided by the conceptual framework of stress and coping, this research examined the personal beliefs, as well as past experiences that motivate use of social support; when, how, from whom, and under what circumstances support is requested (or offered); and evaluations of the positive and negative outcomes of supportive interactions.

The following research questions guided this study: (a) Whom do African American elders name in their most important network of supportive others and what meanings do they attach to the support? (b) What beliefs motivate and define African American elders' involvement in a social support network? and (c) How do African American elders evaluate the consequences of their supportive interactions?

Qualitative in-depth interviewing was the method of data collection. Findings from this study showed that the African American elder informants were embedded in supportive networks, deeply devoted to family, friends and other committed partnerships, had strong religious and family ties, and had resiliency relative to the life stage of older adulthood. The foundation of their supportive interactions was based on their belief systems as well as their desire to reciprocate support. These informants were atypical by education and occupation. Varied coping resources emerged from the study including interdependence, spiritual beliefs, family philosophy, concern for others and self-protection.

DEDICATION

To my best friend, soul mate and
life partner of 31 years
The Reverend Dr. Joseph Jones

ACKNOWLEDGEMENTS

So many wonderful persons have provided encouragement and assistance not only during these past three years at Virginia Tech, but throughout my life span. It is impossible to recall every name and act of kindness. I gained so much from so many wonderful individuals and groups.

I must thank my parents; Mom, I kept going even after God removed you from my presence in 1982. The many loving memories that I retain from our relationship have sustained me. Dad, you have always believed in me as your first born. You have also counted on me to set the pace for others. Thank you for your unconditional love, unwavering support and high achievement expectations.

I must acknowledge my grandmother (aged wisdom), who is 90 years young and an inspiration to me. Ma "B" you have taught me how to age gracefully and enjoy every moment of my life.

My grateful appreciation goes to the faculty and staff in the Department of Family and Child Development, particularly Mrs. Katherine Surface for always showing genuine concern for me and lending a helping hand where needed. Kathy, you have gone above and beyond the call of duty, and for that I am truly grateful. Thanks to my committee members Dr. Mark Benson and Dr. Michael Sporakowski for their support, encouragement, comments, and suggestions. My committee would not be complete without a "Blue Devil" and a "Demon Deacon." Dr. Jacquelyne Johnson

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My children, surrogate children, grandchildren and husband supported me in countless ways throughout my educational endeavors. I am grateful to my daughters Tonya Jones-Boyd and Daphne Jones-Evans for their understanding and encouragement. I am grateful to my surrogate children Lenette Hillian and Michael and Jean Herndon for their energy, enthusiasm, moral support, and faith in my leadership skills. I am the proud grandmother of Joseph Robert Boyd, Jaevan Fisher Evans, Janethea Michelle Boyd, and Taylor Nicole Evans. These four small wonders in my life have demanded my attention, affection, energy, and youthful demeanor.

They loved me and took pride in the fact that grandma was in school.

My husband Joseph was the most supportive throughout this endeavor. He understood and accepted the many demands, distractions, and seemingly endless hours of composing papers and presentations. He took on extra responsibilities, such as chief cook, bottle washer, grocery shopper and house husband extraordinaire. Honey, you have listened to my woes and my accomplishments, served as my "best" critic, encourager, friend, pastor and valued colleague. You believed in you, you believed in me, and you believed in you and me as a team. With your emotional and instrumental support, 1998 was the year that we both received our terminal degrees and extended the strong achievement orientation within our culture and family.

I wish to express my sincere appreciation to the 30 African American elders who opened the doors to their homes and their hearts by volunteering to participate in this study. They taught me some valuable lessons about aging. I gained a new perspective relative to my own aging.

Finally, to God be the Glory for the things He has done. Without the presence of God in my life, my living, striving, and connections with each of you and other supportive others in my life would be in vain.

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CHAPTER ONE - AN INTRODUCTION TO THE STUDY

Background

Mental and physical well-being is very much affected by how individuals manage the inevitable stressors that accompany older adulthood. A multiplicity of biological, psychological, and social stressors confront older persons. Research indicates that the availability of social support contributes to stress reduction and consequent well-being (Antonucci & Akiyama, 1993; Hawks, Hull, Thalman, & Rickins, 1995; Lazarus & Folkman, 1984).

Social context factors influence the types of support available to African American elders and the meanings they attached to that support. African Americans are socialized into a culture of shared understanding concerning what types of support are most effective for reducing stress and benefiting well-being (Chatters & Taylor, 1989). Across the life course these cultural guidelines are blended with personal experience to construct an individual system of meaning relative to social support.

In their literature review on family, friend, and church support networks of African American families, Taylor and Chatters (1989) concluded that African American networks and institutions do not simply function as compensatory supports formed as a necessary reactions to mainstream exclusionary practices. Instead they represent a deeply held emotional belief in the value of collective action. Taylor and

Chatters write: "Black institutions have been frequently characterized as, at best, poor substitutes or caricatures of White institutions, and at worst, dysfunctional organizations which in effect impede the development of Black communities and individuals" (p. 245). There is little apparent appreciation for the manner in which African Americans have creatively responded or adapted to various stressors because these networks and institutions were in place.

Research on social support has begun to take into account that supportive networks among African American elders may differ in some important ways from those of other races, most probably because social constraints such as discrimination have made the conduct of social support distinct from what is routinely studied in White populations (Coke, 1992; Coke & Twaite, 1995; Jackson, Chatters, & Taylor, 1993). Patterns of giving and receiving support among African Americans have historically taken place within an extended kinship structure from a perspective of interdependence and communal cooperation. African Americans have a stronger sense of togetherness if they are connected with family, church, and social groups which provide some hope for the future, and assurance of support in times of need as opposed to being isolated and without hope (Littlejohn-Blake & Darling, 1993; McAdoo, 1995; Taylor, 1986).

Although considerable research attention has been given to social support, most

of the work neglects to take into consideration both the context within which social support is activated and the cognitive processes through which people mobilize and evaluate supportive interactions. Many questions remain unaddressed. For example, do the patterns of giving and receiving support documented in historical studies of African American communities have relevance for how support is offered and accepted by African Americans today? What exactly does it mean to individuals to belong to a network of supportive others? What beliefs and commitments motivate requests for support? Under what conditions are actions interpreted as supportive? What connections do people make between the supportive acts and interactions of others and their own physical and mental well-being?

Purpose of the Study

The primary goal of this study was to explore the concept of social support from the perspectives of 30 African American elders. More specifically, this study examined the personal beliefs, as well as past and present experiences that motivate use of social support; when, how, from whom, and under what conditions support is requested (or offered); and evaluations of the positive and negative outcomes of supportive interactions.

Research especially designed to investigate the life experiences of African American elders is limited (Murray, Khatib, & Jackson, 1989). Given the numerous

possible stressors that can impact the lives of African Americans elders, such as including continuing racial discrimination, economic hardship, inaccessible health care, and unavailable mainstream programs and services, knowledge of the meanings and functions of informal social support among African American elders are especially deserving of investigation (Coke & Twaite, 1995; Jackson, Chatters, & Taylor, 1993).

Research Questions

Three research questions guided the study:

1. Whom do African American elders name in their most important network of supportive others and what meanings do they attach to the support?
2. What beliefs motivate and define African American elders' involvement in a social support network?
3. How do African American elders evaluate the consequences of their supportive interactions?

CHAPTER TWO - A REVIEW OF THE LITERATURE

Conceptual Framework

The overarching framework used to encompass this research was stress and coping theory. From this perspective individuals are envisioned as experiencing various kinds of stressors. Stressors are the life events (e.g., death of a spouse, criminal victimization) or chronic strains (e.g., having a life-threatening disease or living with constant financial hardships) which initiate appraisal processes. If symptoms of physical and emotional stress appear (e.g., upset stomach, shaky hands, anxious feelings, difficulty concentrating) and events or strains are appraised as threatening to well-being, individuals then begin to evaluate their abilities and means to self-protect (Bird & Melville, 1994).

Stress responses vary depending on what coping resources individuals bring to the situation. Coping resources consist of the personal characteristics (e.g., self-esteem, mastery, sense of independence), beliefs (e.g., spiritual beliefs, family philosophy), and arsenal of coping strategies, including social support (Bird & Melville, 1994). Activation of social support has a "buffering" effect on well-being, meaning that the effects of stressors on mental and physical health are lessened by the presence of the supportive actions of others (Dressler, 1991; Handal, Black-Lopez, & Moergen, 1989; Krause & Tran, 1989; Neighbors, Braithwaite, & Thompson, 1995;

Rosenthal, 1986; Taylor & Chatters, 1986).

Background on Social Support

Social support was defined by Moss (1973) as "the subjective feeling of belonging, of being accepted or being loved, of being needed all for oneself and for what one can do" (p. 237). Cobb (1976) added that individuals receiving social support felt intimately connected to others in their social network and made attempts to reciprocate the supportive actions of others. Building on these definitions, Thoits (1982) proposed that social support refers to the satisfaction of a person's basic social needs -- affection, esteem or approval, belonging, identity, and security -- through social ties to other individuals, groups, or the larger community. In effect, individuals are surrounded by a convoy of supportive others, a group of friends and family who over time provide socialization and protection for each other (Dressler, 1991; Kahn & Antonucci, 1980).

In one of the most comprehensive typologies of social support Cutrona and Suhr (1994) identify five categories of social support: 1) informational, 2) tangible, 3) emotional, 4) esteem and 5) social network. They further collapse these five categories into two broad types of support. The first type, action-facilitating support, consists of informational and tangible aid provided by others to individuals under stress for the purpose of assisting with solving or eliminating problems. The second

type of support, nurturant support, includes emotional caregiving and social network efforts to comfort or console the stressed person, without any intent to help with problem solving. Esteem support can be either action-facilitating or nurturant, depending on the goal of the support giver.

Social support is also categorized as informal or formal. Informal support refers to support provided by and received from family, friends, church members and community residents. Informal support is voluntary and tends to be less rigid but activated when a crisis or need arises (Gottlieb, 1985). The composition of informal networks changes with age, and unfolds over time (Kahn, 1994). Formal support signifies that support is provided by formal agencies such as social service agencies, health service agencies, senior services groups, and general government agencies (Stoller & Pugliesi, 1991; Taylor & Chatters, 1986, 1988; Walls & Zarit, 1991). Meal programs, transportation for seniors, home aides, and other services planned for senior adults are also considered to be formal types of social support (Johnson & Barer, 1990).

For this research project social support was envisioned as the emotional sustenance and practical assistance provided in times of need by people or groups of people with close personal ties. This research was concerned with 1) what types of problems and beliefs motivate older persons to decide to seek support, 2) how they go

about gaining support, and 3) the types of support offered. Social support was viewed as being forthcoming in times of stress or crisis through offers of aid such as meals or protective feedback that reinforces a positive self image and sense of optimism (Caplan, 1974; Cobb, 1976; Kahn, 1994; Streeter & Franklin, 1992). Supportive behaviors may also include such activities as listening, expressing concern, lending money, helping with a task, offering suggestions, giving advice, and showing affection (Streeter & Franklin, 1992; Thoits, 1982).

Social Support as a Coping Resource. According to stress and coping theory social support is a coping resource. Coping resources are those factors that modulate or buffer against the impact of stressors such as life events and chronic strains on mental and physical well-being (Lazarus & Folkman, 1984). Social support acts as a coping resource against many types of stressors. Persons with social support are better able to meet the challenges and circumstances of life than persons without social support (Dressler, 1991; Rosenthal, 1986). Supportive relations can serve as a buffer for depression, aid in recovery from illness, decrease physiological and psychological stress symptoms from bereavement. Loss of a spouse, family members, friends, social identity, health and other later life losses can be buffered by support (Antonucci, 1990; Dressler, 1991; Smith, 1993). Social supports are also beneficial in regulating anxiety caused by some mild stressors (Bowers & Gesten, 1986).

In this study, social support was examined as a coping resource for African American elders. Research is limited on social support of African American. The existing literature does not address the meanings, beliefs, and past experiences that African American elders ascribe to social support.

Overview of African American Studies on Social Support

Sources of Social Support

African Americans typically receive informal support from their immediate and extended family and friends, as well as through their church and social organizations (Taylor & Chatters, 1986, 1989). When used in the literature on African American families the term extended family does not imply that all family members live under one roof but that family members outside the immediate family exchange goods and services and visit each other on a regular basis. Although, it is the preference of African American elders to receive assistance from family and friends (Sutherland, Hale, & Harris, 1995; Taylor & Chatters, 1986; Walls & Zarit, 1991), some African American elders report more frequent, intensive relationships with friends and church members than family (Dressler, 1991).

Family, Kin-Structured, and Friend Networks

Taylor and Chatters (1986) investigated patterns of social support to African American elders from family, friends and church members using data from individuals

age 55 years and older who responded to the National Survey of Black Americans. Informants were interviewed regarding frequency and type of support received. Results indicated that eight out of ten informants reported receiving support from friends, six out of ten reported support from church members, and more than half received support from family. Findings suggested that informants aided by church members usually had family and friends that they received support from as well. Taylor and Chatters concluded that African American elders are embedded in informal networks comprised of both family and friends. Also, church members are a vital part of the support network, indicating that religion and religious institutions are significantly important to African American elders.

When Jackson (1972) investigated family and friend relationships among older Blacks, she found that older African American women interacted frequently with close friends.

She also found that women reported satisfaction with their present levels of interaction. However, in her study of marital life among aging Blacks, Jackson (1972) found that African American elders rely upon their family for social support. Findings also indicated that many elderly African American females were widows. Therefore, children were the primary family members from whom assistance was sought, particularly, the oldest child. In the absence of children, assistance was sought from

other relatives. She stated that "It appears that family functioning among Blacks is still highly supportive to the extent possible, for aged family members" (p. 27). In her book *Minorities and Aging*, Jackson (1980) stated that the African American family fulfills a significant role of social support for African Americans throughout their life span.

Ortega, Crutchfield, and Rushing (1983) investigated racial differences in personal well-being of older adults in regards to their friendship, family, and church networks. They found that African Americans of all ages reported more frequent interaction with friends, although Whites reported a greater number of friends within their network. Their research was corroborated by Ulbrich and Warheit (1989) in their study of social support, stress, and psychological distress among elderly African Americans elders and Whites. Findings indicated that African American elders were significantly more likely than older Whites to seek assistance for problems, crises, and other concerns from friends.

Chatters, Taylor and Jackson (1985) investigated the size and composition of informal networks among African American elders. They found that friends tend to be more readily available than family to the old-old; friend relationships tended to be long standing; and family or kin resources tended to decline for this age group more rapidly than did friends.

Studies on family and friend networks show that older adults seek friends for short-term or temporary tasks. Perhaps this decision is made to avoid risking those day-to-day relationships that are of vital importance to continued socialization. However, family and kin are also friends. Elders tend to continue relationships established earlier in life with individuals from their age cohort (Jones, 1996). Since kin and family resources decline with advancing age, relationships with neighbors and friends are possibly more plentiful during the later years. Furthermore, according to Antonucci and Akiyama (1991) family relationships are obligatory and friend relationships are optional. Subsequently, older adults have a choice to make when support is needed. Moreover, availability and proximity play a large part in decision making regarding social support.

Church/Community Organizations

"The Black church has always embodied a strong sense of community, thereby providing a supportive environment" (Pollard, 1995, p. 21). Historically, because most agencies of the White community refused to serve African Americans, the African American church accepted a social welfare function. That function included the establishment of housing, financial institutions, educational institutions, health care, employment services and legal services (Wimberly, 1997). Pastoral care is a type of honoring initiative for African American elders, with older adults being placed in close

relationship with the pastor and other members of the church (Wimberly, 1997). Such supportive church initiatives refute the myth communicated by the larger society that older adults are isolated, detached, self-sufficient and self-regulated without involvement or influence from others. Wimberly (1997) states that elders are best supported by the church when they are involved in intergenerational relationships and programs. This type of programming brings meaning to the lives of elders. Wimberly further asserts that church social supports can provide needed networks of people as well as goods and services.

Wimberly's suggestions corroborate Milligan's (1990) research of a church oral history project. Findings showed that using African American elders as narrators resulted in the forging of a closer relationship between the African American church and the larger community. Furthermore, Milligan's research substantiated the need for the African American church to collaborate with formal agencies to improve service access, thereby enhancing well-being for African American elders. This research also provided a model for other African American churches to use for planning and providing services to African American elders.

Sutherland, Hale, and Harris (1995) reviewed the literature relative to social support provided by the church. Findings indicated that many churches are very instrumental in providing primary prevention, as well as preventive and social services

to those persons considered "at risk." Findings also indicated that ministers, church members, and professionals in the local community worked collaboratively to impact program success.

When Bagley and Carroll (1995) addressed healing forces within African American families they reported that the African American church is of vital importance to African Americans, particularly elderly African Americans. For example, some African American churches sponsor health screening for hypertension, diabetes and other diseases, along with providing health education and education programs for older adults. Other churches combine spiritual and physical health care and provide the professional staff to plan activities and facilitate service delivery.

According to Littlejohn-Blake and Darling (1993), programs planned by the African American church can work to affirm competencies and strengths that older African Americans already possess. Recognizing strengths is a means of improving psychological well-being while reducing stress. Some of the strengths of African American families reported by Littlejohn-Blake & Darling (1993) were: an internal sense of spirituality, kin-structured networks, the ability to respond to internal and external pressures, dual socialization (within the African American ethnic group and the larger society), and a strong sense of empowerment and self. Consequently, the acknowledging strengths of African American families encourages African Americans

to embrace their heritage and exhibit internal pride.

Many African American elders perceive of their church as a valuable social support resource. African American ministers are ranked next to physicians as the professional that African Americans contact or consult in times of personal distress. Church involvement among African American elders was investigated in a nationwide survey by Krause and Tran (1989) to determine if involvement had an impact on stressful life events. Findings indicated that involvement by African American elders in church and church-related activities facilitates connections with other informal support networks, provides a sense of identity, and promotes unity in the community. Findings also indicated that self-worth and mastery were maintained with increased religious involvement.

When comparing family and friends networks of older adults, it appears that the family network is clearly considered the primary source of assistance, regardless of the task. It seems that only when family, particularly adult children, are not available are friends sought out for assistance. Friends, however, are approached first for specific tasks. For example, friends and neighbors provide socialization and day-to-day companionship. Friends and neighbors are also more likely to provide short-term emergency or crisis assistance, such as during illness or running errands in inclement weather.

Studies have shown how the African American family can be strong and positive. These strengths have great potential for alleviating stress. The history of reaching beyond the "nuclear" family to include friends, church members, and neighbors in the extended family network adds to the potential stress buffering power of the family. Additionally, the religious connections to the African American church lays the foundation for endurance in providing social support (Jones, 1996).

Many African American churches offer a supportive refuge in their communities where people come together and share the pains, problems, and joys of their human experiences. African American churches serve as surrogate families by promoting contacts and interactions. They also contribute to emotional security for older persons without family in close proximity. The supports of the African American church are important because members of the church help other persons. The African American church can encourage older adult members to become actively involved in various activities. The African American church can be a referral source for contacts with community agencies and programs. The African American church can also serve as a clearinghouse for information salient to older persons. These supports can serve as a buffer against the inevitable frustrations and uncertainties of daily life (Jones, 1996; Taylor & Chatters, 1988).

Gender as an Influence on Support

Women report that they use support networks more often than do men. Women also report the use of religious coping resources more frequently and willingly than do men (Levin & Taylor, 1993). For example, in a study of function and supportive roles of church and religion, Smith (1993) found that church memberships are largely female, and women are more actively involved in church activities than men. Women and the "old old" reported higher levels of church involvement than men and "young old." Older women were more likely to participate in structured rather than unstructured activities. Smith's research is corroborated by Pollard (1994) in his research on women, men and the African American church.

More African American women tend to be working class and become widows at younger ages than do White women. Working-class women have fewer personal resources with which to cope with widowhood and are more likely to be isolated and lonely than are middle-class widows (Atchley, 1994).

Both women and men have more women in their social support networks, with women reporting larger networks in general (Antonucci & Akiyama, 1991). Men report that they provide more spousal support as well as receive more spousal support, but report limited involvement with children, other family members and friends. Women provide more support to a wider variety of people than do men (Krause &

Keith, 1989; Levin & Taylor, 1993). Given these findings, this study included both women and men to provide the opportunity for gender differences to emerge.

The Influence of Beliefs on Social Support

In *Stress, Appraisal, and Coping*, Lazarus and Folkman (1984) stated that beliefs are "personally-formed or culturally-shared" cognitive configurations (p. 63), or preexisting notions about reality. They further contend that beliefs give birth to and nurture actions that guide ideas, and drive individuals to an understanding of the meaning of these ideas. Furthermore, according to Lazarus and Folkman (1984), beliefs determine what coping resources will be tapped in any given situation. Beliefs also serve as a basis for hope, and are considered a valuable resource for coping with crises and adversities. "Hopes can be encouraged by the generalized belief that outcomes are controllable, that one has the power to affect such outcomes, that a particular person (e.g., doctor) or program (e.g., treatment) is efficacious, or by positive beliefs about justice, free will, or God" (Lazarus & Folkman, 1984, p.159).

Park and Cohen (1992) considered the ways in which religious beliefs and practices influence the coping process. They suggested that beliefs influence the individual's understanding of the situation and build the foundation for evaluating outcomes. However, some beliefs can negatively impact coping behaviors and

resources. For example, a belief in the wrath of God without justice can influence an individual to remain in a less than desirable situation. A belief in fate can dictate an appraisal of helplessness that results in roadblocks for problem-focused coping.

Older African Americans have traditionally maintained a belief in God, family, community, and self. These beliefs sustained them through slavery, exclusion and continuing discrimination (Levin, Chatters, & Taylor, 1995; Lincoln & Magma, 1990; Smith, 1993; Taylor, 1986; Walls & Zarit, 1991).

African Americans have a stronger sense of coherence if they feel they belong, have some say about their fate, future, control over their lives and feel a sense of support and protection (McCubbin, et. al 1995). Individuals become conscious of their own being, their own duties, their privileges and responsibilities towards self and towards other people. These beliefs are strengthened by the corporate personality paradigm, in which there is a direct and continuous connection between "I" and "we." This depicts the old African Proverb, "I am because we are; and because we are, I am." This research project investigated how various belief systems -- religious/spiritual, family, community, and self beliefs -- motivate and define involvement in socially supportive relationships. I also explored the past experiences that influenced the development of those particular beliefs.

Religious/Spiritual Beliefs

"African Americans created a subculture with religion as one of their first and most important means of transcending the circumstances which oppressed" (Pollard, 1995, p. 6).

