1976

An examination of objective factors and social psychological correlates of the stereotype of "old": a development of a model

Timothy Hess Brubaker

Iowa State University

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Timothy Hess Brubaker

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CHAPTER I: INTRODUCTION

Within Chapter I the general research problem and statement of problem are presented. The statement of problem is divided into three sections. In the first part, societal beliefs about old age are discussed, stereotype is defined and the stereotype of old age is presented. The aging process in our society and the importance of the stereotype of old age to aged persons are discussed in the second part. The relevance of stereotypic beliefs about old age to applied gerontology is presented in the final part. A summary concludes the chapter.

General Research Problem

The general problem of this dissertation is to examine an implicit assumption of many theories in gerontology and to develop a model that explicates the correlates of positive and/or negative attitudes toward old age. Specifically, it is assumed that extant stereotypic attitudes toward old age are primarily negative and persons who define themselves as old subscribe to these negative beliefs. Recent findings from research that utilizes old aged samples, however, provide contradictory evidence. It appears, then, that this assumption cannot be accepted for all older persons. There is a need to examine this assumption to expedite the development of social psychological explanations in gerontology. A model of
the correlates associated with positive and/or negative attitudes toward old age is needed to clarify the limitations of current theories of aging.

Statement of Problem

Societal beliefs about old age and the stereotype of old

Beliefs about old people are important to aging members of society. Social psychologists have documented the effects of others' opinions on an individual's behavior (Asch, 1955; Milgram, 1963; Aronson, 1972) and old people are no exception. Social beliefs that pervade society contribute to the social setting in which old people find themselves (Linden, 1957). An older person may perceive others as defining him in terms of these opinions of old and, more importantly, the aging individual may evaluate himself vis-a-vis these societal attitudes. The young are also affected by these opinions. The views young people have of the elderly, and the ways in which younger persons behave toward aged individuals are, in part, defined by societal beliefs about old age. The content of these beliefs, then, is important to older people in their self-evaluation, interaction with others and adjustment to the aging process.

Although societal beliefs about old people may vary, the following summarizes many of these attitudes:
The old person qua member of society tends ... to become comparatively disadvantaged in many respects, despite the various qualifications and mitigating factors. Thus, in contrast to younger people, the older person typically has poor health and low energy; his educational background is inadequate and out of date; he is deprived of his occupational role; his earnings are cut off, and he is left to live on fixed retirement income in the face of rising living standards and the declining value of the dollar; he is extruded from the heart of the family group as his children leave home, his spouse ultimately dies, and he is left to live alone (Riley and Foner, 1968:7).

These beliefs appear to be pervasive in our society and, although some may be valid, many cannot be substantiated. These unsubstantiated beliefs about old age are the focus of this dissertation. Within gerontological literature, these erroneous opinions about old age are defined as the "stereotype of old age."

More than a half-century ago Lippmann (1922) defined stereotype as an opinion, attitude or belief that is factually incorrect, produced by illogical reasoning and rigid. Several years later this concept was defined "... as a fixed impression, which conforms very little to the facts it tends to represent, and results from our defining first and observing second" (Katz and Braley, 1933:181). While the definition of

1For the past several decades, the concept of stereotype has been of concern to both sociologists and social psychologists. For example, in the study of ethnicity and race relations, numerous attempts have been made to ascertain the content of the stereotype that is perceived in response to a particular class of people (Katz and Braley, 1933; Katz, 1970; Gilbert, 1951; Karlins, Coffman and Walters, 1969; Secord, Bevan and Katz, 1956; Secord, 1959).
Stereotype has remained relatively unchanged, one aspect of the definition needs to be explicated. Although a stereotype is not premised on factual information, no direction of the content is implied; that is, the beliefs or opinions may be positive or negative. The characteristics that describe the object of the stereotype may present a favorable, inviting picture or an unfavorable, repulsive impression. A stereotype may be defined as an attitude, opinion or belief that is based on few, if any, facts produced by illogical reasoning, not easily changed and not necessarily positive or negative.  

