

# Exploring Social Networks For Older Adults In Rural Communities: One Dimension In Building Elder- Friendly Futures

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## Purpose:

To describe rural older adults' social support networks as a means for providing human contact, problem-solving capacity, and options for community-dwellers managing chronic illness, related symptoms, loneliness, scarce reserves, and frailty in daily life.

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## Sample and Setting:

Three rural counties in SW New Mexico



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### Sample and Setting: (continued)

The sample consisted of 64 participants across three rural counties: 12 men, 52 women; 19 Hispanics, 45 non-Hispanic Whites; 40 were at least 65 years old; 25 younger adults were caregivers, providers, or community/health planners.

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### Sample and Setting: (continued)



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### Background:

- A recent study of older adults found that poor long-term access to prescriptions, scarce assisted living options, fragmented services, increasing food insecurity, and barriers related to culture, economics and language created serious inequities in the delivery of safe, consistent care and symptom management in late life.
- Formal and informal social support networks were found to be essential elements of their daily lives, in part to address the deficiencies and inequities.

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### Methods:

- **Theoretical foundations** for the study included critical social theory, complexity theory, network analysis and community-based participatory research (CBPR)
- **Approach** blended the expertise of rural residents re. their communities with critical ethnography, community dialogues between local partners and the researcher, and ongoing critical analysis of relevant contextual factors (e.g., history, culture, international border issues, geographic isolation, and economics)

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### Methods: (continued)

- **Data generation:** Ethnographic fieldwork, interviews, field notes and reflective journaling, photography, and archival data review
- **Data analysis:** Sequential coding, thematic derivation, critical/matrix analysis, and qualitative analysis of social networks
- Habermas'/Madison's consideration of **positionality/power** [of researcher, participants], with reflections on social marginalization and action for change

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### Methods: (continued)

- **Consistent with CBPR**, community advisors followed all phases of the study, contributing shared oversight and input
- **Social Network:** defined as an arrangement or system of members/nodes and the linkages/relationships that join them; used here to illustrate and describe

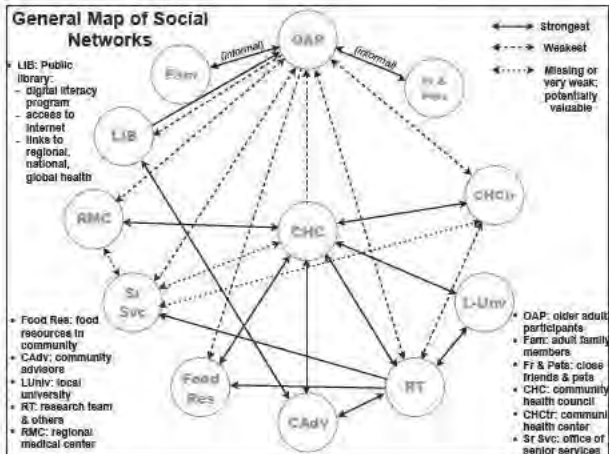
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## Results/Themes:

- **Partners and Organizations (nodes)** in the Social Network: Older adult participants, family members and close friends/pets, community advisers, community health councils, locally owned regional medical center [with inpatient, outpatient and home-care/hospice services], a federally funded community health center, office of regional senior services, food resources, a local university, and the research team
- **Simple Descriptive Map of Social Networks**

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## General Map of Social Networks



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## Implications & Questions:

- Interventions must be at community/systems level
- Mixed methods essential
- All partners/stakeholders included in research activities
- Evaluation blends researcher-community strategies/priorities
- Include network analysis for process and outcomes
- ✓ What public & private social networks support elder-friendly features in your work setting?
- ✓ How might you develop community partnership networks that promote healthy living for older adults?

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