

‘Measuring’ resilience in older people: mixed methods perspectives

Dr Jane Richardson & Prof Pauline Ong
Arthritis Research UK Primary Care Centre

Salutogenesis

An assets approach

Thriving
(Carver)

Gratitude
(McGullough)

Self-efficacy
(Bandura)

Hardiness
(Kobasa)

Empathy
(Eisenberg)

Inner strength
(Nygren)

Attachment
(Bowlby)

Humor
(Martin)

Self-efficacy
(Bandura)

Coping
(Lazarus)

Learned resourcefulness
(Rosenbaum)

Learned optimism
(Seligman)

Learned hopefulness
(Zimmerman)

Sense of coherence
(Antonovsky)

Emotional intelligence
(Goleman, Akerjordet)

Cultural capital
(Bourdieu)

Quality of Life
(Lindström)

Connectedness
(Blum)

Social intelligence
(Goleman)

Social capital
(Putnam)

Resilience
(Werner)

Flourishing
(Keyes)

Action competence
(Bruun Jensen)

Empowerment
(Freire)

Will to meaning
(Frankl)

Ecological system theory
(Bronfenbrenner)

Interdisciplinarity
(Klein)

Locus of control
(Rotter)

Wellbeing
(Diener)

Flow
(Csikszentmihályi)

Concepts relating to resilience

- Wellness
- Normal ageing
- Identity and sense of self
- Valued activities

Change and context

- Life course perspective
- Dynamic approach – shifting perspectives model
- Social connectedness
- Asset approach

58% of older people with joint pain in past year report their general health as excellent, very good or good

A salutogenic approach to chronic musculoskeletal pain ...

- what enables people with chronic pain to consider themselves ‘well’?
- what enables some people with chronic pain to live with little interference from pain?

Preventing pain from interfering with later life: an action-oriented qualitative study



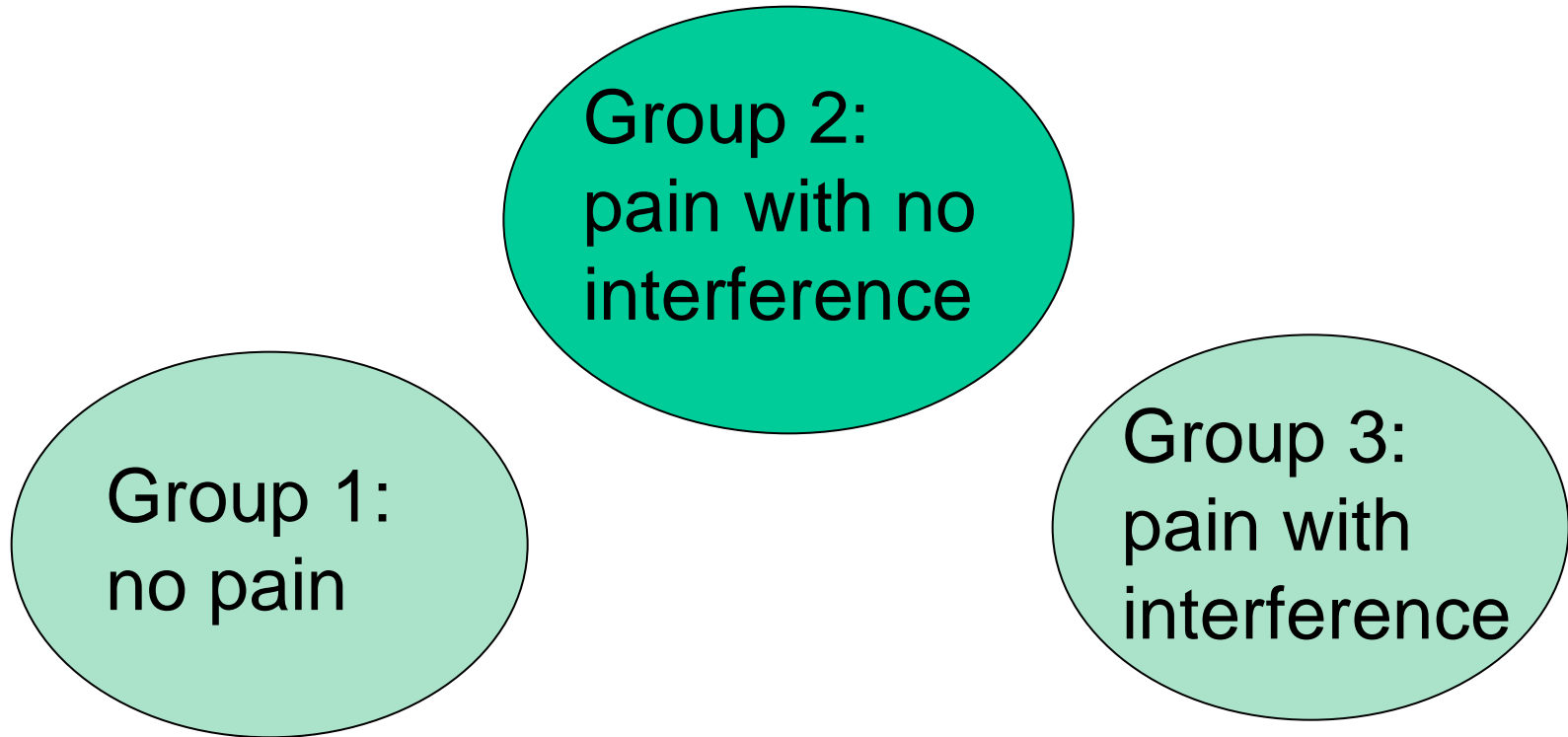
NIHR RfPB (Research for Patient Benefit)

