Lifelong Resiliency Learning: A Strength-Based Synergy for Gerontological Social Work

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The significance of the synergy between promoting resiliency and the strengths-based perspective is well established in gerontological social work. This article reports on qualitative research that suggests another potentially productive synergy, one that can result from the interaction between the capacities for resiliency and lifelong learning. These findings emerged from a qualitative study involving 12 older women (ages 64–72) participating in the Osher Lifelong Learning Institute at the University of Southern Maine. Lifelong learning is defined as a cognitive process by which individuals continue to develop their knowledge, skills and attitudes over their lifetime. The implications of the data are considered from a multidisciplinary perspective that includes gerontological social work, educational gerontology, and adult learning. Specific social work research and practice initiatives that could confirm and operationalize this synergy are suggested.

KEYWORDS   Lifelong learning, older adult education, resiliency, cognitive development

The whole of life is learning, therefore education can have no boundaries.
(Lindeman, 1926, p. 5)

The Oxford English Dictionary (1989) defines synergy as “increased effectiveness, achievement, etc., produced as a result of combined action or cooperation” (XVII, p. 480). Its derivation is from the Greek sunerγος, meaning “working together.” This might be a defining motto for gerontological
social work, as it already incorporates a myriad of synergies as a result of its multidisciplinary heritage and the recognition that older adults can and must be engaged as partners in maximizing their quality of life (Green, 2002). It is within this context that this article introduces the possibility of a new synergy for operationalizing the strengths-based perspective: the mutually supportive interaction between the capacities for resiliency and lifelong learning. It is based on information drawn from qualitative research involving women members ($n = 12$) of the Osher Lifelong Learning Institute (OLLI) of the University of Southern Maine.

The research discussed in this article was undertaken to provide descriptive data on the biopsychosocial implications of participation in self-governing older-adult learning communities such as OLLI. It is estimated that there are over 400 such programs across the country, approximately half of which being affiliated with institutions of higher education (Elderhostel, n.d.). It was in the course of this research that we identified a significant commonality in the way the participants dealt with and responded to past life stressors and traumatic events. For us, all with backgrounds in both social work and adult learning, these data suggested a positive dynamic relationship between the capacities for resiliency and lifelong learning. The evidence for this synergy and its implications for gerontological social work and strengths-based practice is the subject of this article.

For the purposes of this discussion, resilience is defined as a capacity “for successful adaptation under adverse conditions” (Agaibi & Wilson, 2005, p. 198), and lifelong learning as “the process by which individuals continue to develop their knowledge, skills and attitudes over their lifetime” (U.S. Department of Health, Education and Welfare, 1978, p. 1).

THE STRENGTHS-BASED PERSPECTIVE AND RESILIENCY

The relationship between resilience and the strengths-based perspective is widely recognized in social work. Norman (2000) identified resilience as the concept that “operationalizes the strengths perspective [and as] the most reasonable way social work can put it in practice” (p. 3). Greene (2002), in reviewing the literature, found that theorists “continue to urge social work educators to base human behavior content on a resilience approach to increase the emphasis on client strengths and resources” (p. 9). And Saleebey (2001) urged social workers to use the strengths perspective and resilience literature to understand how ‘individuals have survived and in some cases even flourished” despite numerous hardships (p. 87).

The strengths-based perspective is seen as an ideal fit for gerontological social workers in that it provides a focus for identifying and encouraging coping strategies and life enhancing alternatives rather than dwelling on deficit management. However, although many have welcomed this fresh
approach to identifying the needs and competencies of older adults entering into what is often the most challenging of life’s stages, there continues to be concern that adoption of strengths-based strategies with older adults and their families “has tended to lag behind other fields” (Green & Cohen, 2005, p. 368). The findings to be discussed in this article suggest that lifelong learning provides an additional focus for this perspective, one that could help bridge the gap between theory and practice.