Religious beliefs can influence how different individuals view, interpret, and respond to the same event (Park & Cohen, 1992). For example, one individual suffering from a serious illness could interpret that illness as punishment from God. Whereas, another individual inflicted with the same disease could interpret the illness as a sign of being capable of handling the situation, because of the belief that God would not inflict more on an individual than that individual is able to withstand. Park and Cohen (1992) suggest that religious beliefs may influence the number and type of coping resources available to the individual at any given time. Coping resources available to African American elders could include prayer, church attendance, involvement in church activities, and fellowship with other church members. In this study, use of social support is considered a coping resource. A belief in God, and the principle of being available to assist others in need is expected to influence individuals to seek support when under stress.

The African American church has been a place where persons are in community. An individual is said to achieve wholeness only through involvement in

healthy group life, in groups such as families, churches, communities and nations (Pollard, 1995). These resources may not be available to or considered by individuals without religious or spiritual ties. Persons without religious ties typically are cut off from church resources.

Family Beliefs

African Americans, particularly African American elders, have experienced a long history of discrimination and victimization over their entire life course that encouraged them to place their trust and faith in a family philosophy or belief system that protects, provides hope, and enhances psychological development (Chatters, Taylor, & Jayakody, 1994; Smith, 1988; Taylor, Chatters, & Jackson, 1993).

Taylor (1988) investigated aging and supportive relationships among African Americans. He found that most African American elders believe that the family represents the core group that has responsibility for the well-being of elderly members. He also found that relatives within the African American family relocate temporarily to provide support to elderly members. And that it is a practice for relatives, near or distant, to move elderly family members into their homes, or move into the homes of elderly family members to provide support (Taylor, 1988).

Hill (1972) addressed the strength of African American families. He stated that "Most discussions of African American families in the literature tend to focus on

indicators of instability, disintegration, weakness or pathology. The great majority of African American families, for example, are not characterized by criminality, delinquency, drug addiction or desertion" (p. 1). Hill further stated that beliefs are essential to survival, development and stability of African American families. Beliefs of African American families include strong kinship bonds, strong work orientation, flexible family roles, high achievement orientation and religious orientation.

In a study conducted by Wimberly (1997) to examine how African American families honor their elders, she found that African American families respect their elder members as full participants in family life. She further found that African American families remain the main source of primary relationships for African American elders, and those primary relationships include spouse, adult children and siblings. Other findings indicate that the vast majority of African Americans believe in "caring for their own." Many elders are a resource from whom the younger generations obtain experience, advice, historical information and basic survival skills.

Community Beliefs

When addressing race, religion, and resistance in the African American experience, Pollard (1995) states that "Identity is grounded in a strong sense of community, in which individuals understand themselves as part of a people and where no person could live in isolation, materially or spiritually" (p. 5). This belief in

community embeddedness can be preventive in nature. Some chronic illness such as hypertension or diabetes can be controlled and the health status improved within a community by providing the opportunity for residents to become actively involved. Community involvement can result in the formation of partnerships with agencies, schools, and churches (Cowart, Sutherland, & Harris, 1995; Dressler, 1991; Milligan, 1990). Using a partnership approach can serve to engage residents who are widely neglected in an adverse environment, into leadership roles and acceptance of responsibility for their destiny (Breslow & Tai-Seale, 1996; Krause & Tran, 1989).

Embeddedness implies that an individual is rooted, connected, and has made deposits into the bank of community involvement, that impacts others. People in communities are important to personal and family survival. Being grounded and committed to the community typically places an individual in the position of looking to the community for reciprocal support in times of trouble.

Self Belief

Sarason, Sarason, and Pierce (1994) investigated social support. They found that older adults who are more assertive and outgoing have more contact with others and report more satisfaction in their relationships. They further found that older adults who are more assertive and outgoing are less lonely, less anxious, report more friendships, more closeness in their friendships, and greater access to social support.

When researching locus of control, Lefcourt (1991) found that persons with an internal locus of control (a tendency to take control or see themselves as having control) are better able to handle stress. Lefcourt's research is corroborated by Atchley (1991) in an investigation of self-concept and stability. Findings indicate that the inward orientation of older people and the relative stability of the set of roles they use as the basis for their self-concepts, promote stability of self-concept in later life.

Beliefs in personal efficacy -- having a sense of independence or a sense of mastery provides the ability for, and places a person in the position to self-protect. These types of beliefs influence individuals to seek and use social support. However, many individuals who consider themselves to be independent tend to use social support as the last resort, when they have exhausted their personal resources. Although independence is of crucial concern for older adults, turning to others for assistance is a necessary decision. Turning to others is sanctioned by society, particularly during a crisis or illness (Cantor, 1979).

For African Americans, self belief encompasses more than the words "believe in self." Self belief has historically been communicated through the laying of a "silent" foundation. For example, some African American elders who were denied educational opportunities stressed the importance of education and made it a reality for younger generations by sacrificing their own needs and wants. Some worked to try to

place younger generations in a position for betterment.

It has been the observations and experiences of this investigator that many African American elders listened to others such as ministers and teachers to determine their evaluation of members of younger generations, particularly their children. When African Americans were able to observe other African Americans such as ministers and teachers, they were able to aspire to become more than they ever dreamed possible, particularly since for many of them upward mobility was blocked.

Further observations and experiences of this investigator noted that most African Americans were basically unable to exercise their belief in self because of being imprisoned by racism. Although African Americans believed in self and believed that they could achieve success, very seldom were they given the opportunity to make those beliefs a reality. Many African Americans gave up, not because they did not believe in self, but because African Americans were not afforded the same opportunities as Whites.

During my youth and young adult years, many African Americans from younger generations were equipped by their elders with the hope of enjoying a better lifestyle. However, there was a disbelief that this better lifestyle would come to fruition. For example, African Americans with college degrees were denied opportunities that Whites with a high school diploma realized. African American

elders believed in self but did not believe in the support of the larger society, largely White. Many African American elders did not realize belief in self for fear of rejection and bodily harm. This was a protective measure that was necessary for survival.

Further observations and experiences showed that many African Americans historically placed their major belief in God. Many believed that God would take care of them and would see them through any obstacles that they would face. The religious institution (church) along with family and teachers provided the basic training for self belief. The use of social support from family, church, and community gave birth to and nurtured self belief for African Americans (a belief that an individual can achieve, but not necessarily a belief that an individual will achieve). Although self belief was hope for the future that things would change and result in a positive climate for African Americans, many dreams were deferred or never realized, particularly for African American elders.

Impact of Social Support on Well-Being

Ward (1985) developed a conceptual model for investigating the contributions of informal networks and well-being in later life. He suggested that social support can alleviate feelings of distress, and contribute to a higher level of well-being. His research is supported by that of Rubinstein, Lubben, and Mintzer (1994) in their study

of social isolation and social support. Findings indicated that elders who do not have social supports in place are at high risk for abuse, neglect, and decreased personal worth.

In his exploration of social support, Gottlieb (1987) suggested that social support can impact primary prevention by protecting health. He further suggested that social support is most critical when people are faced with adversity influenced by stressful life events and changes in roles. Social support also enhances health and morale to assist people with daily challenges.

In her study of a neighborhood support network Rosel (1983) found that well-being was enhanced, and loneliness and isolation alleviated as a result of social support. The sample consisted of a group of four closely knit persons 75 years of age and older, with a mean age of 81.3. Gender composition included three women and one man. The man was the husband of one of the women. These four persons were the core of a larger network of 12 or more older people. Emotional and tangible support was exchanged several times a day including grocery shopping, phone messages, talking, and other routine supports. These persons had been neighbors for many years. The most unique finding was that self worth and independence among this group was maintained through interdependent neighboring.

Dressler (1991) examined the efficacy of social support in moderating the

effect of social stressors on arterial blood pressure. The sample consisted of 186 African American households, randomly selected from two mid-level income and two low-income communities. Interviews were conducted with heads of household or spouses age 25 to 55. Findings indicated that emotional and perceptual dimensions of social support rather than tangible and instrumental were more salient to this sample. Findings also indicated that social support moderated the association between inappropriate lifestyles and well-being. Furthermore, findings also indicated that younger persons identify friends or nonfamily as their main source of social support, while older persons listed family. In other words, high support from nonkin lowered blood pressure for younger persons, while high support from family or kin lowered blood pressure for older persons.

Russell and Cutrona (1991) studied social support, stress and depression among the elderly. Their sample consisted of 301 older adults living in the community, recruited from an agency on aging in Iowa. All informants were functionally independent and were physically and emotionally healthy. Findings indicated that social support that boosts positive self-esteem and provides direct assistance in stressful situations is very salient to older persons, particularly regarding depressive symptomatology. Findings also indicated that a lack of or reduced social support is both directly and indirectly related to depression in older adults, particularly relative to

isolation and loneliness. Support that communicates regard for human worth and the availability of tangible assistance appear to be most critical to elders.

In their study on religiosity among African American elders, Heisel and Faulkner (1982) found that high religiosity was directly related to personal adjustment and optimism. In contrast, low religiosity was connected to feelings of rejection and isolation. The sample consisted of 29 men and 93 women age 52 to 90 years of age. Subjects lived in a predominately African American section of a large Eastern city. It is significant to note that approximately half of the informants lived alone, more than three fourths were functionally independent, and all were poor. The larger research project investigated mental health, self-concept, and social functioning. Findings reported that those informants who used religiosity as a support reported a greater degree of self-esteem and reciprocity. They not only gained benefits from others but were beneficial to others as well.

Walls and Zarit (1991) explored the type of support African American churches and families provide and how that support relates to well-being. The sample included 98 participants (75% women) recruited from African American churches in an urban area of Pennsylvania. Subjects ranged in age from 65 to 104 years of age, with a mean age of 76 years. Findings suggested that family was more important than church in terms of support. However, well-being was directly connected to the church

network, and was of a general nature rather than related to spiritual connections or involvement in church activities.

Community-based self-help has been instrumental in empowering African Americans to improve their health status (Neighbors, Braithwaite, & Thompson, 1995). Chronic illness tends to produce an overabundance of stress on the social system, thereby reducing the amount of support received (Krause & Jay, 1991). Some illnesses can be controlled and the health status improved within a community by empowering residents to form a partnership with a health promotion agency, school, or church (Breslow & Tai-Seale, 1996; Cowart, Sutherland, & Harris, 1995; Dressler, 1991; Milligan, 1990; Sutherland, Hale, & Harris, 1995). Health promotion and stress reduction programs are most effective for some older African Americans when they are offered through individuals such as community residents and church members (Wykle & Kaskel, 1991). Church and community health promotion and stress reduction programs or clinics can serve to reduce anxiety, pain, depression, panic attacks, medical symptoms, and improve psychological attitudes (Antonucci & Akiyama, 1993; Hawks, Hull, Thalman, & Rickins, 1994; Lazarus & Folkman, 1984).

Acting out the belief in community embeddedness can lend critical assistance in the fight against depression, the onset or prolongation of illness and disease. Community embeddedness can also serve as a catalyst for implementation of other

coping resources among older African Americans (Bowers & Gesten, 1986; Cohen & Wills; 1985; Dressler, 1991).

Studies show that various types of supportive actions can impact personal well-being. Given these findings, this study included an examination of the impact of social support on personal well-being.

CHAPTER THREE - THE METHODS

Rationale for Qualitative Research

A qualitative approach was selected for this research because one of the goals of this study was to provide the opportunity for participants to share their personal stories and life experiences relative to social support. Informants revealed the meanings they associated with use of various social supports, and talked about how those supportive connections had affected their lives. Research questions concerning understandings, meanings, and interactions between individuals in close relationships are best revealed through qualitative methods (Gilgun, 1992; Marshall & Rossman, 1989; Sankar & Gubrium, 1994).

Site and Sample Selection

Sampling for this study among African American elders was purposive. Purposive sampling refers to a determination made or opinion formed prior to conducting research to sample informants predicated on a preconceived, but plausible prototype. Purposive sampling empowered the investigator to recruit and include African American elders who were members of an African American church and actively involved in church activities. For this study age, race and gender were the sample characteristics that provided the selective dimensions that were purposively determined (Miles & Huberman, 1994; Schatzman & Strauss, 1973).

To locate the sample, a letter was written to three pastors of African American baptist churches requesting their assistance with recommendations of elders to be included in this study (See Appendix A). Informants were recruited from churches because this research project examined the social support network from among several possible sources, including the church, for purposes of providing the full range of possibilities of gaining support. Literature regarding African American elders and church involvement substantiates the worth and significance of the African American church as a social institution and a context for primary supportive relations (Lincoln & Mamiya, 1990; Smith, 1993; Taylor, 1986; Wimberly, 1997). The three churches were chosen according to the size of their advertised memberships (large, medium and small). The mixture of varying size churches was chosen to provide the best possible opportunity for a diverse group of participants. For example, a large membership (1000 and above) could possibly include a larger number of elders with higher socioeconomical or educational status, resulting in elders who were involved in numerous church and community organizations. Conversely, a small membership (less than 300) could possibly generate a group of elder participants of lower socioeconomical or educational status, and less involved in church and community organizations. Many church and community organizations require a specific educational attainment and membership dues. This would preclude participation in

many social organizations.

Two of the three pastors responded positively and provided lists of possible participants. The two lists combined generated a total of 25 names. Telephone calls were made to each potential participant to determine his or her interest in participation. Five of the 25 potential participants were eliminated because of inappropriate ages, inability to contact them or absence of functional independence. The remaining 20 elders agreed to participate in this investigation without hesitation.

Once interviews began, study volunteers were asked for names of other potential interviewees. Using this snowball technique produced an additional ten elderly informants. The final sample included a denominational mixture of baptist, methodist, united methodist and episcopalian and a total of 30 African American elders. Pseudonyms were assigned to each informant to assure confidentiality (See Table 3.1).

Description of Sample

Thirteen males and seventeen females were included in the study. All informants were functionally independent, meaning that they were capable of handling activities of daily living: "basic" ADL (e. g., walking, dressing, eating) and "instrumental" ADL (e. g., housekeeping, transportation, personal business affairs) (Branch & Jette, 1983). Ages ranged from 70 to 99 years with a mean age of 84.5

years (See Table 3.2). Sixteen of the informants were married, 12 were widowed, one was separated, and one was never married (See Table 3.3). Two of the households included children (adult children). One household with adult children was the residence of the adult child. One household included a dependent grandchild. None of the households included older adult relatives presently residing with them. Twenty four of the 30 informants had nuclear or extended family members living nearby including children, grandchildren, siblings, nieces, nephews and cousins.

The educational background of the sample ranged from less than high school to professional degrees. One informant did not complete high school; 12 informants had a high school diploma; two informants had some college; one informant had a bachelor's degree; one informant had some graduate education; eight informants had master's degrees (seven in education and one in divinity); one informant had a post master's education; two informants had Ph.D.'s; and two informants had professional degrees in medicine and law (See Table 3.4).

Previous occupations included factory workers, nurses assistant, clerical worker, public school teacher/administrator, college professor/administrator, attorney, and surgeon. Religious affiliation by denomination included 25 baptists, two methodists, two united methodists, and one episcopalian. Informants held membership in or participated in an average of 3.4 church organizations, such as choir, Sunday

school, missionary circle, usher board, official boards (deacon, trustee, steward), and

2.6 community organizations, such as fraternity, sorority, flower club, community club, and community watch (crime).

Pseudonym	Age	Marital Status	Education
Arthur	86	Widowed	Professional
Barbara	72	Married	Master's
Bill	89	Widowed	Professional
Bryant	80	Married	Master's
Charles	71	Married	High School
David	70	Married	Master's
Emma	82	Widowed	High School
Fanny	81	Widowed	High School
Geneva	73	Separated	High School
Howard	86	Widowed	Less Than HS
Isaiah	86	Married	High School
Jane	74	Married	Master's
Lula	73	Married	Some College
Mary	80	Never Married	Post Master's
Nathan	71	Married	Bachelors
Opal	77	Widowed	Master's
Pncilla	71	Widowed	High School
Quincy	81	Married	Doctorate
Ralph	85	Married	High School
Robert	80	Married	Doctorate
Roberta	99	Widowed	Master's
Sarah	76	Widowed	High School
Thelma	87	Widowed	High School
Ulysses	91	Widowed	High School
Velma	72	Married	Some College
Victoria	83	Married	Master's
Violet	88	Widowed	High School
William	78	Married	Master's
Yvonne	93	Widowed	Some Grad.
Zennia	77	Married	High School

Table - 3.1 Sample Demographics

Ages of Sample by Gender

AGE	70-74	75-79	80-84	85-89	90-94	95-99
Male	3	1	3	5	1	0
Female	6	3	4	2	1	1
Total	9	4	7	7	2	1

Table 3.2

Marital Status of Sample by Gender

MARITAL STATUS	Married	Widowed	Separated	Divorced	Never Married
Male	10	3	0	0	0
Female	6	9	1	0	1
Total	16	12	1	0	1

Table 3.3

Educational Background of Sample by Gender

EDUCATION	Less Than HS	H S	Some College	Bachelor's	Some Grad.	Master's	Post Master's	Ph.D.	Professional
Male	1	4	0	1	0	3	0	2	2
Female	0	8	2	0	1	5	1	0	0
Total	1	12	2	1	1	8	1	2	2

Table 3.4

Data Collection

A total of 30 interviews were conducted with African American elders 70 years of age and above. Each interview was preceded by an explanation and reading of the consent form that had been approved by the University Institutional Review Board for Research Involving Human Subjects (IRB). A brief discussion of the research purpose, confidentiality, anonymity, and contributions of the project were articulated. Each informant communicated an understanding of the procedures and signed the consent form (Appendix B). Additionally, a demographic worksheet was completed (Appendix C) and an explanation was entended of the use of two tape recorders in the event of equipment malfunction. Individual, in-depth, confidential, face-to-face interviews lasting in duration from 1 1/2 to 2 1/2 hours were conducted with informants.

To assist in placing informants' comments in context, 25 interviews were conducted in the homes of informants (Seidman, 1991). The remaining five interviews were conducted in a church conference room at the request of informants. All interviews were scheduled at the convenience of informants.

The semi-structured interviews were comprised of questions which were supplemented with probes that were designed to obtain greater depth of information and preciseness of intent. Use of probes led to additional questions that facilitated the

discussion of issues important to the support process. Each interview was preceded by a brief period of less intense conversation to aid in the relaxation of both informant and investigator (e.g., discussion of the weather, current events, local issues and common concerns).

The semi-structured interview format was designed to generate an atmosphere that was supportive of free expression (Bogdan & Bilken, 1982; Gilgun, 1992; Marshall & Rossman, 1989). In-depth, semi-structured interviews allowed exploration of questions about meanings through access to the personal worlds of the informants. Informants were placed in the role of experts regarding their own life experiences. As investigator, I shared a common racial background, and attempted to establish an open conversational communication style to put informants at ease.

Open ended questions within broad areas of inquiry (Snyder, 1992) were used and are listed in the interview guide (Appendix D). The investigator asked general questions and then clarified and reflected as needed to give informants the opportunity to recall, reveal, and construct aspects of their responses and to encourage coherent and meaningful expression (Kaufman, 1986). Although open-ended questions were more difficult, time-consuming, and costly to process, they have been judged superior in building investigator-informant rapport (Marshall & Rossman, 1995; Rubinstein, 1988).

Field notes written at the conclusion of each interview were used to keep a record of observations relative to the interview content and process, as well as personal reactions. They were analyzed in conjunction with the interview data. For example, order of questions, extent of probing, family descriptions and notes on interview dynamics were included in the field notes. These notes also functioned as a reservoir for concerns about the research process and served as an invaluable tool for evaluation of data. Field notes were vital to "hearing the voices" of informants and keeping their experiences active during data analysis.

Data Analysis

Data analysis followed a process of discovery of analytic categories described by McCracken (1988) in *The Long Interview*. Stage one involved reading the interview transcripts for content understanding; and re-reading them to identify meaningful conversation noted as observations. However, these conversations were not connected to other segments of the interview transcript.

Stage two was completed by development of my observations into more detailed, strategic, and broad based observations as a result of information gathered from the interview transcripts and the relevant literature. Special emphasis was given to often repeated phrases and words as they provided insights to salient data. During stage two, I developed some descriptive and interpretive codes.

Stage three began with an examination of the broad observations to determine their connections to each other. This examination was guided by the literature review, conceptual framework, and initial feelings developed from the two prior readings of the interview transcripts. Patterns that emerged from the data were identified and pattern codes assigned for further analysis of data.

Stage four involved identification of patterns of intertheme consistency and contradiction (McCracken, 1988). This stage was completed by an examination of groups of comments, including notes made relative to specific segments in each interview transcript. Basic categories and themes were discovered, polished, and arranged in order of frequency of responses.

Stage five of analysis involved the identification of categories and themes for all interviews across informants, to determine propositions or theses that emerged from the data. This stage advanced from the individual to the community or group under investigation. For example, the emphasis was then on the general properties of all informants rather than one individual informant. This stage also involved a change of focus beyond the informants' world to the world as interpreted by the analyst (investigator).

Reliability

Kirk and Miller (1986) related that it is crucial that qualitative investigators

maintain the context of informants' responses and accompanying observations. I sought to preserve as much of the interview communication in the transcripts as possible, including informants' repetitions, start overs, and nonverbal expressions (e.g., crying and laughing). My field notes included the ways in which I arrived at the methods I used and statements about my personal feelings and experiences during the research process. These notes also contained my mistakes and insights, as well as my description of problems that surfaced during the project.

I met with my research advisor frequently during the data collection and analysis processes. We examined the challenging aspects of the data collection process, including the identification of informants to include in the data analysis process. Emerging analytic categories were discussed, revised, and selected for inclusion in Chapter Four.

Conclusions were based on interview transcripts, field notes, a research journal, and conversations between the investigator, my advisor, and other colleagues. These forms of data analysis were vital in writing the findings that follow.

CHAPTER FOUR - THE FINDINGS

This qualitative study based on in-depth interviews with 30 African American elders over 70 years of age, examined their personal beliefs, and their past and present experiences that motivate their use of social support; when, how, from whom, and under what conditions support is requested (or offered), and evaluations of outcomes of supportive interactions. Evaluations of the positive and negative outcomes of supportive interactions were also explored. The specific research questions were:

1. Whom do African American elders name in their most important network of supportive others and what meanings do they attach to the support?
2. What beliefs motivate and define African Americans elder's involvement in a social support network?
3. How do African American elders evaluate the consequences of their supportive interactions?

Informants shared their understanding of social support from the perspective of older adulthood. Meanings ascribed to social support were found to be shaped by personal belief systems including beliefs about family, friendship, community, religious/spiritual and self. Informants indicated that their beliefs served to establish the foundation for a network of supportive others and influenced their present state of well-being. Informants communicated the variety of ways in which their belief

systems influenced the conditions under which support was requested (or offered); and how they evaluated the consequences of those interactions.

