

Tilburg University

An introduction to silver empowerment

van Regenmortel, T.; de Witte, J.

Published in:
Silver Empowerment

DOI:
[10.1353/book.109943](https://doi.org/10.1353/book.109943).

Publication date:
2023

Document Version
Publisher's PDF, also known as Version of record

[Link to publication in Tilburg University Research Portal](#)

Citation for published version (APA):
van Regenmortel, T., & de Witte, J. (2023). An introduction to silver empowerment. In *Silver Empowerment: Fostering strengths and connections for an age-friendly society* (pp. 9 - 18). Leuven University Press.
<https://doi.org/10.1353/book.109943>.

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Silver Empowerment

Van Regenmortel, Tine, De Witte, Jasper

Published by Leuven University Press

Van Regenmortel, Tine and Jasper De Witte.

Silver Empowerment: Fostering Strengths and Connections for an Age-Friendly Society.

Leuven University Press, 2023.

Project MUSE. doi:10.1353/book.109943.



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AN INTRODUCTION TO SILVER EMPOWERMENT

Jasper De Witte & Tine Van Regenmortel

The concept ‘Silver Empowerment’

With the introduction of the concept ‘Silver Empowerment’, we would like to express our vision on older people. In the psychology of colours, silver represents reflection and illumination, opening new doors, a change of direction for the future. Silver is also associated with characteristics such as calmness, sensitivity and looking for the best in others (Scott-Kemmis, n.d.). ‘Silver Empowerment’ aims to counteract the dominant image of ageing, which is all too often one of decline, loss, dependency and vulnerability. This ‘ageism’ image is problematic because the way we think about ageing influences the way we deal and socialise with older persons. When we consider older persons as unproductive members of society who are unable to participate, we also consciously – or not – exclude them from participating. With a fresh silver image, we want to move away from the dominant grey image of older persons as dependent, passive citizens.

‘Silver Empowerment’ strives to provide opportunities for each person to grow old with dignity and meaning, warmly connected to a society that invites them to participate. In contrast to the World Health Organization’s concept of ‘active ageing’, which justly emphasises society’s responsibility to provide opportunities for older persons to participate in social, political and economic activities (Foster & Walker, 2015), Silver Empowerment does not overlook realities of social inequality, vulnerability and disadvantage, nor does it impose a singular ideal of how older people should live. Instead, Silver Empowerment seeks to expand meaningful choices through which older people can maximally gain mastery over their own lives.

Unfortunately, to this day too much is done *for* older persons, and too little is done *by* and *with* older persons. Therefore, Silver Empowerment emphasises

the need to appeal more to the strengths and capacities of older persons, without neglecting their vulnerabilities. According to the empowerment paradigm, people gain strength and grow through connections, and inversely strength results in more connections. Indeed, research has repeatedly shown that social relations and connectedness to others reinforces the resilience of older persons (De Witte & Van Regenmortel, 2019a; Burholt et al., 2020) by giving them information and instrumental support, encouraging coping behaviour and enhancing self-esteem. Resilience in turn contributes to a general sense of mastery and enables older people to overcome adversities and safeguard their well-being (Janssen et al., 2012). Indeed, people need sufficient strength and resilience, for example in the form of social capacities and skills, to form steady social relations and feel connected to others. In this respect, a sense of connectedness and the fulfilment of social needs (i.e. the basic human need for love, acceptance and belonging) strongly relate to the well-being of older persons (Ten Bruggencate et al., 2018), and when those needs are not fulfilled, feelings of loneliness may arise. Through this central duality of *strength* and *connection*, empowerment strives to improve the quality of life for older persons. The overall goal of empowerment is not to realise maximal independence. Instead, interdependence and relational empowerment are core concepts in the lexicon of empowerment (Van Regenmortel, 2011). Indeed, a balance between individual independence, on the one hand, and connectedness with others, on the other, enables people to fully enjoy individual freedom but at the same time feel safe in the face of limitations and adversity, with which older people are more often confronted (De Witte & Van Regenmortel, 2020a). Together with others, older people can redirect their lives without losing their dignity and integrity (Abma & Bendien, 2019).

