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Henry, Norbert James, Ed.D.

Syracuse University, 1989

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A QUALITATIVE STUDY ABOUT PERCEPTIONS OF LIFESTYLE AND LIFE SATISFACTION AMONG OLDER ADULTS

by

NORBERT JAMES HENRY

A.B., St. Bernard's College, 1958
M.S., Syracuse University, 1975

Abstract of Dissertation

Submitted in partial fulfillment of the requirements for the degree of Doctor of Education in Adult Education in the Graduate School of Syracuse University
June 1989

Approved Roger Hiemstra

Date 6/23/89

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Abstract

If people are expected to live longer, what will be the quality of that extended life? This question became the major focus of the dissertation. An important aspect of successful aging is looking at the concept of life satisfaction. A primary goal was to address the conceptual understanding of life satisfaction as found in the literature. I discovered that a variety of life satisfaction definitions were possible depending on an individual's perception of control or lack of control over life events.

Twenty nine older adults ranging in age from 65 to 95 were interviewed and observed as the source of data for the qualitative study. These people were located in three settings including: a residential home for the elderly, family homesteads, and Elderhostel programs at a local college.

A four cell model was developed to display the relationship between high or low life satisfaction and an individual's perception of internal or external control. A result of this analysis was the development of some generic characteristics related to those persons in each cell.

Implications for caregivers and the elderly themselves were offered. Special attention was given to adult educators who plan and execute programs in lifelong learning. Understanding the diversity of older adults as displayed in each cell could help caregivers respond better to the diverse needs and interests of this population.

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Daniel Dowd and Dr. Shawn Ward offered significant comments about the substance of the project and edited the work for clarity and better flow. Dr. Ken Landers led me through the maze of graduate requirements.

My 86 year old mother provided me with a model of an older adult who, in spite of many physical problems, maintains a high life satisfaction, determination, and strong sense of humor.

Finally, I am indebted to two special people in my life, my wife Pattie and daughter Kelly. They sacrificed many of their own interests over the past years so that I could bring this project to a successful conclusion.

My sincere thanks to all who either directly or indirectly supported me in this important project.

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CHAPTER I

BACKGROUND AND RATIONALE

Purpose of the Study

Current and projected demographics clearly indicate that the population in the United States and in the world is getting older. Demographics suggest that the elderly will not only be a larger numerical force in the decades to come but also a stronger and more vocal moral, intellectual, political, and social force.

Research in social gerontology will increase many fold in the years to come. Contributions to the fields of social and educational gerontology will have a major impact on the elderly and those working with older adults. Moreover, such research will have an impact on those in the field of adult education concerned with issues of lifelong learning.

As I began to explore possible research questions related to the elderly, this question kept coming back to me. If people are expected to live longer, what will be the quality of that extended life? Is the extension of life without attention to the corresponding quality of that life worth much effort? Two diverse responses to this question came from participants in the study. (All names and places are fictitious to insure confidentiality for participants and locations.) Jack Gordon had this to say about the aging process,

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> I have a lot of satisfactions. The things I like to do, I can do within reason...Now I have more freedom to do the things I want...I would like to be able to continue to do these kinds of things, doing a little traveling, getting to meet people, reading, conversations.

Elma Sherwood on the other hand had a more negative response to the aging process. She said,

> I don't look forward to getting into the 80s or the 90s. I'll tell you. In a few years I will be in the 80s and probably won't enjoy anything...I don't think it is anything to look forward to.

If quality of life is an important aspect of the process of aging, then such related issues as life satisfaction and lifestyle are worth exploring. I am not working in "virgin territory" when conducting research on quality of life issues related to aging. A number of research studies offer solid data about quality of life issues related to the process of aging. I will make reference to some of these studies in the course of the dissertation.

The main purpose of this study was to analyze how a sample of older adults perceive their life satisfaction. To accomplish this goal I ascertained how the participant's lifestyle interacted with a perception of life satisfaction. I found a strong interplay existed between the two components. Locus of perceived control was the element of lifestyle that became the major interactive piece with life satisfaction.

A major objective was to expand existing definitions of

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life satisfaction found in the literature. The interplay between life satisfaction and locus of control created not one but a variety of definitions of life satisfaction based on how individuals perceived their lifestyle at a given point in time. This will be carefully and systematically explained in the major conclusions of Chapter V.

While this study is limited by the number of participants, significant conclusions and implications will be offered. Research methodology and the sequence of events leading to the findings of the study will be discussed in great detail in succeeding chapters. The intention here is to state briefly the study's purpose and focus.

This project focused on two connections between life satisfaction and lifestyle among the elderly. The first was that lifestyle does not predict life satisfaction but the interplay between the two is one predictor of a high or low perceived satisfaction level. The second was that life satisfaction is not a static, or solitary phenomenon, but fluctuates from high to low depending on many factors.

For example, critical or dramatic life events have a strong influence on the satisfaction level at any given point of time. Such events as retirement, death of a spouse, moving to a new residence, or health-related issues are samples of dramatic events impacting on the life satisfaction of an individual. This component will be discussed at length in Chapter IV.

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Attention was also given to the phenomenon of locus of control, a component of lifestyle, and its impact on life satisfaction. As previously mentioned the interplay between a person's perceived control and perceived satisfaction was a major focus of this study. This interplay will be developed in great detail in Chapter IV.

Most studies about life satisfaction deal with issues of health, financial security, activity, social interaction, and education. Lifestyle studies tend to focus on issues of work, family, and living arrangements. There appears to be little research actually linking life satisfaction with lifestyle.

I discovered that life satisfaction among the elderly is derived from a series of long term influences on lifestyles that include such components as health, education, role, and status. If these elements or components have been generally positive then a high degree of life satisfaction is usually experienced by the individual. Furthermore, if a person perceives a personal sense of control over most of these life elements, the life satisfaction generally is experienced as high.

However, there was an individual in my study who appeared to be dissatisfied with life overall. He represents a stereotype of the "mean and unpleasant" old person. He almost appeared to take pleasure in being unhappy and dissatisfied with life. Fortunately, the per

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cent of elderly in this category is probably quite small.

If some abrupt or dramatic event occurs, the question arises regarding how such changes will affect the experienced state of life satisfaction. For the participants in my study dramatic events often occurred from such things as:

1. forced or voluntary retirement;
2. death of a spouse, friend, or relative;
3. health related-problems;
4. financial changes either positive or negative;
5. change in place of residence;
6. effects of the Great Depression of the 1930s on this particular age cohort.

Specific examples from the data will be given in Chapter IV.

A major contention from this dissertation is that an elderly person who is perceived to be internally controlled, consistently highly satisfied, but presently experiencing a negative event, will modify the lifestyle to maintain or return to a higher life satisfaction level. In Chapter V, I will expand considerably on this important aspect of the study.

Bob Cook, a physician, comes to mind. He held a prominent position in a health care facility for the elderly. Suddenly he was forced to retire. The initial reaction was one of disbelief, depression, discouragement,

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and loss of purpose. However, a subtle but significant change began to take place. He started spending time at the local library, began to volunteer for local boards and committees, and spent more time with family and friends. He soon became active again and found new ways to be creative and productive.

Another issue explored in this dissertation was the activity level of older adults. Activity is usually perceived primarily as physical activity. I found that activity also includes social, intellectual, and spiritual elements. Older adults who develop and maintain a variety of interests and activities will probably have a higher degree of life satisfaction. The diversity of their life allows for some things to be lost without loosing everything.

For example, a person who was family oriented, but also had a career and did volunteer work or had a hobby, will be successful in old age if some of these activities can be maintained or adapted. This is the contention of the activity theory. A fuller explanation is given in Chapter V.

A good example is Ellie Chad. She has maintained a variety of activities in later life while being forced or choosing to give up others. She raised a family, took care of a sick husband for years, and worked in a professional capacity. Her children grew up and left, her husband died,

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and she retired from work. Now she has modified her activities by volunteering to serve on many boards, being a strong advocate for the elderly, travelling extensively, and being active in church work.

Then there is the person with a single focus in early life who must give up this focus for one reason or another. This is the person traditionally described as a "workaholic." Once this major single activity or focus is removed, the person begins to feel less satisfied in life.

Bill Cooney illustrates this scenario in a very dramatic way. He currently is a resident in the adult home where much of this study takes place. Bill never married, worked at various jobs, had few hobbies or outside interests, and then retired. Since retirement his life has been rather tragic. He has attempted suicide twice and is prone to alcoholism. I suspect a limited focus in life contributed to his present rather unhappy situation.

SIGNIFICANCE OF THE STUDY

I believe the conclusions of this dissertation do add to a better understanding of life satisfaction as perceived by a limited sample of older adults. Specifically, the following actions resulted from the study:

1. expansion of the definition of life satisfaction as found in the literature;

2. finding connections between perceived life

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satisfaction and perceived lifestyle of older adults;

3. development of a four cell model that shows the connection between life satisfaction and lifestyle;

4. formulating possible actions for a variety of caregivers of older adults.

Research on Aging

In order to establish a frame of reference for the dissertation I now present a sample of current thoughts about research on the aging. This literature background provided me with a strong rationale for conducting my research on older adults.

Some research is directly related to the field of gerontology and deals exclusively with issues about the elderly population. Other research comes from applied fields in which researchers develop and evaluate ways to meet various needs of older persons. Such research is usually contained in a broader context of life issues and problems.

Birren (1968) summarizes the rationale for research on aging when he says,

> Broadly speaking, the purpose of research on aging is to be able to characterize the nature of the older organism and to explain how the organism changes over time, that is, to be able to make succinct statements explaining

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> increasingly large number of facts about aging individuals...In the process of integrating disparate facts into verifiable generalizations there are alternating phases of conceptualization, fragmentation of problems, and experimentation (p. 545).

Birren (1968) also describes four general types of research on aging.

1. There are studies of longevity in which length of life is the dependent variable related to independent variables including genetic background, parental age, nutrition, and cultural differences.

2. Some research focuses on differences of age in a range of biological, psychological, and social characteristics.

3. Another type of research deals with problems of complex people moving forward in time. This relates to the notion of life-course events and a range of physical, psychological, and social interactions.

4. Finally, a research type deals with historical aspects of an individual or group. The intention is to identify those aspects or patterns of an individual which will remain distinctive of the person in the course of a life-span. Birren (1968) concludes his observations by stating that the strategy in choosing and designing research on aging should be influenced by longer-ranged values,

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including the possibility of gaining systematic information.

The literature base for research on aging is impressive and has continually increased during the last decade. It seems important and necessary, however, to indicate some of the research problems that have arisen.

Crandall (1980) summarized some of the more significant problems related to research on aging. A major problem he identified was the relatively few trained gerontologists who conduct research, train personnel, teach, or work directly with the elderly. He argued that if gerontology is to advance there must be individuals adequately trained in the various theories and techniques of gerontology. The lack of trained personnel leads to poorly conducted studies that only confuse future research and distort or blur important gerontological issues.

Operational definitions are another problem. In most sciences there is a widely accepted vocabulary of basic terms and ideas. In gerontology there are many important terms without a common definition. Terms such as "old," "retirement," "self-concept," or "health," are defined in different ways by different authors.

Some like Crandall (1980) would argue that there is little theory base for the field of gerontology.

> A theory is basically an explanation; it can tie together research, give direction for future research, and most important of all,

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> answer the question why. At this time gerontological theory is at an infantile stage and most of the literature emerging is descriptive, with little attempt at theorizing (p. 43).

There are relatively few research instruments especially designed for the aged. Some of the quantitative instruments are questionable in both validity and reliability. Often instruments attempting to measure the same variable actually measure different variables making comparisons difficult to say the least.

The lack of longitudinal studies is a problem. A search of the literature produced few studies that examine the same group of people over a period of time to determine changes that occur. Although such studies are time-consuming and expensive, they would be most valuable for gerontological research.

Sampling is a serious problem. Past studies tended to focus on the sick and institutionalized elderly. Such a focus created some biased data and theories. Present studies indicate a lack in basic data on sample composition such as age, gender, or racial background. Older adults are often harder to find as subjects of research unless one goes to overused senior centers. There is very little data on racial and ethnic groups. Some movement has been made with research on the Black elderly, but not much dealing with the

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aged among Spanish-speaking, native Americans, or Asians.

Cross-sectional research is most frequently used in studies of social gerontology. The process is one of assessing individuals of various age groups and comparing their responses (Becker, 1980). The sampling often represents finding people in a wide range of locations such as a neighborhood, an institution, a community, or even a nation. Members can be polled on a variety of topics. Usually these cross-sectional studies include some demographic information, perhaps some reports on activities, and maybe the attitude of group members on a specific topic or issue.

However, a major problem with cross-sectional studies is the difficulty in generalizing and the substantiation of casual effects. Birren (1968) believes that if one can minimize error, be realistic and limited in generalizations, a cross-sectional study is legitimate. Such studies can generate substantive data and add to research on the elderly. I attempted to follow his advice throughout my dissertation and especially in drawing conclusions from the data.

Rogers and Herzog (1987) addressed the question of accuracy of information obtained from older adults. They used data from probability samples of adults to test the accuracy of survey measures. The comparison was made in three age groups--younger than 60, 60-69, and 70 and older.

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For many measures no age difference was detected and where age difference was observed, the older respondents were often more accurate than younger respondents. There is no evidence to date that problems are any more serious in interviewing older people than interviewing younger persons.

Gerontology in Adult and Higher Education

A few remarks are in order to locate this research in the context of the adult education field. In Chapter VI I will show the relevance of this study to the field of adult education and the concept of lifelong learning.

For those working in the field of adult education, including myself, there is more and more interest in clarifying the concept of "lifelong learning." Various educational institutions and adult education agencies are attempting to meet many of the elderly's educational needs.

In determining the type of programs and services best suited for older learners, quality of life issues are among those aspects of the aging process that must be understood. Two recent adult education studies have focused attention on the relationship of life satisfaction among the elderly and educational issues. Brockett (1982) examined the relationship of self-directed learning readiness to life satisfaction. He found a significant, positive correlation between life satisfaction and self-directed learning readiness. In general his data suggested a link between

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self-directedness and life satisfaction associated with three trends. These were educational attainment, a sense of independence, and one's view of self.

Estrin (1985) explored life satisfaction and participation in learning activities among widows. Her research suggested that widows showed significant positive correlation between over-all life satisfaction and participation in learning activities.

The changes that have taken place in the educational level of the elderly are worth noting. Each new cohort in our society is better educated than the previous generation. Older segments of the present day population in America are, therefore, less well educated than the younger generation (Becker, 1980). Thus, the nature of findings from research looking at life satisfaction combined with a constantly changing educational level makes understanding the educational needs of older people quite complex.

Actually, the educational level of Americans over 65 continues to increase each year (Becker, 1980). The median educational level of the older population in 1975 was 9.0 years. By 1990 there is a projected increase to 11.9 years. This means that the median educational level of the elderly will increase by more than three years within a four decade time span (Becker, 1980).

Furthermore, the older population's educational level will be close to the median educational level of the entire

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adult population by 1990. The importance of this fact is that increasing educational levels will facilitate the elderly becoming more sophisticated in pursuing their own interests and in advocating for their own rights. It also suggests that adult educators must be even more creative, aggressive, and determined to promote, in theory and practice, the concept of lifelong learning.

Gerontologists and adult educators are convinced that education can, and should be, an ongoing process. For example, this conviction was emphasized at the 1971 White House Conference on Aging. The distinguished chairperson, Howard McClusky, in his opening remarks said,

> Education is a basic right for all persons of all age groups. It is continuous and henceforth one of the ways of enabling older people to have a full and meaningful life, and a means of helping them develop their potential as a resource for the betterment of society (Kobasky, 1974, p. 82).

McClusky (1974) identified five categories of needs that can be met to some extent by programs in adult education for older adults. While these needs have been widely quoted they have not been empirically tested. They are, however, a good frame of reference for adult educators and gerontologists looking at educational needs of the elderly. Interestingly, these needs are directly or indirectly

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related to quality of life issues and their fulfillment could substantially enhance the quality of life for this population. These categories of McClusky (1974) include:

1. Coping Needs. Age produces many undesirable and often irreversible changes for the elderly. These include changes in finances, marital status, position in society, power, health and role in society. For example, courses in psychological and physical aspect of aging could provide better understanding of the variety of changes taking place. Practical courses in nutrition, physical exercise, crafts, and other leisure time activities could help the elderly in adjusting to these changes.

2. Expressive Needs. In this category, the aged derive enjoyment, meaning, and pleasure out of life. This is usually in the context of participating in a variety of activities. The new freedom of the elderly might allow talents and interests to be fulfilled. Education offers a variety of programs to assist the individual fulfill these expressive needs.

3. Contribution Needs. Many of the elderly feel a need to give to others. They want to feel needed by others. Such programs as the Foster Grandparent program and the Retired Senior Volunteer Program help satisfy this need as well as provide economic subsidy.

4. Influence Needs. The elderly have a need to influence and control the direction and quality of their

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lives. They want to be a part of the decision-making process in their lives. Courses in community and political organizations, decision-making, and the political process can be beneficial.

5. Transcendence Needs. The elderly generally like to think that life is getting better and not declining. This need, however, is not unique to the elderly but typical in all age groups. Courses allowing them perhaps to experience a higher level of satisfaction could be developed. This is probably the most difficult area of program development due to the ambiguous nature of "high level of existence."

There appears to be a relationship between level of education and life satisfaction. Havighurst (1976a) indicated a strong correlation between educational achievement and personal adjustment. Life satisfaction scores were higher for those with higher levels of education. Also it was found that those with higher levels of education were more likely to express positively that they had exceeded earlier life expectations. Havighurst also indicated that those with higher levels of education had a more positive self-concept and rated themselves as very bright, alert, and good at getting things done.

He found a negative correlation between level of education and the number of personal problems that are often related to life satisfaction. Those with higher educational levels mentioned fewer personal problems. Those with little

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education discussed such personal problems as not having enough friends, loneliness, not having enough to do, not feeling needed, fear of crime, not enough money, not enough education, and a perception of poor health.

Havighurst's study related some interesting comments about the best and worst aspects of aging. Those with higher levels of education focused on the best aspects of old age including increased free time, freedom from responsibility, financial independence, and wisdom derived from prior experiences. Those with lower educational levels tended to see the best aspects of aging as enjoying children and not having to work. The higher level of education group suggested the worst aspects of aging were financial problems, loneliness, rejection, and forced retirement. Those with less education saw poor health, boredom, and fear of death as the worst aspects. Finally, the Havighurst study suggests that those with higher educational levels tend to be more socially oriented, while those with lesser education are more family focused and less socially directed.

Much activity and research in gerontology quite naturally is found in institutions of higher learning. Many colleges and universities have put in place studies in gerontology. The direction of this activity in colleges and universities comes from the Association for Gerontology in Higher Education (AGHE), founded in 1972. The goals and

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structure of gerontological studies draw, for the most part, from the natural and social sciences (Peterson, 1978).

There is an ongoing discussion about the positioning of gerontological studies as an autonomous professional field or as a subfield of more established academic disciplines. Peterson (1978) suggests there are five distinct arrangements that dictate the curricula for studies in gerontology in institutions of higher learning.

First, there are what he calls intradepartmental structures in which gerontology courses are taught as part of a more traditional academic area;

Second, are interdepartmental structures in which gerontology courses are taught by faculty from a variety of different academic disciplines including departments of sociology, psychology, and biology;

Third, are gerontology centers which employ faculty along traditional department lines but operate from a special department or center;

Fourth, there are some institutions with a formal department of gerontology with status equal to other academic departments. Usually in such an arrangement, the department has its own faculty and offers its own degrees;

Finally, there are schools of gerontology which have a number of departments and offer degrees at various levels.

Most universities have one or more of the structures mentioned. Many institutions of higher education are

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expanding courses and programs in gerontology under one or more of these structures. Whether gerontology ever emerges as a distinct academic discipline remains to be seen. In all likelihood, social gerontology will continue to have a major impact on the theoretical constructs of the more traditional social sciences (Becker, 1980).

The present consensus seems to be that gerontological efforts are most effective in serving a variety of disciplines rather than assuming a unique role. The diffusion of gerontological research will then permeate a wide range of human activities, research areas, and scholastic disciplines.

In summary, adult education researchers, teachers, and practitioners should be encouraged to provide more educational opportunities for the elderly. Lifelong learning opportunities are valuable and can help the elderly live more enjoyable, useful, and functional lives (Crandall, 1980).

I have attempted in this introductory chapter to display the purposes of my study. As an adult educator I have a strong interest in exploring issues related to the elderly. Lifelong learning for and about the elderly is a critical component of adult education theory and practice. Adult educators are increasingly dealing with issues related to age. Furthermore, such research will have an impact not only on adult educators, and gerontologists, but also can

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enhance the quality of life among the elderly themselves.

In the next chapter I provide a more concrete profile of the elderly and identify more clearly those components of successful aging that comprise this study.

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CHAPTER II

PROFILE OF THE ELDERLY

Grow old along with me!
The best is yet to be,
The last of life, for which
the first was made,
our times are in his hands.

Robert Browning (Rabbi Ben Ezra)

Age-Irrelevancy

Chronological age in and of itself is no longer (if it ever was) a good indicator of how people live. Age alone cannot tell you about a person's financial or marital status, lifestyle, health, or life satisfaction level. It is not possible to predict in what year or decade one will marry, enter college, enter the labor market, or change careers. You hear of a 22 year old mayor, a 29 year old college president, or a 35 year old grandmother. On the other hand there are many older adults in their 60s and 70s who are students in colleges and universities. A 55 year old man becomes a father or starts a second family. People who are 60, 70 or 80 are doing things now they would not have done 30 years ago.

Neugarten (1983) says we are fast moving toward age-irrelevancy. A factor that moves us toward age-irrelevancy is the affluence of people. There are greater opportunities for people to start new careers. People are freerer to do what they want and as the

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educational level of the older adult increases, there is more room for movement and later productivity (Neugarten, 1983).

The question is often asked why 65 is the beginning of old age. The answer is simple. In the 1930s, 65 was arbitrarily chosen as the birth date for eligibility to receive Social Security benefits. This choice had nothing to do with the aging process. The age of 60 or 70 could as easily have been chosen. This arbitrary age of 65 has remained as the benchmark date of entry into old age. Neugarten (1983) believes this age label should be limited only to Social Security and not used to identify the elderly in any other context. In 1935, we did not anticipate the increase in life expectancy due to bio-medical advances.

Today a person can join the American Association for Retired Persons, (AARP) at age 50. A local drug store gives a senior citizen discount beginning at age 55. Those 60 and older are eligible to participate in Elderhostel programs. There is no single age that makes one a senior citizen, elderly person, or older adult.

