

Talk Isn't Cheap

When elders can complain and brag to children and friends, they feel better.

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Self-disclosure, the ability to share thoughts, feelings, and concerns with other people, is one indication of a healthy personality. And such disclosure is vital in obtaining information from a patient, making assessments, and planning interventions.

Middle-aged and young adults involved with numerous people at work and in the community have countless opportunities for self-disclosure. The elderly often are not as fortunate.

Due to illness and death, many elders find their support system of relatives and friends diminishing. Younger people share some concerns with friends and others with family members. Do elders continue to disclose themselves selectively to different people? What is the relationship, if any, between an elder's opportunity for self-disclosure and their level of wellness?

Who Do Elders Talk To?

To find the answers to my questions, I surveyed 107 retired, divorced, or widowed people over 65 years old, who were members of senior citizen centers in a metropolitan area. I used two questionnaires to find out about the elder's lives. The first was a modified version of Moriwaki's Self-Disclosure Questionnaire assessing six areas: body and health; financial and living condi-



tions; social relations; personality, achievement roles; and attitudes and opinions(1). The second was Lohmann's Life Satisfaction Questionnaire to assess level of wellness(2).

Most of the elders described their health as fair. Many said they seldom left their home or neighborhood because of physical limitations, fear of crime and/or low income. The majority of the elders (94%) reported an annual income of \$6,000 or less from Social Security.

Like younger people, these elders maintained different relationships in order to meet different needs. Significant mean differences in the content areas of self-disclosure to children and friends were obtained. To their

adult children, parents disclosed information about changes in health, concerns about changes in bodily functions, satisfaction and/or dissatisfaction with treatments, and fears concerning illnesses. The elders also talked with their children regarding their financial concerns about meeting daily expenses and health care expenses, as well as expressing their opinions of where they lived.

To friends, they disclosed information about past work experiences, achievements, social relationships, and opinions on events and issues.

An important finding was that these elders chose to disclose more to daughters than to sons. Self-disclosure to friends was also gender re-

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lated, but here males disclosed more to male friends and females to female friends.

Does Disclosure Affect Well-Being?

Self-disclosures to an adult child in areas of body and health and financial and living concerns did not enhance well-being. But talking about achievements, personality, social relations, and attitudes and opinions with friends was associated with self-assessed well-being.

Elders who had closer relationships to their adult children tended to reveal themselves in all six areas—body and health, financial and living conditions, achievements, personality, social relationships, and attitudes and opinions. Elders' choice of confidants varied by social class: Elders of lower economic status were less likely to have a friend as a confidant than those of higher status.

Persons with children and friends had a higher level of well-being than those with only children and no friends ($M = 19.29$ and $M = 13.63$, $p < 0.05$, respectively). Twenty-seven out of 107 elders had no friends.

Maintaining a Network

The finding that elders disclosed various aspects of themselves to different individuals indicates that elderly people need to continue interacting with several network systems. But how can they maintain a variety of contacts when they may find it difficult to get out and about, when they or their friends may be moving temporarily or permanently into nursing homes, and when their children may live far away?

Nurses can encourage adult children to remain involved in the care of their aging parents. Contacts can be maintained by phone, letters, and visits. When planning institutional care for the elderly, make sure there are opportunities for interactions with others in order to foster informal friendships.

The fact that the elderly chose to disclose more to daughters might prompt nurses to make special efforts to involve sons in the care of



their parents. Having a closer relationship with sons and daughters might increase the amount of self-disclosure and thus well-being.

For most elders, senior centers can be a good place to see and meet other people. Although most of the elders in this study maintained some contacts with friends and children who had moved away from the neighborhood, they desired more involvement. The centers were important to them as a place to meet local friends. Various activities were available at the center, including exercising, cooking, and discussion groups on religion, health, and politics.

Disclosures regarding problems in body and health status and financial and living conditions, especially, can be seen as the initial step toward solving the problems. However, the elderly in this study felt helpless and powerless in carrying out desired changes.

For example, some wanted to change physicians while others wanted to relocate or make their present homes safer, but they didn't know how to go about it. Others

wanted to make changes in their treatment plans (such as altering the medications they were taking) but were reluctant to make suggestions. They believed that there was nothing they could do to alter their situation. It is essential for nurses to encourage and listen to patients' self-disclosures. Just talking about concerns seems to enhance an individual's feelings of well being.

For elders, having a network of children and friends to whom they can disclose information and opinions can moderate the stress of widowhood or retirement(3). When an elder has no network, the most important action a nurse can take is to use the elder, children, and friends as blocks in building a network.

References

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