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Stress and Positive Coping in Older Adults

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Objective: Stress is a common risk factor for chronic diseases in older adults. As individuals age older, health can decline, but their stress does not necessarily dissipate. One particular form of stress that is unique to older adults is age-related stress, such that older adults experience stress related to worries about growing old, such as potential declines in mobility, brain functioning, health, hearing, vision, and ageism/discrimination. One way to address elevated stress among older adults is by providing science-based recommendations on positive coping mechanisms and creating a positive coping culture, where being able to cope positively is the new normal environment for older adults. Our research team developed a poster in order to disseminate psychoeducation on the effects of positive coping skills on stress management. We conducted a study to assess the preliminary efficacy of implementing the poster in subsidized community residential buildings for lower income racially diverse older adults. The positive-coping health promotion poster was created to reflect the racial representation of the targeted population, in an effort to allow the residents to see themselves and make the connection. We also wanted to assess the discrimination that the older adults may experience due to anything from their age, sex, and/or race, that may contribute to any specific stress within the older population.

Methods: In collaboration with the Institute for Inquiry, Inclusion and Innovation (iCubed) Health and Wellness in Aging Populations Core, and Richmond Health and Wellness Program (RHWP), we implemented a survey to assess poster feedback to urban Richmond, VA low-income senior housing residents. Participants (60+ years old) were recruited in low-income senior housing units through Virginia Commonwealth University: RHWP.

Methods

Participants volunteered to view the stress and positive coping poster and asked to answer questions about the poster. Assessments for stress, demographics, ageism, receptions of the poster were administered. Analyses were conducted to assess individual stress and feelings about using positive coping mechanisms. Preliminary survey data from N=50 participants is described and discussed to direct future health interventions.

SAMPLE:

- **Age** 69.96 (mean) 59-89 (range)
- **Gender** 56.0% female
- **Education** less than high school (5, 10.0%), some high school (15, 30.0%), high school grad (13, 26.0%), some college (14, 28.0%), college grad (3, 6.0%)
- **Stress** A lot (8, 16.7%), some (31, 64.6%), none (9, 18.8%)
- **Ageism**
 - 80% reported that discrimination is a problem in America.
 - 87% reported that racism is a problem in America
 - 70% reported that sexism is a problem in America
 - 64% reported ageism is a problem in America



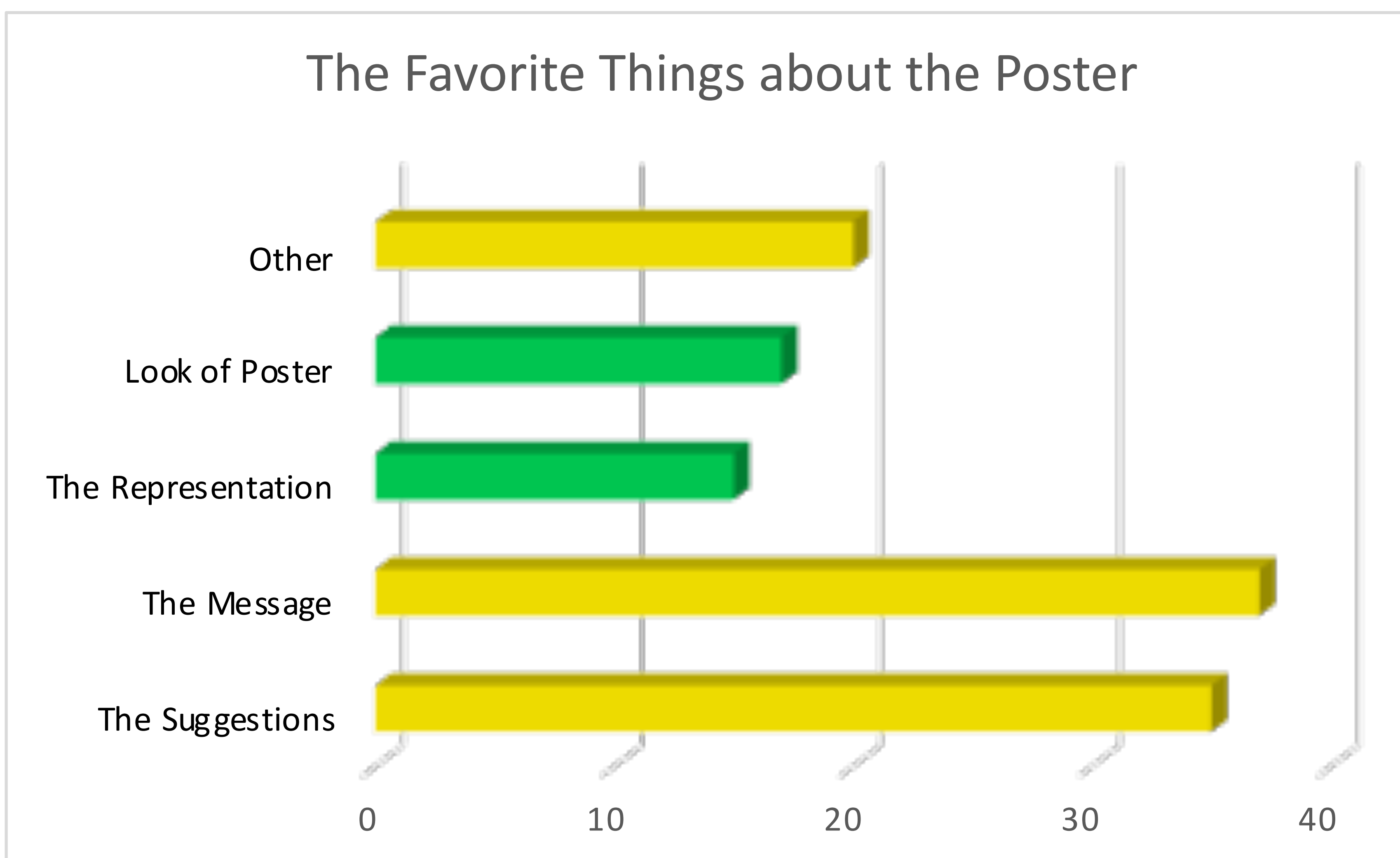
Reaction/Response:

- 82% reported that the poster was very positive and was impacting them in a positive way
- 16% thought that the poster was neutral
- 94% reported that the poster was helpful in their own life.
- 96% reported that the poster would be helpful in their community.

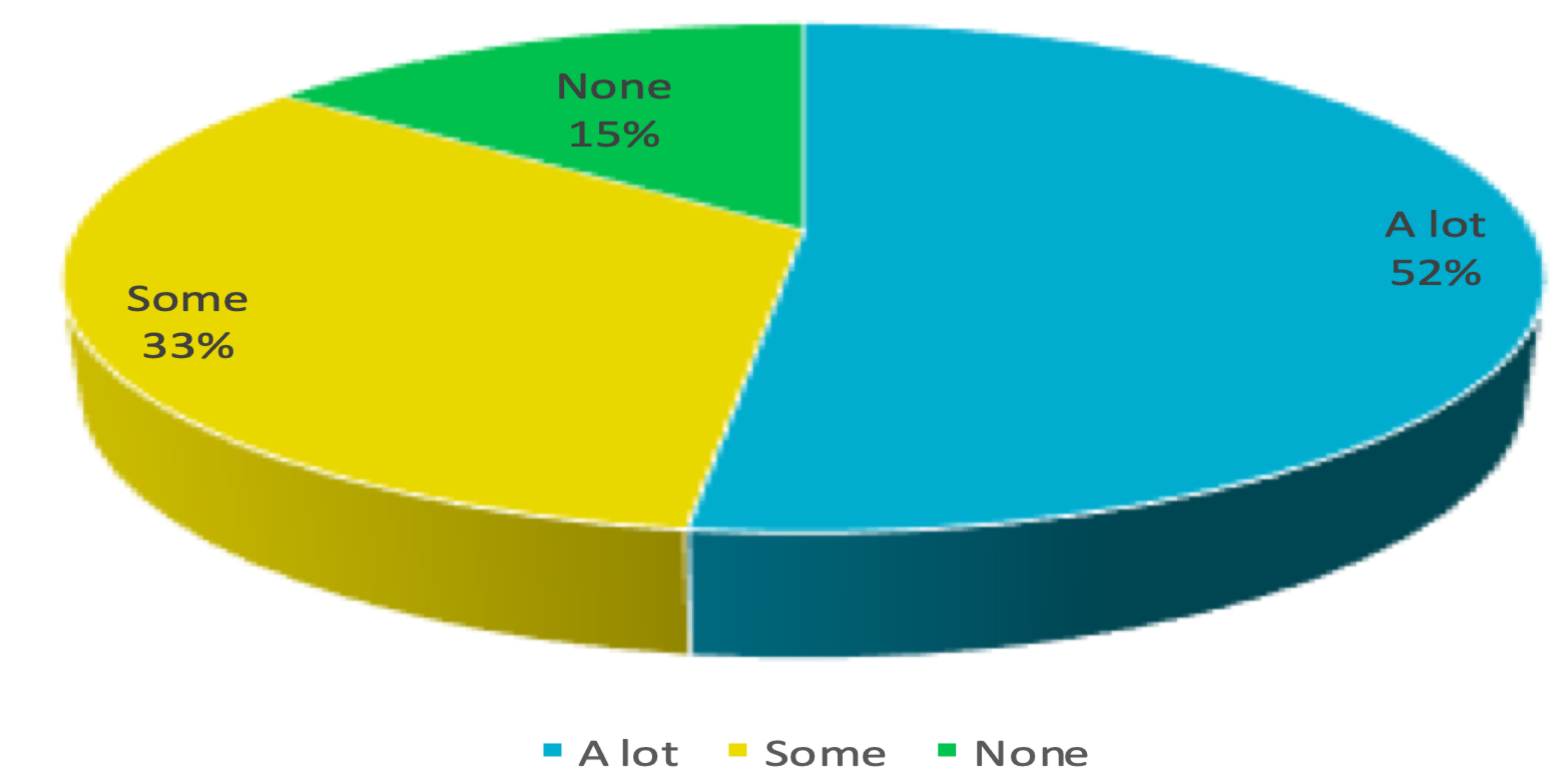
Top Things Willing to Try from the Poster

