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Orientación y Sociedad


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PROJECT DEVELOPMENT FOR OLDER ADULTS: ORIENTATION’S CONTRIBUTION

Ciano Natalia * Mirta Gavilán **

Abstract

This paper systematizes the work developed during the first year of the initiation scholarship for the research project entitled “Orientation within the new Active Aging Model: educational, work-related, personal and social choices” (1). This project articulates the Active Aging Model and the Theoretical Operative Model in Orientation, in order to learn how new projects are developed by older adults who used to be part of the formal system of labor and by those who were out of it, and to design programmatic proposals for educational, work-related, personal and social Orientation choices for such population.

The sample is made up by seventy people between 64 and 74 years of age, residing in La Plata. The first conclusions evidence the importance that older adults place on project development at this stage of their life cycle, giving special importance to educational, personal and social projects; as well as on the identification of economic factors, health state, family needs for care and social support, among other things, as conditioning the

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fulfillment of such projects. The differences found in terms of the labor system they used to belong to can be especially observed in the type of project developed.

**Key words**: Orientation; Prevention; Aging; Projects.

**Introduction**

The study of old age has become truly relevant in various fields, since population aging poses new scenarios and new challenges for science and for society at large. The phenomenon of demographic transformation has allowed for plenty of research and diverse policies, from the different areas, to provide older people with a better quality of life. As a social phenomenon, what is required is a view from a complexity, inter-disciplinary approach and integral strategy design paradigm.

As most of the orientation theories and interventions were developed with adolescent subjects, this research project intends to articulate the Active Aging Model and the Theoretical Operative Model in Orientation.

**The Theoretical Operative Model in Orientation**

The Theoretical Operative Model in Orientation was developed by Dr. Gavilán (2006). It understands Orientation in an ample, all-encompassing sense, as a lifelong process enabling interventions at different moments of transition or change related, especially, to the problems of choice, which provides answers to these new demands and challenges. It is supported by six axes forming the “orienting trilogy” and revolve around orientation articulating on another (Gavilán, 1996), namely: process (in its three aspects: macro-
process, micro-process and specific process), social imaginary and prevention. It also includes health, education, work-related/economic and social policies, and disciplinary, inter-disciplinary and trans-disciplinary knowledge.

The notion of process refers to the different forms of intervention, from orientation, in the subjects’ lives, individually or collectively. The following can be differentiated in it: the macro-process, which implies that the subject does not develop a project independently from the socio-cultural context in which he is immersed, from his cultural values, and from social representations, but rather that this whole socio-cultural arena influences his or her choices and his or her life. The micro-process involves the various evolutionary moments in – for any given reason – choices need to be made. They are “significant cuts on a continuum” (Gavilán, 2006: 184), transitions in which the subject has to choose. And, finally, the specific process is the intervention performed individually or collectively with those subjects in need of a more personalized intervention at the time of making the choice.

As regards the “prevention” axis, three levels proposed by Gerald Caplan (1966) are included: primary, secondary and tertiary prevention. It is believed that the real preventive actions are those carried out at the primary level. Two preventive strategies modalities can be distinguished: specific prevention and non-specific multiple prevention. Specific prevention aims at symptom-oriented prevention, whereas the other kind intends to modify aspects related to lifestyle, to modify habits and attitudes for the sake of achieving a better quality of life.

Finally, the third axis included is the notion of social imaginary. Esther Díaz defines social imaginary as “the effect of a complex web of relations between discourses and social
practices (...). Its realization springs from people’s evaluative coincidences, as well as from resistances. It is manifested in symbols (language and values) and in concrete interpersonal actions (social practices). (...) The imaginary starts to act as such as soon as it becomes independent from individual wills, even though – paradoxically – it needs them to be materialized. Based on the collective imaginary assessment, people possess periodical parameters to judge and act (...). The materiality of the imaginary device lies in the effects achieved on reality” (Díaz, 1996: 13-14).

From this, then, we can deduce that the imaginary works as a parameter for ways of doing and thinking, of discourses and expectations.

The fields are “spaces of knowledge and practices related to one problem and to a group of topics deriving from it; knowledge and practices which can find a focus in discipline, interdiscipline (as regards activities that supplement one another), and/or trans-discipline (understood as a field formed by several viewpoints” (Gavilán, 2006: 113). The need to include various forms of knowledge (disciplinary, interdisciplinary and transdisciplinary) is based on the acknowledgment of the complexities introduced by the social reality, which requires overcoming simplifying approaches and acquiring more integrating visions.