There are any number of examples to illustrate the high activity level of adults in their 70s, 80s, and even 90s. Norman Vaughn at 75 competed in the Alaskan dog-sled race and covered 1,049 miles of wilderness from Anchorage to Nome. Gloria Swanson wrote and sold the story of her life at 81. Armand Hammer continued to run the 33,000-employee

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Occidental Petroleum Corporation at age 82. The most prominent example is George Burns who at 92 is still active and vibrant. He is starting an eighth book and his public appearance schedule is the envy of many younger performers. The list goes on and on of prominent and ordinary people who continue to be active, productive, and energetic in old age (Allen, 1983).

Demographic Characteristics

I previously stated that age in and of itself is irrelevant for much of the aging process. However, demographers continue to use the age of 65 as a starting point for statistical purposes and trend projections for older adults. Persons 65 years or older numbered 29.2 million in 1986 in the United States. This is 12.1% of the total U.S. population or about one in every eight Americans, with an increase of 14% or 3.6 million since 1980. This compares to an increase of 5% for the under-65 population for the same time period.

Actually, the proportion of older persons in the population has risen even more sharply since 1900. The percentage of Americans 65 and older had tripled from 4.1% in 1900 to 12.1% in 1986. The actual number has risen nine times from 3.1 million to 29.5 million.

Interestingly, the older population itself is aging. In 1986 the 65-74 group was about eight times larger than in

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1900, but the 75-84 group was twelve times larger and the 85 and over group was twenty two times larger at 2.8 million.

The life expectancy phenomenon is also of importance for this group. In 1986 persons reaching 65 had a life expectancy of 16.9 more years. This translated into 18.6 years for females and 14.8 years for males.

This trend toward an increasing proportion of older persons is expected to continue. The growth will slow some during the 1990's due to a relatively small number of babies born during the Great Depression of the 1930's. The most rapid increase will probably come between 2010 and 2030 when the "baby boom" cohort reaches age 65.

By the year 2030, there will be about 65 million older adults, or about two and one-half times the number in 1980. Given current projections this age group will be the major significant growth group in the next century. Persons 65 and older will represent by the year 2000 13.0% of the population and this may rise to 21.2% by the year 2030 (U.S. Bureau of the Census, 1970:44).

In 1986, 77% of men and 40% of women were married. In the same year 50% of the women were widows and there were over five times as many widows (8.1 million) as widowers (1.5 million). The number of divorced among the older population has also increased significantly. In 1986 about 4% of older persons were divorced but their numbers (1.1 million) had increased almost four times as fast as the

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older population as a whole in the preceding 10 years. This was 3.7 times for men and 4.0 times for women (AARP, 1988).

Only about 5% or 1.3 million of the 65 and older population lived in institutions such as nursing homes in 1980. However, the percentage increases dramatically as the age increases. The range went from 2% for persons 65-74 to 7% for those 75-84 to 23% for those over 85.

The majority of older noninstitutionalized persons, about 67%, lived in a family setting in 1986. About 9.1 million (82%) of men and 9.0 million (57%) of women lived in family settings. About 7% of men and 18% of women in family settings were not living with spouse but were living with children, siblings, or other relatives. Over 650,000 lived with nonrelatives.

Almost 8.3 million or 30% of all noninstitutionalized older adults lived alone in 1986, including 6.6 million women and 1.7 million men. Of importance is the fact that older adults living alone increased by 68% between 1970 and 1986. This is about one and one-half times the growth rate for the overall older population (AARP, 1988).

The U.S. Bureau of the Census (1958) related that four out of every five older adult had children. Of this number 18% lived in the same house with children and 55% lived fairly close to children.

The elderly are less likely to move than other age groups. In 1985, only 16% of those over 65 had moved

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since 1980 while 45% of those under 65 had moved. Of those who did move, 80% moved to another home in the same state. In 1985, about 49% of those over 65 lived only in eight states. Two million each live in California, New York, and Florida. Over a million live in Illinois, Michigan, Ohio, Pennsylvania, and Texas (Fowles, 1987).

Where the elderly live in the United States is interesting and might offer significant insights for future research. A person's lifestyle is often closely related to where he or she lived. In 1986, about half (49%) of persons 65 and older lived in eight states. California, New York, and Florida had over 2 million each with Pennsylvania, Texas, Illinois, Ohio, and Michigan each with over 1 million. Those over 65 comprised about 13.6% or more of the total population in ten states. The elderly were less likely to live in metropolitan areas in 1986. About 32% of older persons lived in central cities and about 41% lived in the suburbs.

It is also interesting that the elderly are less likely to change their place of residence. For example, in 1985 only 16% of the elderly had moved since 1980 compared to 45% of persons under 65. The majority (80%) had moved to another home in the same state. Finally, in 1985 about 880,000 of the elderly had moved to a different state since 1980. One-third of these had moved from the Northeast or Midwest regions to the South or West (AARP, 1988).

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A few remarks are in order related to those elderly who comprise the minority or non-white population. Unfortunately, the status and resources of some minority elderly reflect the social and economic discrimination they experienced throughout their lives. Many who migrated to America experienced cultural and language differences. Minority groups in general, and minority, non-white elderly specifically, are plagued with poor education, substandard housing, poverty, malnutrition, and generally poor health.

In recent years, the non-white elderly population has been growing faster than the white elderly population, and this trend is expected to continue. In 1980, over 2.5 million persons, or 10% of the population 65 and over were non-white. By 2025 15% of the elderly population are projected to be nonwhite, and by 2050, 20% are likely to be non-white (AARP, 1988).

However, white elderly continue to outnumber minority elderly. About 11% of the total white population in 1980 were age 65 or over, while 8% of the Black population, 6% of Asian/Pacific Islanders, 5% of Hispanics, and 5% of Native Americans, were 65 or older.

The status of minority elderly is not likely to improve greatly in the immediate future. The factors that impact on the elderly's quality of life, such as education, employment, income, and health, will not vary much among non-white elderly now approaching retirement age as compared

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to white counterparts.

The bright side is that the present younger minority will have a better chance to enhance the quality of life now and when they are older. Increased opportunities for education and employment result in proportionately higher incomes and larger benefits. Improved health care may benefit the minority elderly and hopefully, they will enjoy a higher quality of life (Agree, 1988).

Myths About Old Age

Butler (1983) describes several myths about old age that continue to dominate the thinking of many. One of the purposes of research on aging is to expose the fallacy of these myths and present a more realistic picture of the aging process.

There is the myth of aging itself. As Neugarten (1983) noted earlier, chronological age is not a good indicator of the aging process. There are great differences in the rate of physiological, psychological, and social aging from person to person.

There is the myth of unproductivity. Many persons in their 70s, 80s, and 90s, are productive in a variety of situations. Older persons continue to contribute in significant ways to their families, communities, churches, or place of residence such as a residential home for the elderly.

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There is the myth of inflexibility. Actually evidence does not suggest that older persons find it difficult to adapt readily and successfully to change. In fact, there is evidence that adapting to change is a factor of one's personality and life style rather than related to any age factor. The elderly who have experienced a full life are generally more capable of accepting and adapting to change than younger people (Havighurst & Feigenbaum, 1968).

There is the myth of senility. In reality there is no such phenomenon as "senility." This term has been used to categorize old people into a state of forgetfulness, confusion, and reduced attention. Again there is little evidence that any of these or a myriad of other ailments are related directly to age. Young people like older adults experience a range of emotions including anxiety, grief, depression, and paranoid states. It is easy to blame all problems of the elderly on the age factor. However, this is unfair and inaccurate (Butler, 1983).

There is the myth of serenity. This is the reverse side of the senility myth. In this case the elderly are seen as entering a state of euphoria or adult fairyland. The rocking-chair grandfather image is presented as the lot of those elderly who are not senile. In truth, the elderly continue to experience the same emotional stresses they experienced in their earlier life, perhaps more. The lifestyle of an older person dictates a personal state at

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any given time in life and not some magical age that transforms one into being either senile or serene (Butler, 1983).

There is the overall stereotype of ageism. Butler (1983) describes this widespread notion of ageism as follows:

> Ageism can be seen as a process of systematic stereotyping of and discrimination against people because they are old just as racism and sexism can accomplish this with skin color and gender. Old people are categorized as senile, rigid in thought and manner, old fashioned in morality and skills. Ageism allows the younger generations to see older people as different from themselves. Thus they subtly cease to identify with their elders as human beings (p. 15).

Tuckman and Lorge (1958) conducted a study in the early 1950s to look at beliefs about older people. They categorized some beliefs about the elderly as accurate, others as inaccurate, and still others that may or may not be accurate as determined by further research. A sampling of accurate beliefs revealed that older people are able to learn new things, are still productive, are useful to themselves and others, and are not bedridden most of the time. Inaccurate beliefs indicate that older people are lonely, are forgetful, are frequently at loose ends, or are

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mostly conservative. Finally, some beliefs need further research about older people's love of life, such as not being selfish, respecting tradition, and not preferring to live alone.

MAJOR COMPONENTS OF THE STUDY

Successful Aging

Ultimately the goal of this dissertation was to present some relevant research that addressed the notion of successful aging and quality of life. I keep returning to a fundamental question. Current research and demographic information suggests that human beings will live longer in the decades to come, will there be a corresponding quality of life to enhance extended biological life? At this juncture I explored some definitions and understandings of successful aging, lifestyle, and life satisfaction.

Havighurst (1963) proposed that successful aging is appropriate satisfaction with present and past life. He suggested that you find out how older people feel about their past and present. If they are basically happy and satisfied with their lives, they are aging successfully. I attempted to discover more precisely what elderly people think and feel about their present and past life related to being happy and satisfied. This information can ultimately be translated into meaning for successful aging.

There have generally been two distinct approaches to the

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definition and measurement of successful aging in the field of gerontology. One looks at outer behavior for its answers. Social approval scales are applied to a person's life to determine successful aging. The second approach points to a definition suggested by Havighurst (1976-a) in which inner satisfaction is more critical to the definition. My study reflects this second approach. The conclusions of my study are based on a perception of inner satisfaction as described by the participants. Inner and outer aspects of approaching successful aging may not be contradictory but related in some context.

A major theme in much of the gerontological research of the past 40 years has been to measure the subjective well-being of the elderly. Additionally, attempts are made to identify those factors that increase or enhance well-being among the elderly population. The following references reflect some thoughts about a subjective approach to gerontological research.

George (1981) looked at those concepts which measure well-being and distinguished them as cited by Barrow (1986):

morale which is a mental condition with respect to courage, discipline, confidence, enthusiasm, and willingness to endure hardship;

happiness which is a transitory mood of gaiety or euphoria regarding one's current state of affairs; and

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life satisfaction defined as an assessment of one's overall conditions of existence and/or one's progress toward desired goals. Life satisfaction refers to life in general over a long-range time period.

Morale, happiness, and life satisfaction are treated in the literature by some as separate and distinct entities, but also considered as synonymous by other authors. Horley (1984) suggests that subjective well-being is found on three levels. Barrow (1986) summarizes these levels:

1. Overall life satisfaction (global): satisfaction with life as a whole; "Have I satisfied an appropriate proportion of the major desires of life?"

2. The concern level: the more specific domains of life; "Am I satisfied with my marriage, my employment, my friends?"

3. The elemental level; the day-to-day specific action level; "Do I want to take care of the grandchildren on Saturday? Is the weather good enough for a picnic?"

Barrow (1986) adds that research needs to look at all three levels and allow the participant opportunity to indicate the "most personally salient level." A variety of studies show various factors related to subjective well-being in the elderly. Some studies relate activity to subjective well-being (Barrow, 1986).

Finally, Toseland and Rasch (1979-80) link some variables to subjective well-being. These are listed in

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order of importance:

1. family life satisfaction;
2. personal health satisfaction;
3. satisfaction with dwellings;
4. number of close friends;
5. community integration age;
6. satisfaction with health facilities;
7. homogeneity of neighborhood;
8. satisfaction with the community.

Toseland and Rasch further suggest that these variables interact in a very complex manner. If, for example, an elderly person is low in satisfaction in a particular area of life, another area to fill the need would be found.

This reference to successful aging is probably the broadest of concepts related to the quality of life issues for older adults. The following pages will explore briefly some of the more specific concepts so that the reader can better appreciate the conclusions reached in Chapter V.

Lifestyle

Lifestyle describes a person's characteristic way of filling and combining the various social roles one is called to play (Havighurst and Feigenbaum, 1968). Horan and Belcher (1982) describe lifestyle as a systematic pattern of activity. They indicate that there is a strong correlation

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between activity and morale or life satisfaction.

Biesanz and Biesanz (1973) characterize lifestyle as a generic term referring to a whole range of activities, possessions, interests, and tastes. In effect, lifestyle deals with how one goes about the business of daily living.

They further suggest that activity in itself may have little effect on the life satisfaction of older adults. Indeed, the importance of activity as perceived by the individual may result more from the social organization of activity in the local setting. There is a strong connection in the Horan and Belcher (1982) study between activity, life satisfaction (morale), and lifestyle.

There also are external forces and internal forces that act upon an individual's ability to cope and adapt to life situations. This is especially true for the elderly who must often make major changes in their life for a variety of reasons. By observing people in various roles, relationships, group memberships, activities, and environments, one can observe how these elements are forged together by choices, by selective commitments of attention and energy, and by personal mannerisms into a whole life which is called a lifestyle (Atchley, 1980).

Interestingly, most research in this area involves cross-sectional studies where it is virtually impossible to assess the impact of age on changes in lifestyles. These studies provide information about the predominate lifestyle

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at any given age or life stage. Atchley (1980) refers to Williams and Wirths (1965) who proposed the notion that a person adjusts to the process of aging related to lifestyle. Since each person has to some extent a unique lifestyle, the process of aging is also individualistic and unique to each individual.

I believe, however, that this does not necessarily imply a lack of common elements or generalizable foci of individuals as they progress in the aging process. In fact, Williams and Wirths (1965) identified six styles of life among older adults. They studied lifestyles of 168 men and women over 50 with the average age of 65. These lifestyles include:

World of Work: These people find work gives most meaning to their lives. The focus is somewhat limited in scope. Some elderly resist retirement from work. Often they immediately try to replace work lifestyle with other kinds of activities or community service as substitutes. Sometimes they develop secondary lifestyles which can be a replacement for work when they retire.

Familism: The focus for these individuals is family in whatever form that takes. Decisions, values, thinking, and emotions are all centered on the family. Since they are exposed to a wider range of activities by nature of their lifestyle, they probably can adapt easier than the total work-centered older adult.

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Living Alone: A major component of this lifestyle is a tendency to isolate oneself from others. It is not merely a matter of living alone, but one of internal isolation. Such elderly people will probably continue this form of isolation to cope with the aging process. They most likely developed this form of isolation to cope with events in earlier life as well.

Couplehood: Having a significant other in one's life is primary to this lifestyle. It need not be a spouse, but two women, for example, living together. This is a more precarious lifestyle because when something happens to one of the partners, it may cause difficulty for the other who has invested so much time and energy into this relationship.

Life with Minimal Involvement: These people tend to be rather superficial in all their life dealings and not really committed to any singular lifestyle. These people never really engage themselves in the social world. They probably do not have strong commitments or feelings about many things and drift with the current in old age.

Living Fully: These individuals have a broad spectrum of involvement in the social sphere. They are more involved than the previous group and are able to focus their energies in different ways. It is contended that this group probably is most able to adapt to changes in the process of aging and continue to be active and involved in some form or other.

Williams and Wirths (1965) found that about 65% of those

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studied were able to adapt to aging successfully in the context of their lifestyle. This was true for all of the lifestyles except the minimal involvement style which showed only about one third in the highly successful category. They concluded that each of these lifestyles suggest different degrees of commitment to that style and to the satisfaction derived from that lifestyle.

Finally, a study by Maas and Kuypers (1974) examined 142 middle-class men and women in their 70s. They found that just over 40% of the men had lifestyles related to their families and about 40% had more solitary lifestyles centered around hobbies and social contacts. The remainder had life styles dominated by ill health and the ensuing dissatisfaction with life. Women had more diverse lifestyles, since over half of the women were no longer married. Widowed or divorced women were more likely than married women to have job-centered lifestyles or diffused life styles.

Life Satisfaction

A major focus of this study is the perceived life satisfaction of older adults. Various research approaches have been taken to define, analyze, and interpret life satisfaction. Numerous variables have been tested against the concept of life satisfaction. While most of the research on life satisfaction is quantitative in nature,

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these various definitions and findings provide a framework in which the present study can find validity.

Many gerontologists feel that life satisfaction may be the fundamental ingredient for successful aging. Life satisfaction had been a focus of study for psychologists, sociologists, and adult educators. It is, however, a difficult concept to define. Research studies have measured life satisfaction both objectively and subjectively as an indicator of lifelong well-being.

Kalish (1975) includes in a definition of successful aging the notion of feeling satisfied with present status and activities, and a feeling of happiness and satisfaction with one's life. Successful aging bears a strong relationship to life satisfaction. Leonard (1981-82) views life satisfaction as a "major component" of successful aging.

Lemon, Bengston, and Peterson (1972) define life satisfaction as "the degree to which one is presently content or pleased with his general life situation," (p. 513). Others discuss varying approaches to measuring well-being. One can examine a person's external conditions, such as income, participation in social activities, employment, marital status, and health. However, this approach has been criticized by some researchers. Neugarten, et al. (1961) feel this approach is subject to the biases of those who define the limits of high and low

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life satisfaction.

Another approach to defining well-being is to focus on the subjective perceptions of those being studied. In this format one deals with how the subjects feel about themselves in terms of life satisfaction with their lives. In fact, a subjective approach was utilized in interviewing subjects for my study.

For the most part, social gerontologists have accepted the notion that a majority of older adults are satisfied with the quality of their lives. A balance is suggested by George (1986).

> Life satisfaction has an uncertain position in social gerontology. Some investigators have heralded it as the hallmark of successful aging. Others have criticized it as a soft and vague concept, unsuitable for policy planning and evaluation, and distracting our attention from more important measures of functioning in later life. Both of these positions are too extreme. Critics of life satisfaction raise important questions about the meaning and uses of life satisfaction measures. But the failure of life satisfaction to be equally useful for all purposes is not a persuasive argument for ignoring it altogether. Advocates of life

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> satisfaction, on the other hand, only cause problems by proclaiming it to be the barometer of how well an older population is faring (p. 8).

In summary, although there are conflicting views of its value, life satisfaction seems to be an important element in the successful aging process. George (1986) believes that those interested in the elderly should be as interested in enhancing the quality of life as they are in treating illness. They should look at the good life as well as the bad times. Social and psychological factors are most important in understanding the triumphs of life as well as the problems. Concepts of life satisfaction remind us to strive for health and well-being as much as seeking cures for disease.

Personality Types

A brief discussion of personality types is added here to reinforce the importance of life satisfaction and lifestyle. Neugarten et al. (1968) in the Kansas City Study of Adult Life attempted to classify the personality types in an older population. The study included both women and men and used 45 personality variables. The subjects ranged in age from 70 to 79. There were 59 subjects in the study. The following personality types were identified:

Integrated: These people were generally classified

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well-adjusted, mature, and mellow. There were three sub groups within this first category. Some were very active and took on new activities when they gave up old ones. They had a high level of life satisfaction. They illustrated well the proponents of the activity theory. Those in the second group were also active but more specialized. They preferred to spend more time in one or two roles. The third group included people who were more disengaged and also reported a high level of life satisfaction. They were much less active than either of the prior groups.

Armored-Defended: This group also had a high level of life satisfaction but differed from the integrated group in that they were less willing to accept the aging process. They preferred to struggle against the idea of aging. Within this category there were two sub groups. The first group consisted of those who want to "die with their boots on." They prefer to maintain middle-aged behavior as long as possible. The other sub group also contained people who do not want to age but react by becoming more closed off from social interaction and by constricting activities.

Passive-Dependent: Those in this group are much less independent than the two prior groups and exhibited two variations in types of behavior. One such group was heavily dependent on others, and their life satisfaction seemed to depend on having someone to interact with or someone to give them emotional support. The other sub group in this

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category was more passive and usually engaged in less social activity. These differed from disengaged people in that their low activity is not related to the process of aging so much as a long established pattern of behavior.

Disorganized: Those identified as being disorganized had problems related to psychological functioning. They were often barely able to maintain themselves.

Studies of personality types in the elderly are useful in constructing a psychological theory of aging but they leave unanswered many questions. Research conducted by Woodruff and Birren (1972) suggest that the relationship between age and personality is very complex. There is some evidence that personality is rather stable over long periods of adulthood. There is also evidence that personality is strongly influenced by generational forces and is constantly being altered by many forces in society.

Universals of Aging

Finally, I summarize this chapter by referring to a set of "universals" described by Cowgill and Holmes (1972). These universals provide an appropriate conclusion to the narrative contained in Chapters I and II. Cowgill and Holmes identify eight elements related to the elderly and most likely present in all societies.

1. The aged will always constitute a minority of the

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general population. Age is a key factor of any society in defining itself. There are differences in this definition because one society defines the aged as everyone over 45 and another society says the aged are those over 70.

2. In an older population women outnumber men. This is especially true in the industrialized countries where the life expectancy of women continues to increase faster than males.

3. Widows are a majority of the older population. This indicates that women generally marry men of their own age or slightly older than themselves.

4. In all societies some people are classified as old and are treated differently because of this classification. Most societies have developed different folkways for interacting with the elderly and have set role expectations that control the interaction of one old person with another and with society in general.

5. There appears to be a general movement away from physically demanding tasks by those defined as old even though they may continue to be active in one context or another. Retirement programs in industry are common and society continues to make laws defining retirement.

6. In all societies some of the elderly continue to be active in the political, judicial, or civic arena. In most industrialized societies while some elderly hold judicial or political positions, such offices are not reserved for

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them. In many nonindustrialized societies, some leadership positions are reserved for older persons.

7. In all societies there is some mutual responsibility between the elderly and their adult children. There is a wide variation in the expectations and demands of this relationship but in all societies there is some type of mutual responsibility.

8. In all societies there is great emphasis on the value of life and the prolongation of life into old age. There is no age in which a general dissatisfaction with life occurs. If the elderly lose the desire to live it is related to poor health conditions, the loss of close friends or relatives, or some other specific occurrence not related directly to age.

Thus far I have discussed the purpose and nature of my study, offered some demographic information about the elderly, and mentioned some key concepts. The next chapter will describe the methodology employed to arrive at the conclusions in Chapter V with subsequent recommendations in Chapter VI.

The following graphs portray the actual and projected increase of the older population, and offer a comparison of increase by decade.