There is nothing new about the ideal of lifelong learning, e.g. that learning can, and should, continue from birth to death. The concept goes back at least as far as Socrates, Plato, and Aristotle, when adult learners sought out these philosophers in 4th-century B.C.E. Greece. However, from the 1960’s on, the term has been applied to educational activities undertaken by adults in a variety of contexts. These include professional continuing education, vocational training and retraining, adult basic education, higher-education degree programs for adults, and specialized noncredit, but intellectually challenging, programs for older adults, such as lifelong learning institutes (LLIs) and their European equivalent, Universities of the Third Age (Findesen, 2005). The term has also been applied to include self-directed learning in which adults pursue knowledge and understanding on their own, with little or no pedagogical guidance (Merriam, Caffarella & Baumgartner, 2007).

Although the variety of activities called lifelong learning is a cause for some confusion, it is important to emphasize that when applied to the individual adult, e.g. the lifelong learner, the term can suggest a specific capacity or approach to learning beyond mere participation in an educational program (Beairsto, 2000; Vaill, 1996). Although this capacity is by no means limited by age, this article addresses the possible synergy between the capacities for resiliency and lifelong learning in the older adult. Accordingly, what is required of lifelong learners is “learning as a way of being” (Vaill, 1996, p. 51), learning that requires flexibility of thinking and continued reassessment and evaluation of information and ideas. Beairsto expanded on Vaill’s concept by identifying specific individual characteristics (habits of mind) that resulted in the lifelong learners’ way of being.

To understand this concept of the lifelong learner, it is necessary to go beyond the rebranding of various forms of adult education to consider the cognitive process that constitutes learning itself. The way we learn is the most critical and the most complex of all human activities (Jarvis, 2005). Although there are numerous theories on various aspects of adult learning, there is no comprehensive theory to explain the process in all its complexities (Merriam et al., 2007).

Learning is more than just absorbing, storing, and regurgitating information (Freire, 2000; Kegan, 1994). What is unique about humans is the extent to which they can successfully process and integrate information to change behavior and meet perceived needs (Parker, 2005). This process requires the
ability to critically assess existing knowledge while simultaneously considering new information. Adult learning is as much about rethinking old ideas and beliefs as it is about acquiring new knowledge. The study of how humans process information (e.g., think), and how that capacity develops over time, initially focused on children and adolescents (Piaget, 1972). Later theorists addressed the development of the more abstract, more critical thinking of adults. The highest level of this process of cognitive development is characterized by the capacity to critically reflect on one’s thoughts, assumptions, and actions. Various terms have been used to identify this level: “constructed knowledge” (Belenky, et al., 1986, p. 22), “reflective judgment” (King & Kitchener, 1994, p. 9), “relativism” (Perry, 1981, p. 79), and “dialectical” thinking (Riegel, 1973, p. 350). Other theorists have categorized such attributes as “wisdom” (Merriam et al., pp. 351–357). Although these and other theories that postulate the hierarchical nature of adult cognitive development differ in many respects, most suggest that adult thinking, at its highest level, can result in an increased capacity to deal with the contradictions, ambiguities, and uncertainties inherent in acquiring new information or dealing with new situations. This would seem to closely match the definition of resiliency. Such adults are seen as less stressed by unforeseen circumstances or ideas, and more flexible and confident in their ability to deal with new challenges (Brookfield, 1987; Mezirow, 2000; Wolf, 2006). In contrast, researchers have also found that many adults become more rigid in their thinking over time, more set in their ways, and less able to question their own assumptions and beliefs (Merriam, 2004). As a result, they are less able to deal with new, more demanding situations (Hood & Deopere, 2002). This assertion of alternative outcomes in the later stages of cognitive development is consistent with the hypothesis of the dynamic interaction between adult learning and resiliency.

