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Senior Living Employees' Perceptions of Aging and Why They Matter

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What are senior living employees' perceptions of aging and how do these beliefs influence their work? Perceptions of aging can influence people's thoughts and behaviors in unexpected ways. For people who work in senior living residences, there is a connection between their perceptions of aging and the way they interact with residents. Senior living employees who have more positive views of aging may be more likely to interact with residents in ways that encourage greater independence and self-direction. This in turn can promote greater resident well-being.

This paper provides an overview of the importance of perceptions of aging and autonomy to well-being. It also covers some recent research findings on the relationship between senior living employees' perceptions of aging and their support of residents' autonomy and independence. Lastly, it will cover implications for the senior living industry.

Perceptions of Aging

Perceptions of aging develop over the course of one's life, influenced by personal experiences and cultural representations of aging (e.g., Isaacs & Bearison, 1986). As an example, advertisements that tout the “anti-aging” benefits of products reinforce the perception that youth is valued over old age. Exposure to age stereotypes, such as through movies and television, can impact people's health and well-being later in life (e.g., Levy & Langer, 1994; Meisner, 2012). For example, research has found that older adults perform worse on memory tests after they are exposed to negative age stereotypes (Hess, Auman, Colcombe, & Rahhal, 2003). In addition, older adults living in cultures where negative age stereotypes are common, such as the United States, performed worse on memory tests compared to those living in cultures with more positive views of older adults, such as mainland China (Levy & Langer, 1994). Perceptions of aging can influence people's thoughts, feelings, and behaviors without their awareness (Levy, 2001).

Positive and negative perceptions of aging tend to create a self-fulfilling prophecy. For instance, more positive views of aging, including the belief that older adults can improve or maintain their health as they age, are associated with better functional health, fewer illnesses, and greater longevity compared to people with more negative expectations regarding aging (e.g., Levy, Slade, & Kasl, 2002; Moser, Spagnoli, & Santos-Eggimann, 2011; Sargent-Cox, Anstey, & Luszcz, 2014; Wurm, Tesch-Römer, & Tomasik, 2007). Similarly, older adults with more positive perceptions of

aging reported better social support and more new friendships in subsequent years (Menkin, Robles, Gruenewald, Tanner, & Seeman, 2017).

Perceptions of aging not only impact a person's own health and well-being, but these beliefs can also affect the health and well-being of others. People who have negative views of aging may unintentionally act in ways that reinforce these negative stereotypes. For instance, someone who mistakenly presumes that all older adults have physical and cognitive deficits may modify their speech according to these expectations—such as using simpler words,

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shorter sentences, and slower talking speed—instead of accommodating the actual abilities of the specific older adult with whom they are interacting (Hummert, Garstka, Ryan, & Bonnesen, 2004). This overaccommodation of speech can reinforce negative age stereotypes in older adults, and can also reduce their self-esteem and limit their ability to communicate. In addition, others' negative perceptions of aging may also limit older adults' opportunities for growth and new experiences. For example, a person who associates age with illness may be less likely to invite

an older adult to go on a walk, thus limiting opportunities for greater social and physical activity. Likewise, a person who believes the stereotype that older adults are averse to technology may eliminate

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an older adult’s need to use technology rather than empowering them to learn how to use it. These types of experiences, driven by negative perceptions of aging, can limit older adults’ abilities to develop new skills and reduce their confidence and self-efficacy.

Previous research has found that attitudes toward aging and older adults influence the way that health care professionals, including doctors, nurses, and social workers, treat older patients (e.g., Ben-Harush et al., 2017). Research suggests that doctors may sometimes misattribute medical problems to natural aging, and they may be less likely to recommend preventive care for older adults (Adelman, Greene, & Ory, 2000; Robb, Chen, & Haley, 2002). In addition, a study of patient-doctor communication found that doctors were less likely to ask older patients about psychosocial topics such as depression and anxiety, compared to their younger patients (Greene, Hoffman, Charon, & Adelman, 1987).