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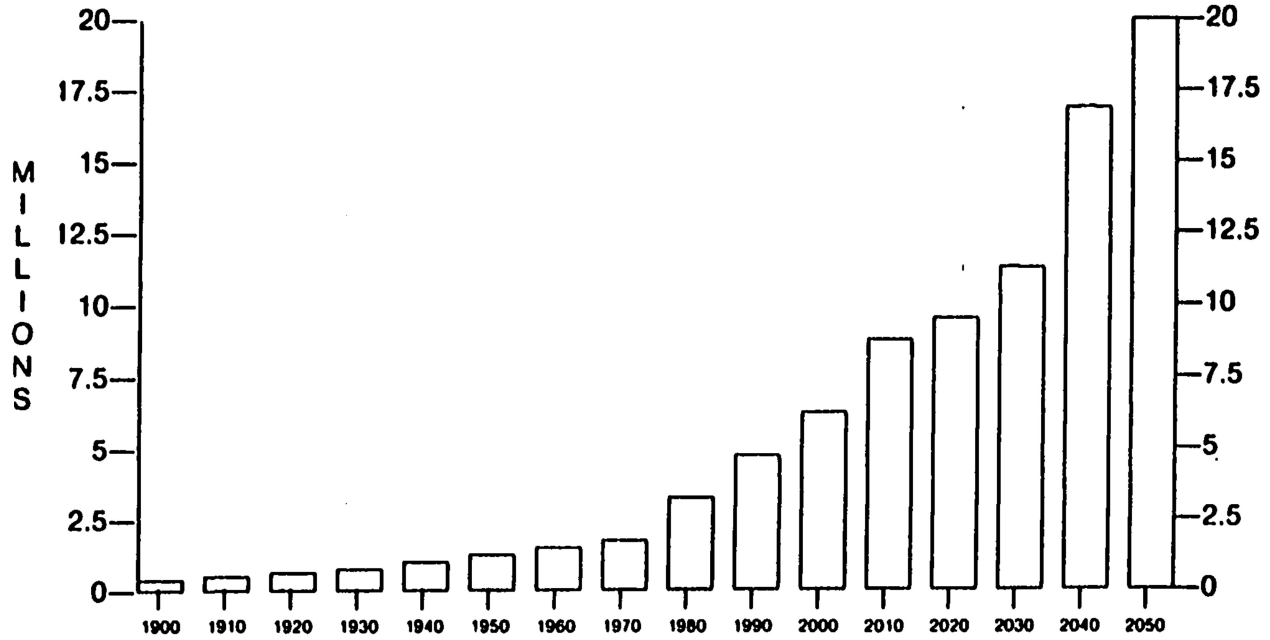
Figure 1

ACTUAL AND PROJECTED INCREASE IN POPULATION 85 YEARS AND OLDER 1900-2050



SOURCE: U.S. Bureau of the Census, Decennial Census; 1900-1980, Projections of the Population of the United States: 1982-2050, Current Population Report, P-25. No. 922. October, 1982. Middle Series Projections.

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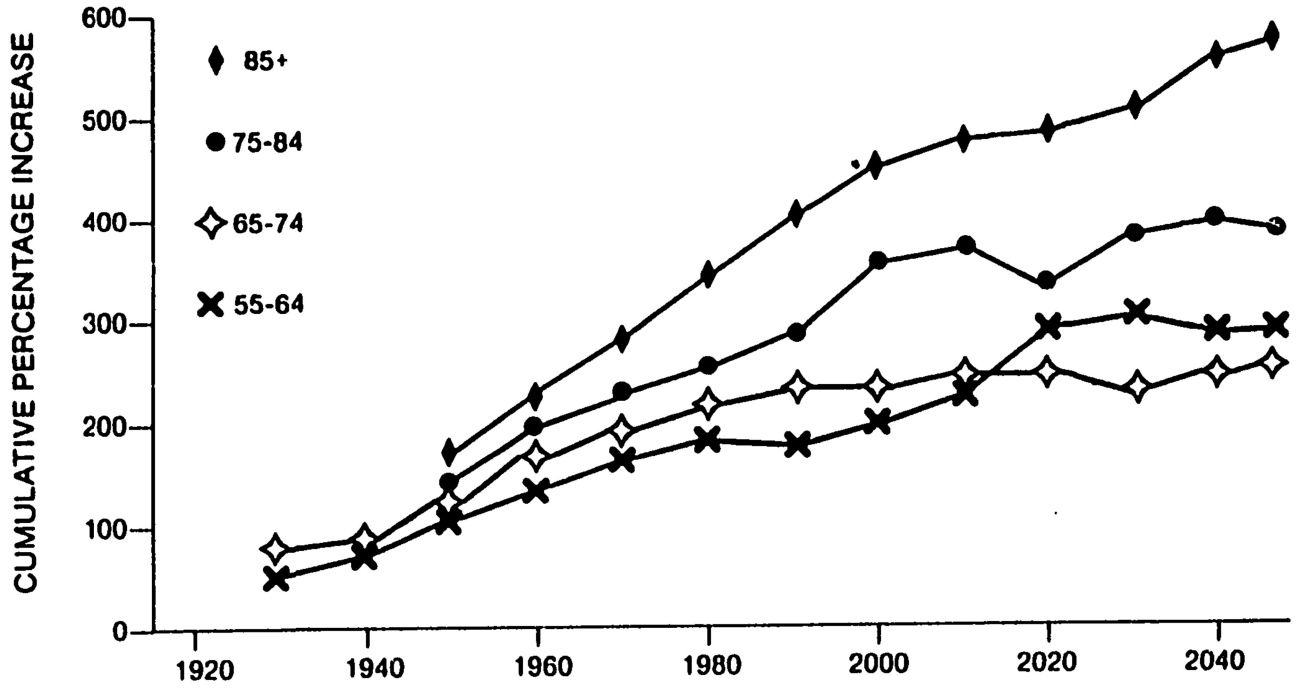
Figure 2

PERCENTAGE INCREASE OF THE OLDER POPULATION BY DECADE 1900-2050



SOURCE: Bureau of the Census, Current Population Reports, Series P-25, No. 952 and AGING AMERICA 1984, Senate Special Committee on Aging and the American Association of Retired Persons.

CHAPTER III

METHODOLOGY

Symbolic Interactionism

The purpose of this chapter is to explain the methodology employed in data collection and analysis. Qualitative research often utilizes the concept of symbolic interactionism. Blumer (1969) explains the concept of symbolic interactionism in this way:

> The term "symbolic interaction" refers, of course, to the peculiar and distinctive character of interaction as it takes place between human beings. The peculiarity consists in the fact that human beings interpret or "define" each other's actions. Their response is not made directly to the actions of one another but instead is based on the meaning which they attach to such actions. Thus, human interaction is mediated by the use of symbols, by interpretation, or by ascertaining the meaning of one another's actions. This mediation is equivalent to inserting a process of interpretation between stimulus and response in case of human behavior (p. 180).

In this study I am working with perceptions of the elderly. Their perceptions of life satisfaction and

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lifestyle provided significant clues to the process of aging.

Blumer (1969) concluded that symbolic interactionism as a theoretical perspective has three basis premises. They are:

1. human beings tend to act toward things based on the meaning these things have for the individual;

2. this meaning given to things arises from social interaction;

3. humans handle and modify the meanings via various interpreted processes.

Spradley (1972) suggests that this phenomenon of symbolic interaction takes place when people receive communication, interpret messages, define situations, anticipate how others will act, formulate plans, make decisions, and receive further or new information and review plans.

Bogdan (1982) describes symbolic interactionism in this way:

> Objects like books, people such as teachers, situations such as reading lessons, and behavior such as reading and writing do not possess their own meaning; rather, meaning is conferred on them. While the educational technologists for instance, will define a language master or a tape recorder as a device

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> to be used to teach reading, the teacher may define it as an object to entertain unruly students when she runs out of work for them (p. 5).

The meaning given to experience by an individual and how this meaning is interpreted is essential to what comprises experience. Human beings are actively engaged in creating their own world of one kind or another. They give meaning to life by interpreting and defining that world. This interpretation is determined with the help of many including family, friends, teachers, media, and a host of others who enter their lives. Interpretation is an essential element in a symbolic interactionist approach to research. Meaning and interaction are also paramount (Bogdan, 1982).

One approach to research suggests that you must understand the individual's perceptual world in order to understand human behavior. Individuals see the world in different ways. One develops a perceptual framework through life experiences and socialization. We selectively perceive and interpret the world and world events. Individuals can perceive the same event differently. The elderly, for example, will respond differently to such events as retirement, health changes, or widowhood. The differences are due to the individual's perception and interpretation of the event (Crandall, 1980).

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Crandall (1980) further suggests that this perspective is more complete than other theoretical frameworks because there are few, if any, exceptions. He says, " If you can understand the individual's perceptual framework, then you can understand and predict behavior" (p. 123).

Jacobs (1975) and Gubrium (1975) utilized a phenomenological theory approach in researching areas of social aging. The interesting element about this perspective is that it is not a theory about the meaning of aging as described by the social gerontologists, but the meaning attributed to aging by those doing the aging. It is not a construct about aging but rather seeks to define and portray aging as experienced by those who are presently aging. This is the perspective of active participants in the aging process. This approach seeks not to generalize the application, but rather attempts to individualize the aging process. It allows everyone the task of assigning his or her own meaning to aging. Jacobs and Gubrium do not suggest that everyone has a unique view of aging, but everyone is an active participant in the construction of the meaning of aging.

This is precisely the approach and rationale I used in my dissertation. As Jacobs and Gubrium indicated, I also attempted to define and portray some aspects of aging through the perceptions and experiences of the participants. I also agree that everyone does not have a unique view of

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aging, but rather the collective perceptions and experiences add to the construction of a meaningful approach to the aging process.

Rationale for the use of Qualitatiave Methodology

Qualitative research is described as a process of generating descriptive data. The methodology generally utilizes the subject's own written or spoken words with the researcher recording observable behavior (Bogdan and Taylor, 1975). The process also is one of inductive analysis. Using two prominent methods of data collection, namely participant observation and interviews, the researcher can build theory from an inductive base. Such theory is "grounded" in the subject's observed behavior and spoken or written words. From this inductive process pertinent deductions are generated.

Shelly (1986) lists some principles underlying the use of qualitative research.

1. The main purpose of employing qualitative data analysis is to use a rigorous and systematic methodology to produce substantive findings from prose-text data collected during observation or by interviews.

2. Qualitative research methodology is based on the assumption that substantive findings are the products of the interaction between the data and the methodology.

3. The researcher using this methodology recognizes the

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influence of the methodology on the substantive findings by: identifying the analysis tasks; documenting the tasks in a chronological order; analyzing the process by studying the documented tasks and by determining their effects on the products generated during the analysis.

The specific methodological approach within the context of qualitative research that seems most appropriate to this study is the modified constant comparative method. This research methodology is oriented more toward theory development and requires more subjects than a case study format. It can be utilized with social units of any size. Some sociologists and anthropologists prefer to restrict its usage to large social units such as organizations, large institutions, or nations. It has been demonstrated, however, that the comparative method can equally be used with small organizational units such as classes in a school (Glaser and Strauss, 1967).

Indepth interviews allow the subjects to define, explain, and articulate perceptions about a variety of issues. The researcher gathers and examines information with a minimum of predetermined theoretical expectations.

The advent of computers helped much in organizing the data. Computer-aided assistance allowed for greater speed, more storage potential, multiple variable manipulation, and quick retrieval of data (Hiemstra, Essman, Henry, and Palumbo, 1987).

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An analogy used by Bogdan and Biklen (1982) helps clarify the procedure. One is not putting together a puzzle or a picture already known. Rather you are constructing a picture that will take shape as data is collected and analyzed. The process moves one from induction to deduction. This methodology allows for common elements to appear from interviews and participant observations. The relationship between various elements can be established.

For example, the researcher looks at the data collected from interviews about the activity level of the subjects. Patterns or common threads running through the comments about activity level generate information used for further analysis leading to conclusions.

This process is not really a logical progression of steps, but rather a cyclical process of data collection, analysis, hypotheses generation and testing, more data collection, etc. An inductive approach continually produces deductions which are tested back against the data, resulting in grounded generalizations.

Bogdan and Biklen (1982) summarize the steps followed in the methodological approach of the constant comparative method.

1. One begins to collect some initial data.

2. The researcher looks for key issues, recurring themes and events that become part of the focus.

3. Further data are collected to develop more

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information about the emerging focus of the study.

4. Memo writing assists the researcher to describe and document the progression of thought and movement from induction to deduction.

5. The data are further analyzed to discover relationships.

The stages construct is an application of the Constant Comparative Method (Glaser and Strauss, 1967). There are three basic stages to the process with each stage evolving into the next stage at a higher level of abstraction. The main goal is to move from the concrete to a more abstract understanding of the phenomena under study. Shelly (1986) explains the stages in this way.

Stage One: This is the time when a researcher collects initial data via interviews and participant observation. The data are coded into main codes and/or sub codes for further analysis. In the first stage beginning hypotheses or better "hunches" may emerge. These hunches are then tested back against the coded data leading to the next stage of the construct at a higher level of abstraction.

Stage Two: In the first stage hunches are generated from within code categories. In this second stage the researcher looks across codes and seeks to establish characteristics or properties to be used later in combinations for further generalizations. In this stage

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more formalized hypotheses are generated leading the researcher back to the codes to see areas where data may be leading. This allows the researcher the opportunity to decide what further data is needed to fill in the gaps.

Stage Three: A further shift begins to take place in this stage. More time is expended exploring relationships of the working hypotheses. The ultimate goal of this stage leads to a refinement of hypotheses.

The stages construct is a useful way to manage the analysis process within a structured framework moving the researcher to higher levels of abstraction (Shelly, 1986). I used the stages construct from beginning to end. It proved beneficial in many ways. For example, I was able to work with small bits of data. It is easier to determine when higher levels of abstraction are reached in the process. The logical progression of thought can be tracked, monitored, and documented. The ultimate goal of this process is to adequately document the evolution of thought, hypotheses testing, and ultimate inferences within the context of appropriate qualitative research.

Shelly and Sibert (1985) developed QUALOG, a logic programming system, which is used to facilitate such tasks as formatting, coding data, and analyzing formalized hypotheses. QUALOG assisted me in the following ways:

1. It facilitated an inductive-thought process that began with concrete observational data and moved to abstract

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representations of the phenomena described by that data.

2. It facilitated record-keeping of an evolving process, i.e., an analysis process that is rigorous and systematic, but unspecified in terms of predetermined, sequential procedures.

3. It documented the methodology used to develop the model discussed in the next chapter (1985, 1-1).

Population and Setting

The final number of persons interviewed and observed for this study depended on many factors. Availability of people, time constraints, and usability of data collected were some limitations on the sample selection.

The number and type of participants in the study included:

A total of 29 participants;

there were 13 males; and

there were 16 females.

All of the participants were interviewed at length (about two hours) and some were interviewed on two or more occasions.

The age range for those in the study went from a low age of 65 to an upper age of 95.

In the following pages I will discuss the stages in the data collection and explain how I selected the participants used in the study.

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There is a spectrum of settings in which the elderly can be found. By setting I mean the actual living arrangements or place of residence. The range of settings from which I drew my sample was as follows:

Category I: The first group of participants all live in a residential home for the elderly. This residence has about 80 clients who share meals in common, participate in many social events together, and are relatively independent and mobile. This adult residential home for the elderly differs considerably from a more traditional nursing home where there is less mobility, more acute care needed, and the residents are much more dependent on the staff. The residential home I used falls between an acute care nursing home and a totally independent apartment or condominium type dwelling.

There were six women and one man interviewed in the residential home. Three of the women were interviewed on more than one occasion. Furthermore, I spend a great deal of time observing the daily activities and events in the home from meal time to social activities. Four of the women were widows. Two woman had been divorced and one never married. The only man interviewed in the residential home was never married.

Category II: The next group of participants were individuals who still lived in their own home. Two were widows and there was a doctor who lived with his wife in the

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family home.

This was the smallest group interviewed but the interviews tended to be longer and more indepth. Of the three in this group, two were widowed women and one was a married man who happened to be a doctor. All lived independently in their own family home at the time of the interview. All had grown children in the vicinity with whom they associated on a regular basis.

Category III: The largest group of participants in the study came from a series of Elderhostel programs at a college in Central New York. The participants were interviewed during a weekly stay at the college.

This was the largest group interviewed and the major connection was that they were all attending an Elderhostel program. They came from a variety of backgrounds, ethnic origins, living locations, and geographical places. Those who attend Elderhostel programs must be at least 60 years of age or 50 if they are a spouse of one attending a program. They generally are very mobile and many come from long distances. They are for the most part well educated and usually financially secure. Some have health problems but are able to function very well under a doctor's care. Only one person in the group I studied was immobile and in a wheelchair.

There were 19 in this group. Of this number 8 were women and 11 were men. They lived in a variety of settings

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including:

1. family homestead;

2. apartment or condominium;

3. adult community (as in Florida) with private living quarters in a condo-like complex;

4. home for the handicapped; and

5. living with a married son or daughter after the death of a spouse.

The focus of this study was really on those older adults who were able to provide some services for themselves. Those needing continual and/or total care such as bed-ridden patients were not used as participants in this study. All of the subjects participated in lengthy interviews and some were interviewed on more than one occasion.

Stages In the Data Collection

Using the Constant Comparative Method of Glasser and Strauss (1967) I began with few preconceived research questions. The methodology does not presuppose hypotheses to be tested. This does not imply that one begins with a "tabula rasa" or blank board but that the interest area is not yet clearly defined or delineated. I wanted to look at life satisfaction and lifestyle of the elderly but did not initially have a clear view of appropriate connections. This relationship between life satisfaction and lifestyle developed from a lengthy process of deduction and induction.

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I conducted some initial interviews and participant observations to explore a study focus as suggested in the literature (Bogdan & Biklen, 1982). Two alternatives for the initial study setting were reviewed. The first choice was to select some older adults who were independent, living at home, and still quite active. The second choice was to locate a residential home for the elderly and interview some of the residents. The latter was initially selected as the starting point. The research would soon expand, however, to include persons in the first category.

There were some practical reasons for starting the project in a residential adult home. Such a setting usually has a mix of elderly who are well and active, sick and confined, and a few who are bed-ridden. A physician friend involved in a professional capacity for many years in a variety of residences for the elderly offered some valuable advice. He suggested a nearby residence where the clients were still quite active and independent within the context of the home requirements.

A contact was made with the home administrator. She was most cooperative and interested in any research related to the residents. The opportunity was provided to conduct extensive interviews with residence and staff. I had the freedom to wander freely and observe staff and residents.

The social director at the home assisted in setting up the interviews. He was responsible for accepting people

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into the home that served about eighty residents. He was later replaced by another social worker who also would prove to be most helpful and cooperative in the project. The first director had documented background information on each resident. We discussed the best approach and he suggested ten residents for the initial interviews.

Five residents were actually interviewed in this initial stage. Those interviewed represented single adults who had never married or individuals who had lost a spouse either from divorce or death. Some of those interviewed had family or children. Others had few relatives but some friends in and out of the Home. Most had good educational background and some were in professional careers before retiring.

The initial interviews focused on these general areas:

childhood and family history;

parents and siblings;

adult life with spouse and children;

education;

employment and work life;

retirement and how it came about; and

feelings about life and present circumstances.

The interviews were purposely kept open-ended, general, and quite unstructured. Little attempt was made to deal with any specific topics or research questions related to problems or issues of the elderly. The interviews were audio taped and then transcribed. They were coded and the

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codes were organized into a logical sequence. The following sequence developed:

"Roots or family background - past life:"

PARENTAL INFLUENCE, MOTHER, FATHER, BIRTHPLACE, SIBLINGS, FAMILY BACKGROUND, MARITAL STATUS, YOUTH, EMPLOYMENT.

"What I do here at the residential home:"

DAILY ROUTINE, TELEPHONE USAGE, READING, KEEPING ACTIVE, HOBBIES, WATCHING TV, EXERCISE, GETTING OUT, HOLIDAYS, SOCIAL ACTIVITIES.

"What occupies my mind:"

HEALTH, POSSESSIONS, FINANCES, FRIENDS, MEMORIES, RELATIONSHIPS.

"Where I do things:"

SKILLED FACILITY, LOUNGE, ROOM, DINING ROOM, FAMILY ROOM.

"Who I am:"

AGE, CHURCH AFFILIATION, INDEPENDENCE.

"Dimensions of age:"

BEING ALONE, RELIGION, ACCEPTING CHANGE, CONTENTMENT, DEATH, ENJOY LIFE.

One of the themes that emerged early from the data concerned the issue of life satisfaction, or the quality of life as perceived by these individuals. Those interviewed did not talk in this terminology but talked about being "happy," "contented with life, " "satisfied with what they

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had accomplished," and "enjoying their present circumstances." Additional themes emerged from the first analysis of the data. The themes were explored to focus on the development of a knowledge base. Each of the themes comes directly from the interviews and are reflective of the thoughts of the subjects at that point in time. These themes included:

happiness and enjoying life;
keeping in touch with friends;
strong religious convictions;
contentment with past and present life;
need for orderliness, neatness, and structure;
friendships that are controlled and deliberate;
independence and freedom;
importance of family, especially children; and
living day to day.

Since the data base at this time was relatively small it was decided that additional subjects needed to be interviewed to add depth to emerging themes. The decision was made to interview some elderly who were not residents of the home but living independently.

Three persons were selected. Two were widows living independently and one was a person who had just retired and living with his wife. The same process and series of questions were asked of these three as of the five initial

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persons in the residential home. Taped interviews were conducted in their own home settings. The interviews were transcribed and the contents added to the data base.

Two of the three were still very active and involved in the community. Their remarks were valuable not only from an age perspective but also from a professional perspective. The third person, a widow, added an interesting dimension because she was not actively involved socially but very active in the context of her own home and family life.

At this time I returned to the residential home and added additional subjects to be interviewed. The social director again suggested people he thought would be receptive to being interviewed. I also did some participant observation at the residence on various occasions to get a better sense of the day to day living at the home.

The final phase of data collection proved to be as rich in material as the previous interviews. These subjects added a dimension that would increase significantly the credibility of the questions being discussed and analyzed. Elderhostel programs at a college in Central New York provided me with a group of elderly who were readily available, diverse in background and living arrangements, articulate and active, and willing to participate in the project.

I used primarily the Snowball sampling technique (Bogdan and Biklen, 1982). In this approach one or two persons were

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suggested as likely participants in the study. These people in turn recommended others. I discovered in the Elderhostel group that I was turning people away. Many more were interested in participating than I could manage. At a certain point I made the decision to stop interviewing. I believed I had reached a saturation point and probably would gain little new information. The interviews with the Elderhostel group now became more focused and dealt more specifically with issues related to life satisfaction and lifestyle. A sample of the questions included:

How do you see your life at this point in time?

Can you point to any dramatic events in your earlier life?

Was retirement a traumatic event or not?

Overall has your life been generally happy and content?

Do you feel you have some control over your life?

How might you characterize your past and present life style?

This was a critical point in the methodological process. Much data had been collected in the indepth interviews and observations reflected in lengthy memos. It was necessary to narrow the focus considerably for possible connections between life satisfaction and life style. Queries were generated in QUALOG to test questions resulting from the data base. The following statements now become relevant and important.

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1. Life satisfaction or dissatisfaction may vary throughout life depending on certain critical or dramatic events and the degree to which the person perceives internal or external control over these events.