Jane Richardson
Drew Moore
Kelvin Jordan
Julius Sim
Miriam Bernard

Methods: sample

	No Pain		Pain with Interference		Pain with no interference	
	Male	Female	Male	Female	Male	Female
56-64	3	5	3	7	6	3
65-79	6	4	6	2	2	1
80+	1	1	1	3	3	3

Comparison of the 3 groups



'Beating the odds'



'Expecteds' vs
'Unexpecteds' in
the pain with no
interference group

We go out on a Friday morning to Morrison's. And we walk around and help one another, you know, you talk to – 'You want this, I want...'. (Murray)



And of course I go out on a Thursday night domino-ing. I play for [pub] bottom of the street there. So that's another area of social life for me" (Murray)



I think a lot depends on your, sort of, social network as well, because if you have friends who you do things with regular, you know, that you look forward to doing things with then that gives you the incentive to want to keep doing it (Robert)



*I did lots of very active things in my teens [...] when I started teaching I used to take kids caving ... outdoor activity has always been an important part of life ... there is an element of you **get up and get on with it**, ... I suppose you become pretty self-reliant in those circumstances*
(Gerald)

I have to do a little bit less gardening because before now I've always set my own seeds, raked out and done, but now I buy my seedlings from the garden centres and carry on from there (Katey)



Conclusion

Social activity, physical activity & involvement are:

- part of the **meaning** of living with minimal interference from joint pain for older people

AND

- lifestyle factors that **contribute** to reducing interference from pain in later life



Image: SOMMAI / FreeDigitalPhotos.net

A salutogenic approach to chronic musculoskeletal pain ...

- Has resonance for people with chronic pain
- Links with self-management (but how to support people in this self-management?)
- Needs to be contextualised
- Needs to go beyond the individual

Acknowledgments

- Funders:
 - Economic and Social Research Council (ESRC)
 - National Institute for Health Research (NIHR) Research for Patient Benefit (RfPB) programme
 - *This paper presents independent research funded by the National Institute for Health Research (NIHR) School for Primary Care Research. The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health.*
- Research participants
- Advisory Groups