Finally, the Theoretical Operative Model in Orientation defines Orientation as the “group of strategies and tactics used by the psychologist and/or educational psychologist specialized in Orientation so that the person receiving the orientation or subject of the Orientation, individually or collectively, by means of an understanding, reflexive and committed attitude, may be able to develop a lifelong educational, work-related, personal and/or social project” (Gavilán, 2006: 194).
The Active Aging Model

The current demographic distribution shows an increase in population aging both around the world and in our country; this produces great interest and worry about the topic, both in those areas studying demographic tendencies and in those people in charge of guaranteeing and sustaining the quality of life of older adults (Fernández-Ballesteros, 2007; Staffolani, Orlando & Enria, 2006; Tamer, 2008). The new paradigm established around aging and old age aims at fully realizing all the dimensions of the human being, not just in connection to good health but also in terms of social participation, personal fulfillment, and so on. That is why the term chosen for this new model is “Active Aging”. This concept was introduced in the 2002 Plan of Action on Aging. The World Health Organization claims that, if aging is to become a positive experience, a longer life must be accompanied by continuous opportunities for autonomy and health, productivity and protection. Active aging is defined as “the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age.” (WHO, 2002: 79). The term “active” refers to a continuous implication in social, economic, spiritual, cultural and civic issues, and not just being physically active.

Now, then, taking into account these guidelines and the increase in life expectancy, the following questions arise: how do older adults develop new projects?, how is leisure time used after retirement?, what sort of preparation or orientation is offered to someone who can retire, or to those who have not been part of the educational or labor systems, to develop new projects?
Due to the lack of orientation policies for retirement or for generating new undertakings in our country, a new research problem arises: how do older adults manage to develop new projects, whether they have been part of the formal labor system or not?

Life expectancy having been extended, there are plenty post-retirement years with more leisure time available. However, due to the loss of their work project, which has most likely taken the largest part of their lives, personal and occupational identity reorganizations need to take place. This requires dealing with issues related to the loss of a social membership place, of the socializing sphere at work, and - most of all - of the possibility to develop new projects. Aisenson suggests that “how individuals cope with this stage of the life cycle will depend on the identity that they have managed to form and on the social support received (...) as well as on the possibilities to develop and redefine projects, based on the visualization of their own resources and the mobilization of strategies which may allow to get these resources going” (Aisenson, 2002:113).

Within the objectives of this research, we have included: a general objective which aims at designing pragmatic proposals of Orientation and educational, work-related, personal and social choices for older adults; as well as specific objectives connected with knowing the types and forms of project development, identifying those factors enabling or obstructing their developing, evaluating ways to cope with aging and, finally, learning which representations older adults have as regards aging.

Methodology

Procedure
During the first stage of the research project, in-depth bibliographical search and reading took place. Moreover, searches in data bases were carried out and analyses of research done in national and international contexts were performed. The institutions where samples would be taken from were selected. Key informants and coordinators were interviewed. Then, the people who fit the sampling criteria were identified and chosen. Fifteen older adults from each institution were interviewed, except in the case of the Permanent Education Program, in which fifteen people were interviewed in each office. A collection of coping strategies were selected and administered, in order to identify frequent difficult situations for older adults and to assess the strategies used to deal with them. A partial analysis of the first stage of the research was carried out.

**Participants**

In order to form the sample, three very different institutions for older adults were contacted in La Plata. The first one is a Social, Development and Sports Club; the second one is a Trade Union for teachers who work in private schools; and the third one is a Permanent Education Program for older adults implemented as a university extension activity. In this last case, the headquarters located in the city center and a secondary venue in the city of Tolosa were contacted. The sample was formed by sixty people aged between 64 and 74 (m= 68.2 years old), seventy percent of whom were female. The study included both people who used to belong to the formal and informal labor system and people who have never worked outside the house. Even though the sample was supposed to include an equal
number of men and women, so far we have only managed to get in touch with women mainly, because their percentage in such institutions is larger.

The group belonging to the Social, Development and Sports Club is heterogeneous in terms of educational level and in terms of their labor path, though none of the participants is still active work-wise. This institution is attended by both men and women.

Given the institutional characteristic of the Argentine Trade Union for Teachers of Private Schools, the group is made up of women who have carried out their educational work mainly in the private sector, and 20% of them have not retired yet.

The group which belongs to the headquarters of the Permanent Education Program is formed mainly by – retired or soon to retire – university professionals who have been part of the formal labor system. The group from Tolosa is mostly characterized by a lower educational level (some participants never finished primary or secondary school) and by having worked informally. This group as well as that from the Social, Development and Sports Club bring together mainly women who have devoted their lives to doing housework and looking after their families, and who have never worked outside the house.