2. A person who feels generally satisfied with life will still experience some dissatisfaction at negative critical events, e.g. forced retirement, change of residence, loss of spouse, serious health problem, or job change. Such a person may modify a lifestyle or change the situation to maintain a satisfying life.

3. A person who has a perceived sense of internal control over his or her life will generally indicate more satisfaction with life. Even if that person made a wrong or inappropriate decision he or she will find internal control adds to their overall satisfaction with life. There was one instance in the data of an individual who was internally controlled but did not appear to be satisfied with life. He exhibited a rather negative outlook on present and past life.

4. People who express a sense of little control overall in their life will make little effort to reverse negative critical events. Such people tend to let external forces dictate the course of their life.

5. The interplay between life satisfaction and lifestyle is probably not a conscious, deliberate act but comes out of everyday living.

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The narrative of stages in the data collection process was provided to show the sequence of events that lead to the findings in the next chapter.

Summary

The goal of this chapter was to define the methodology used in the development of the dissertation. Qualitative methodology, if undertaken carefully and systematically, is a valid and reliable method of inquiry and research. The indepth interviews and observations provided me with a rich source of data for further analysis and study. Every attempt was made to be precise and faithful to tested and tried processes of analysis.

The figure on the next page displays the process used in the Constant Comparative Methodology. The shadowed boxes indicate the major focal point in each stage of the process.

The next chapter will deal directly with the major components of life satisfaction and lifestyle. Some relevant literature will be integrated for a better understanding of the concepts. Also in the next chapter an interesting discussion will focus on the meaning and impact of dramatic events in the life of the participant.

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Modified Constant Comparative Method

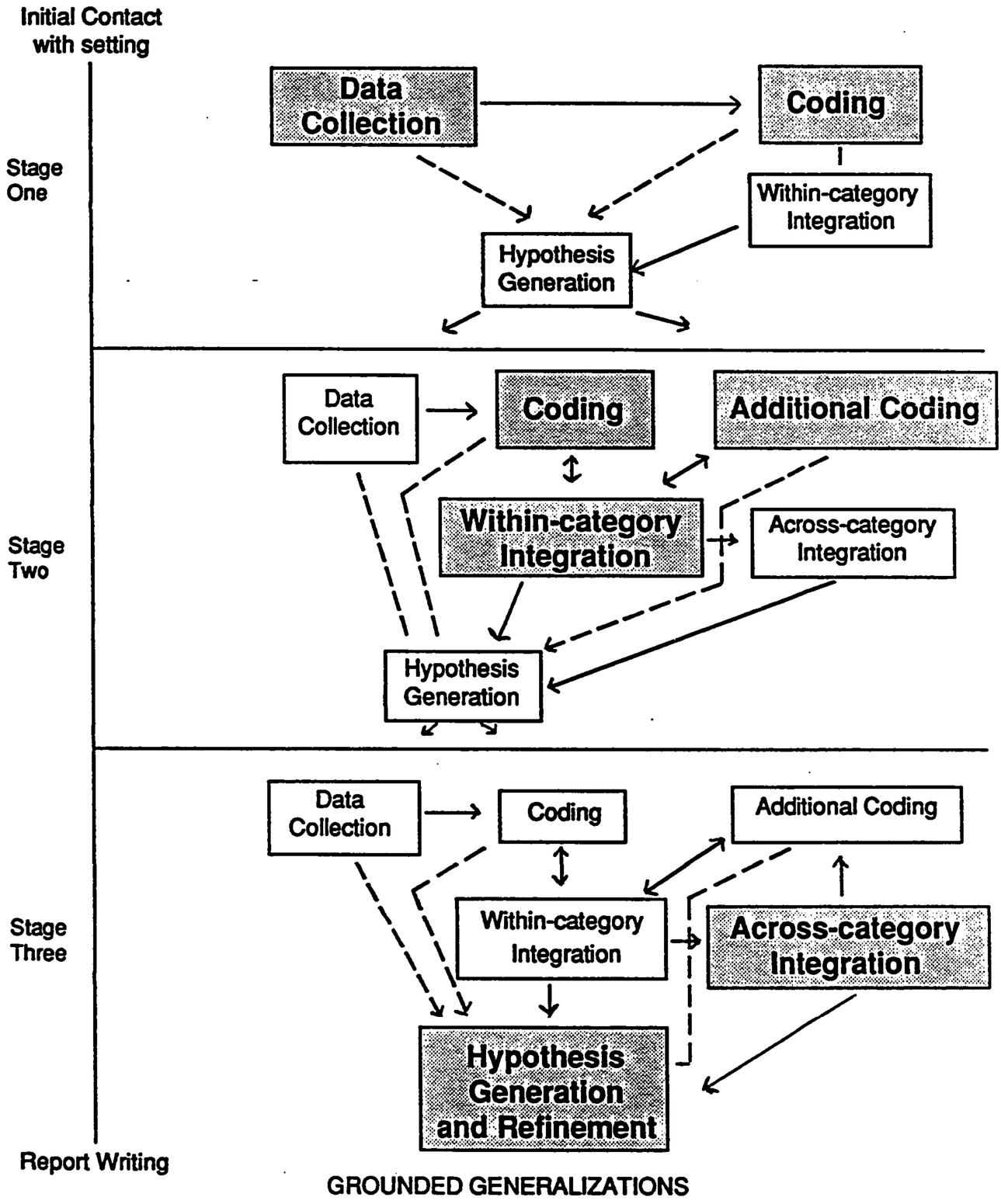

Figure 3

Shelly, A. (1986)

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CHAPTER IV

LIFE SATISFACTION AND LOCUS OF PERCEIVED CONTROL: AN INTERPLAY

The purpose of this study was to understand more clearly how a sample of older adults perceive their life satisfaction. As indicated in Chapter II, the concept of life satisfaction is a major component in the process of successful aging. A Constant Comparative qualitative research methodology described in Chapter III, was used to generate data, analyze data, and ultimately report the significant findings.

To achieve this goal of better understanding life satisfaction in an older population, I chose to explore a possible relationship between the concepts of life satisfaction and lifestyle. The focus of the study became the interplay or interaction between life satisfaction and lifestyle. In effect, what influence does lifestyle have on a perception of life satisfaction among a group of older adults? The data strongly suggested that people viewed their satisfaction level based on how they acted and lived out their life on a day to day basis.

It is important to mention that I do not necessarily view life satisfaction and lifestyle as equal variables. I found that a focus on lifestyle helped to understand and define the concept of life satisfaction better. I selected one basic element of lifestyle, namely locus of perceived

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control for analysis and comparison.

Locus of control provided a theoretical framework and a vehicle for better understanding how the participants perceived their life satisfaction. Since this was not an experimental study, the locus of control model was adapted to reflect how the participants became involved in the decision making process and how they responded to critical life events. The classic definition of locus of control was a good starting point.

Before discussing the conclusions of this study, I offer some additional understanding of life satisfaction and lifestyle, with a special emphasis on this locus of perceived control factor.

Life Satisfaction

Life satisfaction was chosen as an important component for examination and analysis because of its importance to the process of successful aging. As noted in Chapter II, several researchers believe that people appear to age successfully if they feel happy and satisfied with their past and/or present life. Analyzing life satisfaction is actually quite subjective in that success appears to be defined by aging people in terms of their perceptions of an inner satisfaction. Such perceptions obviously can differ from one person to another.

I have included at this point some references to

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relevant research related to life satisfaction and locus of control. Since I am discussing these two vital components of the study, I decided some references to prior research might be useful to the reader. Other pertinent references from the literature will be found in the appendices.

Havighurst (1963) identified what he calls five components of positive life satisfaction. His analysis provides some help for a person attempting to observe inner satisfaction in others. These include:

1. A zest for life which generates an enthusiasm for doing things.

2. Resolution and fortitude for making the most out of life situations and taking the bad with the good in life as well as taking responsibility for one's actions.

3. An agreement between desired and achieved goals with a sense of accomplishment of life goals.

4. A positive self-concept and having a good opinion of self.

5. A mood tone exhibiting happiness, contentment with life, and an optimistic spirit.

Palmore (1981), in the Duke Longitudinal Study, supports the notion of three strong correlates to life satisfaction among older adults. The strongest correlate was health or the lack of physical disabilities. The second strongest correlate was socioeconomic status. The third strongest correlate was social activity. This longitudinal study

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suggests that the best way to maintain life satisfaction in later life is to possess health, be financial stable, and remain active.

Recent doctoral studies have examined a variety of variables related to life satisfaction and the elderly. Brockett (1982) found a relationship between self-directed learning and life satisfaction. Hofsess (1980) looked at interpersonal relations in the context of trust and life satisfaction. He found a positive relationship between trust and life satisfaction and explains this relationship by noting that life satisfaction is an acceptance of self while trust is an acceptance of others.

An interesting dissertation by Walters (1983) found a correlation between life satisfaction and income of elderly widows and a correlation between life satisfaction and morale. Alston and Charles (1973) pursued the concept of life satisfaction in a national sample by asking the question, "Do you find life exciting, pretty routine, or dull?" The proportion of respondents who defined life as exciting varied inversely with age, income, and education. There appeared to be little relationship between age per se and life excitement.

A dissertation by Sanders (1983) looked at the relationship between family interaction, the quality of life, and life satisfaction of older persons. Sixty eight retired couples were part of the study. The findings

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indicated that health status was the strongest predictor of life satisfaction followed by family strength and job prestige. Interestingly, the family strength score was a stronger predictor of life satisfaction for women than for men. The conclusion indicated that these elements of family strength, health, and job prestige were positively related to life satisfaction for older persons. Alldredge and Marshall (1984) found that for males, health, formal activity, informal activity, and income were significantly related to life satisfaction.

A fascinating study by Isikoff (1983) looked at aging homosexual men. There were two major predictors of life satisfaction resulting from this study. Physical well being and a high activity level correlated with life satisfaction. This is consistent with similar studies of aging hetrosexual men. Health and social involvement effected a person's life satisfaction, self-concept, and well-being.

Doyle and Forehand (1984) concluded that persons over sixty five are only slightly less satisfied with life than younger people. Poor health, loneliness, and money problems were the strongest negative correlates of life satisfaction across all age groups. Lohmann (1977) correlated seven frequently used measures of life satisfaction, adjustment, and morale. Data on these seven measures were collected from 259 subjects over the age of sixty representing three clusters. These included institutionalized older persons,

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those with limited mobility, and in the community aged. There was a bias in the sample in favor of older adults who tended to participate in social activities.

Medley and Medley (1976) interviewed 109 males and 192 females over the age of sixty five. Some results of the study indicated that one can offer some predictions about life satisfaction. Satisfaction with family life had the greatest single impact on overall satisfaction in the life of both sexes. The second most important variable for females was satisfaction with their standard of living. The second most important variable for males was health satisfaction. Among the males, the financial situation strongly influenced satisfaction with their standard of living. Financial conditions did not seem to affect the female standard of living.

Collette (1984) conducted a survey with 1,050 elderly persons from Australia. The study looked at the possibility of sex difference in life satisfaction. Both men and women in the study had similar backgrounds. The findings suggested there was little difference between sexes in the casual process determining life satisfaction. This data was later applied to a U.S. study and the same results were found, namely that sex is not a strong determinant in life satisfaction among the elderly.

Finally, Campbell, Converse, and Rodgers (1976) make a useful distinction between happiness and life satisfaction.

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There is a tendency to see these concepts as synonymous. Happiness in their study reflects more the affect people feel toward the current state of life. Life satisfaction on the other hand, refers more to an assessment of the overall condition of existence as determined by comparing aspirations with achievements.

Locus of Perceived Control

The second major component for analysis is the factor of perceived control. One reason for looking more closely at a control factor was the reference by participants to feeling some control or expressing a lack of control over life events. This recurring theme of control apparently had some relationship to their perceived life satisfaction. For this reason I began to focus my attention on the possible influence of control over life satisfaction.

Locus of control factors come out of studies on human motivation and psychology. Many psychologists in looking at personality development have seen the utility of perceived control. George Kelly (1955) suggested the use of personal constructs to enhance the ability of predicting, controlling, and understanding the world. R. W. White (1959) viewed perceived control as a way to increase feelings of satisfaction. Some persons prefer to be origins or casual agents rather than pawns being moved without any personal control (de Charis, 1968).

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More to the point of this study, some psychologists like Baltes and Baltes (1986), dealing with personality development, have applied the concept of perceived control to the elderly population. Almost all aspects of the aging process are influenced by issues related to personal control. Health and general well-being, cognitive functioning, life satisfaction, and just feeling good about one's self imply perceptions of personal control.

E. J. Langer (1981) felt that "senility" in the elderly was really their response or lack of response to the environment that does not allow them to exert personal control. She based this notion on several studies that have specifically considered the extent to which physical and mental health in the elderly are effected by perceived control over their environment.

Langer and Rodin (1976) conducted an interesting study dealing with perceived control. A lengthy description follows because it illustrates how perceived control effects some elderly and relates to the findings of this dissertation. The study setting was a nursing home in New England. Two groups of elderly between 65 and 90 were participants. The experimental group was told in detail that they had much personal responsibility in the day-to-day operation of their lives in the home. They could decide on the room set-up, where to meet visitors, how to spend their time watching television, reading, or whatever. They were

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urged to report any problems to the staff so changes could be made. Each resident in the experimental group was also given a living plant to tend. The comparison group was given the same set of detailed instructions. But in this case they were left with the idea that the staff would make decisions about their day-to-day activities. They were told that the staff was eager to "take care of them" and even would care for the plant they also received.

Two questionnaires were given each group. One was given a week prior to receiving the information and the second was given three weeks after the communication. The first questionnaire dealt with participant feelings about personal control and how happy, satisfied, and active they were. The second instrument was completed by the nurses. Information was gathered about the kinds of activities each resident engaged in each week and its duration. Other items referred to overall activity involvement such as attending movies, joining in group activities, or going to the occupational therapy room. Neither staff nor nurses were aware that an experiment with control groups was being conducted.

The results were most interesting. All before and after items except the one dealing with perceived control showed differences in favor of the experimental group. The two groups had been matched on such variables as health. The residents in the experimental group were more alert, happy,

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and generally felt better three weeks later than did the comparison group. This study illustrates that an intervention designed to increase a sense of personal control can bring about positive effects that lasted over an eighteen month period. There was, however, some decline in both groups. The rate of decline seemed to have slowed by encouraging some individuals to have control over some important aspects of their life.

Schulz and Hanusa (1978) did a follow up to the initial study to see if the positive effects carried over beyond the time of the experiment. They went back to the nursing home and revisited all forty subjects. The additional findings were surprising. No positive long term effects of the control-predictability intervention could be demonstrated. Even more startling was that the two groups initially benefitting from the intervention showed declines in both health status and "zest for life" after the conclusion of the study.

These results raised some interesting and important issues. It showed that researchers must be careful when the subject realizes the control was actually an illusion. Creating such an illusion of control when there is no real control may be worse for the subject in the long run. This raises a further question about the ethics of potentially harming the participants. To the credit of the researchers, they raised these questions about their own

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research prior to the study.

Our discussion has centered around the notion of perceived control. Phares (1988) again suggests that the reality of a controlled situation may not be as important as a perception of control. He feels that perceived control is important and useful because it allows one the opportunity to manipulate the outcomes of behavior. In addition, it permits one to gain satisfaction from the feeling and awareness of control. This is one contention of my dissertation. There is a relationship between life satisfaction and one's ability to carry out a lifestyle that allows for perceived control over events and important facets of life.

At the beginning of this chapter, I mentioned that locus of control was the specific component of lifestyle to be explored. Two major elements of locus of perceived control are internal or external control factors. Both Rotter (1966) and Phares (1988) place great emphasis on these two elements. A brief analysis showing the major differences between these two elements is in order.

Phares (1988) suggests that the most fundamental difference between internals and externals deals with the manner in which each perceives knowledge about their surroundings. Internals, for example, attribute to themselves the results of their actions. Externals by contract look outside themselves for answers. Internals

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appear to be more achievement oriented than their counterpart. He further suggests that internals are probably better adjusted to life and less anxious about life situations than externals. Finally, it appears that externals may be more compliant, conforming, and persuadable than internals. Some people feel that their efforts result more from their own actions while others feel such efforts are the result of external forces and events.

Internals seem to attribute to themselves the responsibility for effects of their own behavior. Externals on the other hand seek to attribute that responsibility to others in much the way they do to themselves. In the area of adjustment, which has relevance for the elderly, the research consistently reveals that internals are better adjusted, and less anxious. Phares (1988) mentions that active, self-reliant qualities possessed by the internals lead to a type of success that encourages adjustment, and adaptation. It may be that because one has better control over life a better level of adjustment is possible. This might imply that there is little to recommend being classified as an external. He cautions that there is a real danger in this assumption.

Palmore and Luikart (1972), discovered that internal locus of control was the third strongest correlate to life satisfaction preceded only by self-rated health and organizational activity. Seeman (1963) observed that

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prisoners in a reformatory who showed more internal characteristics were more knowledgeable than externals about policies and rules of the prison, parole regulations, and long-range economic facts affecting their lives after release.

Wolk and Kurtz (1975) discovered that noninstitutionalized elderly people who were labeled as internals, did seem to adjust better and have a high level of satisfaction. They wondered how internal institutionalized people might feel. Would the confinement and even limited restrictions or loss of control be a problem for the internals? Would the externals then adapt better to such a restricted environment as a nursing home or adult home? This is what Felton and Kahana (1974) found. They discovered that the externals adapted better to an institutionalized setting than did many of the internals. This makes one be cautious about stating that internal is somehow better than external control. Each may be more positive depending on the situation. This contention is borne out in my study and will be explained further in Chapter V.

Finally, there are external and internal forces that act upon an individual's ability to cope and adapt to life situations. This is especially true for the elderly who must often make major changes in their life for a variety of reasons. By observing people in various roles,

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relationships, group memberships, activities, and environments, one can observe how these elements are forged together by choices into a whole life which Atchley (1980) calls simply lifestyle.

Dramatic Life Events

There is an assumption that a major change or dramatic event in life will have an impact on a person. Usually this change is related to the onset of some illness (Birren and Schaie, 1977). Holmes and Rahe (1967) developed The Social Readjustment Rating Scale (SSRQ) to test the influence of critical life events. The scale consists of 43 items ranging from serious events to rather ordinary life events. Each item is given a mean value with the more serious events getting a higher value. They termed the total score the greater potential for illness. The contention is that both pleasant and unpleasant events create stress and impact the organism. Some of the items pertinent to the elderly are listed here. The entire scale is found in the appendix.

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Table 1

Life Event	Mean Value
Death of spouse	100
Divorce	73
Marital separation	65
Death of close family member	63
Personal injury or illness	53
Marriage	50
Retirement	45
Change in financial state	38
Death of a close friend	37
Outstanding personal achievement	28
Change in living conditions	25
Change in recreation	19
Change in social activities	18
Change in sleeping habits	16
Change in eating habits	15
Vacations	13
Christmas	12
Minor violation of laws	11

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One way to compare the relationship between life satisfaction and lifestyle is to look at critical and dramatic events in the life of the participants. For example, almost all participants discussed the impact of the Great Depression in the 1930s. Those now in their 70s and 80s were teenagers or young adults during those tumultuous years. For many it was a negative life event. Ben Johnson described it in this way.

> I resented it (the Depression) as regards my father. He did not provide properly for us. Maybe it wasn't his fault. I had designs on my life. I was going to be a doctor but I quit school at sixteen to help the old man support the other three kids. The Depression was a very big part of my life.

Some participants in the study talked about being more thrifty and financially frugal, worrying more about financial security, and thankful that they are better off now than during the Depression. A few felt the Depression was an exciting and interesting time. Joan Fix relates her experience in this manner.

> During the Depression we were always on the picket line, helping people...I was very active. They were good times...I don't know if it was a phase. We shared our money, our food. A lot of companionship. It was really a wonderful time...Everyone was poor, no one minded being poor. We shared whatever we had.

The Depression also was an exciting time for Bunny Karp. I asked her if the Depression was a hard time for her? She replied,

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> Financially it was hard. But I had very unusual, interesting parents. It was very exciting. My father was a socialist. So was my mother. It is a very interesting background. I was exposed to all the literature of the labor movement.

Retirement was often mentioned as a critical life event. The impact of retirement varied from person to person. For some it was a positive and deliberate decision. For others it had at least temporary negative implications. I met Bill Heinz only eighteen days after he retired. These remarks illustrate his reaction:

> I just retired from the school system in New York City. It was planned. I wasn't running away from anything. I just came to the conclusion that I was at an age where as long as I am in good health, and my wife is in good health, I'd like to spend my golden years doing just what I like to do.

Bob Lynch described his retirement in this way.

> ...the next significant event was my retirement after forty four years in the same agency. I could have retired earlier or kept working for another three years. That, of course, was a traumatic and important event. It happened that I never regretted for a day that I retired.

Mary Lavin had a different view of her retirement. She had some initial regrets about retiring.

> Well, I didn't like it. I retired voluntarily early. I wasn't too satisfied with the job at that particular time. There wasn't any place to go. I decided to get out and get some stupid job, and work at something stupid, and go away for the summer...I didn't like it those first few years.

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Health problems during life were also significant critical events. Some had experienced health problems or were presently dealing with health-related issues. These statements will illustrate the health issue. Alice Bonner who was interviewed in the residential home talks about her health.

> I stay pretty much in my room, especially in the morning. I don't feel too good in the mornings...I don't go outside much anymore...I have this Parkinson's disease. That bothers me. No pain, just nerves. Sometimes I can walk and sometimes I can't.

Ben Johnson relates a health related issue early in his life that had a strong impact on him.

> ...I was discharged from the Army because of this injury I had. It was an accident. Due to the accident, driving tanks and half tracks, and shooting mortars, I got a series of nose bleeds. Eventually that got me out of the Army. I resented that very much because I had many friends and began to hear about this one and that one being killed.

Sam Ester is beginning to notice some health problems, and this concern appears to be affecting his thinking. He is becoming more cautious.

> I have been particularly lucky most of my life as far as health is concerned. I find in the last couple of years, nothing major, but a series of minor annoyances. I think for the first time this year, I am in my 70s, these things are going to happen.

> We always had long range plans. We will have them again but for now we don't want to plan to far out - some health problems - nothing serious but enough to stall, enough to hold back for awhile.

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A decision to change residence had an impact on some. It might be moving to an adult residential home, moving into an apartment, or relocating to places like Florida. One such event occurred earlier in the life of one couple interviewed and had an impact on their life. Bob and Anne Lynch discussed a move.

> We built our home when they (children) were little and went to Washington. Our move was spurred because the national office moved and it meant a long drive for Bob...That was a traumatic move for me. Much more than I ever admitted. I had a little group I was with before. I loved our home, raised our children there, and all their little finger marks were on the walls- twenty four years in that house. I didn't have a good excuse for not wanting to move, so off we went.

Francis Duffy moved in with his son and family after the death of his wife. This apparently was a good move for him. He says,

> I get along better with my daughter-in-law than with my son, just kidding. I have my own room there. I come and go as I want. I have my own room and my own television. It works out just fine.