Autonomy and Self-Direction

Autonomy—defined as the ability to make decisions and to influence actions in one's own life—is a basic psychological need, important for the well-being of older adults (Deci & Ryan, 2008; Ryff & Keyes, 1995). A person can maintain autonomy while accepting support from others; in fact, the availability of resources and support and the willingness to accept assistance when needed are important aspects of autonomy as one ages (Hillcoat-Nallétamby, 2014). Life Plan Communities adjust the services they provide to residents as their needs progress, enabling residents to maintain autonomy (Ayalon, 2016).

Seminal research conducted by Langer and Rodin (1976) highlights the importance of autonomy and personal control for the health and well-being of older adults. As part of the study, nursing home residents listened to an announcement by the nursing home administrator and received a plant for their room. For half of the residents, the administrator's announcement emphasized the residents' ability to make choices about their care and living

environment, and the administrator explained that the plant was theirs to care for as they saw fit. The announcement was framed differently for the other half of the residents. The administrator communicated that employees were responsible for providing care for the residents, and he told the residents that nurses would care for the plant for them. The residents who were encouraged to make choices and take responsibility ended up displaying greater well-being, activity, and alertness relative to the comparison group. This study demonstrates how senior living employees' interactions with residents can impact those residents' autonomy and wellness.

Routinely providing more support than an older adult needs or desires can lead to overprotection, which is associated with poorer outcomes. For older adults with age-related vision impairment, higher levels of perceived overprotection from friends and family were related to lower levels of adjustment to vision loss (Cimarolli, Reinhardt, & Horowitz, 2006). Also, in a sample of older adults with chronic illnesses, higher levels of overprotection were related to greater depression (Thompson & Sobolew-Shubin, 1993).

Survey of Senior Living Employees' Perceptions of Aging

Senior living employees are responsible for providing appropriate levels of support to maintain residents' autonomy without overprotecting them. These employees' perceptions of aging may shape the nature of interactions they have with residents; those with more positive views of aging may provide greater support for resident autonomy, such as encouraging residents to try new things and to pursue their passions (see Figure 1).

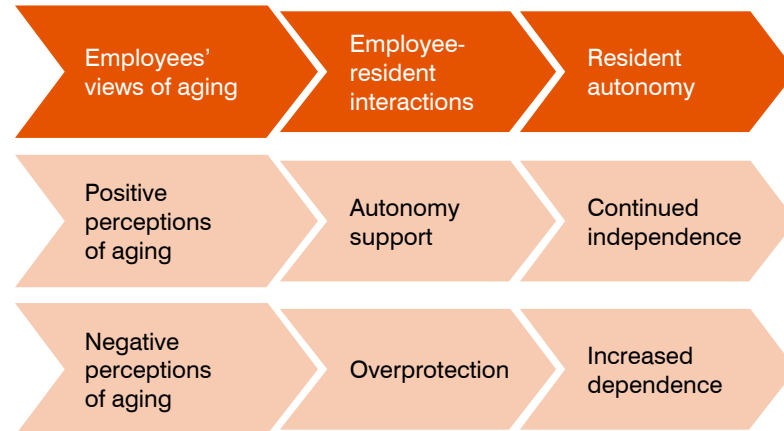


Figure 1. Proposed relationship between employees' perceptions of aging, autonomy support provided by employees, and resident autonomy

Previous research has not examined the impact of senior living employees' perceptions of aging on their interactions with residents. To meet this need, Mather LifeWays Institute on Aging conducted a survey to determine the extent to which senior living employees' positive perceptions of aging are associated with behaviors that encourage independence and self-direction in residents. It was hypothesized that senior living employees' perceptions of aging would be related to their tendency to encourage residents' autonomy and self-direction. The survey methodology and relevant research findings are described below.

Procedures and Measures. Employees were invited to complete an anonymous survey about their views on aging and how those beliefs relate to attitudes at work. Paper and online surveys were administered in four senior living communities, and invitations to complete an online survey were distributed by email to a wider group of senior living professionals.