**Materials**

Data collection was carried out through semi-directed and in-depth interviews which were recorded, with the participants’ consent, and then transcribed. The participants assessed the interviews as productive spaces since part of their life stories could be re-signified and long-forgotten interests could be discovered in them.
To evaluate coping strategies we used a Spanish adaptation made by Cano, Rodríguez and García (2006) of the Copying Strategies Inventory created by Tobin, Holroyd, Reynolds and Kigal in 1989. The first part of the instrument is devoted to the assessment of different problems or stressful situations which may affect the subjects. It allows participants to go into detail as regards the sphere that the difficult situation belongs to, how it was experienced, the amount of stress perceived, and so on. The second part is made up of 40 items grouped in eight scales and a final unnumbered item evaluating their perceived coping efficiency. The items are to be answered in accordance with a scale of 0 - 4, in which the following answers are proposed: not at all, a little, quite, a lot and absolutely, respectively.

The eight primary scales are described here: 1) Problem solving: cognitive and behavioral strategies directed to eliminate stress by changing the situation that causes it. 2) Cognitive re-structuring: cognitive strategies which modify the meaning of the stressful situation. 3) Social support: strategies related to the search for emotional support. 4) Emotional expression: strategies aimed at freeing the emotions which occur during the process of stress. 5) Problem avoidance: strategies which include denying and avoiding thoughts or acts related to the stressful event. 6) Desiderative thought: cognitive strategies reflecting the desire that reality not be so stressful. 7) Social retreat: strategies of retreat from friends, family, partners and important people in their lives, as a result of an emotional response to the stressful process. 8) Self-criticism: strategies based on self-blame and self-criticism for the stressful situation or for having handled such situation incorrectly.

Results
For the analysis of this first stage, four variables were chosen:

- Types of projects developed by older adults.

- Obstacles to develop and materialize projects.

- Representations of aging and old age.

- Types of difficult situations identified by older adults and coping strategies used to face them.

**Types of Projects developed by Older Adults**

- Educational projects (50%): these are framed mainly within informal education. They are not driven by the motivation to learn in order to find a job or “to get a degree to …” but they are performed in order to learn, just for the sake of learning, to be part of a group and spend time with peers, to stay active and to stimulate cognitive functions.

- Social projects (15%): these projects consist in producing some benefit for society; specially focusing on the construction and consolidation of spaces for older adults within public and private institutions or institutions of the third sector. In just a few cases, these projects aim at working with children and adolescents. It is worth mentioning that these are voluntary, non-profit activities and could therefore be called “supportive projects” as well. However, the word “social” is preferred because it is more all-encompassing.
- Personal projects (35%): projects connected with people’s ancestry, as most people are of European descent, stand out in this category. A desire to “go back to their roots” can be noticed, on the one hand, in the motivation to get to know the place from which their family emigrated and, on the other, in their interest to study and learn their ancestors’ mother tongue. This last project could be included within the educational projects but, because of what motivates it, it is included in the personal ones.

- Work-related projects: even though some of the people interviewed do things which might have a work-related purpose, they do not do them with such aim in mind. That is to say, these kinds of projects are not present.

**Obstacles to develop and materialize projects**

The following obstructing factors have been found recurrently:

- Economic factors: lacking of the necessary economic resources is seen as an obstacle to project materialization, though they do admit that there are many gratuitous possibilities. These, however, do not always match their personal interests;

- Health: physical and/or psychological pathologies are described as hindrances to some kinds of concrete projects. As regards physical pathologies in women, greater fear of suffering from urinary incontinence can be observed. In men, however, the fear of not being able to move by themselves stands out. As regards mental pathologies, people of both sexes fear cognitive deterioration, especially Alzheimer.
- Family need for care: because of the changes that have occurred within the family, in the work system and in connection with life expectancy, many older adults not only have to take care of their grandchildren but also of their parents, devoting a large part of their time looking after them and thus abandoning their activities, interests and projects. Caring for their parents may, simultaneously, turn into parents’ economic dependence upon them.

- Perceived social support: lacking friends and family support for the initiative to develop new projects has inhibiting effects, since in many cases – as they fail to have this kind of support – they feel unable to develop their projects. If their relatives or friends disregard the interests or motivations from which projects may arise, older adults often adopt that same attitude, ignoring their interests as they are considered irrelevant. We would also like to stress that, within the institutions that have been contacted, great interest in the institution itself as well as the need to keep and widen the space obtained in it can both be observed, which evidences a need to belong to an institution and to gain social support within the extra-family sphere.

- Aging-related prejudices: having negative representations of both aging and old age constitutes another hindering factor in the development and materialization of new projects. In many cases, this obstacle was not explicitly verbalized; however, it remains implicit in the discourse of some of the people interviewed.