I met Mary Watson soon after she had arrived at the residential home. Her initial reaction to this move was quite different.

> This ain't my kind of living. I have always been free to go and come as I want. What I miss most is when I feel like I want to go somewhere and I can't go out and jump in my car. That just about kills me. I'm trying to adjust to it, but I'm not doing it well. I just don't get adjusted to institutional living.

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In order to compare and analyze a relationship between life satisfaction and locus of control, I studied carefully both the language and observable behavior of the participants. For example, Helen Dolaney talked about her activity at the Home, and her actual behavior provided additional support to her language. At first glance her rather sedentary lifestyle might suggest a less than active person. By observing carefully her daily routine and language, the perception changes. I asked her how much time she spent in her room?

> I go there (the lounge) for certain things. I always try to do things for others. I always find time to do things. Here I would loose my mind if I didn't do things. I made a rag rug. There are the knit hats I made. I stay in my room. I used to go out and sit there. I have been busy, darn it, all with the rug.
>
> Listen. I am too busy. They all expect too much of me. You would think I was something wonderful. I keep in the swing. That's all it is. I want to tell you, you spend a lot of time living in the past. I enjoy it really. I always had a good time. I review what I did. Different things come up that remind me of the past.
>
> I am all right. Well as I say it is because I have always been busy, and I can still keep busy. It keeps you going. You can't beat it.

Based on an analysis of the interviews and observable behavior, the participants were initially placed in either a high or low life satisfaction group. Their language and observed behavior indicated whether things were going the way they wanted or not. I found it more manageable to work

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first with only high or low satisfaction groups and then further subdivide the participants into the two control groups.

Twenty one of the participants were placed in the high life satisfaction category. Nine participants were placed in the low life satisfaction category. Here are a few sample comments that helped me place them in either the high or low satisfaction group. Both Mary Lavin and Ellie Chad were placed in the high satisfaction group. The following comments give an indication of their high life satisfaction level. Mary Lavin says,

> My life is quite satisfactory right now. Health wise, good. Economically, o.k. Living situation, fine. I'm in a retirement village.

Ellie Chad, a very active older adult stated,

> The comparison I make is how relaxed the sex life of a couple is when the menopause is finished. It relaxes all the tensions of marriage. It is the same as you get older. Here you are, so enjoy...It's wonderful you don't have the same kind of responsibilities. So enjoy it.

On the other hand, comments like the following caused me to place some participants in the low satisfaction group. I asked Joan Fix if she was presently happy. She responded.

> No. I miss companionship. I miss male companionship. I have for years. I am too old now to get married. I am lonely, terribly lonely. It gets worse as the years go by.

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Another rather negative response came from Bill Mustang when he stated,

> I would not use either word, happy or contented. I am philosophical about the future. Many things I don't like about the present situation, but I have rationalized all these things.

As previously indicated I decided to divide the analysis into two major tasks. First, placing participants into high or low satisfaction categories, then further dividing them into internal or external control categories. So the next step in the process further differentiates the participants into internal or external groups.

Seventeen of the original high life satisfaction group were placed in the internal cell and the remaining three were placed in the external control cell. Four of the nine in the low life satisfaction group were placed in the internal cell and the remaining five placed in the low satisfaction and external control cell.

One criteria used to designate participants as being in either the internal or external group was how they spoke about their lifestyle. This focus on lifestyle was translated into internal or external components. For example, some talked about the ability to do what they wanted in life. It appeared they perceived a real control over events in their lives. For others, it seemed they felt little or no control over life events in the past or present. Again a few examples are in order to illustrate

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this step.

Mary Henley is still in her own home at age 81. She has a series of health problems but a strong will and constitution. I sense she has a feeling of being in control even when she is having health problems. She seems to bounce back from these health crises with a renewed vigor and determination that is quite amazing. We talked at one point about her present lifestyle. She remarks,

> I like my home and I want to stay in it as long as I can. Even if I am sick, if there is a way to keep me home, and my mind is alright.
>
> When I feel good I do little extra things. I painted the cupboards the other day...I am happy with what I have. I don't want anything more...As long as I can pay my bills. That's all I require.

Sam gives a clue to his perception of being in control in this rather direct statement.

> I think that we are not sitting in a rocking chair, not sitting and looking back on what we are to do-we are doing it now.

Those in the external category are generally the "live and let live" types. They tend to go with the flow and feel little or no control over their lives. This was explained a bit earlier in the chapter. A couple of examples from the study will illustrate this selection. Ed Dillon is a widower who lives with his unmarried daughter. Again his language gives a hint to his lifestyle.

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> I had rather a humdrum life. Nothing unusual. I have some disappointments in that I could not follow the law profession after getting a law degree. I regret that I did not practice law. I did apply it some to my work, but not enough.

Elma Sherwood is a resident of the Home. She does not appear very happy or contented. One strong indication suggesting a lack of control is found in her remarks about growing old.

> Well, I tell you. I am about the youngest person in here. And I don't look forward to getting into the 80s or the 90s. I'll tell you, I am not going to worry about it. We don't know what is coming. In a few years I will be in the 80s and probably won't enjoy anything. Come back when I am 80 and I will tell you how I feel...I don't think it is anything to look forward to.

We discussed her coming to the Home and her reaction to that dramatic event. Again her remarks indicate to me a "go with the flow" attitude, typical of externally controlled people.

> I don't mind coming here...I was so thankful to get in here...I never thought what would become of me. I guess I lived day to day.

In this chapter I explained in more detail the major components of life satisfaction and lifestyle, especially the locus of perceived control factor. The importance of looking at dramatic or critical life events was discussed. The focus on dramatic life events is an excellent example of an element of the study that came out of the data without

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any prior determination. I probably would not have paid much attention to dramatic events, but this issue kept reoccurring over and over in the data. How important such dramatic events are in the life of the participants will become even clearer in the next chapter.

In the next chapter I will display the model used to compare life satisfaction with the locus of perceived control factor. Since there are basically two elements to the components of life satisfaction and lifestyle, a simple four cell-type model proved adequate for data analysis. I found the model useful in organizing the data and extremely helpful in generating the conclusions of Chapter V. I believe that the interaction between life satisfaction and locus of perceived control is appropriately described by the model.

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CHAPTER V

MAJOR CONCLUSIONS

You can't help getting older,
But you don't have to get old.

George Burns (1989)

Chapter V reflects the major conclusions from this study. The significant items of this study are summarized here and will be expanded upon in the following pages.

1. A major goal was to get a better understanding and clarification of the definition of life satisfaction as it applies to the elderly. As mentioned in Chapter II a standard definition offered by Lemon, Bengston, and Peterson (1972) was "the degree to which one is presently content or pleased with his general life situation," (p. 513). In the context of this study this definition is not nearly broad enough to encompass the notion of internal or external control. The study broadens considerably the definition to include an understanding of the perceived control factor.

2. The attention given to dramatic and critical life events, detailed in Chapter IV, are important in understanding a perception of life satisfaction and have a great influence on the lifestyle and subsequent perception of life satisfaction.

3. The life satisfaction--locus of perceived control model was developed from an analysis of the interviews and observable behavior of participants. The model becomes the

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focal point of assessing the relationship between life satisfaction and lifestyle. The model will be explained in great detail later in this chapter.

4. Substantiation of the statements in each cell of the model was found in the data and is illustrated in this chapter.

5. Some characteristics that cut across all participants in each cell are identified and illustrated. These characteristics were generated after the participants were placed in each cell. They represent a summary of some characteristics that, I believe, are more generic and are supported by the data. Not every characteristic was displayed by each subject, but I believe there is enough evidence from the data to support these more generic characteristics.

My conclusions are related conceptually to prominent, diverse theories dealing with successful aging. They are the activity theory and the disengagement theory. At this point I will explain briefly the major components of these two theories.

Riley and Foner (1968), proponents of the activity approach, contend that to age successfully one must continue into old age those activities and values held in middle age. This theory promotes the continuation of the older person maintaining a large number of roles and remaining active in these roles.

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Activity theory is one of the oldest and most widely accepted social theory of aging. It is a dominant paradigm in social gerontology. A paradigm is a model used by most people working in a particular field of study. It gives the researcher a set of common assumptions and set of rules for practice. Becker summarizes the basic assumptions of the activity theory by stating,

> Activity theory states that social activity is the essence of life, and that this is true for all people at all ages. For the aging person, activity becomes very important because the health and social well-being of the aging person is dependent on remaining active (p. 135).

It is through social interaction that we learn what is socially proper and what is socially improper, what motivates, and what provides a self-image. This in effect is what give meaning to life. Social activity can be one determinant of whether one ages successfully or unsuccessfully (Becker, 1980).

The activity theory also maintains that one must stay at an adequate level of social activity to age successfully. Aging people should seek active roles. If one remains socially active he or she will achieve a positive self-image and obtain greater life satisfaction (Riley and Foner, 1968).

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The disengagement approach views old age as a unique developmental stage in and of itself, distinct from previous activity or roles. In this theory, older persons gradually and voluntarily disengage themselves from prior roles and positions. Such reduction in activity level is welcomed and accepted as normal. Successful aging, in this theory, is successful coping with disengagement (Cumming and Henry, 1961).

This theory was developed prior to and in direct opposition to the activity theory. It is essential for people to remain socially active as they grow older, but it is normal and inevitable that people will decrease their level of activity and seek more passive roles as they age.

Disengagement theorists do not believe that it is necessary for older people to remain either other-directed or goal-oriented in their activities. These theorists further suggest that the elderly adapt a laissez-faire attitude to support and approve the reduced activity. The elderly usually decrease their level of activity as they adapt to normal changes as part of the aging process. The theory is best described in these words of Cumming and Henry (1961).

> In our theory, aging is an inevitable mutual withdrawal or disengagement, resulting in decreased interaction between the aging person and others in the social systems he belongs

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> to. The process may be initiated by the individual or by others in the situation. The aging person may withdraw more markedly from some classes of people while remaining relatively close to others. His withdrawal may be accompanied from the outset by an increased preoccupation with himself; certain institutions in society may make this withdrawal easy for him. When the aging process is complete, the equilibrium which existed in middle life between the individual and his society has given way to a new equilibrium characterized by a greater distance and an altered type of relationship (p. 14-15).

Havighurst (1963) posits a compromise position between the two opposing views of activity and disengagement. He feels that both perspectives are related in some way to life satisfaction. Life satisfaction will be positively related to the activity approach for some elderly and positively related to disengagement for others. One whose lifestyle tended to be more active and outward directed probably will prefer to remain active in older age. One who tended toward being more passive and dependent will probably be more satisfied with disengaging from prior roles.

Before I begin to address the major conclusions of my

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study, I thought it would be important to display and explain the model that shows the interaction between life satisfaction and lifestyle with the emphasis on locus of perceived control.

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Table 2

LIFESTYLE

Locus of Perceived Control

LIFE SATISFACTION	Internal Perception	External Perception
High Perception	Things are going the way I want and I feel some control over what is happening. n = 17	Things are going the way I want but I feel little control over what is happening. n = 3
Low Perception	Things are not presently going the way I want but I feel some control over what is happening and I will change the situation if and when I can. n = 3	Things are not going the way I want but I feel little control over what is happening and probably will be unable to change the situation. n = 5
Low Perception	Things are not going the way I want and I feel some control over what is happening But I choose not to change things. n = 1	

n = Number of participants in each cell

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Basically there are four possible combinations in the model that compare life satisfaction and locus of perceived control:

high life satisfaction and internal control;

low life satisfaction and internal control;

high life satisfaction and external control;

low life satisfaction and external control.

The following pages offer substantiation and information about the statements reflected in each category of the model and offer more generic characteristics gleaned from the sample population.

SIGNIFICANT COMPONENTS OF THE MODEL

High life satisfaction and internally controlled:

People in this category project the most positive sense of high life satisfaction. Things are generally going the way they want and they feel some control over what is happening.

Participants in this category are most likely to be in relatively good health, financially secure, and quite active. They will attempt to maintain a high level of satisfaction. When negative critical events occur in their lives, they will make every effort to return to a high life satisfaction. In Chapter IV we discussed in detail some of the possible dramatic and often negative life events that can occur.

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Here is a good illustration of this point. I came in contact with a prominent person who had just been forced to resign as the president of a large corporation. Initially he was devastated. He wandered about aimlessly for awhile. He even seriously contemplated suicide. About six months later I had a long conversation with him about his life. He has subsequently begun to take evening classes at a local college. He made contacts to become a consultant, and appeared on the way to a new lifestyle and return to a high degree of life satisfaction. It became apparent to me that he was an internally controlled person who ultimately would not allow the situation to control him.

During their youth and early adult life those in this category developed a lifestyle that promoted a high life satisfaction. An interesting phenomenon takes place with this group. Traditionally in their youth these folks allowed their lifestyle to influence the level of satisfaction. If youth was a pleasant experience in terms of lifestyle, their life satisfaction at the time was high. When life became difficult or unpleasant, as for many in the Great Depression, their life satisfaction was corresponding lower. This group will reverse the process when they are older. In effect, they will attempt to modify their lifestyle to maintain or return to a higher life satisfaction. In other words, the life satisfaction influences the lifestyle and not the reverse as in younger

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years. The process is displayed on the next page.

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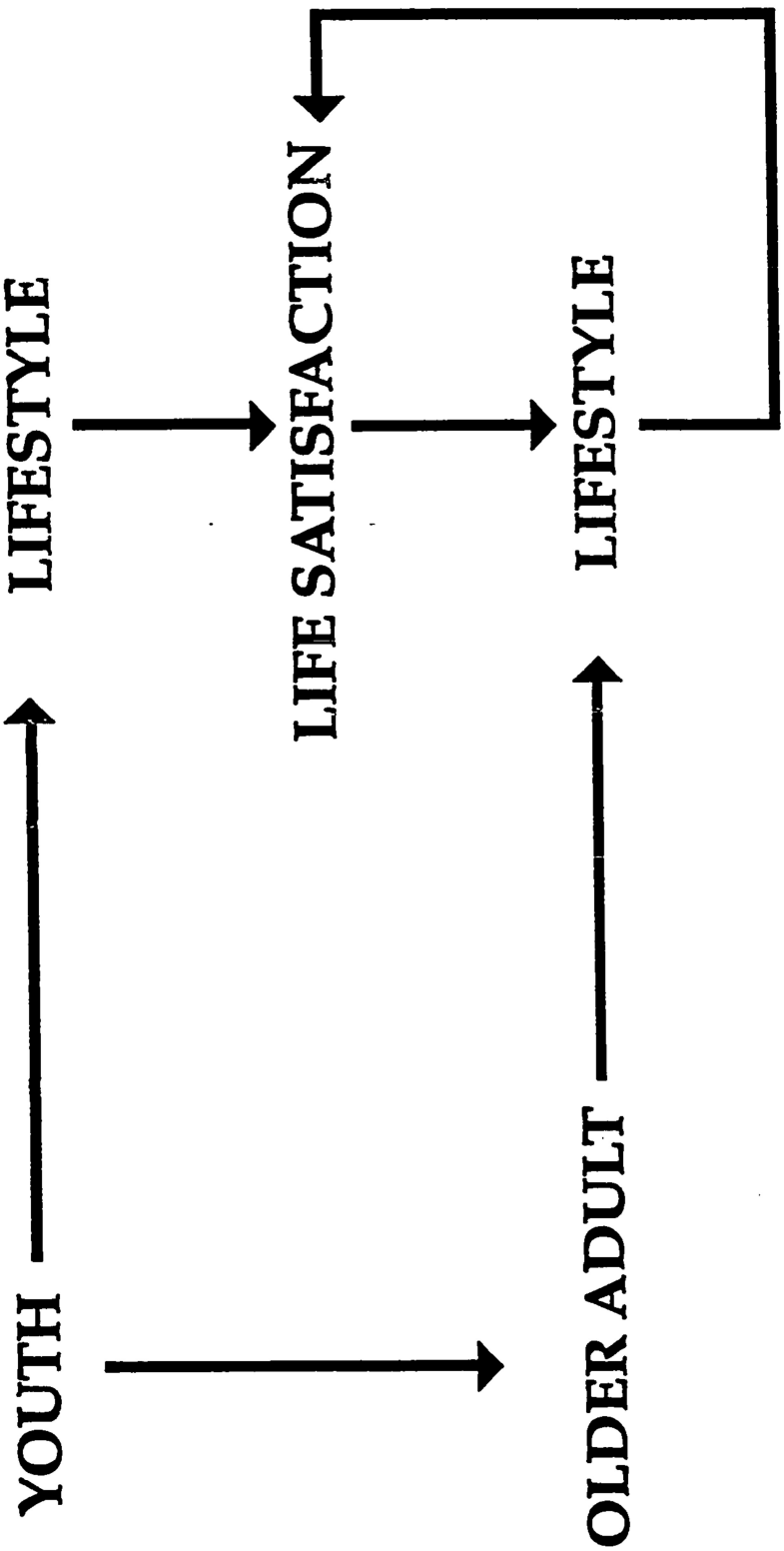

Figure 4

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A good example of a person in this group is Ellie Chad. This lady in her 80's is still very active physically, socially, and culturally. She belongs to many boards and works on volunteer projects. Ellie travels extensively, has the support of her family, and shows most of the characteristics of this group. She is also making a major contribution by working hard as an advocate for the elderly. Her volunteer work is primarily seeking new and better ways to promote legislation, secure services, and enhance the quality of life for the elderly. Even though she is presently very active and highly satisfied with life, she is focusing her energy on the health care needs of the frail elderly.

It is important to note here that much of the advocacy being promoted for the elderly is carried out by the elderly themselves. Generally the active workers among the elderly come from this group of higher life satisfaction and internally controlled. Some significant thoughts come from the interviews with Ellie.

> People are not simple. The human person is not a simple entity. The longer I live the more I realize I thought I was a simple person. I suddenly realized that I am not simple at all. I am a very complex person.

> If you live long enough you acquire a certain tolerance. And I think too if you are realistic at all you have to take a look at how old you are. And also take a look at what is left of life for you. You know we are not stupid and we know that our time is limited. How do you want to spend it? Do you want to spend your time worrying over those petty things that come up? Don't

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> use your psychic energy over things that you cannot hope to change. You do the best you can with what you have at the moment.
>
> Here you are, so enjoy. I wish I could get this across to people as they get older. It's wonderful that you don't have the same kind of responsibilities. So enjoy it.

Another person in this group has a totally different lifestyle. Bob Grady had been in a wheel chair with a crippling disease for most of his adult life. A casual observation would suggest he is anything but highly satisfied and internally controlled. This is where qualitative research serves well. By lengthy interviews and careful observations I concluded that Bob is highly satisfied and internally controlled in spite of his limited physical mobility. He lives independently, attends college, and is an active participant in Elderhostel weeks. His physical handicap does not restrict his perceived internal sense of control, his positive self-worth, and positive disposition. Bob talks about his life satisfaction in terms of being better off than others.

> Well I mean I belong to a lot of handicapped organizations. I go over there and see others with handicaps and in bad, bad shape and I say I am 100 per cent better off then they are so I thank God for the small favor.
>
> It seems to me that people with a severe heart condition are much worse off than me. They are worrying that they don't know when they wake up each day if they will last out that day.

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> My philosophy is a proverb in the Good Book. The man complains that he has no shoes until he meets a man who has no feet. That controls my thinking because I may have mobility problems but when I see there other people...

Some generic characteristics identified with those who are internally controlled and exhibit a high life satisfaction are:

1. Most are active in many ways including physical, social mental, or intellectual activity.

> (Mary Keys) I never had to be kept busy. I need more time. I generally am feeling in control of life.

> (Mary Lavin) I go swimming every day. I swim a third of a mile every day.

2. This group feels some control over life events.

> (Bill Heinz) It was planned (retirement). I wasn't running away from anything...I'd like to spend my golden years doing just what I like to do.

3. This group also sees a need to be useful.

> (Bob Lynch) Since I retired I think the way to be happy is to be useful. The neighbors sometimes call for advice or help in projects.

4. Independent thinking and acting are other strong characteristics of this group.

> (Mary Keys) I am more fiesty and independent than I was earlier in life.

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(Bob Grady) Everyone wants to push me in my wheelchair. I say, "No thanks. I would rather do it myself." They don't realize I need the exercise for my upper body.

5. Most in this group express a positive tone in their language and speech.

(Mary Keys) I am elated about life.

(Val) I have never felt better. We have great kids and great friends...I literally not only feel better now, I am better.

6. Many in this category are also high achievers and have a high energy level.

(Bob Lynch) I worked hard and am proud to look back on the months and years of accomplishment.

High life satisfaction and externally controlled:

Things are going the way they want but this group feels little control over what is happening. They also seek, however, to maintain a high life satisfaction. The main difference between this group and the first group is the perception of control from outside forces rather than from within.

These people generally are easy to please, make few demands on life, and are less assertive with dependence on others. They are generally satisfied with life, and relate this contentment not to their own efforts but to outside forces. They may feel that luck or chance was on their side. Their reaction to critical events in life will be

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different from group one. They return to a high life satisfaction in bad times, but this usually takes longer and is dependent on outside factors. For example, if retirement was a negative event, they will less likely take steps to reduce the trauma and will return to a higher life satisfaction only if outside circumstances change.

Duffy and Dillon are buddies. As married couples they were friends and ironically both wives died within a short time of each other. Dillon lives with his unmarried daughter and Duffy lives with his married son. Both have temperaments that are easy going and project the "live and let live" characteristic. Neither one makes many demands on life and both were not very high achievers. Typical of this group they are pleasant folks who are generally happy and contended with life. Duffy uses such language as,

> I got no complaints at all.

> I live with my son and his family. I get along ok. I have my own room there. I come and go as I want...My son asked me to come and live with them. I said ok.

Dillon also accepts life easily. When asked about any dramatic events in his life he says,

> Not really. Rather a humdrum life. Nothing unusual. I am very grateful and thankful.

Martha Ross is another example of this group but comes from a different setting. She resides in the adult Home.

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She was never married, worked most of her life, and retired in due time. She spends most of the day in her room listening to music on the radio. She makes few demands on the system and is a "nice person" with a quiet and unassuming disposition. She talks about life in the Home.

> I like it here very much. You couldn't have a nicer place. Well, I think it is the care and neatness of the place. The girls know how I like things, I like them in order. I don't like a lot of stuff around. I'm not a person to go in for activities.

Martha Ross characterizes the "live and let live" attitude. She remarks,

> As a natural thing I am happy. I am not one to find fault and be disgruntled.

She speaks about activities in the Home.

> No, I'm not interested because I don't want any responsibilities. I don't want anything hanging over me that I have to do. I just relax. I listen to my radio, the music. I just sit here and turn on my radio very quietly.

> It's really a very delightful place to be, if you are going to be away from home.

She talks about herself in these terms.

> I'm just a plain, disciplined person. I'm not disagreeable like a lot of people. That is the way I am. I do live day to day.