CHARACTERISTICS OF THE LIFELONG LEARNER

With the exceptions already cited, there seems to be few, if any other, comprehensive listings of the psychological or personality characteristics of the lifelong learner, or any specific instruments for assessing these attributes in the individual. Therefore, for the purposes of this qualitative research, we have adopted Beairsto’s (2000) identification of specific habits of mind of the lifelong learner to provide a conceptual framework and nomenclature for identifying the characteristics reflected in the interviews of the OLLI members. What follows are the operational definitions based on Beairsto’s formulation, as used by the authors. It should be noted that Beairsto emphasizes that these affective mental habits should be distinguished from other relevant learning attributes such as problem solving and knowledge.
• **Curiosity**: Sustained inquiry and wonder as reflected by enthusiasm and interest in opportunities for new learning and experience.
• **Optimism**: The inclination to anticipate positive outcomes even while recognizing challenges.
• **Courage**: Ability to permit ambiguity, acknowledge paradox, and initiate change to accommodate new realities and experiences. The individual anticipates being stretched in this process.
• **Honesty**: Commitment to seeing things, including one’s self, as they really are. This requires the acknowledgement of personal limitations and failings.
• **Insight**: Awareness of unstated assumptions, and their role in judging and decision making.
• **Conation**: “A conscious tendency to act or strive for something” (Beairsto, 2000, p. 6). This is described as a product of both motivation and the ability to follow through.

**CHARACTERISTICS OF THE RESILIENT INDIVIDUAL**

The existence of individual resiliency characteristics has been extensively studied, and a number of instruments exist to assess their presence in individuals (Agaibi & Wilson, 2005). In establishing operational definitions for the aspects of resiliency displayed by the OLLI women, we were guided by the literature review conducted by Norman (2000). She identified nine core personality characteristics that enable stressed individuals to maintain competence and control of their lives. They are summarized as follows:

• **Self-efficacy**: “Feeling of self-worth, perception of one’s ability to perform required life tasks, confidence that one can deal with whatever comes” (p. 8). Norman (2000) cited this as the “most important personality characteristic” (p. 9) associated with resilience.

• **Realistic appraisal of the environment**: “The ability to differentiate between the possible and the impossible. This is reflected by the ability to accept limits and acknowledge problems” (p. 6).

• **Social problem-solving skills**: These skills contribute to self-efficacy by reinforcing a sense of competency and mastery.

• **Sense of direction or mission**: Norman (2000) cited research that indicates that assuming responsibility for the care of others or the completion of a task or goal provides meaning and motivation.

• **Empathy**: “The capacity to understand and respond to another’s feelings” (p. 7).

• **Humor**: The ability to use humor “to reduce tension and to restore perspective” (p. 8).

• **Adaptive distancing**: The ability to disengage from dysfunctional significant others (family members, etc.), thus avoiding the repetition of harmful behavior patterns or identifying with the illness of others.
Androgynous sex role behavior: Avoidance of identification with rigid gender stereotypes, and comfort in assuming roles or displaying affect that might not be considered typical for their sex.

High-enough expectations: Exposure to high but attainable expectations by significant others.

RESEARCH DESIGN

The qualitative research reported in this article was undertaken as a preliminary step in a planned longitudinal study of the experiences of members of an OLLI over time. Ungar (2003) noted that qualitative methods of research are particularly appropriate to exploring “protective processes relevant to the lived experience of research participants” (p. 85). This study was limited to women because, both nationally and at the USM OLLI, women comprise approximately 75% of the membership, and because the literature (Lamb & Brady, 2005; Wolf, 2005) has suggested some significant differences between the perceptions of men and women about these kinds of programs. This issue of gender imbalance in OLLI participation is an important one in educational gerontology, but is beyond the scope of this study.

As a secondary purpose, the authors, all with backgrounds in both social work and adult education, wanted to bring to the attention of their colleagues the emergence of new educational opportunities for older adults. We also wished to acknowledge the historical and theoretical links perhaps forgotten by some, between social work and adult education. This goal is reflected in the introductory quotation from Eduard Lindeman (1926). Lindeman was both a teacher at the nation’s first social work school, and a leading influence in the development of American adult education (Brookfield, 1987). In these dual capacities, he was a colleague of both John Dewey and Jane Addams.

