

# Lost in transition

## How older people experience frailty

Bente Egge Søvde<sup>1,2</sup>, PhD candidate  
Anne Marie<sup>1</sup> Sandvoll, Professor  
Eli Natvik<sup>1</sup>, Associate Professor,  
Jorunn Drageset<sup>1,2</sup>, Professor

1. Department of Health and Caring Sciences,  
Western Norway University of Applied Sciences, Førde  
2. Department of Global Public Health and Primary Care,  
University of Bergen



### Background

The experience of frailty extends beyond declining health and physical well-being and encompasses various dimensions, including physiological and social functioning.

### Research question

The research question guiding our study was: How do frail older people experience at-homeness?

### Method

From a purposive sampling strategy, ten frail people 72–90 years old were interviewed in depth in their homes. We used phenomenological hermeneutical analysis and followed the COREQ checklist. The study was presented to the Western Norway Regional Committee for Medical and Health Research Ethics and approved by the Norwegian Centre for Research Data (Ref. 61202).

### Discussion

Our study highlights that frailty disrupted participants' rhythm and continuity in everyday life at home. Short-term stays at a nursing home further forced participants' lives into a new rhythm not in tune with their own

### Findings

An overall finding was that the participants wanted to regain a feeling of at-homeness in their experience of not being at home. We identified three main themes: (1) being home with cherished people and possessions, (2) giving the nursing home a go and (3) attuning to the natural rhythms. For home-dwelling frail older people, life is balancing between living safely in their own home or needing to move into a nursing home.

### Conclusions

Our study provides insight into the lived experiences with frailty related to at-homeness. The experience of being lost in transition represents a uniquely significant experience for frail older people, foregrounding existential issues, carrying the potential of at-homeness.

### Quotes

#### Being home with cherished people and possessions

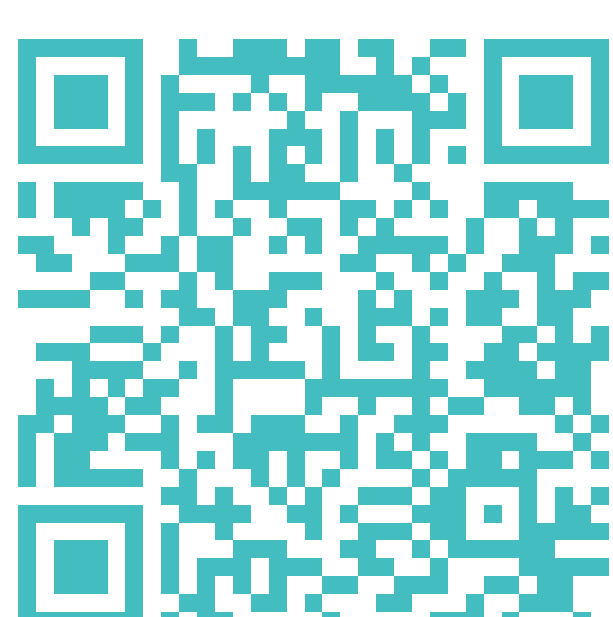
*I think I am fine. We are both 90 years old. My husband manages to arrange the garden and everything; he goes shopping and cooks every meal. I get served breakfast every morning, and he prepares the dinner. I hope to continue as it is, with medication and all of that. Moreover, physically and mentally: it is best to be home! (participant 9)*

#### Giving the nursing home a go

*It was a bit fulfilling to be there. The healthcare providers were so eager to have me dine with the others. The other residents were pleased when I arrived. Moreover, I felt that it was an excellent place to be. You got all the help you needed and more. However, I felt that my head did not quite fit there, and my body did because it was lousy. (participant 3)*

#### Attuning to the natural rhythms

*We have dinner delivered every day except Sunday. I can make dinner, but I will have to spend all day by the stove. Of course, I miss it a bit, but I have so much else. We have a big house, so the days go by any way (Participant 8).*



Western Norway  
University of  
Applied Sciences