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Generic characteristics related to those externally controlled but still perceiving a high life satisfaction are:

1. A "live and let live" attitude might best express how these people approach life.

(Francis Duffy) I got no complaints at all.

(Martha Ross) I'm not disagreeable like a lot of people. That is the way I am. I go along day to day.

2. Many do not consider themselves to be high achievers.

(Ed Dillon) Rather a humdrum life. Nothing unusual. Nothing outstanding.

(Martha Ross) I'm not a person to go in for activities. I was interested in bridge and all of a sudden I got so nervous playing that I couldn't play anymore.

3. Generally this group is easy to please.

(Ed Dillon) After my wife died my daughter moved in with me and that has worked out very well. There weren't any problems. WE get along very well together.

(Martha Ross) I'm just a plain, disciplined person.

4. This group tends not to be very assertive or aggressive.

(Ed Dillon) After my hospital stay and surgery, I would get tired so I let go of the golf.

(Martha Ross) I don't want any responsibilities. I don't want anything hanging over me that I have to do.

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5. They also make few demands on life.

(Francis Duffy) I have my own room. I come and go as I want. I don't bother the folks much.

(Martha Ross) I never knew what it was to want anything. My father did everything for me...I live day to day. I just as soon go any day.

Low life satisfaction and internally controlled:

This particular group is in many ways the most difficult to identify and describe. Things are not presently going their way, but they still feel some control over what is happening and many of them will change the situation if and when they are able. The most significant factor in this state is that it probably is more temporary for most.

As I mentioned earlier, there is at least one person in this cell who may prefer to stay dissatisfied with life. It seems there are people who really are "sour on life," and who probably choose to be unhappy and disgruntled. Since I only identified one person I feel might be choosing to be dissatisfied with life, it is impossible to generalize much further.

Most of the people in this cell were involved in some critical life event when I interviewed them. They have consistently maintained a high life satisfaction and strong internal control. Because they have perceived internal control and are consistently in a high life satisfaction state, they will move toward a higher life satisfaction as

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soon as possible.

Bob Cook, a physician, lost a position of prestige in a major medical facility. At that point in time he felt dejected, unhappy, betrayed. He had consistently been a high satisfaction, internally controlled person. Eventually he found ways to overcome this traumatic retirement event. He began to volunteer for community projects, spent much time at the library, and spent more time with his family. He adapted his lifestyle to return to a higher life satisfaction.

> I never planned to retire. I would have continued to work. Circumstances forced me to retire early. Now I find it a blessing. I learn to live with my problems. The job you feel in your work is gone.

> I have relatives who sit on the couch and watch television all day. You have to try to understand yourself and what you are interested in doing. I am at peace a lot more now than I was then. I had to go through quite a bit and didn't get any help. I didn't get angry or bitter. Once in a while I get a little depressed.

He speaks about adapting to change especially by the elderly.

> Some people expect older people to resist change... Change is life to them. They have been seeing change for 80 years, and one more change...There are always a few who hold out, but for the most part they can accept new things and change. They have buried their children and done all kinds of things...The Depression, wars. Old age wasn't a problem in the past. They either kept on working or died.

> Mary Watson is another good example. When I first met

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her she had recently moved into the adult Home and was not happy to be there. She felt a loss of independence, freedom of movement, and was not initially pleased with the rules and regulations of the Home. I visited her again in about six months and a remarkable change had taken place. Since she was basically an internally controlled person, she decided not to maintain a low life satisfaction profile but found an ingenious way to be more contented and happy in the Home. She began a little business of gift wrapping. Any resident who needed a gift wrapped came to her. I'm not sure she ever charged for the service but this "business venture" returned her to a satisfying lifestyle.

Overall you enjoy it here in the Home?

> No. This ain't my kind of living. I have always been free to go and come as I want. What I miss most is when I feel like I would like to go somewhere and I can't go out and jump in my car. That just about kills me. I'm trying to adjust to it, but I'm not doing it well. I just don't get adjusted to institutional living. But I don't tell anybody. I have to be here so I might just as well put up with it. I have always had a good life. Busy. I was always very, very busy.

At a later interview she appeared more adjusted to living in the Home.

> I'm busy most every minute, painting or drawing. I wrap gifts, packages for people, too. That takes up my time.

Some may not bounce back as quickly or as easily and in fact may never leave this state. Joan Fix lost her husband

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some years ago. Since that time she has been quite unhappy and even though she is probably an internally controlled person, she may remain unhappy unless and until someone can take the place of her husband. Other activities and interests at this time do not seem to compensate for this loss.

> My lifestyle would be people and books...People are my passion. I love to talk to people.

She describes her present life in this way:

> I feel lonely, terribly lonely. It gets worse as every year goes by. It gets worse because my husband and I used to walk together. We used to do everything together... Sometimes I am unhappy... I really miss male companionship... not to live with, but to take a walk with, to have discussions with, to eat with.

The one consolation is that most of the people in this category will probably adapt their lifestyle and return to a higher life satisfaction. They are presently existing in a more temporary state due to a negative life experience or event. Since they are internally controlled they have a better chance of returning to a higher life satisfaction once the particular negative or unhappy event is resolved. This group also exhibits some generic characteristics such as:

1. This group appear unhappy and unsettled during a negative critical event. This is true of most individuals, but this group being more internally controlled will try to

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overcome this state.

(Jean Fix) I'm lonely, terribly lonely...I miss male companionship...Sometimes I am unhappy. I keep looking for someone to walk with and talk to as a companion.

(Ben Johnson) Life at present is a little bit depressing. There is a blandness and emptiness in spots.

2. This group talks usually in good terms about the past and refer to the "good old days."

(Jean Fix) The past was more exciting, much more exciting. I often think of it.

(Mary Watson) I wouldn't change anything in the past. Only I would have done more of what I did do.

3. They also are still very active and seek ways to return to a former higher life satisfaction.

(Jean Fix) When I get up, I walk three miles every day. I walk, I come home, I eat a light lunch, and I read. I go to the library. I walk all the time and think of the past.

4. These people still like their independence.

(Ben Johnson) Retirement meant giving up the business. That's all. At that point it was the body not the mind. If you retire the mind you might as well die.

5. There is at least one person in the study who seems to prefer being unhappy or disgruntled with life. He probably has been consistent and "unhappy" most of his life.

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(B.P.) Many things I don't like about the present situation but I have rationalized all these things...I am very content to be alone...I am impatient with people...I have seen enough of people to look at them with a jaundiced eye.

(B.P.) I don't have a perfect relationship with my children. We are all of the same temperament. It's a free-for-all when we get together. It is not a relaxed situation.

Low life satisfaction and externally controlled:

This group fits the stereotype of the relatively few unhappy and sad elderly. Things are not going the way they want and they feel little control over what is happening.

These people more typically fit the last stage of Erikson's model of those who are not successful in resolving life problems and are classified by him as "despairing." They feel trapped both in language and behavior, and exhibit less satisfaction. Some are living independently, have relatively good health, and are financially secure. Not all are characteristically in nursing homes. These people have generally led an unhappy life with few perceived rewards and believe that they had little good fortune or control over their life.

These people differ from the one person I interviewed who seems to enjoy being unhappy. He appears to be quite angry at life and elicits hostility from others. Those in this cell, however, appear to be unhappy but not angry at the world. They see themselves as victims of circumstance

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and really elicit a response of sympathy from others.

Helen Krawski lived in the adult Home when I interviewed her. She subsequently died. Her language and behavior indicated a sad, unhappy, and lonely existence. She had a family, was relatively healthy at the time of the interview, and was receiving good care at the Home. Her life, however, had been one of hard work raising a family after her husband left her. She never recovered from the death of a grown son. Her only consolations seemed to be occasional visits from her family and a strong faith in God. But even these were not enough to compensate for a sense of unhappiness and little control over her past or present life. She died at a rather young-old age. While a casual relationship to low life satisfaction cannot be made, I suspect there was not a strong will to live.

She talks about the death of her son.

> Then when Teddy died I took it very hard. I didn't sleep. I kept crying. Then when I had to eat I couldn't. It wasn't easy.

A hint into her perception of outside forces controlling her life is stated in this way:

> I adjusted to this place. I thought I would be crying out my eyes, but you know I never shed a tear. I feel bad when I think about my son who died. I ask why God didn't take me instead of him. It was God's will. What can you do.

Bunny Karp is another example of one who appears to be

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unhappy and externally controlled. Interestingly, she has many of the physical and social rewards of the higher life satisfaction group, but these do not seem sufficient to sustain her. She never felt a sense of accomplishment although she apparently had great writing talent. The interview suggests a frustration in not being able to take command of her life and accomplish her goals. This lack of control coupled with a desire to be a high achiever lead her to be unhappy. Frankly, I am not sure at this stage of her life if she can recover a strong self-worth and acquire a positive lifestyle and high life satisfaction.

She discusses her present life in this way:

> That is very difficult. In many ways it is a continuation of whatever restlessness I had before. I think aging and being alone and being retired in some ways have only intensified a character or characteristics or qualities that existed before.
>
> I still lack self discipline...I could have made much more of my life... I have given up my goals... I am not motivated.
>
> I am satisfied with life overall. Dissatisfied with what I have made of my own life... Maybe I am very shallow and superficial? It is hard for me to age. This is typical of a thread that goes back through my life. I can't possibly be that old because I haven't done the things I was supposed to do. In other words, I can't believe I have nothing more to look forward to.

Generic characteristics attached to this group include:

1. These are often quite negative in language and in reacting to life situations.

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(Krawski) My life wasn't easy...I would prefer living with my son...I don't think a dog should be allowed in this place.(Note, she is talking about a real dog that roamed the halls of the Home.)

(Sherwood) There are people out there in the lounge and they are chewing most of the time about something or other. Am I going to get like that?

2. They often appear to be quite unhappy, sad, or lonely.

(Krawski) I am not feeling so well. I am having stomach problems. I went out Thanksgiving Day and got awfully sick after that. So I decided to stay here...I feel bad when I often think about my son who died so young.

3. Some also feel trapped in life-situations and sense they have little control over past or present events.

(Krawski) My marriage didn't turn out so good. My husband turned out to be a drunk. I lived with my parents for awhile with the kids. We were on welfare. Did I ever have a hard time.

(Bonner) I don't think much about the past. If I did I probably would go crazy...There are some things about the past I just as soon forget.

4. Some also find difficulty in accepting life in general.

(Krawski) I ask God why he didn't take me instead of my son, Teddy?

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Generic Characteristics

A summary of the generic characteristics for each category in the model is presented here for easier reference. I repeat that these characteristics were generated after the participants were placed in each cell of the model. They represent a summary of some characteristics I found cut across the participants in that cell.

High life satisfaction and internally controlled:

1. Most are active in many ways including physical activity, social activity, mental, or intellectual activity.

2. This group feels some control over life events.

3. This group also sees a need to be useful.

4. Independent thinking and acting are other strong characteristics of this group.

5. Most in this group express a positive tone in their language and speech.

6. Many in this category are also high achievers and have a high energy level.

High life satisfaction and externally controlled:

1. A "live and let live" attitude might best express how these people approach life.

2. Many do not consider themselves to be high achievers.

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3. Generally this group is easy to please.

4. This group tends not to be very assertive or aggressive.

5. They also make few demands on life.

6. As externally controlled people they feel little control over events in their lives.

Low life satisfaction and internally controlled:

1. This group appear unhappy and unsettled during a negative critical event. This is true of most individuals, but this group being more internally controlled will try to over come this state.

2. This group talks usually in good terms about the past and refer to the "good old days."

3. They also are still very active and seek ways to return to a former higher life satisfaction.

4. These people still like their independence.

5. At least one person in the study appears to be consistently in the low life satisfaction state by choice.

Low life satisfaction and externally controlled:

1. They often are quite negative in language and in reacting to life situations.

2. They often appear to be quite unhappy, say, or lonely.

3. Some also feel trapped in life situations

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and sense they have little control over past or present events.

4. Some find difficulty in accepting life in general.

Summary

I have attempted to describe briefly from the data how I analyzed each group in the model. A few samples were used to illustrate each category. Other outstanding examples could have been added to make the case presented. I realize that these observations and conclusions must be limited to the current data base and sample.

However, I also feel that further research might substantiate the contentions of this model. It is difficult to "slot" people into cells or groups. My intention was not to restrict a person to one specific category or another, but to identify some components of life that might add to the knowledge base about the aging process.

One major goal of this study was to broaden the conceptual understanding of life satisfaction of older adults. The most traditional definitions found in the literature, and discussed in Chapter II are "feeling happy or being content with life." These definitions are still valid. However, I am suggesting a broader definition reflecting the interplay between life satisfaction and locus of perceived control or lifestyle. The feeling of contentment or state of being happy is modified or

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influenced by the control factor. The perception of control adds a dimension to one's perception of life satisfaction.

Life satisfaction for some is interpreted as having perceived control over life events. For others it is not perceiving control over life, but also not having the corresponding responsibility for self-action or self-determination. For others high life satisfaction is bitter-sweet. They may be presently in a negative life situation, but remember the better days when their satisfaction level was much higher. Hopefully, they will make efforts to return to that higher perceived life satisfaction.

The concluding chapter will offer some concrete implications for caregivers and also suggest some possible further research. My contention remains that the more we can learn from the elderly themselves about their perceptions of satisfaction and the influence of lifestyle, the more we can find ways to enhance the aging process.

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CHAPTER VI

APPLICATION TO ADULT EDUCATION AND IMPLICATIONS FOR CAREGIVERS

Many will be forced to act old
before they are ready to

CBS News Report

The implications and recommendations from this study are intended for a broad range of caregivers including educators, and the elderly themselves. I feel strongly that the limited results of this study can benefit those interested in the successful aging process and also provide a stimulus for further research in the process of aging. Any significant findings in a study such as this can best be viewed as an encouragement for further research and sensitivity to the issues raised and explored.

My intention in this chapter is not to offer the "last word" on implications for caregivers, but to reflect on the conclusions and suggest some practical applications. In discussing the applications and implications from the study, I will focus on the following:

Adult education researchers and practitioners;

Adult and nursing home providers;

Social gerontologists;

Older adults; and

Policy makers.

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The data are most directly related to applications for adult educators. The other categories reflect less direct relationship to the data. They are more my personal perceptions and feelings from the study itself, the literature review, and my personal experiences with these various caregivers.

Adult education researchers and practitioners:

Professional educators and practitioners in adult education are generally committed to the concept of lifelong learning. It is important that those planning educational programs consider carefully the needs of the older adult. Unique programs like Elderhostel are successful precisely because the planners take into account the specific needs and interests of those who frequent the campus programs.

Joan Fix tells how important Elderhostel is in her life.

> It has (Elderhostel) done a great deal for me. It really has. The first time I went to Cortland. I loved it. I had a great time. Then I came here five years ago and I have been here ever since.

Mary Keys put it very succinctly when she says,

> This is my cup of tea. That's why Elderhostel is such a joy to me.

It is interesting to note that people in all categories of the model developed in Chapter IV attend Elderhostel programs. They come for different reasons, but it does

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suggest that this program is meeting the educational needs of a wide and diverse population of older adults.

Organizations like the American Association of Retired Professionals, (AARP), are successful because they respond to a variety of services requested by older adults. Such organizations listen carefully and respond directly to the expressed needs of the population they serve.

Some adult education programs are doomed to failure. Often it is the result of not being aware of the complex and varied needs of the target audience. Such programs imply that all older adults have the same needs and, therefore, one model or program is sufficient.

This study suggests that by analyzing carefully the level of satisfaction and locus of control factor of older individuals, educational programs would be tailored to meet the varying needs of a rather diverse group. Not every program can be tailored to fit exactly individual needs, but a more refined assessment of individual needs would lead to more successful programming.

Since I am primarily an adult educator, the major impact of this study will focus on implications for adult education. As suggested, the value of this study is to look at the elderly from both a life satisfaction and locus of control perspective. At this point, I offer some suggestions for adult educators from each of the four categories in the model.

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High life satisfaction and internal control:

Researchers such as Brockett (1982) and Estrin (1985) suggest that older persons with high life satisfaction are more attracted to self-directed learning projects. Such persons tend to be more independent thinkers, more active, and perhaps more interested in designing their own learning experiences. This dissertation would tend to support the contention especially for the internally controlled person. The characteristics previously identified in Chapter V fit the criteria used by Brockett in his findings. Brockett and Estrin did not, however, deal specifically with the psychological issue of locus of control.

In effect, adult educators might locate those individuals who are perceived to be more internally controlled and highly satisfied with life. These appear to be ideal candidates for self-directed learning projects. I believe self-directed learning theory and practice could move forward significantly by paying attention to individuals in this category. As we shall indicate later, not all older adults may be appropriate for self-directed learning projects.

High life satisfaction and external control:

I would suggest this group is not as self-directed as the first group. The characteristics of this group include people who tend to be followers less independent, and accept situations in which they feel less need for involvement. My

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contention is that one can make a distinction in the high life satisfaction group between internally and externally controlled individuals. More traditional, structured programs would probably work better with this group. It might be interesting to test the concept of self-directed learning with this group. Perhaps such a process might increase their sense of control and further enhance their life satisfaction. Maybe for the first time in their lives these people would feel some control over life events.

Low life satisfaction and internal control:

This group is, for the most part, in a rather temporary state of existence. Some dramatic event has caused them to be in a low life satisfaction state. Since they are internally controlled, however, they will probably make an effort to return to a higher life satisfaction when circumstances warrant.

The adult educator could provide a valuable service by offering specific educational programs to help these people overcome a crisis, maintain a positive attitude during a critical time, or allow some to express their internal control by developing self-directed activities. A real sensitivity to this group could create a unique opportunity to help some who need temporary assistance in overcoming a critical life event.

Low life satisfaction and external control:

This group would present the greatest challenge to adult

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education programmers. Very little in life causes them pleasure and they probably are the least group of individuals interested in either formal or informal educational programs. These people could provide the best opportunity for creative and imaginative programming. More individual and one on one attention would be appropriate.

Use of media such as television programming might reach this group who probably spend a great deal of time watching television. Educators in church work, for example, should be attentive to the needs of those in this group who express a strong faith and are committed to a denomination.

Ellie Chad spoke frequently about the role of the church in the life of the older adult. I asked her on one occasion if she thought the churches should address the specific needs of the elderly or try to integrate them more into the mainstream of existing church activities. She responded,

> I think you have to do it both ways...If they are well elderly they should be integrated into the church process, church societies, and organizations. If you don't you are going to miss an awful lot of talent because these people have lived a long time, have been active in the church, and are supportive of the church. So you will miss out if you segregate them.
>
> On the other hand because life is like it is, you have to take into consideration the fact that some are going to need special services. For instance, bus service that would bring groups of people living in the same area to church on Sunday.
>
> The church must make it possible for them to be kept in the mainstream of the church, rather than segregate them.

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I return to the premise that the more adult educators can specify various groups or individuals, the better they can tailor educational activities. The traditional categories of older adults into active or inactive, wealthy or poor, healthy or sick may still be appropriate. I think, however, that attention to other characteristics such as perceived control and perceived life satisfaction can further enhance the goals of adult educators in meeting the educational needs and interests of an older population.

The following comments regarding various other caregivers are personal reflections rather than direct applications from the data.

Adult and nursing home providers:

Another group of caregivers to older adults are those individuals who work in nursing homes and other less restrictive residential homes. Often such personnel are well meaning in dealing with the clients and patients, but may lack knowledge about the real or felt needs of these people.

Caregivers sometimes group all the residents into one large category and expect a regimented response from these people. I spent many hours at a residential Home both interviewing residents and staff, and observing the interaction that took place between staff and residents. One social work administrator told me, for example, that the

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State would like to see all residents involved in the various social activities. In effect the goal was to get everyone to Bingo on Monday afternoons. The social worker said,

> The system judges activity in mainly a physical sense and isn't really interested in the mental activity of the individual. It is hard for people to understand they have a need to be themselves. The system would like to see everyone at everything.
>
> But that is not the ultimate. The problem is that the State feels it is the ultimate. When they come for State visitations they ask how many attended this or that social activity?

I feel that such care providers need to be more attentive to the differences among the clients and could respond more to individual needs. Some would argue that this is impossible given a shortage of staff, limited resources, and lack of time for individualized attention. My belief is that such attention would be more time saving. Some residents appear to need less attention, not more. Some residents are content with their own activities and interests, and require only opportunity and encouragement.

Certainly Ross, Dolaney, and Watson are good examples of this. These ladies are relatively satisfied with life, yet do not need to attend Bingo, go to the craft shop, or even attend church services. Helen Dolaney is busy knitting caps for friends, talking on the telephone, and writing letters to friends. She has little apparent need to go to the many

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social activities to maintain a good, positive disposition. Ross also feels little need for outside activities and is content to stay in her room listing to music and talking to friends on the telephone.

Mary Watson is the lady who began the package wrapping business after an initial low period when first entering the Home. She is very satisfied to work quietly in their room and visit her sister, who lives across the hall. She doesn't even see the need for a telephone in her room. Unfortunately, some caregivers associate activity solely with physical activity. While no one is denying the value of physical activity, there are a variety of ways to remain active.

Perhaps the findings of this dissertation could encourage some care providers to pay more attention to the language and behavior of the residents. I am suggesting that administrators be careful about placing all residents into a single category. Not everyone needs to be socially active as defined by the social director or State. Allowing some individuals to find their own source of activity will probably increase the level of satisfaction overall.

A professional nurse, Jane Palmer, has spent many years working with the elderly. I asked her how the folks she worked with in a particular nursing home remained active? She responded,

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> We had an activities person, very nice who had been there a long time. The kinds of activities and crafts, to me, were not terribly creative. They were pretty much weaving plastic baskets and that type of activity, although if people came in with skills in knitting, etc. they were allowed to do that.
>
> I found it interesting that people you thought would never weave a plastic basket, would do it. I'm wondering if they did it more to pass time, it would be in a social situation, in a big room sitting around a table with other people. The staff would be coming in and out, there would be activity going on. They probably wove the baskets to be in the main stream of activity. They could hear other people talking, they could talk to others. Weaving baskets was a means to an end.

A key to programming for residents is a perception of control over their life and activities. To the extent that administrators are willing and able to address this psychological phenomenon, I believe they can better serve their clients.

I asked Palmer a further question about the daily routine in the nursing home. She replied,

> Some still have control over their lives and are not entirely dependent on the staff. They make their own routine. Maybe they depend on staff for certain things like meals, etc. But I remember that many of them who are still independent did develop their own routine. That is their way of maintaining control.

Social gerontologists:

Another group interested in the process of aging are social gerontologists. A brief survey of the development of social gerontology might be useful before suggesting some implications from the study for social gerontologists.

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Throughout history there have been references and comments about the elderly and state of growing old. Most famous of the ancient writings was De Senectute, by Cicero (106-43 B. C.). Cicero asks the question, "Does old age steal upon youth more quickly than youth upon boyhood? Would old age be less irksome if they were in their eight hundredth rather than in their eightieth year?"