The participants in the study were a randomly selected group of 12 women, aged 64 to 72, who had joined OLLI within the previous 2 years. The OLLI program offers noncredit courses in the humanities, social sciences, and natural sciences to adults aged 50 and above. The average age of its membership is 72. These programs are a relatively recent addition to the range of educational resources available to older adults. There are no entrance requirements, grades, or tests. Fees are minimal and often can be waived. Data were collected through individual, face-to-face interviews conducted jointly by one female and one male author. The interviews focused on documenting the participants’ biopsychosocial status in the years just prior to joining OLLI, and on their experiences with OLLI since then. In the course of the interviews, family and social history emerged but was not the primary focus. The interviews were recorded, transcribed, and then reviewed independently by each author to identify common elements and themes.
Differences were resolved through clarification of operational definitions. The initial intention was to identify participants’ current life situation to provide a base for comparison with follow-up data. However, even before the series of interviews was completed, we were impressed by the consistency of participants’ attitudes towards both learning and dealing with life’s challenges. It was also clear that these attitudes had existed long before they joined an LLI.

Based on the literature (Manheimer & Moscow-McKenzie, 1995; Martin, 2003) and previous research (Lamb & Brady, 2005), it had been expected that the participants would be generally positive about the value of lifelong learning opportunities, even when previous educational experiences had been unsatisfactory. However, what had not been anticipated was the extent to which these women, in discussing their past histories, consistently emphasized their strengths and resiliencies, rather than their weaknesses, fears, or vulnerabilities. As one woman said about starting her own college education after she was married and had children, “When I look back on it, I think I had to have been a pretty strong person to do it because my own parents didn’t think I should.”

It is recognized that the classifications used for both lifelong learning and resilience have limitations. Even with operational definitions, the terms used are ambiguous and overlapping. Nonetheless, upon further review and analysis of the data, we came away with a high degree of confidence that 11 of the 12 participants had striking similarities in their attitudes towards learning and expressions of resiliency. (One person was not included in these results because the interview did not provide sufficient information relevant to the issues of resiliency.) The basis for this confidence can be best illustrated by excerpts from representative interviews that provide a sense of the person as a whole, and how the classification systems were applied. In the excerpts that follow, some details have been modified to preserve participant anonymity. The identified characteristics are italicized.

THREE LIFELONG LEARNERS TELL THEIR STORIES

Annette, 68

The first example reflects a not uncommon pattern among the women in OLLI, a general lack of family support for their participation in further education (Lamb & Brady, 2005). Annette was not encouraged by her family to go to college: “I grew up in the fifties and they just did not see women going to college. They saw it as a waste.” Nonetheless, Annette showed, even then, a capacity for adaptive distancing by going to college for a year before running out of money. Once married with children, and also working, it was many years before she could pursue earlier goals. In doing so, she undertook a rather remarkable inner voyage that reflected her insight...
and honesty, as well as courage, optimism, and humor: “I took a whole year off . . . and I did nothing but lie on my couch and read and watch old movies.” When her husband asked what was going on, she replied: “Oh, I’m lying in state right now. I’m going to think about what I’m going to do for the rest of my life.” During what was apparently a very productive period of active inactivity, she decided to take better care of herself, and “do things” she had not attempted before. The results of this fresh start included taking regular college courses, serving as a volunteer at cultural events, and finally enrolling in an LLI. Annette’s description of her initial and ongoing reactions to participation in the program reinforced and confirmed her characteristic resiliency. She dealt with her initial hesitancy by confirming with another member of OLLI that it was “OK to just sit and listen.” This capacity for social problem solving was facilitated by her accompanying empathy and humor. She related how the more she got to know other LLI members, her reactions just got better:

I like their sense of adventure . . . that they’re not afraid. It’ll tell you what something like OLLI does for me. It energizes me and that’s why I do it. Of course there are times when my kids just think of me with oatmeal dribbling down my chin.