These findings are a summation of the beliefs and meanings ascribed to supportive interactions as experienced by the informants who agreed to take part in this research. Responses cited in this chapter are the actual expressions of the thirty participants. Findings will be presented by addressing and providing the answers to each research question in turn. Because the responses of the 30 informants were generally consistent across questions the findings are not organized by gender. Typically as males age their social support networks decreases in comparison to females networks. However, males in this sample articulated strong network involvement. Informants for this study were drawn from within church memberships with strong social support networks. Religious ideology and African American cultural beliefs about support provision may have generated greater similarities across gender than in the general population. Informants were able to define and discuss experiences and actions that they employed to generate positive results within their social support networks. Informants were able to define and discuss experiences and actions that they employed to generate positive results within their social support networks. Connectedness and embeddedness within the family, church and community networks of informants strongly supported the absence of gender

differences.

Research Question One: Most Supportive Others and Meanings

Attached to Support

This initial research question was provided to identify the most important network of supportive others and the meanings the 30 informants attached to social support. Persons identified by informants as most supportive others included spouses, siblings, parents, grandparents, offspring, friends, neighbors and pastors. The fifteen married informants in this study tended to name their spouses as their most supportive other, as exemplified by the following responses.

My husband is always there for me and he's always doing things that help me. He never says no (Barbara).

My wife...we have been together so long, we just know what each other need. (Bryant)

My husband...Well one thing, when I'm overwhelmed with the different things that I'm trying to do, he gets upset because he continues to say, well now you've taken on more than you should be trying to handle, and he would try to slow me down, but he hasn't been able to do it. (Victoria)

My wife....I think she gives me most strength. She supports me more than anybody I ever knew. More than mama, dad, or anyone else.....When I get awfully quiet, she knows something's wrong and she calls and wants me to tell her...tell her what's wrong and, ah, of course, I open up to her. Then she tells me not to react but to do it. (Ralph)

The thirteen widowed informants named a variety of persons as their most

supportive others, including deceased spouse, children, church members, pastor and neighbors.

I come in here to this dining room and sit and talk with her. We would talk over our meal and just share our day with each other. I miss that dearly (Bill).

My daughter...she is the only one that I depend on. She sees to it that I have everything I need and some things I don't need. (Roberta)

Well, I would have to say it's my pastor. I see him three or four times each week. He was very helpful and loaned me the money without interest to take care of some of the bills that my son left me with from his credit cards and other debts. (Arthur)

With no close relatives around, my neighbor is the closest support to me. He fixes up things around here, moves things, sweep the floor. (Bill)

The one informant who reported being separated (15 years) named her daughters as her most supportive others. She had relocated from a Midwestern state after separating from her husband. She stated that she did not make friends easily. The never married informant identified her most supportive others as her "church family" and described the relationship as ("like family").

Responses generated four categories of information, Building Endearing Relationships, Demonstrating Personal Worthiness, Leaving Loving Memories, and Teaching Valued Lessons (See Figure 1). These categories represent the meanings that informants found in the giving and receiving of support. Meanings were clearly linked to observations of behaviors informants labeled as supportive.

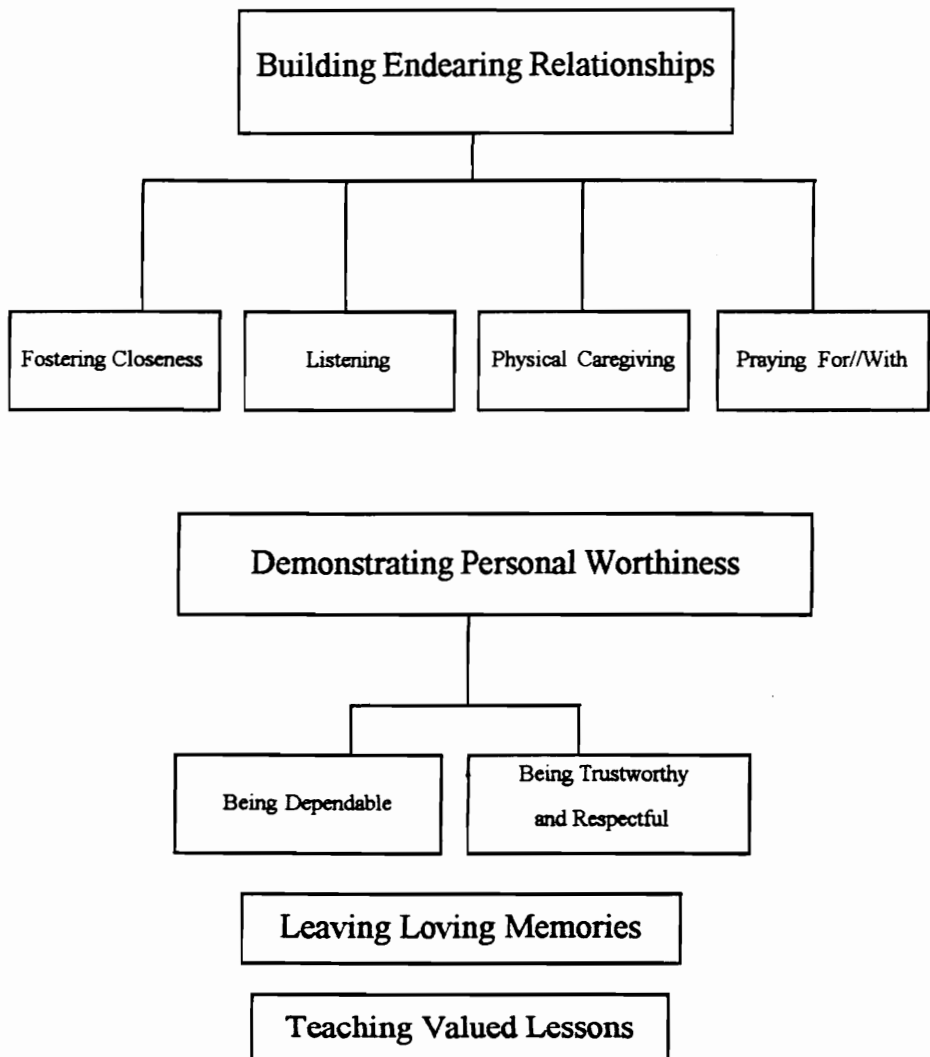


Figure 1 - Meanings Attached to Support

Building Endearing Relationships

More than two-thirds of the informants spoke of the value of building close relationships. Informants spoke quite often of how family members had worked to create special and supportive relationships that endured over time. Here is one of the many examples identified by informants. •

I have a niece who is just a delight. We reared her, her husband left her with eight children, a three week old baby and ill. Afterwards it was discovered that she had cancer after he had gone, but she kept those eight children together and now they're grown. She is...I watched her, she didn't just get down and have a pity party, she said no I gotta raise my children. They put her on welfare so she could get some help, we helped her as much as we could, but as soon as she could she got off, got her a job, went to work and she said if I do it, my children will do it. I've seen the cycle and I don't want that. Now, all of them are grown all are married except one. I just admire the way that she had....now her family is taking care of her, because they realize what she did for them all these years. (Barbara)

Individuals outside their biological families of origin and procreation were also frequently involved in informant's circles of Endearing Relationships. It was striking that informants described relationships with friends, church members and neighbors in such an affectionate and accepting way. Bill spoke of his relationship with his neighbor in an endearing manner, describing him as a son, father and friend.

Since my wife died, he's been there for me. He's a tiny bit shy of 60 years old. He comes over, he's been here this morning and he's like a son, a father, and a friend. It's strange how a person can be all that. As a son, I didn't adopt him as a son, he adopted me as his father. With no close relatives around, my neighbor is the closest support to me. He fixes up things around here, move

things, sweep the floor. He just moved a file cabinet in the room where I will put my office stuff. I haven't had to ask him for any help. He always volunteer to help out and do things for me. He came over this morning and put my files in the house out of the shed in the back so that I won't have to go out in the weather.

As informants described the importance they placed on Building Endearing Relationships, four themes emerged from this category, Fostering Closeness; Listening; Physical Caregiving; and Praying For/With. Each will be discussed in turn.

Fostering Closeness

Fostering Closeness was perceived as a key element in the development and establishment of a network of supportive others by eight informants.

Bryant shared his close intimate relationship with his wife in this way:

My wife and I are very close, ah we, usually I discuss with her...I can tell my wife anything. You see, we support each other and know what each other need. And, ah we can tell each other or we have been together so long, we just know what each other need. I don't know, I ah don't know nobody else that I need to go to see.

Victoria spoke of the closeness she feels from her husband when she said:

Well, I feel very close to my husband. I've always felt that I could talk to him about anything that I am involved in because I've always been a busy person and he has always been a supportive person even to the extent that when he would work...five days a week ...he was a patient person and it helped me to have patience.

Jane also talked about a friend of 56 years whom she labeled as her "best" friend. Although that friend was deceased, she shared her closeness to the children of

her friend as a result of their close relationship.

I had a friend, we were best friends for 56 years, and I lost her. It was in 1990, a few years ago. That was really my best friend because I've had some good friends, but her children are close to me.

Opal shared her closeness to her brother, son, sister, and other female friends.

She communicated the importance of their closeness since the death of her husband:

My brother and I are close. I feel a little bit closer to him [son] than I do to my brother but my friends, female friends, and my sister are very, very close to me.

Sarah stated emphatically:

I feel close to my pastor.

Sarah also shared a close relationship with a cousin of her deceased husband.

She said:

My husband's first cousin....We married in the family but his first cousin, she's close. We don't miss a morning calling....I can call her anytime. We talk every morning. We call each other. I put it like that. If I beat her to the phone, I call her to see how she's doing. We already talked this morning.

Closeness also included relationships with friends and church members. Velvet shared her feelings regarding friends in her church:

Well, I have a couple of friends at our church that I feel very close to as I was saying before. I feel like that I can really talk to them and we can talk about the Lord and we can talk about different things, even personal things if we have something that we talk about and they are people that, their personality, they have a personality like mine.

Listening

Six informants articulated positive and pleasant experiences with listening, both being listened to and listening to others. They spoke of the importance of being supportive by listening.

Jane shared her experiences as a wife who loves her husband for lending her a listening ear:

...I love my husband because he will listen to me...He listens, but sometimes I get wrapped up in something but...we've always worked it out.

Informants described listening as vital to all relationships and emphasized that each individual must do his or her share. Lula spoke of being listened to by her husband and friends.

She put it this way:

I listen to them and they listen to me, and my friends, sometimes your friends are listening...

Pricilla and Fanny also shared their accounts relative to friends listening:

They [friends] are people I can call on the phone; and if I have a problem and want to talk, they will listen....they will listen, and they are really just willing to listen...it means a lot in life because oft times you... find somebody who will listen, I think it mean a whole lot... (Pricilla)

I have a friend, and we have been friends for I'd say maybe 20 years, and if there is anything on my mind that I want to get off, I can call her and it is the same way with her. If there is something going on that she wants to talk about, she doesn't mind calling me 6:00 in the morning because she knows that

I am going to listen to her and vice versa and that is as far as the conversation goes. (Fanny)

Physical Caregiving

Five informants related the special connections that they felt to those providing physical care to them. Their stories were not told from a negative or dependent point of view, but rather from a position of love and gratitude within the context of Building Endearing Relationships.

Roberta and Mary give their accounts in turn:

Susie...she stays here with me and she takes care of everything because I'm not able to do it now like I used to. (Roberta)

Roberta continued:

Sarah Smith...one time after my husband died, I stayed here alone, and I came down with the flu. Sarah and Mary [her sister] would come up here and see to it that I had meals every day and anything else I needed. They would come and attend to me, take care of me.

When I had my surgery, the same friend, I told you we grew up together, she moved in with me because her husband was dead...she lined up a group of people from the sorority, church, and community to come and stay with me while she was at work and everybody reported on time and they knew what to do for me. They would take me for a walk and they would see to it that I was taken care of. (Mary)

Praying For/With

Intercessory prayer was described by four informants as a supportive other speaking on their behalf. For these informants praying was integral to Building

Endearing Relationships.

Barbara spoke of how her husband prayed with and for her. She also spoke of how her church members whom she considered as close friends interceded for her during her diagnosis with cancer and how they continued to communicate their good wishes for her:

If I say something is wrong physically, he says let's pray.

Barbara continued:

When I go in for an exam the church members and my friends are all praying for me. They always say, we're praying that everything will be alright.

Sarah made the following comment regarding how her pastor interceded for her:

He's a good pastor....He came and prayed and gave communion and all so I wouldn't trade my pastor for nobody.

Demonstrating Personal Worthiness

Dedicated devotion by or to individuals within ones support network was described as being worthy. Sixteen informants stated that worthiness was expressed by being there without judging or wavering; in other words, being steadfast and unmovable even in trying times. Two themes emerged from this category, Being Dependable and Being Trustworthy and Respectful.

Being Dependable

Eleven informants stated being available was the primary component of showing support through dependability.

Barbara spoke of the dependability that she feels from her husband:

...he's just here for me. We discuss things and we make decisions as to...pertaining to our lives.

Siblings, friends, church members and neighbors were also counted on by informants to be there for them to provide necessary support. Listen as Opal, Pricilla, Mary and Bill share their experiences. Their comments are given in turn.

My sister...we are there for each other, no matter what. In fact, she just lost her son and well, I never even thought for a minute that I shouldn't be right there with her at all times and that's what I did. And, when I lost my husband, she did the same sort of thing for me, you know. (Opal)

They [friends] are the kind of person who will, if you have a need, drop whatever. You don't have to wait. They drop whatever and, "I'll be there." I can call in the midnight hour or whenever. "Okay, I'll be there in a few minutes" and that makes a difference in some people. Some of them will, you know, wait a little while and tarry but they respond most immediately. (Pricilla)

My church is my family and they give me support. Because they are right there for me whenever I need them or when they think I want them. (Mary)

My next door neighbor... he's been there for me. I haven't had to ask him for help. He always volunteer to help out and do things for me. (Bill)

Arthur shared his sentiments about his pastor knowing the needs of others and

being there for him:

He [pastor] is a Christian man and practices what he preaches. He is good about knowing what others need and I am grateful that he was there for me and I told him how much I appreciate his help.

In conversations about support informants described dependable supporters as those who could be depended on to keep their word and hold a confidence.

Charles spoke of three people who demonstrated confidence in his dependability -- physician, pastor and an influential person in the community:

My doctor... I had a doctor to tell me many years ago, he said Charles, I guess he kind of liked me when he got to know me, and he says you know, I'm depending on you to do a good job where you are. And I'm saying to myself, why would you, you know why would you, you know. And that just kind of brighten me up, now here's somebody depending on me to do a good job so I kind of felt obligated you know. And I had the same thing happen...my pastor, he said Charles, you know we're depending on you. We like what we see and I'm saying to myself what do you see. And then I had another man who was an influential person in the community and I said hey I need a little money, he said you do, I said yea, he said how much you need, I said \$150.00. I wonder if you can sign this note for me for \$150.00. He looked at me and he said I'm going to sign this note for you Charles, but you know you're going to have to pay it. I said I understand that. And I paid the note off and got it for 60 days. I signed the note for 60 days, so when the note came through I went and paid it off. And from that time on, he was one person (he's dead and gone now), but he was one person that said, Charles you know I took a chance on you but you know what, you proved to be the type fellow that I...if you ever need anything you can come to me.

Mary listed three friends that were dependable. She shared her experiences with them in the following manner:

I can talk to those persons [friends] about most anything and we do talk about things. If something happens that I am not quite satisfied with, I have three or four people that I feel comfortable going to, talking to about this and it is in confidence because anything that is in confidence, I am very careful who I talk to about that because I just think that if I come to you and talk to you and I say, "I want this held in confidence" then I take your word that you will do it. So I have about four of us that I feel and that I do go to and we come to each other...we came up together, we played in the sand, and we made mud pies together.

David shared a moving story about his brother's dependability. His brother acted as a surrogate father after the death of their biological father. David's story follows:

I have a brother that all through my life has fathered me from 12 years of age when my father died...I can think of a lot of things that he has done for our family which developed me and my respect for him...all through the years.

Pricilla talked about the dependable support of a close friend as vital to her support network. She made the following observation:

Whenever a burden or some little thing, I can count on that kind of support that you need when things come upon you.

Being Trustworthy and Respectful

Seven informants spoke of the importance of displaying trust and respect within the family unit as well as within other supportive relationships. These African American elders believed that Being Trustworthy and Respectful resulted in secure relationships. Informants further believed that trustworthiness and respectfulness once

established within family relationships could be applied to other relationships outside the family.

David believed that trust and respect were very important components of supportive relationships:

Our belief [family] is that mainly we have to trust one another in all we do and recognize that we are there to assist each other. If we have problems we don't have no fear about asking for help if you would like the help and not be afraid to mention it because you are ashamed of it. We don't make them have that kind of guilt feeling that they would be afraid to talk about it.

Barbara, Pricilla and Mary described their belief in trustworthiness and respectfulness as showing honor or esteem for others as well as for self:

One thing my mother instilled in us was....respect the rights of others...I learned that in my family....every adult was to be respected.... (Barbara)

I, ah, in my family we tried to respect one another and their beliefs. I try to pass it on by the way that I live...to respect, respect other people's opinions....You need to respect them and what they believe, but not necessarily if it is not what you believe...you respect them for what they too believe. (Pricilla)

I think young people should be taught to respect themselves as well as for other members of the family, even the smallest, the youngest child. (Mary)

Barbara and Velma concurred with other informants:

When I find someone that I believe is a true person...I look for that, a person that I can trust and I can usually tell after a while through conversations. (Barbara)

I have a couple of people...I can go to them and talk to them about most

anything....I feel like that it won't be something that will be put in the street the next day or tell somebody every time I tell them something. I feel that friends are very important...to talk to...maybe we might have things that we wouldn't want to tell the world about, just maybe another friend. (Velma)

Yvonne also reflected on the way in which trustworthiness was viewed within a friendship relationship:

I think after living this long time, I believe mostly in trust....Some friends...I have been able to trust...through the years...I value that....to be true and trustworthy. (Yvonne)

Pricilla, a widow for more than 30 years believed that trust was vital among neighbors within a community:

I think within the community...I think you should have a close enough relationship that people will trust you...and believe in you and are willing to come to your aid whenever it is necessary.

Leaving Loving Memories

Eight informants described how they retained strong memories of past relationships and interactions with supportive others now deceased. Leaving Loving Memories refers to the phenomenon of having positive past events and experiences come to mind when thinking about or needing support.

Opal cherishes the memories of her deceased husband and count on those memories to keep her focused in the midst of difficulties. She spoke of how she talked with him about her problems when he was alive and how she continues to

communicate with him. She gave the following account:

...now that I've lost him, and I find myself coming in here sometimes talking to him. When I have problems, because I don't tell my sister everything and she shouldn't tell me everything; but if I have anything that I want to say, I just come in here or sometimes I go to the cemetery and I just talk out what's bothering me and we have done that all along and so I haven't gotten anyone yet that's alive that I have done that to. I just haven't because I don't even do it to my children. First of all, they are not here so I probably would do to my girls and to my son, too, probably would if they were here, but they are not and I don't feel like getting on the telephone and running up that kind of bill. So, I just talk it out with him and the Lord.

Bill spoke of the memory of his wife as a daily support, although he made it quite clear that he was in touch with reality. He made the following statement:

It's the memory of my wife of 57 years. That comes back to me almost daily, something that she said or did. I think I try not to be morbid or live totally in the past, but somewhere I read or learned that we are a part of all that we have met or of all that we have been, and that thing keeps recycling. I always go back to that, because after you have been with someone for 57 years which is not a short time. I don't just live in the past, but there are so many things that we did together that I just think about them and they come back.

Teaching Valued Lessons

When conversing about support six informants spoke of and ascribed meanings to experiences that they had with elders throughout their life span. These experiences were described as lessons learned through supportive teaching and instruction.

Arthur talked about his childhood activities and interactions with his mother and related these experiences to his success as a surgeon:

My mother taught me about caring. I had a doll as a boy that I made clothes for, and I used to knit and do embroidery. That's how I learned to do some of the stitches that I used in my surgery.

Barbara shared her experiences with an older sister as the teacher of meaningful lessons:

My sister...holds very much the same beliefs as I do. She has instilled some of them in me. She's shown by example that they work:

Sunday school teachers were credited with teaching lessons that continued down through the years. Arthur and Thelma shared their experiences:

My Sunday school teacher taught me how to teach others. I taught Sunday school as a result and have been superintendent of our Sunday school for many years. (Arthur)

We had a Sunday school teacher...one of the greatest women you can think of and she loved young people...I had that same Sunday school teacher for I guess about 25 years. (Thelma)

Research Question Two: Beliefs

The second research question that guided this study was designed to explore those beliefs that motivated and defined African American elder's involvement in a social support network. Beliefs discussed by the 30 informants covered the domains of family, friends, church, community and self. Descriptions of beliefs produced six categories: Presence of God; Concern for Neighbors; Family Unity; Aged Wisdom; Like Family; and Days Past and Gone. Figure 2 displays these categories and the

accompanying themes and dimensions of those themes.

Presence of God

Presence of God was a constant belief reported by all of the informants in this study. This belief was described as offering a defense against the forces which might threaten their well-being. The safe haven provided by a belief in the Presence of God was said to assist in the creation and maintenance of a positive, healthy environment where the elders in this study could thrive. Two themes emerged to help define this belief -- Practicing Rituals and Abiding by Christian Principles. Belief in the Presence of God will be discussed first, followed by an explanation of each theme.

Emma related not only her benefits from The Presence of God but how she encouraged others to do likewise.

I try to live by what I grew up with, that God comes first and that all people are equal in the sight of God. I tell young people, my children, grandchildren, and others that I come in contact with to keep God first and treat people right and that things will turn out right for them.

Violet agreed:

Well, with God's help, I feel like I can do most anything, even at this age. I can't do much but I can do something. But, when I was a younger person, I could just, anything that come to mind, I could do it. And I believe that, ah, I was always, in what I tried to do, especially through my church and those kind of things or the neighbors or something, I always think in terms of putting God first.