Further, what empowerment means in old age requires an in-depth inquiry of older people, their situation and biography, enriched by theoretical insights and professional knowledge. Therefore, we need to include the perspectives of older persons more in practice, policy and research. By including 'the insider perspective' of older persons, the so-called outsiders can gain more understanding of the lifeworld of older persons, which results in more comprehension and a more positive image of the latter. Moreover, acknowledging the value of experiential knowledge of older persons forms an important source of strength for this group and is a key element of the empowerment paradigm. Practices and policy should not be developed for older persons, but together with them. No empowerment can exist without participation, without considering what is meaningful for older people. To accomplish this, we must create spaces for respectful dialogue and reciprocity that enables the empowerment of older persons. We call these spaces 'enabling niches'.

These enabling niches refer to ‘safe havens’, social spaces that offer resources and opportunities through which older persons can develop their skills and undertake meaningful interactions with others. Such spaces avoid stigma and define (older) persons as individuals who each have specific wishes, goals and characteristics. That way, older persons feel recognised and appreciated, and can grow by appealing to their strengths (Boone et al., 2020).

As a multilevel concept, empowerment upholds a relational picture of society where factors on the individual, organisational and community level are inherently interconnected. From this follows that the mechanisms of exclusion can also be found on all these levels, and that there is a *shared responsibility* for exclusion which needs to consider various domains such as social participation, housing, health and social care. That way, empowerment clearly contains a political component and moves away from the narrative of blaming the victim (and blaming the system). Indeed, individuals, organisations and the system all have agency within certain boundaries, and thus form part of the solution with respect to mechanisms of exclusion. Therefore, all stakeholders in society should contribute and counteract exclusion and ageism: older persons themselves, professionals, social organisations, academics and policymakers.

Silver Empowerment does not frame ageing and the ageing population as a problem, but rather sees it as a challenge opening new opportunities. By focusing on the strengths and connections of older persons, Silver Empowerment strives to realise an inclusive, warm and age-friendly society that gives older people a voice and influence. Too often this is not realised in practice. This book offers a different philosophy, a drastic shift in the way we look at the health and social care system for older persons and in how we look at ageing in general.

be.Source and HIVA – KU Leuven

be.Source, a private foundation that aims to improve the living conditions of vulnerable senior citizens, and the Research Institute for Work and Society (hereafter HIVA – KU Leuven), found each other in this vision of Silver Empowerment and the joint mission to stimulate a more positive image of older persons and to enhance solidarity in our society. Silver Empowerment focuses on a psychosocial strengthening process of older persons and shows that vulnerability and mastery can go hand in hand. Furthermore, it underlines the importance of solidarity between different generations to stimulate empowerment among older persons.

The private foundation be.Source commissioned the KU Leuven Chair Empowerment of Underprivileged Elderly to promote research about (vulnerable) older persons, and more specifically about psychosocial aspects affecting older persons (e.g. loneliness). The main research question of this university chair is as follows: how can we strengthen older people living in precarious circumstances and improve their connection to their surroundings and society so that they can experience a higher quality of life? Jasper De Witte and Tine Van Regenmortel (holder of the chair) conducted research about, with and for vulnerable older persons. In this respect, we participate with and give voice to professionals and the so-called silenced voices, vulnerable older persons themselves. Along with several research reports (De Witte & Van Regenmortel, 2019a, 2019b, 2020a, 2020b) and workshops, this book, *Silver Empowerment*, is part of this KU Leuven chair.

Structure of the book

This book discusses various ways to stimulate the empowerment of older persons in practice. We give the floor to eminent academics from a variety of backgrounds (among others psychology, sociology and economy), who each have specific expertise about social care and policy for older persons. Hereby, the authors focus on individual, social and structural processes of empowerment, while covering a wide range of subjects such as resilience, loneliness, the possibilities of neighbourhood-oriented care for empowerment, the interplay between formal and informal care, and the inclusion of older persons in research and care. Besides discussing the most recent scientific insights, the authors also explore the practical and policy implications of these insights and formulate – where possible – specific policy recommendations to stimulate empowerment.