Catherine, 64

A second interview illustrates the importance of the sense of self-efficacy in the operation of resiliency, combined with courage and a realistic approach to dealing with adversity. Catherine was in her mid-40s when her husband died of cancer after a long illness. She described how she took over her husband’s business in a field in which she had no background:

I knew nothing about it really but . . . it was an economic decision and I had a daughter about ready to leave for college and I wasn’t going to get this working at [a local store]. Desperation was the motivator. I never tried to fool anybody. It was a real stretch . . . but I got to the point where I could do it.

Catherine used “stretch” several times to describe her efforts to take on new challenges or learn new things.

In describing her experience in joining OLLI, Catherine said she was apprehensive at first, because she did not know anyone and the program might have expectations she could not meet. But, again, her courage and self-efficacy won out, describing herself as a learner who was always “positive and upbeat. . . . You should challenge yourself with something that makes you a little bit afraid instead of just always being safe.”

However, even individuals with histories of positive coping mechanisms need reinforcement from time to time. Catherine said that doing things
alone had been a cause of past discomfort. Now she finds she does not need that “security” anymore. In one sentence, she seemed to confirm the developmental processes and synergy of resilience and learning: “As I have matured and gone through other things, I’ve realized I can be alone and not be lonely, which is a big thing to learn.”

Although we were able to confirm that each of 11 interviews reflected almost all the lifelong-learner resiliency characteristics, there was one exception, androgynous role behavior. Catherine’s was the only interview in which an example of transcending sexual stereotypes emerged. It was only by chance that Catherine mentioned one experience that met the definition of androgynous role behavior: She described having recently assumed the position of chairperson of a committee previously occupied by a man: “We had a man in the office for 10 years. There were many people, women included, who didn’t think a woman could do it. I have to get beyond that, so it’s a challenge.”

Margaret, 72

The data generated by the interview with Margaret, a retired nurse who has been a member of OLLI for 2 years, adds to the picture of the dynamic interaction between lifelong learning and resiliency. Her description of her initial response when she first learned about OLLI documents the curiosity and courage that supports the openness to new ideas required for learning though the lifespan (Brookfield, 1995).

When I first heard about OLLI, I was totally fascinated by the idea that this was going on and the interest that people had. My definition of lifelong learning is that it opens your horizons and leads you where you hadn’t been, and that takes you in another direction . . . and even though you’ve reached a certain age, you continue to learn.”

A powerful example of the synergy between resilience and learning came in her account of a series of major losses and crises in later life, one in which almost all the lifelong–resiliency–learning characteristics seemed to have been operationalized.

My first husband died when I was just 50, and that opened up a whole new world [courage, insight, realistic appraisal]. My adult children at that time left and got married, and then about 4 years after that I met another man who I had known and, to make a long story short, we married. I basically got a divorce from my whole family and went away to Florida [courage, curiosity] and worked for 9 months away from my immediate family—my children, my mother, my sister, you know, the whole thing [adaptive distancing, social problem solving]. Then, after we had been married only 3 years, he was diagnosed with leukemia. I thought he was going to die. He almost did, but, thank God, he survived. So that was very
traumatic, and the year after that his son was killed in an automobile accident, so that was traumatic. Those traumatic things happened to us, but we managed to keep going and get help [self-efficacy, realistic, problem solving, high enough expectations, optimism, conation].

IMPLICATIONS FOR RESEARCH AND PRACTICE

It is recognized that increasing specialization in the study of human behavior often makes it difficult for professionals in one field to assess the value of potentially relevant knowledge generated in another (Green, 2002). Nonetheless, in retrospect, the close relationship between resiliency and learning would seem obvious: human survival depends on the capacity to learn from experience and modify behavior accordingly. This capacity is the essence of resiliency. If resiliency and learning are interdependent, and evolve over time, the premises of an integrated lifespan dynamic, lifelong resiliency learning, becomes viable. This perspective parallels Lewis’s and Harrell’s (2002) concept of “resilience as a dynamic process over the life cycle rather than an outcome of one’s coping abilities during a singular time of stress” (p. 283). This presents the field of gerontological social work with the opportunity to support and encourage lifelong resiliency learning in older adults, their families, and the professionals that work with them.