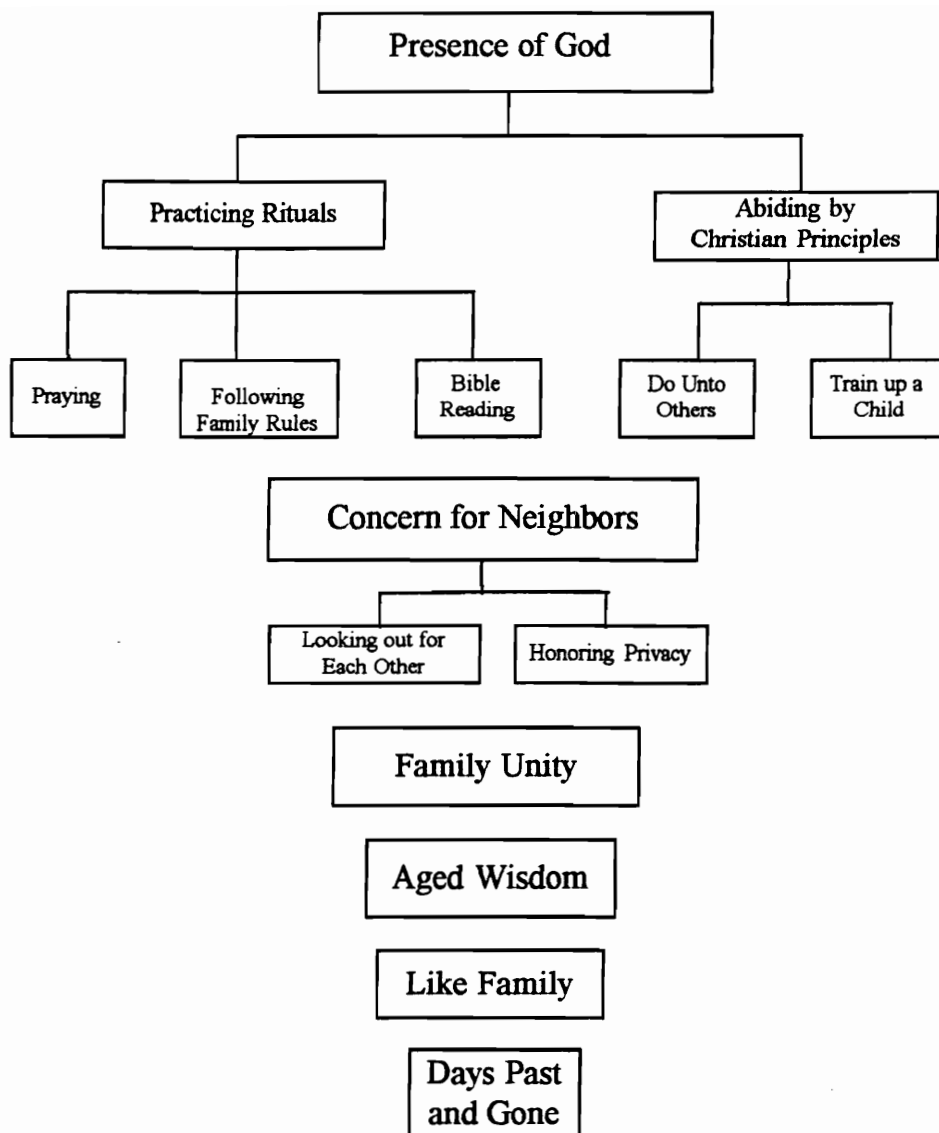


Figure 2 - Beliefs

Ralph attributed his longevity to having God in his life:

Well, I, I, sometimes I attribute the longevity of my life, that if you obey God and do what He has asked you...sure, sometimes we break God's law but yet and still He says He's there to forgive you if you confess....I tell them that, I say, my total success comes from me believing in God, serving Him to the best of my ability and that he has blessed me with...longevity...if they'd do that He'd do that for them because He won't only do it for one person, He will do it for anybody who loves Him and trusts Him.

Ralph continued:

My dad...mother and granddad...believed in God and they depended on Him regardless to the condition or the situation. I do know when they had what was it, what was it? It wasn't no recession but depression, the Lord took care of all of us.

Velma spoke of how her parents taught the importance of God's Presence to her and her siblings. The teachings included a sense of togetherness, closeness, and safety:

My parents were Christians, very strong Christians and they taught us. I came from a large family, a family of 12, and we were taught to keep your hands in God's hands and He will always be near and He would always keep you safe.

Bryant spoke about his childhood struggle with poverty and how God brought him through those trying times. He spoke of how his financial situation was so bleak that he feared failure without God's help:

Well, I wouldn't be where I am now...I also believe that with God's help, you can do all things. Now I had to bring that in. You can't do it, that, that, ah has been my story, that I believe that I had God's help and I sought that help that I could do far more things than I would do without that help. You see, I

was born in poverty, and ah I didn't have no parents to pay my expenses in school. You see I had to have faith in God to leave home and...enter college, didn't know how I was going to meet the monthly expenses and all of that. I had to have that so that has been my strength to keep going in spite of the odds being against me.

Practicing Rituals

Rituals were identified by informants as the observance of set practices at specific intervals with the primary purpose of keeping the Presence of God first and foremost in their lives. Informants described Rituals such as praying together as a family, praying for others, saying Grace before meals, attending prayer service on Wednesday nights, and attending Sunday school and Baptist Training Union on Sundays. Sixteen of the 30 informants in this study reported employing Rituals. These Rituals were practiced by family, church, friends and community as positive behaviors that influenced their ties with social support networks. Three sets of beliefs emerged as informants discussed Rituals: Praying, Following Family Rules, and Bible Reading.

Praying. Seven informants believed that praying was an important Ritual in their Lives. For example, Bill talked about the Sunday morning breakfast routine in his family and how his mother always interceded for others less fortunate than his family.

Every Sunday morning we would get around the table and have Grace.

Mother would pray and I would read the scripture. She would include in her prayer every Sunday morning, Lord help those folk who are less fortunate than we are.

Ulysses, Mary, Velma and Violet shared their beliefs about the Ritual of Praying.

Their comments are listed in turn:

Every Sunday they [family] should pray over whatever they intend to do or do and especially bless the house that they live in, the food, their mothers and their fathers...and that's what they will be successful in life if they were to do that and believe in it. (Ulysses)

I just think that the families ought to...my thing is that the family who prays together stays together. (Mary)

Well, I believe that a family should be people that should...the family should pray together. My family, I was brought up with praying in the home...in the morning...before we eat...and at night. (Velma)

Well, I believe...you should come together and have prayer...at least we can have breakfast and have prayer. Have your Grace, thank God for the food. (Violet)

Rituals also included counting on others for intercessory intervention as Jane stated:

When I would have a problem, I could go to him [father] and I'd say, daddy, be praying for me at such and such time, and he would.

Following Family Rules. Five informants believed that Rituals also included the belief that family members should adhere to certain valued family

guidelines or rules.

Bryant voiced his beliefs and experiences regarding Family Rules:

To tell you the truth, I think that the parents ought to have some rule or guideline for the kids...I believe that the family should actually teach the kids certain principles and certain things, ah in the early life.

Victoria spoke of how her parents took her and her siblings to church each Sunday as a part of the familial system of rules. She shared how she reared her children in the same manner, especially going to Sunday school each Sunday and how she taught Sunday school:

You do not think in terms of whether or not it is convenient. You think in terms of the fact that it will be and if you think that it will be that means that you will make arrangements...to get there...the excuses are always very predominate...that's just a part of what you do and you just do it.

Velma spoke of the experiences she had with Family Rules requiring that prayer be included each morning:

I was brought up....First thing in the morning before we leave, before we eat we had to have family devotion...this is the way I was brought up. I brought my family up...I taught them...to thank Him [God]...because it is God that keeps them at all times.

Barbara expressed her experiences with Family Rules and the consequences of breaking them:

One thing my mother instilled in us...you were punished for bothering each others belongings. Another was stealing...she would not tolerate neither was being disobedient or...if we misbehaved at school, unless we had a very good

reason, that we would be punished...it stayed with me.

Zennia also spoke of Family Rules being enforced by her parents:

Yes...we didn't do anything that was against their [parents] teaching. We would get punished for going against their teaching.

Bible Reading. Four informants talked about their belief in the Ritual of Bible Reading.

Roberta shared a moving experience with a particular Scripture that gave her comfort after the death of her husband. She continues to rely on the Ritual of reading that Scripture even today:

There is a chapter in the Bible that's the 91st Psalm. After my husband died, I felt that I was all alone 'cause there was nobody here with me...everybody else was busy. So I read it nearly every night because it gives me strength.

Barbara talked about how she encourages young people to Practice the Ritual of reading their Bibles and to seek the Presence of God in their lives. She told the following story:

I try to teach them...young people at my church they know what Mrs. Barbara say all the time, you need to read the Scriptures everyday if it's not but one verse. You need to at least read the Scriptures because there are times when you can't get a Bible and there are no people around when you can just recall the Bible or what the Lord has to say about situations, things that are happening and reach out. And I tell them that practice, practice memorizing verses in the Bible, a line whatever because it can be kinda what you need at times when nobody is there but you. So, I believe in Scripture reading, not only reading it, but I think memorizing it.

Velma said:

I was brought up...we always had Bible readings in the mornings.

Abiding by Christian Principles

Christian Principles as described by fourteen informants involved the belief that people should practice Christian values, morals and standards. Two themes emerged; Do Unto Others and Train up a Child. One basis for these values, morals and standards was identified as the Golden Rule. Additionally, informants spoke of their belief in assisting others to reach their maximum potential. This was said to be accomplished through viewing others as oneself (as equals).

Do Unto Others. Do Unto Others was described by informants in this study as being fair, just, impartial, pleasant, and courteous as well as a sense of helpfulness. Eight informants believed that Do Unto Others should be a component of their supportive interactions with others. The basis for these values, morals and standards was the Golden Rule: Do unto others as you would have them do unto you.

These informants talked about the Scripture Matthew 7:12 and used it as a basis for gaining, practicing, and passing on Christian Principles "Therefore all things whatsoever ye would that men should do to you, do ye even so to them: for this is the law and the prophets."

Fanny expressed her desire to treat others fairly. She based her view on

treating others in the manner that she would like to be treated (The Golden Rule):

I try hard to live by the Golden Rule. Sometimes I fall short, but as a rule, I try to give a person the same break. I would expect them to give me. I just try in some small way to show them.

Zennia agreed with Fanny when she cited the Golden Rule as her basis for fairness:

Do unto others as I'd have them to do unto me.

Emma and Lula said:

I taught my children to treat others like they would want to be treated. I tell...my children, grandchildren, and others that I come in contact with to keep God first and treat people right and that things will turn out right for them..
(Emma)

...live neighborly and try to treat each other as you would want to be treated.
(Lula)

Do Unto Others was also communicated as a necessary component for support within fraternal organizations. Fraternal organizations are structured on the extended family concept and designed to provide social support.

Quincy credited his view of Doing Unto Others to his supportive connection with a fraternity:

My fraternity brothers...they are good people, you know. They treat you right and I treat them right.

Train up a Child. Violet spoke of moral virtues and contrary vices and

how her parents' belief in God led them to also believe that Christian Principles should be taught to their children. She referred to Proverbs 22:6 - "Train up a child in the way he should go: and when he is old, he will not depart from it:"

I believe that we should...start children out at an early age....If you train up a child in the way that he should go most of the time. He might stray, but he will come back.

Zennia spoke of her belief in teaching others how to obtain and exercise

Christian Principles:

We must, we must teach our children. We must set an example for them...we must live by that in front of them....You must be kind and you must be always willing to do something for some people. Don't look for someone else to do something for you all the time. Pass it on and do it willingly, not begrudgingly. Don't ever act like you don't want to do it.

For Mary, a never married woman from a strict, religious background,

Christian Principles were always a part of her belief system:

First, having been born and reared in that church...I also teach, try to talk about...what it means to be a Christian in this day and time. Not only this day and time, but to start from infancy and go to senior adult with Christian Principles and training and that's what I talk about all the time.

Quincy shared his beliefs regarding the training of children:

My father...taught us that we were all children of a loving God.

Concern for Neighbors

Seventeen informants in this study also believed in showing compassion and

Concern for Neighbors. They expressed an understanding of what others are experiencing (i.e., trials, troubles and sorrows) from an empathetic point of view. Some of the their beliefs relative to Concern for Neighbors were displayed through watching out for the safety and welfare of neighbors. Informants described their belief in Concern for Neighbors as persons within a neighborhood respecting the rights of individuals and property and neighbors looking out for each other. These African American elders believed that to be able to look out for each other, neighbors must exhibit a sense of closeness. Closeness in turn produced awareness and awareness begat responsibility. The ultimate action, according to those interviewed was communication among neighbors with common interests in the safety and protection of others. Two themes emerged as informants spoke of their Concern for Neighbors, Looking out for Each Other and Honoring Privacy.

Looking out for Each Other

David, Fanny, Mary and Thelma shared their views on Looking out for Each Other in the following manner:

Well....If your back porch light is on, I will call and say, well, did you know your back porch light was on? or did you know you left your car lights on?
(David)

Well... If my paper stays on the porch too long in the morning, she [neighbor] will find a little excuse to call me....I just want to make sure you are alright...we don't really see that much of each other but I know she's got her

eye on me all the time which makes me feel real good, especially now that I am here by myself (Fanny).

I just think the community should be a caregiving group. They are to care about the welfare of everybody. (Mary).

We learn to come to your aid if I am needed. If I can do something for you, 'm here for you (Thelma).

Violet pledged her Concern for Neighbors when she spoke of being available to assist her neighbors with any needs that they may have. She was adamant regarding the offer of assistance and stated that she would try to perform any act of kindness without limitations or boundaries. Therefore, she would be available for "anything." Her statement follows:

I believe if my neighbor needs me I will try to go. If there's anything that I can do for my neighbor, I would do it.

Ralph expressed his Concern for Neighbors when he said:

I wouldn't want to know anybody any better who's concerned with conditions around here. Now if they [neighbors] see something going on wrong anywhere around here, they, they, we'll call each other, wondering what we are supposed to do. If we think it's that bad, we call the police.

Having a belief in the Concern for Neighbors will often require informants to leave the confines of their homes and venture out in the community in a supportive way. This practice was described by Yvonne and Zennia:

Reach out to each other. You can't know nothing about what's going on if you're to stay in your house. (Yvonne)

One neighbor, right in front of us, now she comes to see me. We call each other. If we don't see each other in a couple of days, I call to check on her, to see if she's alright. If you don't ever visit them [neighbors], you can call up and find out are they alright. If you don't see them going backwards and forth, check on them. They could be in there sick. (Zennia)

David said:

I try to be warm with all my neighbors and try to develop spirit...sometimes one don't speak so well about the other, and I tell them....I try to relate to them and mediate where there is misunderstanding and things like that.

Roberta concurred:

So, If you are a good neighbor, you are in interest of the neighbors condition and they are in interest of what my condition is.

Yvonne expressed her belief that neighbors were to protect each other:

Now we have this, what you call this, crime watch program....It's up and down this street in particular, they just look out for you. If we see people lying around, you know we alert the neighbors about it. If somebody come up and down the street trying to sell something, look out for each other.

Honoring Privacy

As informants described their belief in having a Concern for Neighbors, Honoring Privacy or caring from a distance was described as a belief. The degree of support was not viewed as being diminished by the absence of frequent visitations within neighborhood homes. Informants spoke of how they provided support as well as received support without, as they put it, being in and out of each others houses or getting into one another's business. Five informants believed that Honoring Privacy

was significant enough to discuss.

Emma stated:

I think that neighbors should help one another if they need it. Not getting into one another's business, but know what's going on in the area.

Fanny echoed Emma:

Well, now I find it's good neighbors...we don't live in each others house.

Pricilla concurred with other informants regarding the need to assist others, while Honoring Privacy:

Not necessarily running in and out of people houses all day long and all of the time but be in constant relationship, maybe by telephone and living in such a way...people in your neighborhood...if they are in need...they just call you...are willing to come to your aid...but you don't have to be in and out of their houses at all times.

Family Unity

Family Unity, was a belief in the importance of family connectedness working together. Twelve elders believed that families should support each other and be able to count on that connection.

Nathan said it this way::

The strongest family belief is unity...with a spiritual base. It's interrelated and interconnected with anything we hear.

Opal went on to say that regardless of geographical barriers, Family Unity is possible:

We should all come to, not necessarily the rescue, but should that happen, that anything should happen in the family that a person is needed, we should be there first and foremost...keep in touch, no matter whether we are close or not, in terms of distance...always keep in touch with one another every week of the year and that we try to get together as a family at least once a year. We've been successful so far that we have been able to do it more than once a year and that pleases me very much.

Velma communicated her experiences with her grandmother as integral to

Family Unity:

My grandmother...she liked to keep her family together and to keep us. I lived with her for so many years. it was a part of our life to be a family not just in name, but be together and be a part of each other's lives.

Velma continued by saying:

I always, we were always taught that sisters and brothers should...always...help each other...then you will stick together. The family that stays together...you will feel like you always be able to go to your brother or sister if you need something, you are close enough to them to let them know that you are in need...we are family, we always like to try to keep our family close together.

Velma's sentiments supported the experiences expressed by Opal:

Well, I believe that a family should be people that should be together. I also believe that if you be together...this is something to be thankful for.

The following accounts were given by Pricilla and Ralph:

I feel that families should be able to work together, to plan together, and...I brought my family up the same way. (Pricilla)

Well I believe in, in the family. Families ought to...support each other...our children...saw how my wife and I got along and I think that was an example for them. (Ralph)

Charles noted that successful people modeled Family Unity. He said:

My family, my mother and father were very dedicated to each other. Plus...people who are successful, people who seem to be doing okay in life, they seem to be so supportive of each other. They don't seem to be apart.

Jane described the unity within her family in this way:

My family was very, very, very close...we always were able to, anything that happened during the day, we could discuss it around the table....We were very close. We didn't always agree but we still supported and loved each other.

Velma said:

Well...you will feel like you always be able to go to your brother or sister if you need something. Brothers and sisters should love each other.

Aged Wisdom

Eleven informants in this study expressed a belief in the worth of listening to elders' for wise counsel. Elders were described as capable of passing along valuable lessons to younger generations. These lessons were transmitted both by direct communication and by personal example. Informants viewed such lessons as preparation for facing the many responsibilities and changes that accompany each life stage.

Emma communicated her childhood observations of the Aged Wisdom of her grandmother:

I watched my grandmother and other older people, how they set a pattern for us...just being around her [grandmother]...and watching how she treated other

people.

Arthur credited his decision making ability to childhood experiences with elders:

My parents and grandparents...when I was a boy...helped me to formulate my belief systems. I watched them and they also helped me to make some better decisions than I myself had decided to make.

Many informants mentioned the beliefs gained from the elders within their church congregations, particularly from Sunday school teachers. Listen as Jane, Mary and Bryant share their experiences.

Elderly people in the church....I've always depended on talking to them. (Jane)

We were in the...Sunday school class and the teacher told us...and from that kind of training we grew up with Christian principles...and we tried to pass them right along and we try to help our young people to...listen to what's going on so they will know what to talk about. (Mary)

I had a Sunday school teacher that ah, through the years was very influential. (Bryant)

Like Family

Eight of the 30 African American elders in this study reported that they did not have biological family in close proximity and relied on supportive others they described as being "Like Family." These informants expressed a strong belief in assigning equal value to biological members and extended or surrogate members of their support network.

A variety of individuals were said to provide support Like Family including in-laws, peers, friends, neighbors and church members. Informants often spoke of their relationships with supportive others as being available for fellowship, sharing, listening, and encouraging.

Jane's relationship with her sister-in-laws was equated to that of sister-to-sister. She spoke of the peace and harmony within her relationship with her brothers wives:

I have three sister-in-laws and...we have never fallen out. We are just like sisters right now...they have been in my family for many, many years...we are just like that, just like sisters.

Ulysses a widower, described his belief in being Like Family when he talked about his fellowship with a group of individuals at a senior housing complex:

I have a group of people that I meet with when I can that I eat with. I go down there [senior housing complex] for fellowship and not just to eat but to fellowship. When I get with them it seems like an extended family to me, and I love them.

Velma remembered a treasured friend in the following manner:

It means a lot because you feel more comfortable sharing things with them [friends]. I really lost a very good friend last year. We'd do everything. We were just like sisters. We used to tell everybody we was like sisters...we could talk to each other about our problems or whatever. If I...needed some friend to talk to and she could do the same thing with me. We just felt like we could talk to each other and we didn't worry about everybody else knowing about it, you know. It was just nice to have somebody to do that with.

Opal placed her church family in the category with biological family:

It [church] has been almost like a second family to me...I have been there for a long while...the people there to me are very warm...and that meant a tremendous thing to me.

Days Past and Gone

Days Past and Gone was a belief among informants that the personality of neighborhoods changed over time, and that neighborhoods are not like they once were. This belief was clearly communicated by informants when they spoke of neighbors not knowing each others names, thereby, limiting the interactions or exchanges made between neighbors.

Informants shared past experiences with going to a neighbor to borrow a cup of sugar, an egg or even asking a neighbor to run an errand or assist with a task. However, those supportive interactions as communicated by seven of the 30 informants were viewed as a thing of the past. From their perspective neighbors don't visit or look out for each other as neighbors once did.

Arthur reminisced about his boyhood neighborhood. However, he voiced a concern that his current neighborhood did not measure up to the nurturing and family oriented neighborhood of his childhood. He expressed his belief in Days Past and Gone in the following way:

The community as it was when I was a boy is no longer there. My neighbors were very much like parents to me and all the other children in the community.

Velma voiced agreement:

Well one thing...they [neighborhoods] are not like they used to be, you know....You have people coming and going and this is what is bad...

Knowing neighbors and keeping in touch with them was a strong belief concerning Days Past and Gone. Bryant spoke affectionately about his neighborhood memories as a boy. He spoke of how neighbors kept in touch even in the process of daily chores and household responsibilities. For example, his mother visited with her next door neighbor while hanging out the family wash:

When I was growing up neighbors knew each other, and they visited each other. Women talked over the fence while hanging their clothes out.

Barbara added:

...we were looked after as we went about, as our parents worked everyday. All adults in the neighborhood were our keeper and we knew that.

Bryant also painted a contrasting portrait of neighborhoods today when he told his story of being isolated from his present neighbors. His account also included an absence of effort on his part. His account follows:

Today, the street we live on, I seldom ever see any of my neighbors...by accident I see them going in and coming out. There isn't that kind of community that kind of closeness now...I have become adjusted to that. When I go in, I'm in.

Nathan shared fond memories of his community as a child. He agreed with Bryant regarding today's communities:

The community is not what I would like to see as a community. The community that I know is one I knew when I was growing up as a boy. I knew everybody on the street and everybody knew me....Community is not today to me what it was nor what it can be.

Zennia echoed the voices of other informants when she stated:

Things are different than they used to be with neighbors. Neighbors now stay more to themselves than then. Where I came up, we were neighbors. Now it's a little different. People don't visit each other in the neighborhood anymore....My neighbors over here, I don't get to see them only when their cars go out or something like that.

Research Question Three: Evaluation of the Consequences of

Supportive Interactions

The final research question was designed to determine how the 30 informants evaluated the consequences of their supportive interactions. More specifically, discussions centered on what impact social support from others had on their well-being. Informants' descriptions clustered into four categories: Positive Sense of Well-Being; General Satisfaction With Life; Ability to Change; and Taking Pride/Giving Back. Figure 3 depicts these categories and accompanying themes.