- Devaluing or not acknowledging personal abilities, resources and capacities: this hampering factor is intimately connected to lack of social support and to the prejudices
related to aging. These result in lower self-esteem and self-confidence, which hinders the development of any kind of project as they feel unable to carry it through.

**Representations of aging and old age**

What we could observe in the interviews conducted was that older adults possess various representations about these phenomena:

- Negative representations associated to illnesses, deterioration, declining cognitive functions, time that has passed and being unable to get a glimpse of the near future. Such negative representations also arise because they have their parents’ old age as reference, a much earlier and more passive old age than their own.

- Based on these representations, there are certain deeply-rooted prejudices in connection with old age and aging.

- Positive representations of aging and old age as another growing stage, with its very own features and with both gains and losses. Life experience is valued, integrating the past to the present and allowing for a projection into the future.

- During the analysis of this variable, we felt the need to modify the negative representations and to help people envision the fact that they are built on prejudices from the social imaginary, so as to promote healthy and active aging, since these representations hinder the development and materialization of new projects.

**Types of difficult situations and coping strategies used to face them**
- Difficult situations: family conflicts, moving, break up of friendship bonds, health problems of relatives and of their own, and shortage of economic resources.

- Coping strategies: problem solving, self-criticism, emotional expression, desiderative thoughts, social support, cognitive re-structuring, problem avoidance, social retreat.

Although difficult situations abound and differ, the strategies used to deal with them do not vary that much. First, there is the “Emotional expression” strategy. The “Desiderative thought” and “Self-criticism” strategies come in second and third position respectively, in terms of implementation frequency. These tendencies coincide with the results from other research which show that older adults achieve an adaptive coping mechanism centered around the way they handle the emotions which spring from the stressful process instead of around the problem, which should be a priority, to modify the situation or its meaning. This is corroborated by the fact that the “Problem solving” strategy has received the lowest score. However, this does not mean that they fail to deal with the difficult situation since the “Problem avoidance” strategy also has a low score.

From a preventive approach, identifying the coping strategies used by older adults allows us to look at the resources at their disposal which work as factors protecting their health. This is, in turn, a self-knowledge and reflection modality since they have the chance to think about the strategies in play in the different situations that life presents them with; and they thus reflect upon how beneficial or detrimental the implementation of a certain strategy can be and upon the need to widen the variety of strategies.
Discussion

Analyzing the kinds of projects developed allows us to observe the importance older adults give to continuing making projects. Even though they admit that there is another dimension for time: a shorter, finite time; a not so far away future. This understanding does not stop them from developing short-term projects. In this regard, we found no difference between the older adults belonging to the formal system of labor and those who were outside it. The difference lies, rather, on the kind of project developed. Those people with college or university education who have been part of the formal system develop educational projects more frequently than others. Conversely, those who have not attended higher education institutions and who used to have a trade, show more difficulty in materializing projects because they are unaware of their own potential and because they believe they lack the necessary resources. However, these difficulties are more noticeable in those women who devoted their lives to looking after their families and their homes and who never worked outside the house. The main obstacle here lies on the prejudices connected to growing old, added to which are those prejudices about gender issues and female roles which circulate in the social imaginary and which, in many cases, go hand in hand with the devaluing of their own personal resources. This is just one example of how interrelated the hampering factors are, as well as of the relation between them and the representations of aging and old age. In order to change this, an integral approach seems necessary.

Based on the analysis of the results obtained and of the articulation of the Active Aging Model and the Theoretical Operative Model in Orientation, we can anticipate the
importance and significance which the orienting interventions have, as they might provide a favorable contribution to:

- recognizing the significant issues of the social imaginary, which operate as hindrances; detecting distortions and making them visible in order to make a positive intervention;

- identifying personal resources and abilities so as to strengthen their self-esteem during the understanding of the self;

- including the fields of health, education, work-economy and social policies (contemplated in the Theoretical Operative Model in Orientation) so as to let older adults know about the different offers each of them provides;

- recovering and capitalizing life experiences and re-signifying them;

- reflecting upon this stage in life in order to understand the changes, stressing the gains and not just the losses that occurred during the aging process;

- accompanying subjects in the reorganization of their identities;

- promoting the development and materialization of educational, work-related, personal and social projects.

These interventions would be destined to older adults in need of accompaniment during the development and/or materialization of projects, irrespective of whether they belonged to one labor system or the other and even of whether they ever developed activities in either of them. This aspect introduces an advantage that Orientation has above other retirement
preparation programs which include almost exclusively soon-to-retire workers from the formal system and leave a large part of the population behind.

The preventive role of Orientation can be derived from all that has been mentioned above, since such issues promote good, active aging. In fact, Orientation could turn this stage into a period opening to new development and personal fulfillment opportunities, and it could help understanding as regards the development of new projects.