Respondents completed measures of their perceptions of aging and their tendencies to support or suppress autonomy as part of a larger questionnaire. Perceptions of aging were measured using the Expectations Regarding Aging Survey (Sarkisian, Steers, Hays, &

Mangione, 2005). Positive expectations about aging reflect an expectation that older adults are able to develop and maintain better physical health, socioemotional well-being, and cognitive functioning. In contrast, negative expectations about aging reflect the belief that health and well-being inevitably decline with age.

The tendency to interact with residents in ways that encourage or suppress autonomy was measured in two ways: Autonomy Support (adapted from Williams & Deci, 2001) and Overprotection (adapted from Thompson & Sobolew-Shubin, 1993). Autonomy support

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measured the tendency to interact with residents in ways that bolster their independence and self-direction, such as providing residents with choices, trying to see situations from the residents' point of view, and encouraging residents to try new things. Overprotection measured the tendency to control or overhelp residents, which can encourage dependence.

Participants. A sample of 198 senior living employees completed the survey. Participants in this study were predominantly female (79%), employed at a Life Plan Community (79%), and white (72%). Just over half had a college education, with 55% of respondents reporting a bachelor's degree or higher.

Analyses. The analyses controlled for age, gender, education, and number of days per week that participants typically interact with residents. Older employees tended to report less overprotection of residents. Female employees tended to report higher levels of autonomy support for residents compared to male employees. Employees with a college degree or more education and employees who interact with residents a greater number of days per week tended to report higher levels of autonomy support.

Finding 1: Employees reported positive perceptions of aging and high autonomy support. Overall, senior living employees who participated in this survey reported positive perceptions of aging, high levels of autonomy support, and low levels of overprotection. Employees' generally positive views of aging make sense given that they chose careers that provide support and care for older adults. In addition, the high levels of autonomy support are appropriate given the emphasis on person-centered care within the senior living industry. However, there was variability in levels of perceptions of aging, autonomy support, and overprotection across respondents.

Finding 2: Greater expectations for physical health in older age were associated with greater support of resident autonomy.

Overall, more positive perceptions of aging were significantly related to greater autonomy support, controlling for employees' age, gender, education, and amount of resident interaction. Follow-up analyses revealed that autonomy support was most related to employees' expectations for aging related to physical health (see Figure 2). Their expectations for socioemotional well-being or cognitive functioning in old age were unrelated to autonomy. In other words, senior living employees who believe that older adults can maintain or improve their physical health as they age tended to indicate that they encourage greater autonomy and independence in residents.

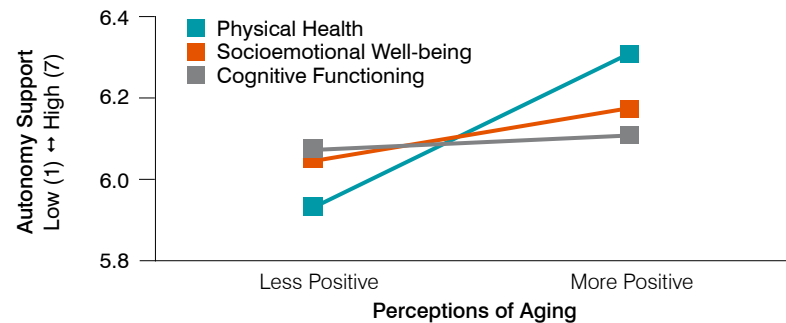


Figure 2. More positive perceptions of older adults' ability to maintain their physical health are significantly associated with greater support of residents' autonomy.

Finding 3: More positive expectations about aging were related to less overprotection.

Employees who reported more positive perceptions of aging also tended to report significantly less overprotection of residents, controlling for employees' age, gender, education, and amount of resident interaction. Senior living employees who expected more deterioration in physical health, mental well-being, and cognitive functioning were more likely to endorse statements related to overprotecting residents (see Figure 3).

Ironically, overprotection of residents could potentially contribute to decreases in residents' health and well-being that are consistent with these negative expectations regarding aging.