Positive Sense of Well-Being

Every informant in this study spoke in positive terms regarding his or her emotional and physical well-being. Informants talked about how they were able to progress beyond the normative changes that accompany aging, such as slowed

reflexes, and diminished sight and hearing. They often spoke of reaching out to others to compensate for limitations and other restrictions in mobility and independence. Their sense of forging ahead in spite of the many limitations was strengthened through interdependent interactions. As informants talked, three themes emerged to guide their accounts: Reciprocal Caregiving, Shared Fellowship; and Feeling Blessed. A description of each follows.

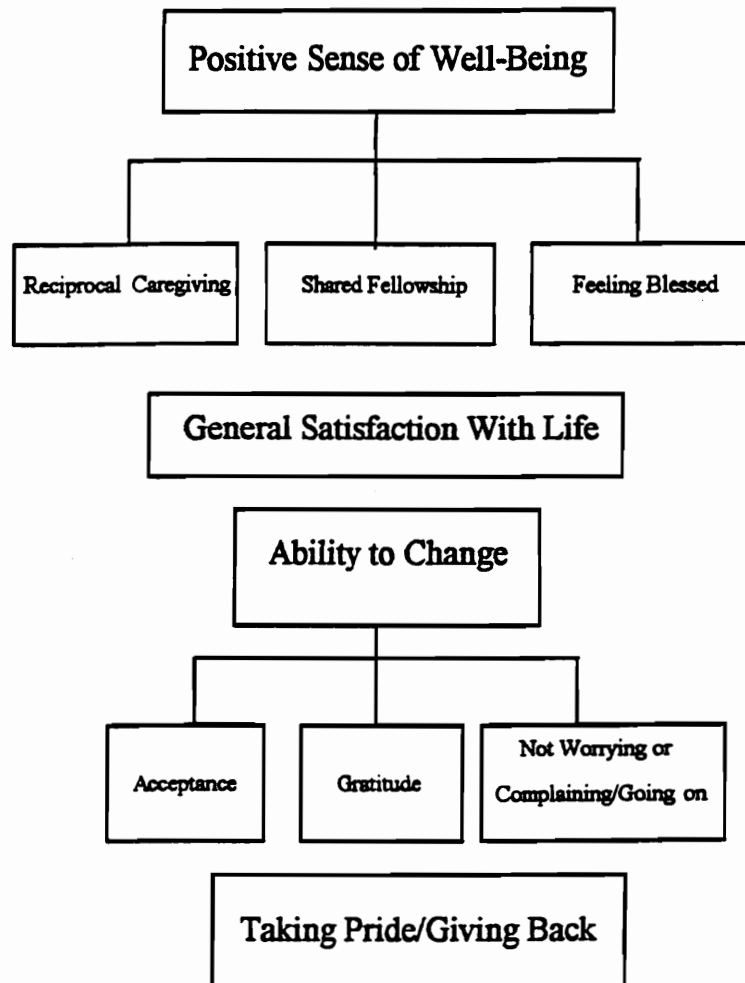


Figure 3 - Consequences of Supportive Interactions

Reciprocal Caregiving

Twelve informants described the reciprocal nature of the interactions in their support networks. Reciprocal Caregiving was viewed by all informants as valuable in promoting and maintaining physical and emotional well-being.

Thelma admitted that she was the receiver of care from her extended or surrogate family after they recognized and felt her need for support. She gave the following account:

When this tumor got me, well slowed me down, my church members and neighbors nursed me. This neighbor right over here, she was here all the time she wasn't at...hospital on her job, she's a nurse. And my church members were just great.

Victoria shared her experiences as a receiver of care in this manner:

Well, my husband and have always been neighborly and did what we could for others. It has come back to us here lately. I told him we must have a guardian angel or somebody looking out for us. He had his leg amputated and when he was in the hospital I broke my hip. Our church members came over and cooked, cleaned and did other chores for us. Our neighbors collected and put the garbage out for pickup. Now that may seem like a little thing, [trash] but it was tremendous to us.

Ulysses spoke of his community club as good caregivers:

They [neighbors] know that I can't get around like I use to with these bad legs. They come by and do little things for me like vacuum, cook, and order groceries. They even take me to the doctor.

Mary also spoke about her experiences as a caregiver. She shared her desire to

remain sensitive to the problems and needs of individuals in her neighborhood and to encourage others to get the best that they could from life. She believed that such care influenced positive well-being. She said:

I guess I'm just strong on caregiving, and to be able to help somebody everyday. I like the song, If I can help somebody then my living has not been in vain...that's what I try to do. I look around the neighborhood to see what needs to be done and I help where I can..

Sarah agreed with Mary that she was willing to help others whenever and wherever she could. She put it this way:

I was, now what I do, if it's anybody that I can help, I help. We got some neighbors they don't even want you to come in the door but there's some that need help, and I always get in my old tugbug out there and run and do something for somebody and I always say, if I can help somebody while I pass this way, my living will not be in vain and that's the way I am. I feel, if I can help somebody, I feel knowing that I can help 'em...I have a good clear heart knowing that I've done good for them.

Thelma shared the following account:

We learn to come to your aid if I am needed. If I can do something for you, I'm here for you.

Ulysses spoke of his teamwork with his wife in the provision of care:

...my wife...she taught me a lot of things....Helping people in the community and organizing different things in our church...we started a flower club...we put flowers in the church...things like that and care for others.

Shared Fellowship

Ten informants related that Shared Fellowship was important to their well-

being.

Ulysses and Yvonne spoke of going out into the community to mingle with people. Their comments are listed in turn:

Well...the fellowship that I get with dealing with other people and their dealing with me. It makes me feel a whole lot better than being here alone. (Ulysses)

You can...have activities, but you need to get away from your house, and fellowship with other groups, with other people. Call them on the phone, write them cards and letters. Go where people are and be with people. I've never isolated myself from people. I've always been a people person. (Yvonne)

The importance of Shared Fellowship was also expressed by Emma in the following words:

I go to breakfast every morning with some of my friends and church members. I eat breakfast every Saturday with Reverend and Mrs. Green. We have been doing this for years. We enjoy each others company. Well, I guess that is good for all of us. I just look forward to getting up each morning and seeing other people.

Barbara attributed her health and well-being to the support she receives from her Shared Fellowship with family, friends and her church. She expressed it this way:

My health would not be good if it wasn't for the support that I get. When I was diagnosed with cancer....Through prayer and encouraging and even when I go for a mammogram they're praying, whatever. I also let them know if I'm going in for an exam. I had one last week and they all said we're praying everything's going to be all right. They're very encouraging.

Shared Fellowship was considered vital by informants who had experienced the death of a spouse. Bill shared his view:

That little group that meet at Noon each Wednesday and my fraternity have helped me to survive, particularly after my wife died. They have been so supportive that I feel better when I go to meetings with them. I actually feel much better all around with these people in my life. My outlook on life has improved tremendously.

Feeling Blessed

Eight informants verbalized the presence and impact of blessings in their lives and attributed such blessings to their sense of well-being.

Barbara and Bill made these comments as they described their well-being:

I feel like I'm blessed. (Barbara)

I am very blessed with what others do for me. I am blessed. (Bill)

Ralph made the following observation attributing Feeling Blessed to the support from others:

I can see it's a blessing. It has to be a blessing because there's so many people, their outreach is not like mine.

Roberta spoke of Feeling Blessed in terms of receiving divine assistance on a daily basis. Her words were spoken in this manner:

You know, the Lord has been, has blessed me so...I feel there's a constant help every morning, every night.

Feeling Blessed was also equated with the provision of service to others as exemplified by Sarah's words:

I feel good knowing that I've done what I could do. That's where I get my

blessings from.

General Satisfaction With Life

Twenty five of the 30 informants indicated a sense of peace and contentment with their current status and life stage. For example, Barbara's persona was heightened when she made the following comment:

I just feel that life has really been good to me and that my life right now could not be any better at this stage. I am very satisfied.

Nathan reviewed his life experiences and concluded:

With my life, I would say that I am very satisfied with it.

Pricilla, Victoria and Mary made the following comments:

I would say very satisfied. (Pricilla)

I am very satisfied. (Victoria)

I am very satisfied. I just didn't do some things like my school. (Mary)

Howard was not very verbal, however, he responded simply, concisely, and convincingly when he said:

I have no complaints.

Sarah and Yvonne spoke of past experiences as satisfying. They told of how they were able to persist. Their statements are listed in turn:

I am satisfied because I know God is on my side. He'll never leave me alone. (Sarah)

I'm not going to worry about being dissatisfied about nothing. I'm just happy. The Lord is good to me and he allow me to go to bed at night and go to sleep and get up....I'm just happy and I am very satisfied with what I have, not asking for no more. (Yvonne)

Bill offered an intriguing and unique story regarding his general satisfaction with life. He stated:

Somewhat satisfied, because there are things I want to do I want to reach out to help others. I reach out but I don't think I have reached out as much as I should. Booker Washington was out in the ocean and he said that he needed some water, and he sent a message to shore, saying send someone out, we need fresh water. The message that came back was let down your bucket where you are. Right down in the middle of the ocean was a stream of fresh water in the middle of the ocean. He had to let down that bucket to save himself. Many times we get in a spot, and we don't know where to go, and we get in turmoil, let down your bucket where you are.

Ability to Change

Nineteen informants recognized and acknowledged that change was constant in their everyday lives. Life circumstances often required informants to accept and cope with illness, slowed reflexes, diminishing thought processes and restrictions in mobility. Staying flexible, keeping an open mind, and maintaining a positive attitude were essential keys to successful aging and positive well-being according to the elders sampled here. They asserted that they had an awareness of when and how to make the necessary adjustments that impacted their well-being. Responses clustered into three themes which seemed to represent an adjustment process: Acceptance; Gratitude;

and Not Worrying or Complaining/Going on.

Adjustment usually began with expressions of acceptance for their current status, followed by expressions of gratitude for past as well as present skills, and finally employment of strategies of Not Worrying or Complaining/Going on.

Acceptance

Ten informants shared their experiences with acceptance not only regarding physical health, but emotional health as well. They spoke positively about even the declines that they had experienced, and related them back to the process of the Ability to Change.

Ulysses put it this way:

Well...my feet and legs give me trouble and other than that, I'm okay. I go to the doctor for them, but I don't let that stop me.

Yvonne spoke of the importance of moving around to keep active. She communicated how her circulation was improved by activity:

I have poor circulation. Now that doesn't bother me 'cause I don't sit. I'm sitting here longer now than I usually sit. You are supposed to keep moving and take exercise.

Quincy shared his experience with a serious health issue and shared his positive attitude regarding adjusting to change:

Although I've had a heart attack, had open heart surgery, I think I can do pretty good. I am active.

Ability to Change involves more than health issues. Velma shared some intimate details regarding the changes she had to make as the result of a serious automobile accident that claimed the life of one son and resulted in permanent impairments to her other son:

I think it [supportive connections] is more important 'cause I have lost one son. The other son came a long ways and had surgery, but he [God] brought me through all of that...I am here. My family helped me, especially this daughter [eldest]. And my pastor, church members and even the doctors and nurses at the hospital. God brought me through and actually, I feel, I just feel real good about it now.

William spoke of the emotional strength that is required to accept changes at this life stage. He referred to not letting too many things bother him:

I don't let too many things upset me. I just go on because I can't change them. I don't get down about it, I face it and go on. We men are the worst...we don't take care of our health and cry the loudest when we hurt.

Robert laughed when he spoke of the pain in his legs that he contended with on a daily basis. His expression of Acceptance was uttered in these words:

Don't anybody's legs hurt as good as mine.

Thelma spoke of her Acceptance in these words:

The little pains that He [God] put on me, I've told myself that I can bear them.

Perhaps Quincy's assessment of Acceptance was the most descriptive of all.

He articulated how he welcomes and has accepted the end of life itself. Listen to his

account:

I just think that one of these days I will have a heart attack and I hope that I do. I hope I won't be sick for a long time. My father had a heart attack, got up and walked around the garden, and sat down at the table, had a heart attack and died. I think it was a blessing for him and for my mother because she didn't have to take care of him. I think, wouldn't it be fine if this same thing would happen to me and I try to live so that if it happens, I'll be ready to go. I think, I think death is a blessing.

Gratitude

Gratitude was expressed by five informants for their current status and contributed to their future hopes and dreams.

Perhaps Roberta said it best:

So many people my age [99] can't hardly move and I can move. I can go and I can...I'm active. I do all I can.

Thelma and Yvonne expressed their Gratitude for the ability to be mobile and independent.

At my age [87], there's a whole lot of women not able to get out of bed. Not only do I get out of bed, I do my own meals, I do my own driving. Well, I'm having trouble driving by night now because it's the cataract in my right eye, but at the same time, I'm happy. (Thelma)

The Lord is good to me and He allow me to go to bed at night and go to sleep and get up...and do...little things for myself, fix my breakfast, sit down and read the paper, visit my neighbors. (Yvonne)

Not Worrying or Complaining/Going on

Four informants communicated experiences with Not Worrying or

Complaining/Going on. Many informant experiences were related to health issues and the process of aging. However, aging was viewed as part of living and as a natural progression rather than a loss or negative occurrence.

Jane spoke of Not Worrying or Complaining/Going on as being able to move forward and leave the things undone behind. Her interpretation follows:

I don't worry about anything. You know, what should have been or what could have been. I just leave the past behind and keep moving forward.

Mary spoke of her love for children. She taught in the public school system for more than 30 years. Her ultimate dream was to establish a private school for children. However, she did not realize that dream, but kept a positive attitude regarding life in general. She made the following comment:

There are some things that I look back on in my life and wish I had done, and that school is one...but I don't worry about it.

Yvonne expressed how complaining was not positive or profitable:

I don't complain...a whole lot of complaining doesn't help.

Taking Pride/Giving Back

More than one third of the informants stated that they gained a sense of their own worth and merit from past and present supportive experiences. Taking Pride/Giving Back was communicated in spite of some seemingly insurmountable odds, obstacles and pitfalls. Informants felt an obligation to give back to others.

Roberta spoke of her love for children and how she taught school for 45 years. She also talked about how she organized a community club for the children in her neighborhood. She continued to plan monthly meetings and birthday parties for all the children. Birthday gifts and party expenses are sponsored by her. She spoke proudly with excitement in her voice:

I bought Bibles for the children and assigned them Scriptures to read. I expect them to be able to discuss what they read when they attend follow up sessions with me.

Roberta also spoke with great pride when she talked about her recent visit to an elementary school to share with 7 and 8 year old children her childhood school experiences. The pride was very obvious as she recalled her experiences working with the girl scouts and children at her church. Regarding current accomplishments, she continued by saying:

I take care of my room and anything else I wanna do. I got up this morning and made my coffee.

Thelma's pride was exhibited when she spoke of how she serve as a volunteer on the cancer unit at a local medical center. She spoke of how she was a cancer survivor with a desire to help others. She expressed how service to others was vital to her functioning to avoid feeling sorry for herself:

I am a cancer survivor and want to help other cancer patients. I give the patients on the unit what they need, but not necessarily what they want. When

the Lord gets ready for me, He's going to have to bring somebody with Him....I will be too busy to stop and go willingly.

Thelma continued:

I tell people to get up off their stool of do nothing and get busy. Don't tell me what you can't do until you try to do for yourself. You can't just sit around and wait for things to fall in your lap. You must be busy, doing for others. I kept foster children, I took in the strays and those that others didn't want.

William was a retired educator with more than 30 years of service to the public school system. He also took much pride in his ongoing accomplishments and spoke of how he is Giving Back.

I am actively involved in my church. I am the coordinator of transportation and arrange transportation for church members to attend doctors appointments and other appointments that they need to go to. I also deliver meals to shut in people and coordinate a Meals-on-Wheels site. I have been doing that since retirement, 18 years ago.

Howard was a man of few words, but spoke with much pride about his work as an automobile mechanic for many years. He took pride in maintaining his skills and helping others:

I keep up my cars and I work on my nieces cars for them. I also go up to the station where I worked and help out sometimes.

Nathan was a retired corporate executive. He owned his own business and worked full time as a financial consultant. He took pride in his accomplishments. He was very self confident and communicated that others can be successful with effort:

I took advantage of opportunities throughout my life that resulted in financial independence. I believe that one can control their destiny by rising above their situations and circumstances.

Life went on for Pricilla after working for more than 4 decades as a factory worker. She had a desire to earn a college degree, however, her life took another direction. She maintained active involvement in her family, church and community while achieving her goals. She was able to let go of a supportive other [husband] but thrive on the loving memories that she continued to cherish. Additionally, she tapped into her own self worth and was a supportive other by Giving Back:

Well, I guess I've always had a desire to be independent and have goals. I worked toward that end even though I didn't...I had a desire at one time to go to college. In fact, I sent in applications for college. Sometime along the way you get turned away from things that you want to do. I think it was the desire to, wherever I was to do the best that I could do, be the best that I could in whatever job I was in....I always took my work seriously...they didn't come to me and ask me for a job. I went to them...I worked hard. I am a volunteer for several organizations in the community, including my church. I am also on call as a bus driver for...University.

In summary, these 30 African American elders were able to develop, implement and manage a cadre of routine and strategic supportive interactions that proved to be an invaluable asset to their well-being. Findings are discussed and conclusions drawn in the following chapter.

CHAPTER FIVE

DISCUSSION and CONCLUSIONS

Overview

The primary purpose of this study was to explore the concept of social support from the perspectives of 30 African American elders. More specifically, this study examined their personal beliefs, and their past and present experiences motivating their use of social support; when, how, from whom, and under what conditions support was requested (or offered); and evaluations of the outcomes of supportive interactions.

The overarching framework used to encompass this study was stress and coping theory. From this perspective individuals are envisioned as experiencing various kinds of stressors. Stressors are the life events (e.g., death of a spouse, criminal victimization) or chronic strains (e.g., having a life-threatening disease or living with constant financial hardships) which initiate appraisal processes. If symptoms of physical and emotional stress appear (e.g., upset stomach, shaky hands, anxious feelings, difficulty concentrating) and events or strains are appraised as threatening their well-being, individuals then begin to evaluate their abilities and means to self-protect (Bird & Melville, 1994).

According to stress and coping theory, social support is a coping resource.

Coping resources are those factors that modulate or buffer against the impact of stressors such as life events and chronic strains on mental and physical well-being (Bird & Melville, 1994; Lazarus & Folkman, 1984). In this study social support was examined as a coping resource for African American elders -- to address the meanings that African American elders attach to social support, beliefs, and how supportive interactions influence well-being. This research sought to extend the social support literature in three ways, by 1) examining a seldom sampled population (African American elders), 2) drawing from within church memberships, and 3) employment of a qualitative methodology. The research questions that guided this study were:

1. Whom do African American elders name in their most important network of supportive others and what meanings do they attach to the support?
2. What beliefs motivate and define African American elders' involvement in a social support network?
3. How do African American elders evaluate the consequences of their supportive interactions?

Interview questions were designed to answer these research questions. The findings were described in detail in Chapter Four. This chapter begins with a summary and discussion of the major findings. Next, conclusions are drawn concerning how the results expand knowledge of social support and advance theory. Finally,

implications and recommendations are offered.

Summary and Discussion of Major Findings

This study examined the social support networks of 30 African American elders as they faced the many challenges and demands of older adulthood. Findings of this study substantiated the significance of strategically identifying supportive interactions. Although previous research investigated supportive relationships and identification of supportive others (e.g., Chatters, Taylor & Jackson, 1985; Jackson, 1972; Taylor & Chatters, 1986, 1988, 1989, 1991), none of the studies reviewed investigated the personal meanings older people attached to social support. Through the employment of a qualitative methodology, it was possible for meanings to emerge. Follow up questions and probes uncovered a wealth of information as informants described specific behaviors and actions they employed to gain as well as give support.

Most Supportive Others and Meanings Attached to Support

These African American elders communicated being deeply embedded in their social support network connections beyond basic routine and temporary interactions. Their most supportive others as elders included spouses, memories of parents and grandparents, siblings, offspring, church members, friends, neighbors and pastors. When asked to identify supportive others, informants recalled special and supportive

relationships with family members. However, individuals outside their biological families of origin and procreation were also frequently included in this close circle of supportive relationships. This finding complements the research of Taylor and Chatters (1986; 1989) in their investigations of patterns of support within family, friend and church networks. As Wimberly (1997) asserted, African American families remain the source of primary relations for African American elders, and those primary relationships include spouse, adult children and siblings.

As informants described their supportive interactions with others, responses clustered into four categories. Taken together these categories suggest that African American elders derive their meanings of support from their belief systems and evaluate support from that standpoint. Informants did not include persons who were not supportive. Four categories of behavior were reported as important: Building Endearing Relationships, Demonstrating Personal Worthiness, Leaving Loving Memories, and Teaching Valued Lessons -- were all actions taken by those named as most supportive others.

Building Endearing Relationships was the most often identified supportive behavior. This category was accompanied by the themes of Fostering Closeness, Listening, Physical Caregiving, and Praying For or With. Building Endearing Relationships was described as supportive by more than two thirds of the informants.

Fostering Closeness was perceived as a key element in the development of a network of supportive others. Many of the informants equated being intimate or close with the generation of feelings of warmth and friendliness. Like respondents in a recent study by Streeter and Franklin (1992) the African American elders in this study reported that supportive behaviors include such activities as listening, expressing concern, preparing meals or providing protection. Informants described Listening as lending a listening ear that went beyond just hearing words. That is to say, the listener was required to give attention to the unspoken messages communicated while displaying sensitivity. Physical Caregiving was provided by family and friends. For example, Mary a retired educator without nuclear family members drew friends from her network of supportive others (church members) to provide care after heart surgery. Praying For and With was the last meaning within this category that informants attached to support. It was described as a supportive other speaking to God on their behalf. Taken together these themes described the meanings that informants found in the giving and receiving of support. Meanings were clearly linked to observations of behaviors informants labeled as supportive.

Demonstrating Personal Worthiness was the second category of supportive behavior valued by informants in this study. Displays of devotion were viewed as being supportive. Demonstrating Personal Worthiness was further described as being

present without judging or wavering; being steadfast and unmovable even in trying times. Within this broad category of meaning two other meaningful themes emerged - - Being Dependable – being able to count on supportive others to be available and loyal in the provision of support; knowing that confidential thoughts and feelings would not be repeated to others; and Being Trustworthy and Respectful -- treating others with honor or esteem.

Informants retained strong memories of past relationships and interactions with deceased supportive others. This third category of supportive behavior, Leaving Loving Memories, refers to the phenomenon of having the positive past actions of loved ones come to mind when thinking about support. Informants stated that the memory of conversations, acts of kindness and daily routines of deceased supportive others empowered them to persist. Previous literature on social support had not investigated this phenomenon. Leaving Loving Memories was credited with providing a source of comfort, durability and focus not only in informants' daily lives, but particularly in the midst of difficulties.