Only recently, however, has there been serious consideration of the issues and concerns related to the elderly in any systematic, organized, research-oriented manner. It is only in the past three decades that researchers, practitioners, gerontologists, and adult educators have scientifically addressed the many facets of life for the elderly.

In 1909 Dr. Ignatz Nascher first used the word "geriatrics." This came from two Greek words, namely, "geronto" meaning "the old man," and "iatrike" meaning "surgery, medicine, or the treatment of." Later the word gerontology was coined from the same Greek base geronto adding ology or "the study of." In effect geriatrics is the medical care of older persons while gerontology is the study of older persons and the aging process related to the elderly.

Havighurst (1963) suggests that the practical purpose of gerontology is to help people live better in later years. There is little general agreement, however, on what this

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good living is all about. Some conditions are more generic like health, economic stability, and the presence of friends and/or family. There is much disagreement among researchers on the actual signs of good living in feelings and behavior of older persons.

In more recent times the term "social gerontology," popularized by Clark Tibbits, came to mean those aspects of gerontology dealing with social factors and forces (Breen, 1970). Sociology is not the only discipline that has added significant contributions to the study of aging. Economics, psychology, anthropology, demography, medicine, philosophy, and adult education, to name a few, have all increased the knowledge about and awareness of the problems, challenges, and internal or external environmental factors impacting on the elderly.

Breen (1970) distinguishes five separate stages in the development of social gerontology.

1. Philosophical stage: Philosophers throughout the ages have tried to describe or explain the satisfaction of old age and the wisdom acquired after many years of living and experience. Already mentioned was the famous treaties of Cicero. Horace (65-68 B. C.) and Aristotle (384-322 B. C.) had rather negative and biased views about old age. Shakespear laments the last two ages of man in his Seven Ages of Man.

2. Biological stage: As medical knowledge and research

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expanded there was a parallel interest in the biological functions and processes of the elderly. Some sought to find a way to reverse the aging process or find the "fountain of youth." Much progress has been made in recent years to understand and deal effectively with the biological problems of older life. Much of this work has brought about the increased average age life expectancy of the elderly. However, at times one must revert to the questions asked by the philosophers with few and often unclear answers to the intricate and complex process of aging.

3. Psychological stage: This stage saw the emergence of a focus on the older person as an individual. Attention was paid to helping older persons adjust psychologically to the process of aging. Mental health agencies took a special interest in this segment of the population and institutional facilities began to develop. Long term care centers came into being. However, the attention at this stage of development was on the individual almost exclusively and little attention was paid to relationships with others.

4. Social stage: A more recent development has dealt with the elderly not only as individuals but as part of a larger social group. Areas such as the social security system, group housing, and retirement have an impact on the social conditions of society. The elderly are seen much more as part of a larger social system interacting with

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other social groups.

5. Political stage: Since the mid-forties, the elderly have had a greater impact on the political action system of the country. Older persons have organized themselves into a variety of political and social action groups. The first White House Conference on Aging was held in 1961 to deal with problems related to the elderly in a political context. In recent times a number of organizations related to the elderly have come into existence including: the American Association of Retired Persons, (AARP), the National Retired Teachers Association, the National Council on the Aging, and the Association of Emeriti, to name a few. A final note by Breen (1970) indicates that each stage plays a significant part in developing awareness and contributing to the overall well-being of the elderly in our society.

Social gerontologists and researchers have only begun to identify, explain, and document the complex components that comprise the process of successful aging. This study has as a major goal to add a small piece to the mosaic of this process of aging. An interesting study might be to use the Self Directed Learning Readiness Scale, (SDLRS), and relate it to the Internal-External (I-E) control scale of Rotter. Both scales have been tested for reliability and validity. Such a quantitative study could produce some interesting statistics about these two variables. I see more clearly a

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continual need to increase research on the perception of satisfaction as determined by the elderly themselves. More qualitative studies and additional longitudinal studies would greatly increase the knowledge and understanding of this complicated process.

Older adults:

I feel the study could have implications for the elderly themselves. The more an older adult understands the aging process, the better chance one has to enhance life satisfaction. Much unhappiness, fear, acceptance of myths, and general ignorance surrounds the aging person. To the extent that the elderly buy into many of the myths and misconception currently believed, the less chance of becoming a well satisfied, well adjusted older adult.

Each individual should be allowed to increase awareness, develop a positive outlook, and broaden an understanding of the aging process. Once a person realizes that he or she need not fit into some one's preconceived category, the willingness to take some control over life becomes more attractive. The internally controlled person, for example, will do this instinctively. Anne, one of the participants in the study, says,

> He (Bob, her husband) is a very independent kind of guy and I am independent. There are no demands put on one another. We changed some of the activities we were involved in when Bob retired. There was no trauma. Suddenly you can't decide to travel together if you

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haven't enjoyed being home together.

The externally controlled person may need more encouragement, fortification, and positive reinforcement to generate an acceptance of life that is satisfying and rewarding. Krawski spoke longingly about her home and wishes things might be different.

> It is nice here but it isn't home. Do you know what I mean? I certainly miss my house. But I couldn't stay there because the house needed a lot of repairs.

Policy makers:

I feel those interested in promoting quality in the aging process should pay attention to governmental and organizational policies that affect the elderly. Some like Kutza (1981) argue that chronological age should not be a major factor in designing legislation and national policies for the elderly. My study implies that there is a wide variety of interests, skills, and activity levels, within the same cohort population. In other words, there are more significant criteria for legislation than mere reference to age. A better way to understand the needs of individuals is to look at their development along social lines, biological time, and historical context.

For example, the Age Discrimination Act of 1975 has come under review. The amended Act calls for a reexamination of federally funded programs using age as a criteria for receiving benefits. Age may be one "reasonable" factor in

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providing benefits. At the very least the Age Discrimination Act will probably bring into question the age-based criteria for federally funded policies.

Estes (1983) summarizes the importance of a closer look at legislative policies related to the elderly when he says,

> ...the long-range goal must be policies that provide for an adequate income, a job, decent housing, and health care; that alter the objective condition of the aged; and that change the social processes by which social policies are made and implemented in such a way that the public interests, rather than private special interests, are served. To accomplish these objectives requires the development of a comprehensive national policy on aging that does not segregate the elderly, stigmatize them or place them in a dependent and depersonalized status. To achieve such a national policy will require basic changes in our values, in our attitudes, in our behavior, and in our actions toward the elderly (p. 220).

My goal in this final chapter was to highlight some ways in which those involved in the process of aging might add to the "quality" aspect of that process. This included thoughts about the development of adult education programs,

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and ways in which other caregivers and the elderly themselves might promote a better quality of life.

IMPLICATIONS FOR FURTHER RESEARCH

I would like to suggest some possible follow-up studies to my dissertation. It would be interesting, for example, to develop a quantitative comparative study about life satisfaction and lifestyle, or locus of control. The Life Satisfaction Index A (LSIA), used by Estrin (1985), could be related to the Rotter (1966) Internal-External Scale (I-E). It would be fascinating to see if such a study would further validate the conclusions of this study.

Certainly expanding this qualitative study to a larger and more diverse population could prove beneficial. It might provide new insights into the conclusions already reached.

Combining other elements of life with life satisfaction could broaden a definition of life satisfaction beyond the scope of this dissertation. The impact of religion, for example, on life satisfaction would be an interesting study.

I am sure there are a range of other possible research areas that could tie in nicely to my study. I hope to follow-up on one or more of these research areas.

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Concluding Remarks

I have attempted in this dissertation to focus on a major aspect of successful aging, namely, life satisfaction. I proposed that a narrow definition of life satisfaction was not adequate to explain totally this concept. Saying that "being happy" or "being content" defines life satisfaction is not sufficient. Life satisfaction is influenced strongly by life events and lifestyle. How a person views control over life events has a significant impact on their perception of life satisfaction.

I have attempted to explore the relationship that exists between a perception of life satisfaction and locus of perceived control. The model provided me with a framework in which I examined some generalizable characteristics of this particular population of older adults. To the extent that I showed this relationship, I believe I accomplished the major goal I set for myself in this research project.

I asked Ellie Chad if she thought the phenomenon of aging was new and if she thought the older person of tomorrow is likely to be quite different from the older person of today. After some thoughtful reflection she responded,

> In some ways that is probably true. I don't think the phenomenon of aging is new. I think it is the number and the way we look at it that is new. The phenomenon is the way we are looking at it. That is what is different.

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> I can remember as a little girl being taken by my mother to the old County Home for the elderly, because my brother and I were musical and performers. These old people all with the same clothes, sitting around in rocking chairs against the walls with folded hands, nothing to do...dreadful.
>
> The old people are there. This is not new. But the way we are handling it has changed.

I concluded that issues related to the process of aging are complex, more individualized, and have a great impact on society overall. As the aging population increases, so too will the urgency of addressing the many and varied issues related to this process of aging.

I return to my original question in Chapter I. If people are expected to live longer, what will be the "quality" of that extended life? Is the extension of life without attention to the corresponding quality of that life worth much effort?

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References

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References

Abel, B. & Hayslip, B. (1987). Locus of Control and Retirement Preparation. Journal of Gerontology. 42(2), 165-167.

Agree, E. (1988). A Portrait of Older Minorities. American Association of Retired Persons Publications. Washington, D.C.: AARP.

Alldrege-Marshall, G. (1984). Life Satisfaction in Aging Americas: A Casual Model. Ph.D dissertation, Brigham Young University.

Allen, M. (1983). New Life For the Aging. Aging. Third Edition. Guilford, Ct: Dushkin Publishing Co. 4(7).

Alston, J.P., & Charles, D. (1973). Age, occupation, and life satisfaction. Gerontologist, 13, 58-61.

American Association of Retired Persons (AARP), (1988). A Profile of Older Americans: 1987. Washington, D.C.: AARP.

Atchley, R. (1980). The Social Forces in Later Life. Third Edition. Belmont, California: Wadsworth Publishing Company.

Baltes, M.M., & Baltes, P.B. (Eds.). (1986). The psychology of control and aging. Hillsdale, NJ: Erlbaum.

Barrow, G. (1986). Aging, The Individual, and Society. Third Edition. St. Paul, Minn.:West Publishing Company.

Becker, D. (1980). Social Gerontology. An Introduction to the Dynamics of Aging. Boston: Little, Brown, and Company.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Biesanz, M. & Biesanz, J. (1973), Introduction to Sociology. 2nd ed. Englewood Cliffs, N.J.: Prentice-Hall.

Birren, J. & Shaire, K. (1977). Handbook of the Psychology of Aging. New York: Van Nostrand Reinhold Co.

Birren, J. (1964). The Psychology of Aging. Englewood Cliffs, N.J.: Prentice-Hall.

Birren, J. (1968). Principles of Research on Aging. Middle Age and Aging. Neugarten, B. (Ed.), Chicago: University of Chicago Press.

Blumer, H. (1969). Symbolic interactionism: Perspective and method. Englewood Cliffs, N.J.: Prentice-Hall.

Bogdan, R. & Taylor, S. (1975). Introduction To Qualitative Research Methods. New York: John Wiley & Sons.

Bogdan, R. (1982). Illiterate or Learning Disabled?: A Symbolic Interactionist Approach to the Social Dimensions of Reading and Writing. Draft of a paper presented at the International Reading Association Special Seminar on the Social Dimensions of Literacy. Syracuse University.

Bogdan, R., & Biklen, S. (1982). Qualitative Research For Education: an Introduction to Theory and Methods. Boston: Allyn and Bacon.

Breen, L.Z. (1970). The Discipline of Gerontology. In A. Hoffman (ed.) The daily needs and interests of older people. Springfield, Illinois: Charles C. Thomas. 5(22).

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Brockett, R. (1982). Self-directed Learning Readiness and Life Satisfaction Among Older Adults. Unpublished doctoral dissertation. Syracuse University.

Burgess, E.W. (1960). Aging in Western Societies. Chicago: University of Chicago Press.

Butler, R. (1983). Successful Aging and the Role of the Life Review. Aging. Third Edition. Guilford, Ct: Dushkin Publishing Company. 15(21).

Campbell, A., Converse, P., & Rodgers, W. (1976). Quality of American Life. New York: Russell Sage.

Clark, M. & Anderson, B. (1967). Culture and aging. Springfield, Il.: Charles C. Thomas.

Collette, J. (1984). Sex Differences in Life Satisfaction: Australian Data. Journal of Gerontology. 39(2), 243-245.

Cowgill, D. and Holmes, L., eds. (1972). Aging and Modernization. New York: Appleton-Century -Crofts.

Crandall, R. (1980). Gerontology: A Behavioral Science Approach. Reading, Massachusetts: Addison-Wesley Publishing Company.

Cumming, E., & Henry, W. (1961). Growing Old: The Process of Disengagement. New York: Basic Books.

deCharms, R. (1968). Personal causation: The internal affective determinants of behavior. New York: Academic Press.

Doyle, D., & Forehand, M. (1984). Life Satisfaction and Old Age. Research on Aging. 6(3), 432-448.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Estes, C. (1983). Social Policy Alternatives: A Redefinition of Problems, Goals, and Strategies. Aging. Third Edition. 210-220.

Estrin, H. (1985). Life Satisfaction and Participation In Learning Activities Among Widows. Unpublished doctoral dissertation. Syracuse University.

Felton, B., & Kahana, E. (1974). Adjustment and situationally bound locus of control among institutionalized aged. Journal of Gerontology, 29, 295-301.

Fowles, D. (Ed.). (1987). A Profile of Older Americans: 1986. American Association of Retired Persons. Washington, D.C.: U.S. Department of Health and Human Services.

George, L. (1981). Subjective Well-bing: Conceptual and Methodological Issues. In C. Eisdorfer, Ed. Annual Review of Gerontology and Geriatrics

George, L. (1982). Models of Transitions in Middle and Later Life. The Annals of the American Academy of Political and Social Science. November. 464, 22-37.

George, L. (1986). Life Satisfaction in Later Life. Generations. X(3), 5-8.

Glaser, B., & Strauss, A. (1967). The Discovery of Grounded Theory: Strategies for Qualitative Research. Chicago: Aldine Publishing Company.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Gubrium, J. (1973). The Myths of the Golden Years: A Socio-Environmental Theory of Aging. Springfield, Illinois: Charles c. Thomas.

Gubrium, J. (1975). Living and Dying at Murray Manor. New York: St. Martin's.

Havighurst, R. (1963). Successful Aging. In R.W. Williams, C. Tibbits, and W. Donahue, eds. Process of Aging. 1, New York: Atherton Press. 299-320.

Havighurst, R., & Feigenbaum, K. (1968). Leisure and Life-Style. Middle Age and Aging. Neugarten, B. (Ed.), Chicago: University of Chicago Press.

Havighurst, R. (1976a). Aging in America:Implications for Education. Washington, D.C.: National Council on the Aging, Inc.

Hiemstra, R., Essman, E., Henry, N., & Palumbo, D. (1987). Analysis of Qualitative Gerontological Research. Educational Gerontology. 13(5), 417-426.

Hofsess, R.E. (1980). Correlating Interpersonal Trust Scores with Life Satisfaction Scores of Older Adults. Unpublished doctoral dissertation. North Carolina State University.

Holmes, T. H., & Rahe, R. H. (1976). The Social Readjustment Rating Scale. J. Psychosomatic Res., 11, 213-218.

Horan, P., & Belcher, J. (1982). Life style and Morale in the Southern Rural Aged. Research on Aging. 4(4), 523-549.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Horley, J. (1984). Life Satisfaction, Happiness, and Morale: Two Problems with the Use of Subjective Well-Being Indicators. Gerontologist 24(2), 124-127.

Isikoff, J.G. (1983). Locus of Control and life satisfaction in aged homosexual men. Ph.D. dissertation, California School of Psychology.

Jacobs, J. (1975). Older Persons and Retirement Communities: Case Studies in Social Gerontology. Springfield, Ill.: Charles C. Thomas.

Kalish, R. (1975). Late adulthood: Perspectives on human development. Monterey, CA: Brooks and Cole.

Kelly, G.A. (1955). The psychology of personal constructs: A theory of personality. (2 vols.). New York: Norton.

Kelly, J., Steindamp, M., & Kelly, J. (1986). Later Life Leisure: How They Plan in Peoria. Gerontologist. 13(5), 531-537.

Kobasky, M. (1974). Educational opportunities for the elderly, in S. Grabowski and W. Mason (eds.), Learning for Aging. Washington, D.C.: Adult Education Association of the USA, 80-85.

Krause, N. (1987). Understanding the Stress Process: Linking Social Support with Locus of Control Beliefs. Journal of Gerontology. 42(6), 589-593.

Langer, E.J. (1981). Old age: An artifact? In J. McGaugh & S. Kiesler (Eds.), Aging: Biology and behavior. New York: Academic Press.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Langer, E.J. & Rodin, J. (1976). The effects of choice and enhanced personal responsibility for the aged: A field experiment in an institutional setting. Journal of Personality and Social Psychology, 34, 191-198.

Larson, R. (1978). Thirty years of research on the subjective well-being of older Americans. Journal of Gerontology. 33(1), 109-125.

Lemon, B.W., Bengtson, V.L., & Peterson, J.A. (1972). An exploration of the activity theory of aging: Activity types and life satisfaction among in-movers to a retirement community. Journal of Gerontology. 27(4), 511-523.

Leonard, W. M., (1981-82). Successful aging: An Elaboration of social and psychological factors. International Journal of Aging and Human Development 14(3), 223-232.

Lohmann, N. (1977). Correlations of Life Satisfaction, Morale and Adjustment Measures. Journal of Gerontology. 32(1), 73-75.

Longino, C. & Kart, C. (1982). Explicating Activity Theory: A Formal Replication. Journal of Gerontology. 37(6), 713-722.

Mancini, J. (1980-81). Effects of health and income on control orientation and life satisfaction among aged public housing residents. International Journal of Aging and Human Development. 12(3), 215-220.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Mass, H., & Kuypers, I. (1974). From Thirty to Seventy. San Francisco: Jossey-Bass Publishers.

McClusky, H. (1974). Community programs in education for aging, in S. Grabowski and W. Mason (eds.), Learning for Aging. Washington, D.C.: Adult Edcuation Association of USA, 118-129.

Medley, M., & Medley, L. (1976). Satisfaction with Life Among Persons Sixty-Five Years and Older. Journal of Gerontology. 31(4), 448-455.

Mussen, P., Honzik, M. & Eichorn, D. (1982). Early Adult Antecedents of Life Satisfaction at Age 70. Journal of Gerontology. 37(3), 316-322.

Neugarten, B., Havighurst, R., & Tobin, S. (1961) The measurement of life satisfaction. Journal of Gerontology. 16, 134-143.

Neugarten, B. (1968). Middle Age and Aging. Chicago: University of Chicago Press. Neugarten, B., Havighurst, R., & Tobin, S. (1968). Personality and patterns of aging. Middle Age and Aging. Neugarten (Ed.), Chicago: University of Chicago Press.

Neugarten, B. (1983). Acting One's Age: New Rules For Old. Aging. Third Edition. Guilford, Ct: Dushkin Publishing Company. 8(14).

Palmore, E. & Luikart, C. (1972). Health and social factors related to life satisfaction. Journal of Health and Social Behavior. 13(1), 68-80.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Palmore, E. (1968). The Effects of Aging on Activities and Attitudes. The Gerontologist. 8, 259-263.

Palmore, E. (1981). Social Pattern in Normal Aging: Findings from the Duke Longitudinal Study. Durham, No. Carolina: Duke University Press.

Parsons, T. (1960). Toward a Healthy Maturity. Journal of Health and Human Behavior. 2, 163-173.

Peterson, D. (1978). An overview of Gerontology Education in Gerontology in Higher Education: Perspectives and Issues, eds. M. Seltzer, H. Sterns, and T. Hickey, Belmont, Calif: Wadsworth.

Phares, E.J. (1988). Introduction to Personality. Second Edition. Glenview, Illinois: Scott, Foresman and Company.

Riley, M., & Foner, A. (1968). Aging and Society Volume One: An Inventory of Research Findings. New York: Russell Sage Foundation.

Rodgers, W. & Herzog, R. (1987). Interviewing older adults: The Accuracy of Factual Information. The Journal of Gerontology. 42(4), 387-394.

Rodin, J., & Langer, E.J. (1977). Long-term effects of a control-relevant intervention with the institutionalized aged. Journal of Personality and Social Psychology, 35, 897-902.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Rotter, J.B. (1966). Generalized expectancies for internal versus external control of reinforcement. Psychological Monographs, 80(1, Whole No. 609).

Salmon, M. & Conte, V. (1981). The Salmon-Conte Life Satisfaction in the Elderly Scale and the eight correlates of life satisfaction. Presented at the 34th Annual Scientific Meeting of the Gerontological Society of America, Toronto, Ontario.

Sanders, G.F. (1983). Life Satisfaction of Older Couples: A Family Strengths Perspective. Ph.D. dissertation. University of Georgia.

Seeman, M. (1963). Alienation and social learning in a reformatory. American Journal of Sociology, 69, 270-284.

Schulz, R. (1976). Effects of control and predictability on the physical and psychological well-being of the institutionalized aged. Journal of Personality and Social Psychology, 33, 563-573.

Schulz, R., & Hanusa, B.H. (1978). Long-term effects of control and predictability-enhancing interventions: Findings and ethical issues. Journal of Personality and Social Psychology, 36, 1194-1201.

Reproduced with permission of the copyright owner. Further reproduction prohibited without permission.

Shelly, A.L., Archambault, R., Sutton, C., & Tinto, P. (1986). The Stages of Qualitative Research: Researcher Thinking Facilitated by Logic Programming. The Case Center Technical Report Series. Report No. 8607. Syracuse, NY: Syracuse University.

Shelly, A.L., & Sibert, E.E. (1985). The QUALOG User's Manual. Syracuse, New York: Syracuse University, School of Computer and Information Science.

Soumerai, S. & Avorn, J. (1983). Perceived Health, Life Satisfaction, and Activity in Urban Elderly: A Controlled Study of the Impact of Part-time Work. Journal of Gerontology. 38(3), 356-362.

Spradley, J.P. (1972). Culture and cognition: Rules, maps and plans. San Francisco: Chandler.

Spritzer, E. & Snyder, E. (1974). Correlates of life satisfaction among the aged. Journal of Gerontology. 29, 458-464.

Toseland, R. & Rasch, J. (1979-80). Correlates of Life Satisfaction: An AIP Analysis. International Journal of Aging and Human Development. 10(2), 203-211.

Toseland, R. & Sykes, J. (1977). Senior citizens center participation and other correlates of life satisfaction. Gerontologist. 17(3), 235-241.

Tuckman, J., & Lorge, I. (1958.) The Projection of Personal Symptoms into Stereotypes About Aging. Journal of Gerontology. 13, 70-73.