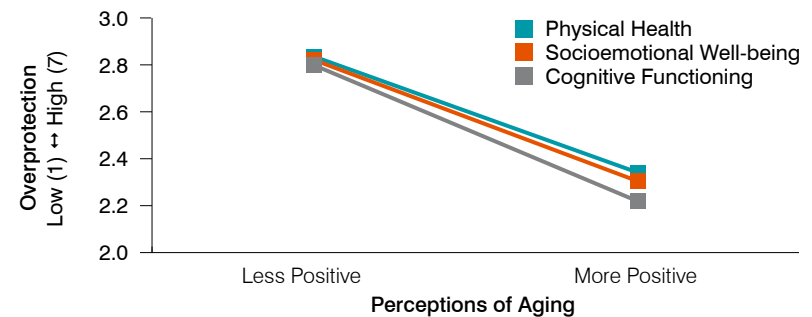


Figure 3. More positive perceptions of older adults' ability to maintain their physical health, socioemotional well-being, and cognitive functioning are significantly associated with lower levels of overprotection.

Implications for Senior Living Providers

It is important for senior living employees to have positive views of aging for two reasons. Multiple longitudinal studies have found that positive perceptions of aging during middle age are related to better health and well-being outcomes decades later (e.g., Levy, Slade, & Kasl, 2002; Sargent-Cox, Anstey, & Luszcz, 2014; Wurm, Tesch-Römer, & Tomasik, 2007). Positive perceptions of aging are not only beneficial for employees' well-being, but also the well-being of the residents they support. Specifically, positive perceptions of aging are associated with greater autonomy support and less overprotection.

One of the challenges for senior living employees is how to balance the benefits and risks associated with resident autonomy, particularly for frail or vulnerable residents. The desire to reduce risks, such as falls, may sometimes motivate employees to overprotect residents. However, adults of all ages may choose to take reasonable, informed risks in their daily lives. Senior living employees can support resident autonomy by discussing potential risks associated with choices that the residents make and suggesting alternatives or safeguards, but ultimately leaving the decision up to the resident.

Senior living employees must also decide how to best walk the line between providing high quality service and care for residents while encouraging autonomy and independence. As an example, offering to carry a package for a resident would likely be considered good service, whereas insisting on carrying the package after a resident declines assistance may be overprotective and paternalistic. Individual residents also have different needs, and actions that may be “overhelping” for one resident may be an appropriate level of assistance for another.

The connection between employees' perceptions of aging and autonomy support suggests that improving employees' knowledge and views of aging could enhance the quality of service and care they provide to residents. Employees may not be aware of their perceptions of aging. One of the problems with age stereotypes—whether the stereotype is positive or negative, such as loving grandparent or curmudgeon—is that they do not reflect older adults as unique individuals (e.g., Kessler, Rakoczy, & Staudinger, 2004). Conversations with employees about perceptions of aging may increase their awareness of their own beliefs and how those beliefs may influence their behaviors. Education on normal aging processes can be used to clarify misconceptions about aging.

Here are some strategies for cultivating more positive perceptions of aging in senior living employees:

- Incorporate education on aging processes and awareness of age stereotypes into new hire orientation.
- Conduct a brainstorming session with staff to generate a list of common phrases or sayings that reflect negative perceptions of aging that employees should avoid using (e.g., “over the hill,” “you can’t teach an old dog new tricks,” “she looks great for her age”).
- Review language and images used to depict aging and older adults in organization’s communication materials.
- Create opportunities for employees and residents to interact outside of their typical work roles, such as shared cooking or storytelling programs.

In conclusion, perceptions of aging can impact one’s own health and well-being as well as the health and well-being of others. Senior living employees, like most people, may not be aware of how their views of aging shape their thoughts and behaviors. Recent research has found that more positive perceptions of aging held by senior living employees were related to greater autonomy support and less overprotection for the residents they serve, which is important for maintaining residents’ independence. Increasing people’s awareness of their beliefs about aging and educating employees on natural aging processes may improve perceptions of aging.

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