The final category of behaviors that informants described as supportive was Teaching Valued Lessons. Elders were viewed as models and teachers of supportive behaviors. Honoring African American elders as a resource for younger generations seeking experience, advice, historical information and basic survival skills was also

reported by Wimberly (1997). Informants in this study described the lessons taught as experiences learned through supportive teaching and instruction from parents, grandparents, siblings, neighbors, Sunday school teachers and other elders.

Beliefs That Motivate and Define Network Involvement

Informants in this study described six major beliefs that guided their thoughts and actions relative to social support: Presence of God, Concern for Neighbors, Family Unity, Aged Wisdom, Like Family, and Days Past and Gone. The identified beliefs encompassed the domains of religious/spiritual, family, community and self. Past research suggested that beliefs influence the individual's understanding of life situations and build the foundation for evaluating resources (Park & Cohen, 1992). Findings from this study indicate that a belief in the Presence of God offered the best defense against the forces which might threaten the well-being of these elders. Informants further described this belief as a safe haven which was said to assist in the creation and maintenance of a positive, healthy environment where elders in this study could thrive.

Practicing Rituals and Abiding by Christian Principles were described as secondary beliefs or themes that explained the supportive nature of Presence of God. Rituals that were routinely practiced included Praying, Following Family Rules, and Bible Reading. Christian Principles that directed informants' supportive interactions

included Doing Unto Others and Training up a Child. These findings extend previous research. For example, McAdoo (1995) addressed the strengths of African American families and found that beliefs of African American families included strong kinship bonds, strong work orientation, flexible family roles, high achievement orientation and religious orientation.

The rituals of Praying, Following Family Rules and Bible Reading were described as beliefs that created and fostered connectedness within family relationships and within other relationships outside the family. Praying was a ritual practiced before meals, before going to bed, before embarking upon difficult tasks or challenges. Strong kinship bonds as mentioned by McAdoo (1995) were evidenced in this study through the belief of adhering to certain valued family guidelines and rules, including respect for elders in the home, church and community (e.g., , respecting not only the right of others but respecting their property). Additionally, reading the Bible provided comfort in loneliness and knowledge for growth and development.

Do Unto Others was a belief in the Christian Principle that individuals should treat those they interacted with as they themselves would want to be treated. This belief was scripturally based and discussed by informants as the Golden Rule, "Do unto others as you would have them do unto you" (Matthew 7:12). Train up a Child was another belief that was scripturally based. Elders said they believed that children

should be taught from an early age how to relate to others as well as how to obey God, elders, the laws of the land and promote goodwill among humankind. The scripture that elders referred to was Proverbs 22:6, "Train up a child in the way he should go: and when he is old, he will not depart from it." Once established within family relationships, Christian Principles were applied to other relationships outside the family. For example, informants mentioned that an individual in need should not fear going to others within their network for assistance knowing that they would receive fair treatment.

Concern for Neighbors was a belief described by informants as an appreciation of what others were experiencing (e.g., trials, troubles, sorrows and showing compassion and concern for others from an empathetic point of view). This belief was displayed through watching out for the safety and welfare of others. Pollard (1995) stated that "identity is grounded in a strong sense of community, in which individuals understand themselves as part of a people and where no person could live in isolation, materially or spiritually" (p. 5). This idea was advanced through findings in this study relative to looking out for others, yet honoring their need for privacy. These beliefs involved respecting the rights of individuals and property and neighbors looking out for each other by being just, impartial, pleasant and courteous without infringing upon the privacy of others (supporting from a distance).

Family Unity, a belief in the importance of families working together to support each other also was a significant belief for these informants. Family Unity included sticking together and showing love unconditionally with the assurance that there was nothing that a family member could do that would make other family members stop loving and supporting them.

Elders were described as a valuable resource for members of the younger generations. Informants expressed a belief in the worth of listening to elders for wise counsel transmitted both by direct communication and by personal example. This wise counsel of Aged Wisdom was viewed by study participants as preparation for facing the many responsibilities and changes that accompany each life stage.

African Americans typically receive informal support from immediate and extended family and friends (Taylor & Chatters, 1986, 1989). Although the preference of some African American elders is to receive assistance from family and friends, some African American elders report more frequent, intensive relationships with friends and church members than family (Smith, 1993; Taylor & Chatters, 1989; Walls & Zarit, 1991). Informants in this study expressed a strong belief in assigning equal value to biological members and extended or surrogate members of their family support network. The supportive others were reported as being available for fellowship, sharing, listening and encouraging. For example, Jane, the only female

sibling in her family of origin equated her relationship with her sister-in-laws as being just like sisters. And Ulysses, a widower described his belief in Like Family when he talked about his fellowship with a group of individuals to share meals and said they seemed like an extended family.

Days Past and Gone, the final belief that informants described in this section was a belief that neighbors today did not know each others' names and did not keep in touch. From their perspective, neighbors did not visit or look out for each other as neighbors once did. For example, Bryant spoke of how his mother visited with neighbors in the process of hanging out the family wash. David remembered how his neighbors would discipline him as well as all the children in his childhood neighborhood. Informants communicated different cultural expectations of the role of neighbor, and said that they were not getting what they wanted and certainly needed to know neighbors names.

Evaluation of the Consequences of Supportive Interactions

Four major categories emerged as informants evaluated the consequences of their supportive interactions: Positive Sense of Well-being, General Satisfaction With Life, Ability to Change, and Taking Pride/Giving Back. Several researchers investigating the contributions of support informal networks to well-being have concluded that social support can alleviate feelings of distress, and contribute to a

higher level of well-being (Dressler, 1991; Rubinstein, Lubben & Mintzer, 1994; Russell & Cutrona, 1991; Walls & Zarit, 1991). All 30 informant spoke in positive terms regarding his or her emotional and physical well-being. Three themes emerged from informants Positive Sense of Well-being: Reciprocal Caregiving, Shared Fellowship and Feeling Blessed.

Informants in this study expressed that the function of care provision was to be both givers and receivers of support. The provision of care was viewed as valuable toward promotion and maintenance of physical and emotional well-being. The welfare of others was a prime consideration in the provision of care and fostered positive well being for informants both as caregivers and carereceivers. Informants in this study articulated how their self worth and independence were enhanced through interdependence.

Shared Fellowship was another function that informants in this study viewed as vital to their emotional and physical well-being. For example, Emma spoke of engaging in Shared Fellowship by eating breakfast with friends and her pastor and his wife. Similarly, Bill described the function of Shared Fellowship as meeting with his prayer group each Wednesday and related how he felt better as a result of those interactions

A third theme related to positive well-being was Feeling Blessed. Prior

research reviewed mentioned religious and spiritual beliefs, and the importance of church affiliation and attendance for many African American elders. However, blessings were not included in these investigations. Findings from this study relative to blessings were unique. Informants were able to realize, recognize, and articulate their blessings as an appreciation and enjoyment of life in spite of their limitations and adversities. Informants spoke of blessings received from supportive interactions from three perspectives of 1) as being derived from what others did for them, 2) the provision of service to others, and 3) in terms of receiving divine assistance on a daily basis.

The second consequence of social support involvement mentioned by all informants was a General Satisfaction With Life. More than 83% of the informants evaluated their general satisfaction with life as very satisfied or satisfied. Their evaluations were described as a sense of peace and contentment with their current status and life stage.

The third emergent category from this study was Ability to Change which included the themes of Acceptance, Gratitude and Not Worrying or Complaining/Going on. This category was unique because previous social support studies reviewed did not include this phenomenon as a consequence of supportive interactions. Nineteen informants in this study recognized and acknowledged that

change was constant in their everyday lives. Life circumstances often required them to accept and cope with illness, slowed reflexes, diminishing thought processes and restrictions in mobility. Staying flexible, keeping an open mind, and maintaining a positive attitude were reported as essential keys to positive well-being. Informants described a three phase process involving acceptance of the varied changes required in their lives, being able to look back at the many accomplishments and joys that they had experienced and moving forward.

Evaluations of the consequences of support focused on both physical and emotional health. For example, Yvonne, a widow spoke of the importance of keeping physically active as a result of poor circulation. She communicated how improvements were realized through exercise that took her out among other people. Yvonne described communication with others as being emotionally uplifting. Velma shared the emotional changes required and the emotional support she received after the death of a son and permanent impairments of another son as the result of a tragic automobile accident. Other positive evaluations relative to acceptance and gratitude for supportive interactions were evidenced through visits and performance of tasks following illness. Informants seemed to move forward because they viewed aging as a part of living and as a natural progression rather than a loss or negative stage of life.

The final consequence of supportive interactions mentioned by informants was

Taking Pride/Giving Back. This was another finding. The newness resided in the informants' discussion of their sense of personal worth and merit as coming from supportive interactions and as driving and obligating them to give back to others. For example, Roberta, a retired school teacher who taught for more than 45 years felt an obligation to continue teaching through the organization of a community club for children in her neighborhood. Similarly, Thelma, a cancer survivor served as a volunteer on the cancer unit at a local medical center. Howard, a retired automobile mechanic felt an obligation to maintain the automobiles of his nieces and assist with mechanical responsibilities at a local gas station.

Conclusions

For the 30 African American elders in this study, the findings confirm that social support is a major coping resource. As suggested by stress and coping theory the emotional sustenance and practical assistance provided in times of need by individuals or groups with close personal connections is linked to positive assessments of well-being.

The three major conclusions of this study were: 1) social networks are developed and maintained as a process; 2) beliefs have a recognizable structure; and 3) feelings of well-being are a consequence of supportive interactions and beliefs. Each will be discussed in turn.

Social Networks as Process

Social support networks were developed and maintained through a progression of steps identified by study informants. This process was revealed as informants discussed meanings of support. The process began with the selection of those who met personal standards for admittance. Elders described how people became valued members of their support networks and then reported how relationships were maintained and individuals kept in the network.

As elders spoke of their experiences with supportive others it was clear that serious thought was given to network membership. The most esteemed and valued members of these elders' social networks had a demonstrated personal worthiness. As supportive interactions occurred elders had observed behaviors that they evaluated as evidence of support. For example, dedicated devotion by or to individuals within ones support network was described as a necessary action of a supportive other. Worthiness was expressed by informants in behavioral terms such as being dependable when needed without judging or wavering; in other words, being steadfast and unmovable even in trying times.

Dependability was also equated with being an esteemed individual. Simply put, individuals proved themselves worthy by rising to the occasion when support was requested. Other behaviors judged essential included being trustworthy and respectful.

Once admitted to the support network, actions of supportiveness allowed individuals to progress beyond basic membership to the point of becoming more intimately embedded in the network. At this point it was possible to build endearing relationships over time. This stage of the support process was described as being less based on individual behaviors and now more closely tied to dyadic behaviors. Fostering Closeness, Listening, Physical Caregiving and Praying For/With all served a dyadic function. According to these elders, special and supportive relationships resulted from these supportive interactions.

Investments of time, energy and effort resulted in the development of a relationship that was evaluated as valuable enough to nurture and maintain. Elders articulated that just because an individual was a member of their network did not guarantee that the relationship would progress to become an endearing one.

Once embedded as a valued intimate partner in the support structure of another, an individual could eventually be looked upon as a wise teacher from whom valued lessons might be learned. Elders in the network of informants were particularly treasured from this perspective. Informants described how the older members in their support network taught them how to make decisions, how to survive in a racist society and how to plan ahead for the future. These lessons were communicated by teaching as well as by example. By demonstrating personal worthiness and participating in

supportive interactions, some support network members moved to this more respectful stage in the support process -- that of model and teacher of others.

Finally, informants identified the last stage in the support process -- being available even after death. According to informants, relationships were built and nurtured with various individuals that persisted beyond the human life cycle. Relationships with departed others were dynamic enough to make some permanent imprints in the lives of these elders. These close and endearing relationships fostered comfort, encouragement and resiliency for those left behind. Informants spoke of how they counted on those memories to keep them focused in the midst of difficulties. Memories of deceased supportive others were also counted on for daily strength. Previous definitions of social support (Cobb, 1976; Cutrona & Suhr, 1994; Moss, 1973; Thoits, 1982) did not include memories of deceased supportive others as a factor of support. While there are no direct or tangible resources, loving memories are considered as strengths. In fact, for certain situations in which they find themselves, informants did draw support from their deceased loved ones.

Structure of Beliefs

The second major conclusion was that the belief system as described by elders had a discernable structure. The foundation for the structure of informants' beliefs was the Presence of God. Informants spoke of having a relationship with God as a loving

father who cares for, watches over and has high expectations for His children. This relationship with God was nurtured and developed through practicing family and religious rituals and following Christian principles. By doing so the elders in this study said they were able to maintain connection with God and reap dividends. Informants spoke of their lives as not being their own. In other words, they communicated how their purpose for being on earth was to show love and compassion for others while enriching the lives of those with whom they came in contact. Love and compassion were described as including accepting responsibility for teaching others how to co-exist and advance humankind.

Rituals were identified by informants as keeping the presence of God first and foremost in their lives. These elders believed that people should practice Christian values, morals and standards. Informants said that their beliefs were structured to create an atmosphere of peace and harmony. They used scriptural references to ground their beliefs. For example, Do Unto Others: Matthew 7:12, "Therefore all things whatsoever ye would that men should do to you, do ye even so to them for this is the law and the prophets'," and the Golden Rule -- Do unto others as you would have them do unto you -- treating others like one would want to be treated.

The elders also believed that children who were trained to abide by Christian principles would continue to apply those principles not only in their own lives but to

influence others with whom they came in contact. This belief also had a scriptural base; Proverbs 22:6 "Train up a child in the way he should go: and when he is old, he will not depart from it." Elder's believed that children should be taught from an early age, and that although they were subject to stray, they would remember their teaching ("home training") and return to the structure.

These elders used spiritual references throughout their interviews, returning time and again to their religious beliefs, viewing such beliefs as the foundation for the other beliefs they identified as personally relevant -- Concern for Neighbors, Family Unity, Aged Wisdom, Like Family and Days Past and Gone.

The foundational belief in the presence of God seemed to guide elders in this study in all walks of life. Through a belief that they were their brothers and sisters keeper, elders felt an obligation to show love and concern for their neighbors. Neighbors were a vital part of these elders' networks which included individuals who were not only in close proximity, but all those with whom they came in contact and were responsible for. Informants equated being neighborly with meeting the expectations that all that they were and ever hoped to be was predicated on how well they took care of not only themselves but others. The spiritual reference of being their brother's keeper led these informants to believe in showing a genuine concern for their neighbors even from a distance. This belief was explained by informants as a

belief that God does not force Himself upon others, but stands at the door of the hearts of His children and waits for them to invite Him in. Informants said that their belief in the constant presence of God in their lives compelled them to be vigilant in their efforts to look out for each other.

These informants articulated that their belief in God as being a God of order and structure was the basis for their belief in unity within families. Family members working together and being connected according to these elders was interrelated and interconnected to everything that they believed. Informants explained that a display of family unity modeled the constant presence of God in the lives of family members and that unity within the family fostered an environment for supportive interactions. In other words, elders said that where unity was present within families, that spirit of cohesiveness was more likely to spill over into relationships outside the family and make a positive impact on society in general.

For these informants, many of the past positive events and experiences connected to various life stages where older persons in their support network dispensed advice and directed other aspects of their lives was described as aged wisdom. Informants believed that wisdom as given by God, accumulated throughout the life span, manifested itself in older adulthood and led older members of their network to strategically give advice relative to survival, decision making and planning

for life in the future. Furthermore, informants believed that older persons from their childhood who shared wise counsel with them had a special relationship with God. They believed that through a progression of stages the ability to provide wise counsel was a promotion by God of those with an intimate relationship with Him to a higher level within His kingdom here on earth. These wise elders from their past were considered to be the most valued and esteemed supportive others within their network. Moreover, informants believed that once they had been privileged with information and experiences it was their God given responsibility to continue the cycle of passing on wise counsel. Informants in this study took pride in having progressed to that stage of life where they to were valued as esteemed and wise elders, and attributed this elevation in status to having abided by Christian principles and practiced religious and family rituals that strengthened their relationship vertically with God and horizontally with man.

A fifth major belief for these elders was a belief in treating others like members of their own biological families. This belief according to informants stemmed from a larger belief that all of God's children are born into one family, the human family, and that all humankind was connected in some manner. Informants explained that treating others within their network as they would treat their own family members kept the presence of God alive in their lives as well as in the lives of

others. This was accomplished by showing love and compassion and including others in their close circle of intimate relationships. Meaning that care, protection and other survival techniques were shared with persons outside their biological families and on occasion, bringing them into the confines of their homes. Informants said that this belief crossed the boundaries of culture, race, age, gender and religion.

The sixth and final belief in this structure of beliefs as described by elders in this study -- things are not the way that they once were. According to informants, their concern for what once was related to experiences that God had taken care of them in the past, was taking care of them presently, and would continue to take care of them in the future. Their disenchantment was with the loss of cooperative neighboring that seemed to go against the grain of the constant presence of God being in their lives, and their belief that all humans belonged to the same family (humankind). Cooperative neighboring according to these elders meant that when one of their neighbors was hurting or unhappy they too felt that hurt and unhappiness. Conversely, when one of their neighbors was happy or prosperous, that spirit of happiness and prosperity was shared in a corporate manner.

Well-Being: Consequences of Support and Beliefs

Recent studies have shown that social support has a positive impact on well-being (Dressler, 1991; Kahn, 1994; Walls & Zarit, 1991). However, previously

reviewed studies did not link personal beliefs and meanings of support to individuals assessments of well-being. All informants spoke in positive terms regarding his or her well-being. Informants talked about how they were able to progress beyond the normative changes that accompany aging. They often spoke of reaching out to others to avoid succumbing to loneliness, limitations and other restrictions in mobility and independence. Their sense of forging ahead in spite of their limitations was strengthened through interdependent interactions. For these elders a sense of well-being was much more directly tied to support network functions and beliefs than to physical health. As elders talked, three support functions emerged to guide their accounts; Reciprocal Caregiving, Shared Fellowship and Feeling Blessed.

Reciprocal Caregiving began in the belief system as a behavior that elders looked for in others that resulted in positive well-being. Two distinct components of caregiving emerged; direct and indirect. An example of direct care was the provision of medical assistance, transportation to appointments and cooking and cleaning chores. An example of indirect care was working within the network to equip members with the necessary tools to assist others with no intent of being the receiver of care. Another indirect care behavior was passing on a lesson learned from a mistake to prevent others from making a similar mistake.

Shared Fellowship involved two or more persons in their attempts to achieve a

common goal. For example, eating lunch or breakfast with another individual or a group of individuals, attending a prayer meeting or Bible class to "feel better." Shared Fellowship according to these elders grew out of the belief that individuals are not their own and that anything given to them by God was meant to be shared with others.

Feeling Blessed was a unique finding relative to well-being. Three perspectives emerged relative to Feeling Blessed. First, by what others did for them as Bill explained how his neighbor and his fraternity brothers were blessings to him in the performance of chores, visiting, and providing emotional comfort. Second, Sarah equated Feeling Blessed with the provision of service to others. She said that she provided transportation for others, ran errands and did whatever she could to help. She further said that she felt good knowing that she had helped others by doing what she could and that her blessings were derived from these interactions. Third, Feeling Blessed was articulated by Roberta in terms of receiving divine assistance on a daily basis. She said that she felt His presence as a constant help day and night. Feeling Blessed had a support function and because of the rewards gained from the supportive interactions informants felt that God had blessed them.

The second positive consequence of support and beliefs for these elders was a General Satisfaction With Life. Twenty five of the 30 elders in this study indicated a

sense of peace and contentment with their current status and life stage. Informants who did not report a high level of satisfaction with life spoke in terms of the condition of society, seeing it as the basis for their diminished satisfaction. However, none of the informants complained about their personal situation.

Ability to Change was another finding. Although the elders were very involved in their networks, they reported continued growth and development as individuals. Staying flexible, keeping an open mind and maintaining a positive attitude were essential keys to their positive well-being. Informants had an awareness of when and how to make the necessary adjustments that impacted their well-being. Three functions emerged that seemed to represent an adjustment process; Acceptance, Gratitude and Not Worrying or Complaining/Going on.

Acceptance was not only related to physical health, but emotional health as well. Acceptance of declines that had been experienced included poor circulation, recovery from heart surgery, daily bouts with arthritis and preparation for the end of life by accepting death as a blessing.

Gratitude represented an appreciation for past accomplishments and joys. However, the positive sense of well-being that elders enjoyed was an occasion for the expression of gratitude. Many elders spoke of being grateful in terms of being able to think for themselves, to dress and feed themselves and to mingle among other persons.

Additionally, Gratitude included emotional stability after experiencing tragic losses through death and for financial means to enjoy life after retirement. Other examples of Gratitude included thanking God for being able to sleep at night, get up in the morning, cook breakfast, read the newspaper and drive to various destinations without requiring assistance.

The final step in the adjustment process was Not Worrying or Complaining/Going on. Many experiences were related to health issues and the process of aging. However, aging was viewed as a part of living and as a natural progression rather than a loss or negative occurrence. For example, Mary underwent heart surgery but said that she did not plan to sit down, instead she continued her involvement with others as a provider of support. And Yvonne said that she did not worry or complain about anything as complaining was not positive or profitable.

The final positive consequence of well-being was Taking Pride/Giving Back. Although this was not an entirely new consequence it created a new perspective for gaining personal worth and merit, particularly from past and present supportive experiences. For example, this perspective included the pride that was shown by Roberta after teaching children for 45 years. Her method of Giving Back was evidenced by organizing a community club for children in her neighborhood and teaching them. Another example was evidenced by Thelma. Her pride was exhibited

when she spoke of surviving cancer. Giving Back was displayed through her volunteer work on a cancer unit at a local medical center. And William spoke of his accomplishments and the pride that he enjoyed after having taught school for more than 30 years. His Giving Back was displayed through the provision of transportation for his church members and the delivery of meals to shut in persons within his community.

Conclusions Relative to African American Families

To fully appreciate these elders' responses, it is important to place them within the context of the existing literature including African American elders. A powerful argument can be made for the examination of the growing numbers of social support networks of African American elders given that increasing age is associated with a deficit in kin resources (Cantor, 1979; Chatters, Taylor, & Jackson, 1985; Taylor & Chatters, 1991).

Many African American families have overcome a variety of challenges (i.e., discrimination, poverty) and stressors presented on a daily basis. This was evident with informants in this study. Furthermore, research acknowledges the strength of African American families and defines their resilience relative to supportive interactions that create and foster a positive sense of family unity (Littlejohn-Blake & Darling, 1993). Positive family unity was communicated by the informants as a belief

in the importance of family connectedness. The strength of their relationships may be related to their triangular commitment to faith, family and community and the teamwork or partnership approach that emerged from their intimate connections (i.e., togetherness and showing unconditional love).