The development of appropriate intervention strategies requires that one distinguish between the needs of those already engaged in lifelong learning activities and those who are not. For the former, support and recognition are critical. Learning activities, formal and informal, need to be acknowledged for what they are: demonstrations of resiliency in the face of adversity. Vaillant (2002), reporting on a 50-year longitudinal study involving hundreds of individuals from a diverse urban community, found that lifelong learning was one of the “basic activities” that made retirement “rewarding” (p. 224).

But what about older adults who do not participate in such activities? It is here that both the challenges and the opportunities may be greatest. However, it is necessary to differentiate between those who are unable to participate for instrumental reasons (lack of availability or awareness of resources, limited mobility, financial constraints, etc.) and those who seem to lack the interest or motivation to explore any learning opportunities. What follows are some possible strategies for supporting and encouraging lifelong resiliency learning by both groups. These preliminary suggestions are offered as a point of departure with the expectation that social workers involved in the day-to-day realities of gerontological work will have an even better sense of where and how to test the premises and possibilities discussed in this article. It is hoped that they will be emboldened, as we were, by Greene’s and Conrad’s (2001) vision that, “The basic premises of the concept of resilience are far-reaching, and its promise as a human behavior and practice concept has yet to be realized” (p. 41).
Developing Lifelong Learning Resources for Underserved Populations

Despite the increased availability of lifelong learning programs throughout the county, it is widely acknowledged that participants represent only a narrow segment of the population: White, middle-class adults with above average education. Many LLIs have initiated outreach programs in attempts to diversify their membership, but with only limited success (Manheimer, 2005). It should also be noted that older individuals have, for a long time, been underrepresented in formal adult learning programs, and minority and/or economically disadvantaged populations even more so (Cross, 1979). This is an area where interorganizational, interdisciplinary collaboration could be especially productive as it suggests a variety of social work policy and practice initiatives. Another opportunity for direct social work intervention is the promotion of more intellectually stimulating (e.g., stretching) content in programs offered by senior centers, nursing and graduated care facilities, and adult day programs. Saleebey (2001) concluded that many programs for older adults “do not stretch the imagination, the physical capacity, or the intellectual reach of older adults” (p. 463). One step in reversing this trend would be for social workers to familiarize themselves with lifelong learning programs within their community, and include them in their inventory of possible client resources. In doing so, they should be aware that anecdotal evidence suggests that many older adults, especially those who have negative feelings about previous educational experiences, may be intimidated by the university identification attached to many LLIs. Although LLIs are working to change their image, greater familiarity by referring professionals with the reality of these programs would help to counter this reverse stereotyping. Also, an insight offered by Malcolm Knowles (1998) needs to be considered: Adults “resent and resist situations in which they feel others are imposing their wills on them” (pg. 65). As a result, many adults will exhibit some degree of resistance to the idea of going back to school. Knowles’ (1998) observation in this regard mirrors the strengths-based perspective: “Adults need to be treated . . . as capable of self-direction” (p. 65).