We will now zoom in on the different contributions of this book. In the first chapter, Tine Van Regenmortel and Jasper De Witte describe the empowerment framework and discuss its implications for the older population. They emphasise that empowerment – with its focus on strengths, connections and resilience – is a useful way to counteract ageism and to stimulate participation. Indeed, just like any other age group, older persons can acquire a feeling of mastery and control, despite age-related vulnerabilities. In this regard, the authors point to the shared responsibility of all stakeholders to create *enabling niches* in which older persons can deploy themselves and realise empowerment. By appealing to the strengths of older persons and stimulating meaningful connections with their surroundings, the general resilience and quality of life

of older persons will improve. This can be done by reinforcing their sources of strength on the individual, relational and structural level. The authors propose, for example, to stimulate *the power of giving* because doing things for other people (e.g. through volunteering, taking care of grandchildren) makes older persons feel better, useful and proud of themselves. Moreover, this often also has positive effects on their social network and society as a whole. Further, the authors underline the importance of strengthening community care and community building, and removing the structural barriers that impede older persons from participating, for example, by increasing access to healthcare, social services (e.g. psychological support) and public and individual transportation.

In the second chapter, Jozef Pacolet, Rodríguez Cabrero Gregorio and Simón Sosvilla Rovera discuss the *economic cost of loneliness* for older persons in Spain and Belgium. In this respect, they not only consider the direct cost of loneliness (e.g. on health expenditure such as hospital admissions) but also its indirect cost (e.g. a loss of economic activity, the need for more social support). Based on an extrapolation of the results from a Dutch study about the financial cost of loneliness on additional healthcare expenditures, the authors suggest that the additional cost of loneliness for healthcare for the total Belgian population could be approximately 3.2 billion euros, which is about 0.7 per cent of the gross domestic product. They also point to additional costs with regard to long-term care, the indirect costs of increased mortality rates and other cost dimensions (e.g. the dangers of providing informal care, for older persons with dementia). They estimate that the indirect cost of loneliness is roughly between 2 and 10 billion euros, depending on the monetary value that is given to life. In line with the empowerment paradigm, the authors stress that loneliness is a *shared responsibility* of individuals, public health and preventive policy, and the professional care sector and civil society.

In the third chapter, Jasper De Witte and Tine Van Regenmortel discuss the state of the art about one of the most important indicators for well-being of older persons – namely, feelings of loneliness. The relevance of this subject is not only demonstrated by the detrimental effects of loneliness on quality of life but also by the prevalence of loneliness, which increased significantly during the Covid-19 pandemic. Based on statistical data analyses, the authors first detect various groups of older persons that are disproportionately affected by feelings of loneliness and on which loneliness interventions could focus (e.g. women, people with a migration background, the *older old*). Subsequently, the authors discuss various factors that *explain* feelings of loneliness on the individual (e.g. health), relational (e.g. social network characteristics) and structural levels (e.g. culture). Based on these analyses, they conclude that

loneliness is a complex phenomenon which comes in multiple forms, for which one-size-fits-all interventions do not exist. They stress the importance of creating a wide range of interventions that are tailored around the unique needs of the individual. The authors argue that empowerment is an effective framework that can guide the development of interventions that aim to prevent and alleviate feelings of loneliness among older persons. Indeed, empowerment's central focus on strength and connection is crucial for loneliness interventions because it enhances older persons' resilience and their possibilities to create a satisfying social network.

In the fourth chapter, Leen Heylen considers the potential and pitfalls of the policy concept *neighbourhood-oriented care* to enhance the well-being and empowerment of vulnerable older persons. Neighbourhood-oriented care puts the neighbourhood forward as the field of action for care and support, and it considers the community and civil society as key players. In line with the empowerment paradigm, it upholds a holistic, integrated and inclusive approach whereby the person is put central regardless of age. According to Heylen, a first opportunity of neighbourhood-oriented care is that it stresses that the place where people live matters for their well-being (e.g. proximity of services, green) and gives policymakers additional tools to empower older persons. Second, its inclusive approach (which focuses on people of all ages) counteracts ageism because it moves beyond the simplistic and stereotypical view of dependency in old age: it views older persons as in need of care but at the same time also as persons with control who can support other people in their neighbourhood. Third, this concept implicitly acknowledges the importance of so-called *weak ties*, the social cohesion between neighbours (e.g. regular contacts, a chat with a shopkeeper). Last, its transversal policy view adds to the well-being of older persons. However, Heylen also discusses various pitfalls, such as the fact that not all neighbourhoods are good environments to *age in place* and that nostalgia can be a misleading driver for putting policy into practice (because mutual support among neighbours has its limits). In addition, neighbourhood-oriented care can potentially reinforce inequalities among neighbours because the implicit focus on social networks and neighbours risks excluding those who lack these contacts. These pitfalls form the stepping stone for tackling many of the challenges associated with an ageing population and have the potential to contribute to the empowerment of older persons.