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----United States Bureau of the Census. (1970). Projections of population of the United States, by age and sex (interim revisions): 1970 to 2020. Current Population Reports. Series P-25, 448. Washington, D.C.: U. S. Government Printing Office.

Usui, W., Keil, T. & Durig, K. (1985). Socioeconomic Comparisons and Life Satisfaction of Elderly Adults. Journal of Gerontology. 40(1), 110-114.

Walters, J. (1983). Life Satisfaction Among Urban and Rural Elderly Widows. Ph.D. dissertation. Michigan State.

White, R. W. (1959). Motivation reconsidered: The concept of competence. Psychological Review, 66, 279-333.

Williams, R., and Wirths, C. (1965). Lives Through the Years. New York: Atherton Press.

Wolk, S., & Kurtz, J. (1975). Positive adjustment and involvement during aging and expectancy for internal control. Journal of Consulting and Clinical Psychology, 43, 173-178.

Wolk, S. & Telleen, S. (1976). Psychological and social correlates of life satisfaction as a function of residential constraint. Journal of Gerontology. 31(1), 89-98.

Woodruff, D. S., & Birren, J. E. (1972). Age changes and cohort differences in personality. Developmental Psychology. 6(2), 252-259.

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Appendix A

Instruments to test Life Satisfaction

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Appendix A

INSTRUMENTS TO TEST LIFE SATISFACTION

A variety of measures have been developed to test and assess life satisfaction and related constructs and variables among the elderly. The instrument most widely used in life satisfaction research is the Life Satisfaction Index A (LSIA), developed by Neugarten, et al. (1961). LSIA came from a larger study where life satisfaction ratings were assigned to subjects from a series of personal interviews. As a result of the the data collected from these interviews the authors recognized five factors that comprise the variable of life satisfaction. These components have already been discussed at some length but are repeated. They include zest vs. apathy; resolution and fortitude; congruence between desired and achieved goals; self-concept; and mood tone.

Brockett (1982) recounts that recognizing the intensive interview format might not be appropriate for researchers. Neugarten and colleagues developed two scales using the interview format as a criterion. The LSIA is regarded as a major contribution because it defined life satisfaction as a multidimensional construct and specified the factors of the construct (Brockett, 1982). Salamon and Conte (1981) interpreted the reliability figures for the Indexes to be at best low to moderate, with a range of $r = -.07$ to $r = .59$. This would suggest a critical limitation to the use of the

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LSIA. In responding to the limitations of the one dimensional life satisfaction scales and its relatively low reliability scores of the LSIA, Salamon and Conte (1981) developed another life satisfaction measure. This was called the Salamon-Conte Life Satisfaction in the Elderly Scale (SCLSES) and was a 40-item Likert scale designed to produce an understanding of subject's "feelings about life in general." The reliability coefficient of .93 reported by the SCLSES is quite higher than reliability figures for other life satisfaction measures.

Finally Crandall (1980) compared the average level of life satisfaction of the elderly with younger adults. There is a small difference in many of the statements. Both groups of elderly and younger adults found their past lives to be satisfying, were generally satisfied with their past, and would not change the past even if they could do so. Even the negative aspects of life satisfaction were very close in comparison. Similar percentages indicated they might be happier, they became discouraged often, and many of the things they did were boring. A significant difference related to the future. The elderly were more likely to be pessimistic about the future while the younger group tended to be more optimistic about the future. Life satisfaction tended to go down with increasing age. Aged men seem to have a higher life satisfaction score than aged women. In this study higher income and education related to higher

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life satisfaction. Whites appeared to have a higher life satisfaction than blacks, and the employed had a higher life satisfaction than the unemployed or the retired.

In summary Crandall (1980) states, "it appears that life satisfaction does decline with increasing age. However, the difference between those 18-64 and those 65+ is not very great. Also, many of the differences are not caused by age in and of itself but rather by factors such as poor health and low income. Although these factors occur more frequently among the aged, they lead to low levels of morale and life satisfaction among all age groups. (p. 260).

Related Concepts To Life Satisfaction

A number of concepts or life situations are related to life satisfaction among the elderly. Many studies deal with the relationship between these related concepts and life satisfaction. Some of these include: health, financial security, education, marital status, setting or residence, activity level, and locus of control. Brockett (1982) lists these among other related concepts. For our purposes those chosen will provide an additional framework for this study.

Health. The factor that correlates most strongly with life satisfaction among the elderly is perceived health (Palmore and Luikart, 1972). Those individuals who have a perception of good health will also indicate a higher level of life satisfaction. This should not seem unreasonable

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since health is a major concern and even preoccupation especially the the elderly.

Financial status. Spreitzer and Snyder (1974) found a sense of financial security second only to health as having a strong correlation with life satisfaction. Again the perception of financial security rather than the reality appears to be the deciding factor. A stronger relationship to life satisfaction was found in self-rated perceptions of financial adequacy rather than those studies dealing with levels of security determined by actual income (Brockett, 1982).

Education. The relationship between education and life satisfaction is not as clear as perceived health or perceived financial security. Hofsess (1980), however, found a positive relationship between education and life satisfaction. It appears that those with a higher level of education also had a higher level of life satisfaction (Clark and Anderson, 1967). This is an area for further research for gerontologists and especially adult educators dealing with the concepts of self-directed learning, life-long learning, and educational programs geared especially for the elderly.

Marital status. The relationship between marital status and life satisfaction is interesting. For example, Larson (1978) concludes that there appears to be some relationship between marital status and "subjective well-being." He

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further indicates that, "well-being of single persons tends to be roughly equivalent to that of married persons, while widowed, divorced, and separated persons tend to have lower reported well-being" (p. 114).

Setting. Brockett (1982) discussed the relevance or importance of residence or setting to life satisfaction. This issue is of importance to this study since setting is one of the deciding factors in the relationship between life style and life satisfaction. In a study by Wolk and Telleen (1976) life satisfaction was found to be higher among those living in a retirement community setting rather than those living in a long-term care facility. They concluded that the setting may determine the relationship between other related factors and life satisfaction. In other words the relationship will depend to a great extent on the type of setting.

Activity level. Since the activity theory is so predominant in the literature the relationship between activity and life satisfaction is important. Brockett (1982) refers to a study by Toseland and Sykes (1977) in which they looked at senior citizen's center participation as correlated with life satisfaction. This relationship was not significant, but activity level was found as the strongest predictor of life satisfaction. In this situation activity level was found to be a better predictor of life satisfaction than health, which is considered the strongest

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correlate of life satisfaction in the majority of studies cited.

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Appendix B

Theories of Aging

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Appendix B

THEORIES OF AGING

Biological

Many of the research studies in the field of gerontology are concerned with the biological aspects of aging. Perceived biological changes in people have been a source of interest to researchers in a variety of fields for a long time. While this study has a focus in the area of social gerontology it seems important to a least make reference to a few major studies dealing with biological aspects of aging. Biological theories of aging address the basic question, "Why do we grow old?" Barrow (1986) summarizes the various categories of biological theories in this manner.

Group 1. Aging is the result of a disease process in the body. By eliminating disease, medical science may be able to keep the body in a good state of health indefinitely.

Group 2. This group of research theories relates to group one but deals more with the body's immune system. These theories suggest, for example, that such diseases as cancer attack the body in old age because the body slowly looses the ability to develop immune reactions to fight foreign substances.

Group 3. These theories suggest that the normal stresses and pressures of every day life wear people out. Most agree that daily living does affect old age but

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probably are not death threatening.

Group 4. Some theories refer to a "biological clock" that begins at conception and ticks away for the rest of life. Genetic theories suggest that the body is programmed by specific genes to live a certain length of time.

Group 5. These theories believe that aging is determined by DNA change. This DNA is the genetic code that determines individual characteristics. They lean strongly toward environmental pollutants such as radiation, smog, and other chemicals as major causes of aging.

Social Theories

Social gerontologists have developed a variety of theories or perspectives to explain the process of successful aging. These theories attempt to explain the process of aging in terms of more subjective areas of life. Interestingly, two of these theories are in direct opposition to each other. These two traditional theories have been subjected to a variety of tests by social researchers. In addition, another theory has more recently developed that allows social gerontologists the opportunity to look at the process of aging from a fresh and perhaps new perspective. One of the prominent theories, the activity theory, is based on a symbolic interactionist approach to research.

There is a strong connection between the activity theory

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and symbolic interaction. This theory was developed by sociologists at the University of Chicago well know for being symbolic interactionists.

Burgess (1960) began writing about the connection between symbolic interactionism and social gerontology which led to the development later of the activity theory. He talked about the "roleless role" of the elderly. As life expectancy increases, getting older is expected. Older persons become a larger group in society and begin to emerge as a distinct social group. The social structure, however, is unable to absorb this new group. The traditional social institutions consist of the work place, family, kinship networks, and the community. These institutions are not accustomed to accepting older people as fully participating members. Consequently, older people are left out and excluded from the normal day to day activities of society. They are forced into a state of inactivity that Burgess (1960) calls the "roleless role." As a result the elderly are left with no meaningful social functions to perform. Burgess (1960) felt that old age did not have to be a negative or roleless role devoid of socially meaningful activity. Instead he suggested that new roles could include responsibilities and obligations that would lead to a more meaningful existence for the elderly population.

The question becomes one of how to create this new social role for older people? The activity theory suggests

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that elderly people should actively seek full integration and participation into society. They must develop organizational structures and situations for social interaction. This social interaction will create new roles for the elderly. When so organized they can then pursue their own interests in competition or at least with some equality with other more traditional established interest groups.

Becker (1980) summarizes well this new role as defined by the proponents of the activity theory.

> Activity theorists see the new social role of the old and their social advancement as dependent on the activity of older people themselves. No amount of action by others in their behalf can achieve what the old can achieve for themselves. Their interests will be served best if they transform themselves into a self-conscious group. If they are successful, they will secure their position in the established social structure (p. 137).

The disengagement theory was greatly influenced by the school of sociological functionalism or structured functionalism. The leading proponent was Talcott Parsons. He argued that Americans are instrumental activists who favor programatic and goal-directed activities that favor youth over old age (Parsons, 1960).

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Cumming and Henry did not view disengagement and social withdrawal as negative (Becker, 1980). Many of the elderly they interviewed showed improved morale and greater life satisfaction as they became more disengaged. Older people and especially those over 80 enjoy disengagement and display a sense of tranquility not found in younger people. The proponents of this theory view the disengagement process as a natural adaptation to the needs of the society. They argue that nothing additive needs to be done. We do not need to interfere or intervene in the social process or change it in any essential manner.

There are two important studies that are based on the theoretical framework of the activity theory and disengagement theory. These significant studies offer some interesting and important further data about the validity of these prominent theories.

Palmore (1968) asked the question, "Does aging reduce activities and attitudes?" He used data from a study in which 127 persons were interviewed on four different occasions. He developed this model.

		Social Activity	
		High	Low
Life Satisfaction	High	Support for Activity Theory	Support for Disengagement Theory
	Low	Support for Disengagement Theory	Support for Activity Theory

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The findings of the Palmore Study (1968) indicated that men showed very little reduction in either activities or attitudes while women showed reduction in both areas, but the reduction was quite small. He concluded that most people do not become less active as they age and do not show marked withdrawal from their activities. Older adults may in fact reduce activities in some areas and increase activities in other areas of their lives. He also suggested that those who were most active also had the highest level of life satisfaction. Those with reduced activity levels had a lower level of life satisfaction.

In comparing the two theories, Palmore (1968) says,

> ...it may well be that the disengagement theory is applicable to some and the activity theory is applicable to others; that some find most satisfaction in disengaging and others find most satisfaction in remaining active. But apparently in our panel the activity theory was most applicable to most of the participants. (p. 262).

Lemon and Associates (1972) looked at the relationship between social activity and life satisfaction in a retirement community. They interviewed all persons before they moved into the retirement community. They constructed a series of hypotheses that are relevant to this study and very interesting.

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1. Informal activity with friends, relatives and neighbors is directly associated with life satisfaction.

2. Formal activity such as participating in voluntary organizations is directly associated with life satisfaction.

3. Solitary activities such as leisure pursuits and house work is directly associated with life satisfaction.

In other words they were asking if the relationship between activity and life satisfaction is always the same or does it vary depending on the kind of activity?

The results of their study suggest that none of the original hypotheses were correct contrary to the activity theory. They did not find that higher frequency of activity was related to greater life satisfaction. However, part of the original hypotheses were correct. The relationship between activity with friends and life satisfaction was high but not between activity and relationship with relatives or neighbors. Furthermore, the relationship between activity and friends with life satisfaction was true only for women and those over 65 and this correlation was not very strong. Lemon (1972) summarizes the findings by saying:

> The data provide surprisingly little support for the implicit activity theory of aging which has served as the theoretical base for practice as well as research in gerontology for decades. The propositions that the greater the frequency of activity, the greater one's

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> life satisfaction and that the greater the role loss, the lower the life satisfaction were in the main not substantiated by this research. (p. 521).

A study by Longino and Kart (1982) replicated the work of Lemon, Bengtson, and Peterson (1972) which articulated a systematic statement about the activity theory of aging. Longino's study (1982) worked with three different retirement communities (N=1209). There was a greater variation of variables than in the Lemon (1972) study. These findings gave strong support to the activity theory of aging with the following variations. Informal activities contributed positively, strongly and frequently to life satisfaction of the subjects. Solitary activities had no effect on life satisfaction. Formal activities has a negative effect.

Havighurst (1963) also suggests that disengagement does not equal being passive and dependent. It refers more to a lessening of bonds that link a person or individual to his or her environment.

In summary, Becker (1980) suggests that the above descriptions of these prominent theories shows the relationship between social-gerontological theory and research. The research does not give predominance to either theory. The study by Palmore (1968) did not support the disengagement theory but provided some support for the

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activity theory. The study by Lemon and associates did not provide validation for the activity theory. There are some gaps between the theories and research. This provides the present research with a strong rationale to look at both the theories and the current research. Recent developments in theory and research add to the growing knowledge base of the process of aging in the elderly. Some additional developments will be briefly mentioned.

The life-course perspective seems to integrate both the activity and disengagement theories. The study from which the model was developed is called the Kansas City Study of Adult Life. The results indicated a wide range of behavior patterns. This included active and disengaged people and a range in-between. The life course perspective indicates that the attitudes and behaviors of older adults are formed in part by their attitude and behavior in younger years (Neugarten, Havighurst, and Tobin, 1968).

Gubrium (1975) wrote a wonderful ethnography of a nursing home requiring him to live in the home. He tried to construct meaning by observing the life of the residents. He documented what life in a nursing home meant to the residents, staff, administrators, and visitors. Gubrium (1975: Preface) states that this study,

> documents the way in which the 'work' of everyday life in a nursing home is accomplished: how the participants negotiate

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their roles, goals, and needs; how they invoke their rights and duties; and how, in the end, Murray Manor emerges as an organized social entity

This theory developed by Gubrium (1975) posits two factors he feels affect the social interaction of the aged. These include a physical proximity to others and a certain homogeniety by age. He further developed a system of categories illustrated in this way.

	Spacially Compact	Spacially Separate
Age Homogeneous	TYPE I	TYPE II
Age Hetrogeneous	TYPE III	TYPE IV

"Spatially" refers to a physical closeness. Spatially compact environments bring people closer and spatially separate environments keep people further apart.

Gubrium (1975) posits that Type I environments are more conductive to high levels of social interaction and Type IV environments offer the least opportunity for beginning a social interaction. He further states that activity norms have a greater influence on an older person's life satisfaction than even friends (Gubrium, 1973). Very important in his observation is that activity in and of itself is less important to life satisfaction than the potential for activity. If one has the ability to be

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active, life satisfaction is high (Gubrium, 1973). Some environmental constraints decrease the person's ability to cope successfully with everyday living. This would decrease self-satisfaction.

Summary Remarks

A conclusion to this phase of the inquiry summarizes where the literature in the field of social gerontology has taken us and what remains for researchers to pursue. This summary provided me with the rationale and confidence to push forward in finding even a bit of additional knowledge to clarify or add to the existing theories and/or research in question. Becker (1980) puts it nicely by saying,

> The social theories of aging are both provocative and disappointing. They are provocative in the sense that they are vehicles for the understanding of aging. They organize what we know, provide the ideas that stimulate further inquiry, and provide a path toward greater understanding of the social world of the old. They are abstract, often too abstract, but within these theories is the potential for greater knowledge about the social world in an abstract sense as well as greater understanding of ourselves and our relationship to the social world. The social

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> theories of aging are disappointing when they fail to provide the degree of understanding of the social world and ourselves that we would like to achieve. It is safe to say that the development of theories of aging is far from completed. This condition, of course, is not unique to the sociology of aging. Unless we assume that all physical and social phenomena are static or unchanging (an assumption that we can quickly dismiss), we can anticipate that the development of social theory may continue but will never be completed (p. 148-149)

THEORIES FROM OTHER DISCIPLINES

A variety of theories and models already discussed have been developed to explain the process of successful aging. Some of these theories come directly from the field of social gerontology. Other theories that have relevance to the study of aging and gerontology come from other disciplines including psychology, anthropology, and sociology. Some of the efforts and research conducted in the area of personality development in the field of psychology have direct relationship to the focus of this study. A major part of this literature review will deal with the work done in personality development related to

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Perceived Control or what is commonly referred to as Locus of Control.

Since the beginning of time human beings have tried to gain control of the natural environment. As advancement were made in the area of technology, some control over the physical world has been achieved. Success in technology, however, has now created new problems and concerns as one struggles with nuclear arms, air pollution and the like.

Many of the social sciences have found the concept of control to be an important element in the development of the human. In a negative construct these sciences include: psychology where lack of control leads to stress, sociology where lack of control leads to alienation, gerontology, where lack of control leads to physical, emotional and mental problems for the elderly.

Phares (1988) discusses at length the concept of perceived control. In personality development this concept has gained importance in suggesting that such control gives one satisfaction in feeling some control over one's life. This perceived control allows one to maximize pleasure and minimize pain. Having control over life allows for the ability to achieve important life goals whether short or long range. Some find being in control an end in and of itself. Many people find satisfaction with the ability to make decisions for themselves. It makes them feel comfortable and content having some say over their life

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whether it be taking a vacation, driving a car, or making more serious decisions.

Probably the most widely used instrument to measure perceived control in adults is the I-E Scale developed by Rotter (1966). The I-E Scale consists of 23 forced-choice items, along with 6 filter items used to disguise the purposes of the assessment. A sample of the type of questions is:

I more strongly believe that

1. a. Many people can be described as victims of circumstances.
   b. What happens to other people is pretty much of their own making.
2. a. Much of what happens to me is probably a matter of luck.
   b. I control my own fate.
3. a. The world is so complicated that I just cannot figure thing out.
   b. The world is really complicated alright, but I can usually work things out by effort and persistence.

The scale refers to internal and external control of reinforcement (I-E) or what is commonly called a locus of control. Rotter (1966) explains the concept used in the scale in this way:

> When a reinforcement is perceived by the

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> subject as following some action of this own but not being entirely contingent upon his action, then, in our culture, it is typically perceived as the result of luck, chance, fate, as under the control of powerful others, or as unpredictable because of the great complexity of the forces surrounding him. When the event is interpreted in this way by an individual, we have labeled this a belief in external control. If the person perceives that the event is contingent upon his own behavior or his own relatively permanent characteristics, we have termed this a belief in internal control (p.1).

Rotter (1966) is quick to point out that I-E is really a continuum from external at one end to internal at the other. People can fall anywhere along the continuum. The number of studies done on I-E is now in the thousands.

A word is said about I-E related to the aging process. One might ask if people become more oriented to internal control as they age? The first logical response would be to think so given that the elderly increasingly deal with problems of health, shrinking income, and growing cognitive deficits, over which they may have less control. Some argue on the other hand that the present elderly were raised in a more "internal era" when most felt they had control over

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their destiny (Phares, 1988).

Finally two observations are made from Phares (1988). Internals are not always more active than externals unless they value the goal toward which the activity is directed. General broad I-E scores will be only moderately predictive of specific behavior in a given situation.

A study by Krause (1987) demonstrates that social support operates by bolstering the internal locus of control. This longitudinal study of older adults suggests that a relationship between support and perceived control is nonlinear. The increase in social support tends to increase feelings of control, but only up to a point. Beyond a certain point additional support tends to decrease feelings of personal control. Krause (1987) mentions that several studies show that persons who believe that events in their lives are under their own control are able to cope more effectively with life stress than those who perceive that their lives are controlled by luck, fate, or chance.

Abel and Hayslip (1987) looked at locus of desired control and participation in retirement preparation programs related to retirement attitude and adjustment. 59 older workers and retirees were the subjects. The study found that retirement preparation programs maintained both a desirability and expectancy of internal control and a positive retirement attitude among workers. It suggested that programs of retirement preparation can provide a

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context within which one's attitudes toward retirement can be assessed. The instrument used with the DCM, Desired Control Measure.

A study by Soumerai and Avorn (1983) dealt with 25 experimental and 30 controlled randomly selected elderly who had applied for work in a part-time position. The results of the study indicated positive effects of part-time employment on life satisfaction for these urban, community dwelling retirees. The major factor in the high life satisfaction was that participants were given opportunities to exert " meaningful control" over their environment and were able to satisfy a need to engage in useful, valued activity. This suggests a strong connection between useful and valued activity, control over environment and life satisfaction.

Developmental vs Sociological Models

Developmental models of aging focus on the psychology of the individual. Variables such as personality, motivation, cognition and morale are discussed and analyzed. Developmentalists look at individual changes throughout a life cycle. The impetus for change resides in the individual person. These researchers contend that some internal background mechanism is a force creating change in a person as he or she moves through life (Barrow, 1986).

Sociological models by contrast deal with the society

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and social groups that influence the development of the individual. These models do not deal with personality changes that come with the aging process but rather with those external forces that affect a person including social events and social structures.

George (1982) developed a model that integrates developmental and sociological views. She contends that an integrated model balances the contribution of the individual and society. This model of George (1982) suggests five sets of variables as displayed in Barrow (1986). These include:

1. role transitions and life events during middle and late life

2. the meaning of the changes to the individual

3. short-term behavioral response to change (how the person acted)

4. long-term response to change or outcome of the change for the individual and society (adaptation)

5. how change is affected by numerous social and individual factors such as social setting, social status, world events, personal resources, and past socialization experiences (p. 64-65).

Summary

The purpose of this appendix was to identify and explore those concepts and theories that have relevance to this study. The primary focus was on the literature related to

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life satisfaction among the elderly. Since various disciplines deal with this issue it was necessary to have familiarity with a variety of studies dealing with the issues of life satisfaction.

While this is not an exhaustive literature review, I was most careful to select and discuss those studies that appeared to have some direct relevance to the present study. In such a selection process one realizes the vast array of other potential works that might be of some utility.

The studies cited do illustrate the attention paid to an understanding of life satisfaction and related concepts to the overall quality of life in the aging process.

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Appendix C

Social Readjustment Rating Scale

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U·M·I

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