Another caution from the field of adult learning is the need to recognize the difficulty differentiating instrumental versus interpersonal reasons for nonparticipation (Fisher, 1979). For example, an individual might cite travel distance as the reason for nonparticipation, although this decision is also influenced by pervasive depression. Alternately, professionals also need to guard against prejudicial assumptions about the capacities of individuals to benefit from intellectually stimulating experiences. Inherent in the strengths-based approach is the recognition that, sometimes, it is the people with the fewest advantages and the severest trauma who demonstrate the greatest resiliency (Kivnick & Stoffel, 2005). In this context, it also may not be recognized that such resiliency suggests a capacity to engage in significant and challenging learning.
Strengthening Family Support

Social workers have long recognized the importance of supporting and empowering families in their critical role as caregivers and resources for their older members. There also exists a substantial body of theoretical and practice information relevant to applying the strengths perspective to promote resilience in family caretakers. Kropf and Greene (2001) credited Walsh’s (1998) proposals as capturing this approach. These include interventions that readily lend themselves to supporting lifelong resiliency learning, including “praising efforts and achievements, drawing out hidden resources, finding strengths in the midst of adversity and building empathic connections among family members” (p. 308). In both their current and past research Lamb and Brady (2005) reported how participants described, with pride and a touch of irony, how family members reacted with pleasure, respect, and surprise to their intellectual vigor and adventurous curiosity. They may have joked about “grandma dribbling her oatmeal,” but behind this was recognition that grandma was still a person to be reckoned with. It is this kind of demonstration of competence that helps counter families’ compassion fatigue and hopelessness. Hopelessness is the enemy of resilience in individuals, families, and even social workers.

Recruiting and Training Gerontological Social Workers

The shortage of social workers willing to enter the geriatric field is a well-documented phenomenon (Anderson & Wiscott, 2003; Hooyman & Peter, 2006; Mellor, 2006). Although there are a variety of explanations for this situation, it would seem that a major cause is the desire on the part of so many people, especially in our youth-oriented culture, to deny and shun the reality of aging and its inescapable outcome (Silverstone, 2000). Saleebey (2001) characterizes this as “massive cultural repression” (p. 433). Social workers and other professionals are not immune to such feelings and reactions (Lewis & Harrell, 2002). Introducing the strengths perspective is one strategy advocated by many to help professionals see aging as a more hopeful and positive experience. Social workers, by the nature of the tasks and challenges they face, must call upon great reserves of personal resiliency, but even they are subject to burnout, depression, and despair. Helping relationships work best when they are reciprocal (Noddings, 2002). When clients lend therapists their strengths by their patience with the therapists’ shortcoming, or by the examples they set, everyone benefits. It would also be beneficial for social work students to visit LLIs, and perhaps even serve field placements in such organizations to see another aspect of aging, one that shows older adults as creative, energetic, and actively engaged in life.
Research Opportunities

The concept of the lifelong learner as possessing specific cognitive and personality attributes has received only limited attention in the adult learning literature, and is often more implied than stated (Beairsto, 2000). Clearly there is a need for a normed instrument to assess the individual characteristics of the lifelong learner. Such a tool would provide empirical data that could be used to test the relationship between lifelong learning, resiliency, and successful aging. The creation and validation of such a tool would also provide an additional perspective in exploring the complex and “challenging” question of “the connection between health, well-being, and resilience” (Lewis & Harrell, 2002, p. 282).

Making the Strength-Based Approach a Reality in Everyday Practice

Saleebey (2001), commenting on the work of Steven and Sybil Wolin (1993) noted how, by exploring areas of strengths and success with clients, even after harrowing tales of hardship and trauma, this allowed them to “search out and account for the considerable assets and resources that people have within and around them, especially those elements of character that have ripened as a consequence of coping with dire circumstance” (p. 13). One might speculate that many of the accounts of lifelong resiliency that emerged uninvited in the OLLI interviews were prompted by the interviewers’ initial focus on lifelong learning. It was the participants, not the researchers, who first raised the connection between learning and resiliency. If, as it is generally believed, resiliency is a learned response to dealing with trauma and loss, older adults who maintain their learning capacity through intellectually stimulating activity may also enhance their levels of resiliency. This suggests that gerontological social workers who adhere to the strengths-based perspective should consider and explore options for supporting lifelong resiliency learning. Imagine, if you will, what it would be like if social worker contacts with clients routinely included the question, “So what have you been learning since the last time we talked?”

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