In the fifth chapter, Benedicte De Koker, Leen Heylen, Dimitri Mortelmans and Anja Declercq stress that the sustainability of the long-term care system requires adequately supporting informal caregivers by creating a strengthening environment and enhancing their resources so that they can be resilient

and realise empowerment. Although formal support is one of the crucial elements for this, the *support paradox* shows that formal support does not always work. In this respect, the authors point to the importance of having a good connection and trust, recognising and valuing everyone's role in the 'care triad', and home-care policies sufficiently supporting and empowering informal caregivers. Further, the authors consider neighbourly support and citizen initiatives, two new forms that are (re)gaining importance as sources of informal care. Although these forms of care are worthwhile and have predominantly positive outcomes, there are also risks involved when they are relied on too much. Indeed, expectations must be realistic and feasible for those actors to have an empowering experience. We must also be aware of the risk of social exclusion because these types of care are generally more reserved for people who are well off. Further, the authors emphasise that their *bottom-up approach* does not match the top-down logic of formal care. Indeed, policymakers and professionals should not take over these bottom-up initiatives and try to professionalise them by adapting them into traditional structures, but rather respect their informal and often organic nature.

In the sixth chapter, Elena Bendien, Susan Woelders and Tineke Abma discuss some critical moments of (dis)empowerment during participatory action research with older persons as co-researchers. Participatory action research is based on an equal partnership among experts, researchers and end users in the process of creating knowledge, and it aims to strengthen the empowerment of the people involved in the research process. In this respect, the facilitator tries to create a *communicative space* in which all stakeholders feel encouraged, respected and supported to give their perspectives in order to generate knowledge. Based on an example of a participatory action research project with older volunteers in the Netherlands, the authors describe several *critical moments* in which the perspectives and underlying values of the people involved were conflicting, creating an impasse. If not dealt with correctly, those moments could have resulted in disempowerment and may have undermined the entire project. To avoid this, the authors conclude that researchers have a moral responsibility for *ethics work*, in which they act as reflexive practitioners who recognise ethically salient aspects by paying attention to emotions and relationships, and who work out the right course of action together with critical friends. That way, the *co-creation* of knowledge is empowering for everybody involved in this process.

In the seventh chapter, Meriam Janssen, Katrien Luijkx, Aukelien Schefelaar and Annerieke Stoop emphasise that *person-centred care* requires that older persons are put at the centre of their own care and support. To realise this, the authors argue that older persons must be sufficiently included *in*

research, as equivalent partners of researchers and care professionals. Indeed, it is crucial to gather sufficient data about the lifeworlds of older persons, as the most important and primary source. In this contribution, the authors give several examples of how the Academic Collaborative Center (ACC), a long-term and structural collaboration between science and practice at Tilburg University, contributes to person-centred care by giving a voice to older persons in research, and by gaining insight into their experiences, preferences and capabilities. Based on qualitative research methods, the ACC, for example, shows that although nursing home residents still value sexuality and intimacy as important in their lives, they deem that this cannot be satisfactorily experienced in the context of a nursing home because of various practical, emotional and communicational issues. Moreover, staff often experience and label sexual behaviour as a problem and do not feel equipped to empower residents in this life domain. By giving a voice to these nursing home residents, the ACC not only stimulates empowerment but also aims to improve the care. Further, this centre also structurally involves older persons as co-creators of new studies by stimulating them to think along and create a joint vision on their own roles and tasks within the research. It is not only the democratic right of older persons to be involved, but this also results in higher quality research and a better fit and usefulness of services.

In the eighth and final chapter, Katrien Steenssens, Tine Van Regenmortel and Jasper De Witte present the core guiding principles to develop, implement and evaluate empowering policies, practice and research. Apart from the central principle of strength in and through connection, these principles are termed *a positive stance, inclusiveness, participation* and *an integral perspective*. Using these interrelated guiding principles as touchstones during the process of development and implementation offers feedback about the extent to which this process can actually lead to empowerment. The discussion of the principles makes it clear that good intentions alone will not suffice to accomplish the intended empowering process of Silver Empowerment. One has to be willing to go the extra mile to maximally reach and involve all older people, pay attention to and develop all their strengths, and stimulate their mutual connections.

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