Many African American families have many strengths from which they can draw (McAdoo, 1995), but few studies have been conducted relative to their strengths (Littlejohn-Blake & Darling, 1993). Informants in this study drew upon the strengths within both their immediate and extended families, which extended their potential number of caregivers and network members. That diversity emerged from the strength of being adaptable to family roles. Researchers suggested that such flexibility within African American families is a source of strength and stability. The sources of strength are supportive network, role flexibility, strong religious connections, employment of extended family supports and use of fictive kin like family (Littlejohn-Blake & Darling, 1993; McAdoo, 1995; McCubbin, Futrell, Thompson & Thompson, 1995). The elders in this study communicated a sense of belongingness, intimate connections and reciprocal support within their family, friends, church and community networks.

Given the increasing number of African American elders, the need to evaluate the consequences of supportive interactions seems particularly relevant to this group

because of the dearth in data. Although this study cannot be generalized to include all African American elders, the level of positive well-being experienced by these elders may have been enhanced by a combination of meanings, beliefs and positive consequences of supportive interactions. Within this sample, elder's involvement as both givers and receivers of support was described as having contributed to their positive sense of well-being. Some researchers suggested that some African Americans may have stronger family ties than other ethnic groups and this factor may have a significant impact upon their social supports and general satisfaction with life (Littlejohn-Blake & Darling, 1993; McAdoo, 1995). It is evident that these elders gave meaning to, drew upon their beliefs and evaluated their supportive interactions by consistently employing a variety of strategies that contributed to positive well-being. Many of their supportive relationships and networks had endured for more than 80 years.

Limitations of This Study

While this study proved beneficial along several dimensions, limitations to this project exist. Although my status as a midlife African American woman may have afforded me access to these elders, it may have hindered the objective interpretation of their comments. Being an insider to this racial group presented the possibility that some information was not articulated because there may have been an assumption that

I was already aware of shared issues with which African Americans have been confronted especially as relative to survival issues (for example, history of oppression and discrimination in social service provision). As an insider, I had to give particular attention to remaining objective in listening to stories, observing behaviors and analyzing data.

In many ways, sharing the experience of growing up in a similar religious culture laid a foundation for greater understanding and commonality of experiences between the informants and me. My respect for African American traditions espoused by informants and my sense of pride in the ancestry that these elders articulated, resulted in an emotional attachment and depth of sharing not anticipated. It was vital for me to engage in a continual reflective dialogue with myself as researcher and my advisor to ensure as accurate an interpretation as possible. I had great respect for traditions and felt a sense of pride in ancestry that these elders articulated.

Other limitations of this study were the age group, educational and economic resources and functional status of informants. Seventeen of the 30 informants had a post high school education. Interviews were restricted to African American elders over 70 years of age who considered themselves to be functionally independent. Frail African American elders were not included in this study. Inclusion of a more diverse group of elder African Americans including the frail among them would have enriched

the data.

While this research was specifically designed to examine social support networks of African American elders who were members of a church, the inclusion of a broader range of participants, such as non-church members, also may have enriched the findings. In other words, the 21st century presents varied challenges for older adults striving to maintain a positive state of well-being. Such challenges are not unique to African American elders who are members of a church congregation but transcend among and within cultural groups regardless of age, gender, race and religious preference (Taylor, Chatters, Tucker, & Lewis, 1990). Qualitative investigation of these factors across a broad range of African American and other elders may prove insightful.

Suggestions for Future Research

Qualitative studies investigating social support among older African Americans are quite limited. This is the first qualitative study to concomitantly examine the meanings, personal beliefs and present experiences, and evaluation of the consequences of supportive interactions. Existing research investigating social support was mostly quantitative, and was conducted with lower income and less educated samples.

One suggestion for further research is to use representative samples of elderly

African Americans. Replicating this study with persons identified with other cultures, geographic locations, socioeconomic statuses, educational attainment, and religious preferences would be relevant as well as informative for family scholars and family practitioners. Contributions to literature on African Americans are needed that do not improperly generalize, stigmatize, or pathologize ethnic minority families.

A second suggestion for further research is to expand the definition of social support to include the loving memories of supportive others now deceased. Informants clearly found comfort in the words and deeds of departed loved ones. None of the literature reviewed defined social support from this perspective. Another suggestion is to extend the definition of family as it is currently used in the social support literature. Informants defined family as going beyond biological ties. Family included friends, church members and neighbors. Furthermore, the concept of neighbor as defined by informants was in flux. Neighbors were credited with many supportive actions, but were viewed as negligent in other ways. Informants clearly were struggling with their beliefs about how neighbors should behave as guardians, caregivers and educators of the community.

Perhaps the effects of aging might differ for a population that had a different level of economic, physical or emotional stress. The meanings and effects of aging might well differ under more extreme circumstances. Although findings from this

study cannot be generalized to all African American elders over 70 years of age, it painted a clear portrait of social support among these 30 African American elders.

Concluding Comments

The findings from this study diverged from the other literature on social support and informed theory because of the difference in the research problems and the methodology. Support networks were built based on strong religious ties that gave rise to partnerships between individuals in varied domains such as family, friends, and peer relationships. The strong religious ties of African Americans and the adherence to certain traditional beliefs can be respected and understood as responses to a long history of discrimination and oppression. The partnerships and other strong bonds were formed not only out of basic survival but out of concern and love for others.

This context of culture framed the belief systems of these African American elders because of the absence of a structure within the larger society that was supportive of this ethnic group. The strong belief in God, church, family, friends, community and self were tapped into to provide basic survival strategies as well as ongoing support for positive well-being.

In sum, the support process used by these 30 African American elders reflected the particularistic meanings they attached to the support they gave to and received from supportive others. Behaviors emerged as key components of the support

process. This finding complements and extends recent research that identified networks of most supportive others, patterns and types of support (Taylor & Chatters, 1986, 1988, 1989, 1991). Demonstrating personal worthiness, leaving loving memories, feeling blessed and ability to change emerged as unique phenomena and added knowledge to theoretical understanding of the social support process. Identification of the structure that undergirds and gives meaning to the beliefs of this elderly sample was empirically rewarding.

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APPENDIX A

Appendix A

Advertisement to recruit volunteers for the study

Dear Pastor,

I am a doctoral candidate for the Ph.D. degree in Family and Child Development at Virginia Polytechnic Institute and State University, Blacksburg, Virginia. I have chosen the option of Adult Development and Aging with a certificate in gerontology. I am beginning to collect data for my dissertation, and thereby solicit your assistance.

I am interested in contacting African American elders, age 70 and older, male and female, to participate in my research project. I will be investigating social support networks. Participants are being recruited from churches because this project examines the social support network from among several possible sources, including churches for purposes of providing the full range of possibilities of how older people gain support. Additionally, research substantiates the worth and significance of the African American church as a social institution and a connection for primary relationships. Participants must be members of your church congregation, and recommended by you, the pastor. Participants must be functionally independent, meaning that they must be capable of handling activities of daily living: "basic" ADL (e.g., walking, dressing, eating) and "instrumental" ADL (e.g., housekeeping, transportation, personal business affairs).

I will be contacting you by telephone in the very near future to schedule an appointment with you to discuss in more detail this research project. I will need the names, addresses and telephone numbers of all members recommended by you. Should you have any questions, please make note of them so that they may be addressed at our meeting. I know how valuable your time is from first hand experience. My husband is the pastor of a church.

Thank you in advance for your assistance. I am working to add to the limited research base, information and understanding of personal and social contributions made by extended family, friends, church, and social organizations to the social support of African American elders. Should you need to contact me prior to our formal meeting, please call me at 969-6035 or e-mail me at jonesaltay@aol.com.

Sincerely,

Althea Taylor Jones, MA, PhD Candidate

Gloria W. Bird, PhD, Research Advisor

APPENDIX B

Appendix B

Application for Approval for Research Involving Human Subjects
Althea Taylor Jones

Protocol for Research Involving Human Subjects

Title of Project: SOCIAL SUPPORT AMONG AFRICAN AMERICAN ELDERS: MEANINGS,
BELIEFS, AND WELL-BEING

Justification of This Project

The purpose of this research is to determine the meanings that African American elders ascribe to social support and explore the connections they make between such support, their personal beliefs, and their well-being. This project will provide qualitative data on the social support process enacted by African American elders. Qualitative studies that explore social support among African American elders are relatively rare. Most of the work neglects to take into consideration both the context within which social support is activated and the cognitive processes through which people mobilize and evaluate supportive interactions.

Procedure

This research utilizes qualitative methodology. Participants will include 30 African American elders, age 70 and older, who are members of African American churches in Winston-Salem, North Carolina. They will be volunteers recruited through contact with pastors and/or other church administrators and office staff (Appendix A). Participants are being recruited from churches because this research project examines the social network from among several possible sources, including the church for purposes of providing the full range of possibilities of gaining support. Names, addresses, and telephone numbers of potential participants will be gathered from pastors or their representative. The investigator will telephone potential participants to inform them of the purpose of the study. All interested individuals will be scheduled for an interview. Procedures for obtaining consent for the interview will be completed upon initial contact with participants (Appendix B).

Interviews will be conducted in the homes of participants. Alternative interview sites will be suggested if that is the preference of the participant, for example, a reserved room at a public library. Interviews will be approximately 2 hours in duration. The investigator will telephone each participant 1 day prior to the scheduled interview, as a reminder. The investigator will interview the informant and audiotape all responses after reading the consent form to him/her and asking for a signature. Audiotaped interviews will be typed by a paid transcriptionist verbatim for coding and copied onto two computer disks. The investigator will keep one copy. The second copy will be given to Dr. Gloria W. Bird. All names and other identifying information will be deleted during transcription and replaced by numbers and pseudonyms. Copies of discs and transcripts will be secured in locked file cabinets when not being used. Background information and interviews will include questions as listed in the background information guide (Appendix C) and the interview guide (Appendix D). Follow-up probes

will be employed to encourage participants to reconstruct and reflect on experiences within the topics under study (Seidman, 1991). Throughout the interview, follow-up questions will be uniquely tailored to each individual participant by using the participants' vocabulary preferences and styles of expression (Snyder, 1992). Personal observations about the interview situation will be added at the end of the tape, following each interview.

Risks and Benefits

This research project will provide information that will be helpful to our scholarly understanding of beliefs, social support, and well-being among older persons. The information provided by participants may also be helpful to other African American elders interested in how their supportive networks of family, friends, church, and community impacts well-being. Participants may also benefit from being given the opportunity to talk about their own meanings, beliefs, and experiences from their own personal perspectives. Interview questions are not intended to cause risk to any participant.

Confidentiality/Anonymity

Interview responses in the individual in-depth interview will be held at the highest level of confidentiality. Identities of informants will not be revealed in the typed transcripts. All identifying data will be replaced by numbers and pseudonyms. All information will be stored in locked file cabinets when not in use. The investigator will conduct and audiotape all interviews. The transcriptionist will be cautioned against sharing information with anyone other than the investigator. Audiotapes will be destroyed after the successful defense of the investigator's dissertation. Pseudonyms will be utilized when referring to participants' responses in future presentations or documents.

Biographical Sketches

Althea Taylor Jones is a Doctoral Candidate for the Ph.D. degree in Family and Child Development. She received her Bachelor of Science degree from Tennessee State University in recreation. She received a Master's degree from Appalachian State University in rehabilitation psychology and counselor education. She has worked professionally as department head and director of counseling services in the Division of Student Affairs, Winston-Salem State University. She has worked as a consultant, trainer, rehabilitation supervisor, rehabilitation counselor, programs supervisor, and as an instructor in various educational institutions and organizations for more than twenty-five years within the North Carolina correctional, rehabilitation and educational systems. She was a graduate assistant during the academic years 1995/96 and 1996/97, in the Adult Day Services Program at Virginia Polytechnic Institute and State University. Her research interests include social support networks and well-being among older adults, which has resulted in the development of a social support program for participants at the Virginia Tech Adult Day Services Program, their caregivers and volunteers from Retired Senior Volunteer Programs in the New River Valley. Proposals were written to national foundations for sponsorship. Other research interests are intergenerational family enrichment, and health promotion for African Americans, which has resulted in development and implementation of a church-based family enrichment program, in Winston-Salem, North Carolina supported by a two year

grant from the state of North Carolina. She is a collaborator with Dr. Gloria W. Bird on a research project investigating personal belief systems of older adults, and the impact of stressors and coping strategies on well-being among adults age 55 and older in Virginia and North Carolina.

Gloria W. Bird is associate professor of family studies in the Department of Family and Child Development. She received her Ph.D. from Oklahoma State University in family and consumer environmental studies. For the past twenty years Dr. Bird has conducted research on the stress and coping process -- which includes a focus on belief systems, well-being, and use of social support. She has authored numerous articles published in professional journals such as *Family Relations*, *Journal of Marriage and the Family*, and *Journal of Social and Personal Relationships*. She teaches two required graduate courses on relationships, both of which cover aspects of social support and well-being.

Informed Consent

Please see attached the informed consent form to be used in this research project.

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

Informed Consent for Participants of Investigative Projects

Title of Project: SOCIAL SUPPORT AMONG AFRICAN AMERICAN ELDERS

Principal Investigator: Althea Taylor Jones

I. THE PURPOSE OF THIS RESEARCH

You are invited to participate in a study of social support networks. This research will explore how personal beliefs, experiences and events, affect use of social support. This study will also examine how use of support impacts well-being. Thirty people are being asked to take part in this research project.

II. PROCEDURES

You will be asked to participate in an individual in-depth, tape recorded interview with me. The interview is projected to be approximately 2 hours in duration, and is being conducted in your home or another place of your choosing. You will be asked to provide background information such as your marital status, number of living children, church involvement, community involvement and education. You will also be asked questions about your social support network, your beliefs, and your health.

III. RISKS

I am not aware of any risks to you from participation in this research project.

IV. BENEFITS OF THIS PROJECT

You are not being offered any promise or guarantee of benefits for your participation in this project. This research project will provide information that will be helpful to our understanding of social support and well-being among older persons like yourself. Although no guarantee of benefits is being offered for your participation, you as a participant will provide information that may be helpful to other African American elders in defining their social support network and understanding how it affects their physical and mental health. You will also have the opportunity to express your own thoughts, beliefs, and experiences the way you see them.

V. EXTENT OF ANONYMITY AND CONFIDENTIALITY

Your interview will be held at the highest level of confidentiality. Audiotapes will be labeled with fake names. The transcriptionist will be required to keep all audiotapes and typed information confidential and asked not to share information on audiotapes and computer disks with other individuals. Audiotapes will be kept in a locked filing cabinet and destroyed after I complete my

dissertation.

VI. COMPENSATION

Other than my sincere thanks, there is no compensation for participation in this project.

VII. FREEDOM TO WITHDRAW

You have the right to withdraw from this study at any time. You are free to choose not to answer any question.

VIII. APPROVAL OF RESEARCH

This research has been approved, as required, by the Institutional Review Board for Research Involving Human Subjects at Virginia Polytechnic Institute and State University, and by the Department of Family and Child Development.

IX. PARTICIPANT'S RESPONSIBILITIES

I voluntarily agree to participate in this study..

X. PARTICIPANT'S PERMISSION

I have read and understand the informed consent and instructions regarding this project. All of my questions have been answered. I hereby acknowledge the above and give my voluntary consent for participation in this project. If I choose to participate, I understand that I may withdraw at any time without penalty. I agree to abide by the rules of this project.

Signature

Date

Should I have any questions about this research or its conduct, I will contact:

Althea Taylor Jones
Investigator

336-969-6035

Dr. Gloria W. Bird
Faculty Advisor

540-231-4791

H. T. Hurd, Chair
IRB Research Division

540-231-5281

APPENDIX C

Appendix C

MEANINGS, BELIEFS, AND WELL-BEING: A QUALITATIVE STUDY OF SOCIAL SUPPORT AMONG AFRICAN AMERICAN ELDERS

Background Information

To begin, I need some background information to help me interpret the results of my study. Please tell me about yourself.

In what year were you born? _____
(date)

Are you:

_____ MARRIED
_____ WIDOWED
_____ SEPARATED _____ OTHER, Please describe:
_____ DIVORCED
_____ SINGLE, NEVER MARRIED
_____ SINGLE, LIVING WITH A PARTNER

IF MARRIED (or SINGLE, LIVING WITH A PARTNER), How long have you been married to your present husband/wife (or single, living with your current partner)? _____

(years)

How many living children do you have? _____
(number)

How many daughters? _____ How many sons? _____
(number) (number)

How many grandchildren do you have? _____
(number)

How many living brothers do you have? _____
(number)

How many living sisters do you have? _____
(number)

Do any of your children and/or grandchildren live nearby -- close enough that you see them several times a month? _____ YES _____ NO

Other than children and/or grandchildren, which family members live nearby?

How long have you attended _____ church? _____
(years)

How often do you attend religious services there? _____
(times per week)

In what church activities do you participate?

_____	Activity...How often Participate	_____
_____	Activity...How often Participate	_____
_____	Activity...How often Participate	_____
_____	Activity...How often Participate	_____
_____	Activity...How often Participate	_____

Have you held any church offices or leadership positions in the church?
_____ YES _____ NO

If YES, which ones?

In what other ways are you involved in the church?

Tell me about your involvement in community organizations. Which organizations...and how often do you participate?

How often do you talk to someone on the phone (other than those living with you)?
Who?

Are you in contact with anyone on a regular basis by any other means (e-mail, FAX, etc.)?

Other than nearby children or grandchildren do you have anyone else that you see on a regular basis?

Who? _____	How often seen _____
_____	How often seen _____
_____	How often seen _____
_____	How often seen _____
_____	How often seen _____

What is your current employment status?

_____ RETIRED

_____ EMPLOYED PART-TIME -- How many hours? _____
(number)

_____ EMPLOYED FULL-TIME -- How many hours? _____
(number)

What type of work do you do?

Is this the type of work you have always done? What type of work would you say was typical for most of your working life?

In 1997 what was your approximate income before taxes?

(Note: A card will be given to informants for them to check the appropriate category. The card will be collected, placed in an envelope and sealed.)

What is the major source of your income?

Probe: Pension, Social Security check, savings, family, etc.

APPENDIX D

Appendix D

MEANINGS, BELIEFS, AND WELL-BEING: A QUALITATIVE STUDY OF SOCIAL SUPPORT AMONG AFRICAN AMERICAN ELDERS

INTERVIEW GUIDE

BELIEFS AND SOCIAL SUPPORT

One purpose of this study is to find out more about the beliefs people have that guide and sustain them.

Family Beliefs

Tell me about your family beliefs. Do you have certain beliefs about families that you have tried to live by...perhaps even tried to pass along to others, for example, your children (and grandchildren)?

Probes: Obligation, reciprocity to kin

What person (or persons) do you think most influenced you to believe as you do about family?

What past experiences have shaped your beliefs about family?

Think about the stories that you tell to other family members (your children and/or grandchildren, for example) that reflect the beliefs you hold about family? Tell me one of your favorite family stories.

What is it about this story that you enjoy?

Other than a family story, how do you pass important beliefs about family to your children and/or grandchildren? What would you say?

Beliefs About Friendship

Which friends are important in your life right now?

What is it about these friends that make them important to you?

What are your beliefs concerning friends and friendship...the value of friendship, what it means to be a good friend?

What do you think influenced you to believe as you do about friends and friendship?

Probes: A particular person; past experiences

Religious/Spiritual Beliefs

What is it about the church that keeps you coming back?

Probe: What do you gain from your involvement in the church?

What spiritual or religious beliefs have you tried to live by?

When you talk to your family about spirituality or religiosity, what beliefs do you try to pass along to the next generation as important?

How do you go about trying to help those closest to you understand the importance of spiritual/religious beliefs in their lives?

What people most influenced your own religious/spiritual beliefs?

Which past experiences most influenced you to believe as you do?

Beliefs About Community

What beliefs do you hold about your community...about what a community should be like...beliefs about the community that you've tried to live by?

What or who do you believe influenced you to believe as you do about the community?

Beliefs About Self

We are often told to believe in ourselves and all will be right with the world. In what ways do you believe in yourself?

Probe: What personal characteristics have helped make you the person you are...have helped you make it through life to this point?

What personal characteristics or self beliefs do you try to encourage in family members and others important in your life.

SOCIAL SUPPORT

Family/Friends

Please identify the three persons that you feel closest to (role or relationship).

What is it about each of these three people that causes you to feel close to them?

What kinds of things do you do for each other?

Which of the three gives you the most support?

Now, let's talk about the person in your life who is most supportive of you.

Who would that person be?

How often are you in contact with this person?

How does this person know when you could use some support?

What kind of support does this person usually offer?

Is there something about this person, the situation, or your personal beliefs that makes it okay to receive support from him/her?

How satisfied are you with the support provided?

Have there been times when you have liked more, less, or a different kind of support from this person? Tell me about it.

Were you able to let the person know how you felt?

Who is the person to whom you provide the most support?

How do you know when this person needs support?

What kind of support do you usually give this person?

How do you know what kind of support to offer?

Have you ever misjudged the kind of support needed? What happened?

How do you judge whether or not your support is adequate....or satisfying to this person?

Has this person ever indicated that he/she was uncomfortable with the support you give or even refused your support? Tell me about it.

Who is the person that you are least likely to ask for support?

What is it about this person that causes you to be reluctant to ask for support?

Probes: Personality type, behavior patterns, circumstances

Church

Churches are known for their efforts to support others. In what ways do you feel supported by your church?

What kinds of support do you receive from the church?

Do you think there is a good match between what you need in the way of support and

what the church provides? Tell me about it.

Are there types of support that you might need, but would hesitate to seek from the church? Tell me about it.

In what ways do you support your church?

Community

If circumstances were such that you needed support from an organization or community group (other than the church), where would you turn?

What is it about the organization or group that would lead you to request support from them?

In what ways do you contribute to your community?

In what ways has the community "been there" for you when you needed them?

In what ways has the community let you down or disappointed you?

Is there an organization or community group that you would never go to for support? Tell me about it.

Probe: What is it about the group or your situation that causes you to feel that way?

Of the sources of support that we have talked about...family, friends, community, and church -- which is most important to you in terms of feelings of being supported?

What is it about _____ that causes you to view them as being most supportive, compared to the others?

How satisfied are you with the support you receive from all sources?

WELL-BEING

Another purpose of this study is to find out about your health. Please describe your current health for me in as much detail as possible.

Probes: Physical health -- presence of chronic illness (arthritis, high blood pressure, heart or kidney disease, etc.), energy level, sleep patterns ~ Mental health -- degree of anxiety, sadness, depression.

How would you rate your health?

____ Excellent ____ Very good ____ Good ____ Fair ____ Poor

What connections do you see in your life between having supportive relationships with others and your own physical and mental health?

Can you think of instances in your life when having the support of family, friends, community, or church made a difference in how you felt physically or emotionally? Tell me about it.