Pray (20, 41.7%), visit family (18, 37.5%) talk to a friend (20, 41.7%), volunteer (14, 29.2%) help a family/friend (14, 29.2%), visit a museum (14, 29.2%),

Not willing to try: YouTube Yoga (3, 6.3%) host an Event (3, 6.3%), library book club (3, 6.3%), invent (1, 2.1%)



How much you relate to the poster

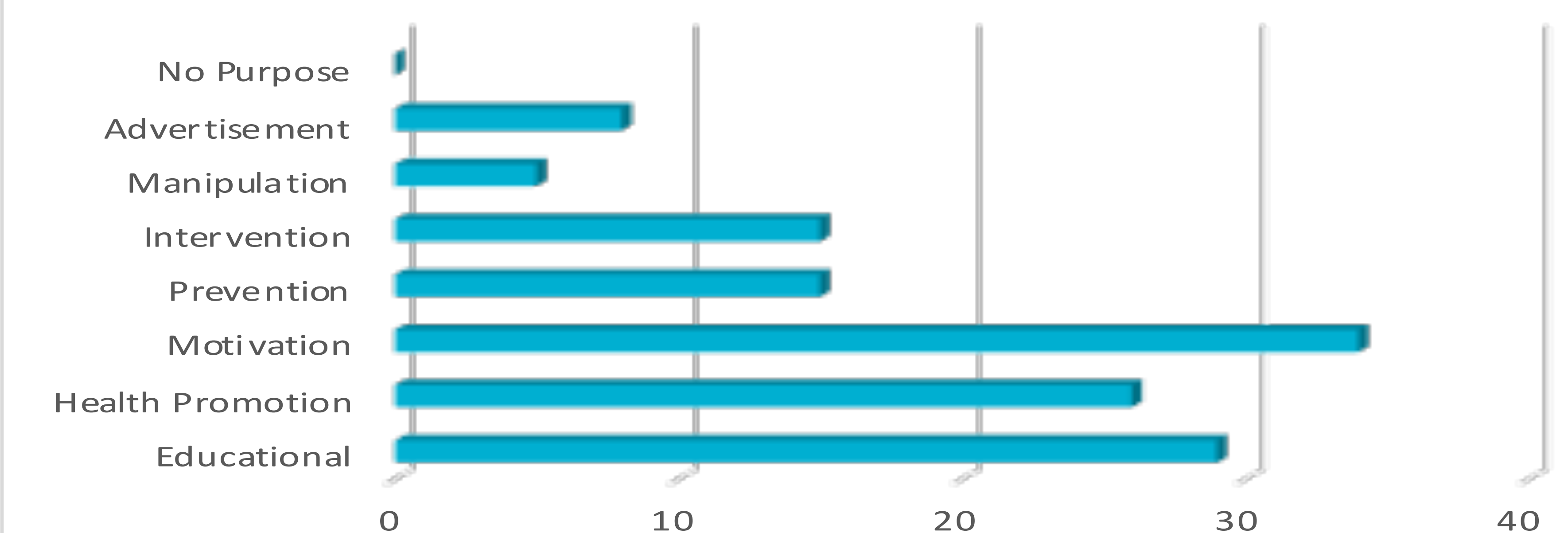


Learning; 85.7 % expressed learning something

- 59.5% learned new ways to deal with stress
- 47.6% expressed learning new activities to be apart of
- 45.2% learned the variety activities to be apart of
- 21.4% learned about stress,
- 31% new ideas
- 20% expressed not learning anything from the poster

Purpose: Participants understood that the poster was educational.

What do you think was the purpose of this poster?



Poster Feedback:

98% reported wanting the poster displayed in their building.

60% wanted a copy of the poster

68% wanted a wallet-size of the poster.

Discussion:

- Some expressed their community room feeling depressed and not full of life.
- A few of the participants stated enjoying this research interview and us coming in and talking and doing different activities with them.
- This sample population reported trying to stay positive and are open and willing to take control of their health.
- In conclusion, there needs to be a push to implement healthy living habits into these communities. Starting programs within them should be the next step into promoting healthy lifestyles.