Have there been times when the lack of support caused you to feel worse physically or emotionally?

Have there been times when support failed -- actually made you feel worse physically or emotionally? When?

In general, how satisfied are you with your life?

____ Very satisfied ____ Somewhat satisfied ____ Average

____ Somewhat dissatisfied ____ Very dissatisfied

STRESS PROCESS

Everyone at one time or another faces problems in their life. Tell me what usually causes discomfort for you....what things in your life are bothersome for you right now?

Probes: Life events (death of a loved one or friend, etc.) Chronic (ongoing) problems you must deal with....your health, relationships, finances, events, etc.

Over time have you found particular ways of handling your struggles or difficulties that seem to work better than others? Tell me about them.

Now, please take a minute to think back to the last time you experienced a struggle:

When was that time for you?

What happened?

What was it about the situation that caused your discomfort?

What symptoms-- physical or emotional signs--did you get that indicated to you that you were experiencing discomfort?

Probes: Physical -- headache, difficulty sleeping
Emotional -- couldn't think straight, felt anxious.

How did you manage the discomfort?

Did you approach anyone?

Who did you approach for support?

Why did you choose this particular person?

Exactly how did you let this person know that you needed support?

Probes: Direct -- simply told him/her.

Indirect -- behaved in a way that volunteer support was offered

How did this person go about supporting you?

Probes: What did she/he do to help -- think of as many ways as you can?
What did she/he say that helped?

What was his/her attitude about supporting you?

Probes: In what ways were his/her attitudes helpful --
(comforting, accepting, understanding, etc.)?

Were there times when you were uncomfortable because of something he/she said or did? Tell me about it.

Who else did you talk to when you experienced discomfort or difficulties?

What else influenced how you handled things?

Has being in this situation and dealing with it affected your physical health?

And what about your mental health, has it affected your emotional well-being?

Now that you look back on the situation were there any benefits that emerged from going through this difficult situation or experiencing this discomfort?

Probe: Some people mention that they learn new ways of coping or gain a richer appreciation for life when they go through a difficult situation or experience discomfort.

What benefits did you gain?

APPENDIX E

CURRICULUM VITAE

**Althea Taylor Jones
1243 Martha Avenue
Rural Hall, North Carolina 27045-9540
Telephone: Voice/Fax (336) 969-6035
E-Mail: jonesaltay@aol.com**

HIGHLIGHTS OF QUALIFICATIONS

- * Eight years of college teaching experience - Undergraduate and graduate classes.**
- * Five years of higher education administration as director of counseling services and department head, supervising and providing in-service training for staff and graduate student interns.**
- * Twenty-five years of counseling experience with various populations, age groups, and ethnic groups.**
- * Direct experience writing or co-writing funded grant proposals.**
- * Proven ability to administer higher education grant programs.**
- * Excellent writing, speaking, listening, interviewing and counseling skills.**
- * Demonstrated ability to delegate and motivate others to perform at their highest level.**
- * First-generation college student committed to educating students with similar challenges.**
- * Committed to the value of higher education and dedicated to promoting that value in others.**
- * Nationally recognized for expertise in the area of substance abuse education and prevention programs.**
- * Genuine concern for, sensitivity to, and talent for relating to all types of people.**
- * Well organized, efficient, eager to learn, strong interpersonal and organizational skills.**
- * Presentations at numerous conferences.**
- * Proven ability to assess and meet human needs.**

EDUCATION

1998 - Ph.D. - Family and Child Development. Virginia Polytechnic Institute and State University, Blacksburg, VA. Area of Specialization: Adult Development and Aging.

1998 - Graduate Certificate of Gerontology. Virginia Polytechnic Institute and State University, Blacksburg, VA.

1980 - M.A. - Rehabilitation Psychology/Counselor Education: Appalachian State University, Boone, NC.

1968 - B.S. - Recreation: Tennessee State University, Nashville, TN.

PROFESSIONAL EXPERIENCE

General Psychology Instructor, (Undergraduate) - Winston-Salem State University, Department of Social Sciences, Winston-Salem, NC. - Summer, 1998.

Gerontology Instructor, (Graduate) - North Carolina A&T State University, School of Education, Department of Human Development and Services, Greensboro, NC. - Summer, 1998.

General Psychology Instructor, (Undergraduate) - Winston-Salem State University, Department of Social Sciences, Winston-Salem, NC. - Summer 1997.

General Psychology Instructor, (Undergraduate) - Winston-Salem State University, Department of Social Sciences, Winston-Salem, NC. - Summer, 1996.

Freshman Seminar Instructor, Winston-Salem State University, Division of General Studies, Winston-Salem, NC. - 1990 - 1995.

Educational Consultant, Zion Memorial Baptist Church, Family Enrichment Center, Winston-Salem, NC. July 1995 - Present.

Responsibilities: Development, implementation, administration, and evaluation of an intergenerational family support program; including proposal writing, research, instruction and other functions.

Graduate Assistant, Virginia Polytechnic Institute and State University, Adult Day Services Program, Blacksburg, VA. August 1995 - May 1997.

Responsibilities: Assisting participants through direct service provision, coordination of activities, program planning/development, fund raising, proposal writing, research, and other functions.

Professional Experience (Continued)

Director of Counseling, Winston-Salem State University, Winston-Salem, NC. August 1990 - June 1995.
Responsibilities: Development and direction of a comprehensive counseling program for the university. Coordination of new student and parent orientation programs. Classroom instruction for Freshman Studies Program. Development of in-service training for new counselors and graduate interns. Supervision of the administration and interpretation of tests and inventories. Organization, implementation, and evaluation of workshops and seminars. Organization and implementation of campus and community outreach programs. Advisor for international and minority students. Provision of individual and group counseling, crisis intervention/consultation and referrals to community agencies and institutions. Proposal writing, budget preparation and management, community service and public presentations.

Counselor-in-Charge, Vocational Rehabilitation Services, Winston-Salem, NC. January 1990 - August 1990.

Responsibilities: Supervision and training of counselors and support personnel. Office management, plan development and evaluation, public relations, budget preparation and management, referrals, job placement and follow up.

Rehabilitation Counselor, Vocational Rehabilitation Services, Winston-Salem, NC. 1973 - 1989.

Responsibilities: Counseling, program development, casework management, budget preparation and management, classroom and workshop instruction, supervision of a Halfway House, referrals, public relations, job development, placement and follow up.

Program Emphasis

1987 - 1989 Counselor for clients referred by the Forsyth County Department of Social Services and North Carolina Baptist Hospital.

1978 - 1987 Counselor for clients referred by Charter Mandala Hospital, Forsyth Memorial Hospital and Forsyth/Stokes Mental Health Center.

1977 - 1978 Counselor for clients referred by John Umstead Hospital and Forsyth/Stokes Mental Health

1977 - 1978 Counselor for clients referred by Central/South Park High School.

Program Supervisor, State of North Carolina, Department of Corrections, Winston-Salem NC and Greensboro, NC. 1971 - 1973.

Responsibilities: Counseling, supervision of inmates, classroom instruction, program planning, public relations, job placement and follow up.

Professional Experience (Continued)

Substitute Teacher, Winston-Salem/Forsyth County Schools, Winston-Salem, NC. 1971.

Responsibilities: Classroom instruction.

Educational Diagnostician, State of Tennessee, Cumberland House Elementary School, Nashville, TN.
1969 - 1970.

Responsibilities: Educational testing and interpretation, counseling, observation, consultation, screening and program planning.

OTHER EDUCATIONAL AND PROFESSIONAL TRAINING

- 1998 - Summer Workshop on African American Aging Research - University of Michigan, Ann Arbor.
- 1997 - African American Nurturing Program
- 1994 - Employee Assistance Training for Supervisors
- 1993 - Performance Management System Appraisal, Phase IV
- 1992 - Retaining and Increasing FTE'S Through Total Quality Management (TQM)
- 1990 - Performance Management System Appraisal , Phases I, II, and III
- 1990 - Fundamentals of Management Program
- 1989 - Developmental Disabilities Training Institute, III
- 1988 - Developmental Disabilities Training Institute, II
- 1988 - Crisis Intervention Seminar
- 1987 - Counselor Education Certification K-12, Wake Forest University
- 1987 - Internship in School Counseling, Moore Alternative School
- 1986 - Neurological and Respiratory Disorders Workshop
- 1984 - Marketing Strategies Seminar
- 1979 - Psychiatric Rehabilitation Institute
- 1976 - Developmental Disabilities Training Institute, I

SUMMARY OF PUBLICATIONS, PRESENTATIONS, AND PAPERS

PUBLICATIONS

- Jones, J., & Jones, A. T. (1998, September). Building Strong Children: Living and Learning. *Baptist Informer*, pp. 10-11.
- Jones, A. T. (1998, August). The Mind of a Winner as Influenced by Aged Wisdom. *Baptist Informer*, p. 10.
- Jones, A. T., & Jones, J. (1998, June and July). Working Together: Lessons Learned From Geese. *Baptist Informer*, p. 16.

Summary of Publications, Presentations, and Papers (Continued)

Jones, A. T., & Jones, J. (1998, May). Honoring Elders Through Intergenerational Programming. *Baptist Informer*, p. 16.

Jones, A. T. (1998, April). Fail to Plan and Plan to Fail: Pre-Retirement Strategies. *Baptist Informer*, pp. 11-12.

PRESENTATIONS

1998 - Meanings, Beliefs, and Well-Being: A Qualitative Study of Social Support Among African American Elders. Dissertation presented to the faculty of the Department of Family and Child Development, College of Human Resources and Education, Virginia Tech, Blacksburg, VA.

1998 - Well-Being Among African American Elders: Evaluation of the Worth and Consequences of Supportive Interactions. Research Cameo presented at the Third Annual North Carolina Summer Symposium on Aging, Boone, NC.

1998 - Study Skills/Test Taking Strategies; and Time Management. Workshops presented to Health Careers Opportunity Program Summer Participants. Winston-Salem State University, Winston-Salem, NC.

1998 - The Narrative Construction of Post-Retirement Adjustment: A Qualitative Study of Social Support Among African American Elders. Roundtable presented at the Southeastern Council on Family Relations Annual Conference, Atlanta, GA.

1998 - Meanings, Beliefs, and Well-Being: A Qualitative Study of Social Support Among African American Elders. Dissertation proposal presented to the Faculty of the Department of Family and Child Development, College of Human Resources and Education, Virginia Tech, Blacksburg, VA.

1997 - Stress Management for Older Adults. Workshop presentation for the Family Enrichment Program at Zion Memorial Baptist Church, Winston-Salem, NC.

1997 - Social Support Networks and Volunteer Opportunities for Older Adults. Lecture for the Adult Day Services class, Department of Family and Child Development, Virginia Tech, Blacksburg, VA.

1997 - What Time is it? Time Management workshop for Health Careers Opportunity Program Summer Participants. Winston-Salem State University, Winston-Salem, NC.

1997 - Healing the Hurts: The Positive Effects of Multiculturalism for all Children. Keynote address for Part III

Summary of Publications, Presentations, and Papers (Continued)

Parent & Caregiver Conference Series on Raising Emotionally Healthy Young Children, Winston-Salem, NC.

1996 - Stress: How to Recognize and Reduce it. Workshop for the Forsyth Association for the Education of Young Children, Winston-Salem, NC.

1996 - Family Enrichment Center Health Promotion Program: An Intergenerational Perspective. Seminar presented at the Southeastern Council on Family Relations Annual Conference, Atlanta, GA.

1996 - Stress: How to Recognize and Reduce it. Workshop for the Caregivers Support Group, Virginia Tech Adult Day Care Center, Blacksburg, VA.

1996 - Multiculturalism: Strength in Diversity, and Management of Stress. Workshops for the Forsyth Association for the Education of Young Children, Winston-Salem, NC.

1996 - Stress: How to Recognize and Reduce it. Workshop for Health Careers Opportunity Program Summer Participants, Winston-Salem State University, Winston-Salem, NC.

1995 - Stress: How to Recognize and Reduce it. Workshop for Day Care Workers & Administrators, Forsyth/Stokes Mental Health and Smart Start, Winston-Salem, NC.

1995 - To be old, Black, and Poor, Discussion Leader, Virginia Tech, Blacksburg, VA.

1994 - Spring Fever, Strategies for Planning, Conflict Resolution and Communication/Listening Skills. Series of Stress Management Programs for Radio Station WSNC-FM 90.5, Winston-Salem State University.

1992 - Time Management, Leisure Time and Relationships. Lecture for older adults, YWCA Social Fellowship.

PAPERS

1997 - Generational Equity. Presented in Policy and Economics of Aging Class, Department of Family and Child Development, Virginia Tech, Blacksburg, VA.

1997 - Men on Divorce: Conversations With Ex-Husbands. Presented in Marriage and Family Relationships class, Department of Family and Child Development, Virginia Tech, Blacksburg, VA.

1997 - Renegotiating Boundaries Within Divorced Families. Presented in Marriage and Family Relationships class, Department of Family and Child Development, Virginia Tech, Blacksburg, VA.

Summary of Publications, Presentations, and Papers (Continued)

1996 - Family Enrichment Center Health Promotion Program: An Intergenerational Perspective. Paper presented at the First Annual North Carolina Summer Symposium on Aging, Winston-Salem, NC.

1995 - Family Enrichment Center, Health Promotion Program. Research proposal for Nutrition and Aging; Virginia Tech, Blacksburg, VA.

SUMMARY OF PROPOSALS AND GRANTS

FUNDED GRANTS

1996 - Jones, A. T. (PI, and Project Consultant). Family Enrichment Center: Zion Memorial Baptist Church; Submitted to Smart Start, State of North Carolina - **\$25,000**.

1995 - Jones, A.T. (PI, and Project Consultant). Family Enrichment Center, Zion Memorial Baptist Church; Submitted to Smart Start, State of North Carolina - **\$25,000**.

1994 - Jones, A.T. (PI, and Project Director). Institution-Wide Drug Education and Prevention Program: Winston-Salem State University; Submitted to the U.S. Department of Education - **\$110,916**.

1994 - Jones, A.T. (Writer). Drug Prevention, Adult Education and Pre-School Developmental, Structured Play Activities Program: Skyline Village Apartment Complex; Submitted to the Forsyth County Alcohol and Drug Coalition - **\$3,000**.

1993 - Jones, A.T. (PI, and Project Director) Drug Prevention Video Counseling Program: Winston-Salem State University; Submitted to the Forsyth County Alcohol and Drug Coalition - **\$1,500**.

1993 - Jones, A.T. (Writer). Drug Prevention Summer and After School Tutorial program for Skyline Village Apartment Complex; Submitted to the Forsyth County Alcohol and Drug Coalition - **\$10,000**.

NON-FUNDED PROPOSALS

1997 - Jones, A. T. (PI). Intergenerational Social Support Program for Zion Memorial Baptist Church Family Enrichment Center; Submitted to the Dr. Scholl Foundation - **\$35,680**.

1997 - Jones, A. T., (PI) & Willard, S. M. (Co-Investigator). Surrogate Sibling Social Support Program for Participants at Virginia Tech Adult Day Services Program; Submitted to the Max and Victoria Dreyfus Foundation - **\$9,100**.

1995 - Buffer, L.C., (PI) & Jones, A.T. (Co-investigator). Intergenerational Exchange Program: Virginia Tech Adult Day Services Program; Submitted to the Warm Hearth Gerontology Consortium - **\$2,000**.

Summary of Proposals and Grants (Continued)

1995 - Buffer, L.C., (PI) & Jones, A.T. (Co-investigator). Caregivers Support Network: Virginia Tech Adult Day Services Program; Submitted to the Warm Hearth Gerontology Consortium - **\$2,000.**

1993 - Jones, A.T. (PI). Alcohol/Drug Prevention Consortium Among Colleges and Universities in Winston-Salem, NC: Winston-Salem State University; Submitted to the U. S. Department of Education - **\$40,000.**

RECENT CONFERENCES

1998 - Third Annual North Carolina Summer Symposium on Aging, Boone, NC - Presenter.

1998 - Southeastern Council on Family Relations Annual Conference, Atlanta, GA - Presenter.

1997 - National Council on Family Relations Annual Conference, Arlington, VA - Participant.

1997 - Succeeding in Academia: Strategies for Instructional and Administrative Faculty. Presented by VABFA - VA Association of Black Faculty and Administrators in Higher Education, Virginia Tech, Blacksburg, VA - Participant.

1996 - The Gerontological Society of America 49th Annual Scientific Meeting, Washington, DC - Volunteer and participant.

1996 - First Annual North Carolina Summer Symposium on Aging, Winston-Salem, NC - Presenter.

1996 - Racialization, Gender, and the Academy; Women's Studies Conference, Roanoke, VA - Participant.

1996 - Southeastern Council on Family Relations Annual Conference, Atlanta, GA - Presenter.

1996 - Generations United - National Conference on Intergenerational Relations, Washington, DC - Volunteer and facilitator.

1995 - Life, Death and Grief: Physical, Emotional and Spiritual Perspectives for the Health Care

Professional. Sponsored by the College of Human Resources, Department of Human Nutrition and Foods, Virginia Tech - Participant.

1995 - Aging in all its Colors: Issues of Diversity 1995 Post - White House Conference on Aging Event. Sponsored by Virginia Tech, Virginia Center on Aging, and Southern Gerontological Society - Volunteer and facilitator.

Recent Conferences (Continued)

1995 - Training Institute: Drug Prevention Programs in Higher Education, U. S. Department of Education, Washington, DC - Participant.

PROFESSIONAL AFFILIATIONS

Current

Gerontological Society of America - GSA
Southern Gerontological Society - SGA
National Council on Family Relations - NCFR
Southeastern Council on Family Relations - SCFR
American Society on Aging - ASA
Sigma Phi Omega Academic Honor and Professional Society in Gerontology - SPO
American Association of Retired Persons - AARP

Past

National Rehabilitation Counseling Association - NRCA
North Carolina Rehabilitation Counseling Association - NCRCA
American Counseling Association - ACA
Higher Education Addiction Prevention Professionals - HEAPP
Triad Chapter of Addiction Prevention Professionals - TCAPP
National Association for Student Affairs - NAFSA

AWARDS AND HONORS

1998 - Research Stipend - Institute for Social Research, University of Michigan, Ann Arbor
1998 - Academic Scholarship - Doris Whisnant Memorial Foundation
1997 - Academic Grant - International Chapter P.E.O. Sisterhood
1997 - Academic Scholarship - Doris Whisnant Memorial Foundation
1997 - Graduate Assistantship - Virginia Tech Adult Day Services Program
1996 - Academic Scholarship - Doris Whisnant Memorial Foundation
1996 - Graduate Assistantship - Virginia Tech Adult Day Services Program
1995 - Inducted into Sigma Phi Omega Academic Honor and Professional Society in Gerontology
1995 - Graduate Assistantship - Virginia Tech Adult Day Services Program
1995 - Board Member of the Year - Friends of the Library, Winston-Salem State University
1994 - Governor's Award Nominee - North Carolina Human Relations Commission for outstanding service to the Winston-Salem community and the betterment of human relations among people in Winston-Salem, NC

CAMPUS SERVICE/COMMITTEES - WINSTON-SALEM STATE UNIVERSITY

Chairman - Search Committee, Substance Abuse Education Consultant - 1995

Campus Service/Committees - Winston-Salem State University (Continued)

Chairman - Search Committee, Clerk Typist III - 1994
Chairman - EPA Non-Faculty Grievance Committee - 1995, 1994, 1993, 1992, 1991
Chairman - Search Committee, University Counselor - 1994
Chairman - Search Committee, University Counselor - 1993
Chairman - Search Committee, Assistant Coordinator Health Careers Opportunity Program - 1993
Chairman - Search Committee, Counseling Center Secretary - 1992
Chairman - Search Committee, University Counselor - 1991
Chairman - Search Committee, Director of Retention and Mentoring Program - 1991
Member - Continuing and Lifelong Education Committee - 1995, 1994, 1993, 1992, 1991
Member - International Programs Committee - 1995, 1994, 1993
Member - Advisory Committee, Health Careers Opportunity Program - 1994, 1993, 1992, 1991, 1990
Member - Search Committee, University Physician - 1994
Member - Search Committee, Vice Chancellor for Student Affairs - 1994, 1993
Member - Academic Advisement and Retention Handbook Committee - 1993, 1992
Member - Search Committee, Director of the Anderson Center - 1992
Representative - Speakers' Bureau and Media Bureau - 1994, 1993
Board Member - Friends of the Library - 1998, 1997, 1996, 1995, 1994, 1993
Co-Chairman - Staff Development Committee on "Customer Service Excellence" - 1991

NATIONAL/REGIONAL/STATE/LOCAL ~ COMMUNITY SERVICE

U.S. Department of Education, Washington, DC, Talent Search Program Reviewer - 1998.
U.S. Department of Education, Washington, DC, Upward Bound Program Reviewer - 1995.

Winston-Salem/Forsyth County Coalition on Alcohol and Drug Problems

- Vice Chairman, Board of Directors - 1995
- Member - Search Committee, Youth Programs Coordinator - 1995
- Chairman - Search Committee, Executive Director - 1994
- Member - Board of Directors - 1995, 1994
- Featured Guest - WTOB-AM, 1380; Counseling Services at Winston-Salem State University and Winston-Salem/Forsyth County Coalition on Alcohol and Drug Problems - 1994
- Grant Partner - 1994, 1993
- Chairman - Public Affairs Committee - 1994
- Member - Red Ribbon Week Committee - 1995, 1994, 1993, 1992
- Member - Community Service Awards Selection Committee - 1994, 1993
- Volunteer - Crosby Golf Tournament - 1995, 1994
- Volunteer - Project Graduation - 1995, 1994

United Way of Forsyth County

- Representative

Forsyth/Stokes Mental Health

- Advisory Committee

National/Regional/State/Local ~ Community Service (Continued)

Forsyth Rehabilitation Houses, Inc.

- Board of Directors

Zeta Phi Beta Sorority, Inc.

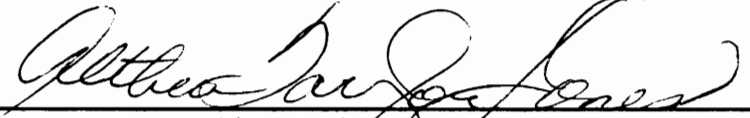
- Keynote Speaker
- Workshop Facilitator
- Chaplain
- Special Events Coordinator

Interdenominational Ministers' Wives/Widows Association

- President
- Education Committee Chairman
- Executive Board
- Assistant Dean of Education (NC State Association)

Zion Memorial Baptist Church

- Coordinator of Intergenerational Programming
- Workshop/Seminar Presenter and Facilitator
- Scholarship Committee Secretary
- Family Enrichment Program - Proposal Writer/Principal Investigator/Educational Consultant



Althea Taylor Jones