Social psychologists have attempted to distinguish the differences between attitude, belief, and opinion but the precise terminology appears to be complicated by several theoretical and empirical issues (Kiesler, Collins and Miller, 1969). Triandis (1971:2) defined attitude as "... an idea charged with emotion which predisposes a class of actions to a particular class of social situations," while Rokeach (1968:112) conceptualized attitude as "... a relatively enduring organization of beliefs around an object or situation predisposing one to respond in some preferential manner." Belief, on the other hand, refers to "... any simple proposition, conscious or unconscious, inferred from what a person says or does, capable of being preceded by the phrase "I believe that ..." (Rokeach, 1968:113). Opinion has been distinguished from both attitude and belief as an overt expression or specific manifestation of an attitude (Hovland, Janis and Kelley, 1953). Although these terms—attitude, belief and opinion—may differ within social psychology, in gerontology these concepts have been used interchangeably. In this dissertation, then, attitude, belief and opinion refer to an organization of ideas or expectations that predispose action toward a particular object or situation.
Several functions of stereotypes have been identified. Although the impression created by stereotypic beliefs may be inconsistent, nonfactual and ambiguous, these beliefs help structure everyday situations for people (Schutz, 1974). As individuals come into contact with foreign situations, people or a class of objects, stereotypes enable definitions to be formulated that provide the structure necessary to respond to these unfamiliar surroundings (Lippmann, 1922; Schoenfeld, 1942; Hayakawa, 1950; Frenkel-Brunswik, 1949; Richter, 1956; Smith, 1968; Zajonic, 1960). For example, within an individual's life space, contact may be made with a criminal or aged person. An individual, however, may not have had any previous contact with either of these categories of people. Stereotypic beliefs provide an impression of characteristics of criminal or aged persons and, in an attempt to structure this ambiguous situation, an individual can attribute the stereotypic characteristics to the criminal or aged person with whom he is in contact (Secord and Backman, 1974). In addition to minimizing ambiguity, stereotypes also bolster self-esteem and allow for social control. Self-esteem may be bolstered if stereotypic beliefs depict a group to which one does not belong as inferior. In a similar manner, social control is exercised because certain individuals are excluded and others are included in group membership (Katz, 1947; LaViolette and Silvert, 1951; Maykovich, 1971; Orcutt, 1973; Zajonic, 1960). Although both positive and negative stereotypic attitudes fulfill
these functions, generally positive stereotypes have been associated with the social control function (Goudy and Bain, n.d.).

Although it is evident that the stereotype concept did not originate within gerontology, the stereotype of old age has received much attention (For a review of this research, see McTavish, 1971; Peters, 1971; Wood, 1971). Much of the research, however, has not observed the criteria of Lippmann's (1922) definition of stereotype (factually incorrect, produced by illogical reasoning and rigid). The use of one of these requisites without the other two encourages misconceptions of the stereotype concept (Brigham, 1971). Since there are many beliefs about old age, analyses of the stereotype of old age need to rigorously measure stereotypic attitudes. In other words, stereotypes refer to a particular category of attitudes, beliefs or opinions. Only attitudes, beliefs or opinions that are factually incorrect, premised on illogical reasoning and resistant to change are identified as stereotypic. Unfortunately, many of the indexes and scales employed to measure the stereotype of old age have included items that are factual. Such instruments measure attitudes toward old age that are not stereotypic. For example, several studies (Tuckman and Lorge, 1953a; Tuckman, Lorge and Spooner, 1953) have used the following item to measure the degree of negativism of the stereotype of old age: "They [old people] have
a high suicide rate." Aged persons, however, do have a high suicide rate (Resnick and Canter, 1970; Kastenbaum and Aisenberg, 1972). A respondent aware of the suicide rates of older people would be forced to agree with this item. This item, then, measures knowledge about late life rather than the direction (positive or negative) of the stereotype of old age.

In sum, there are many opinions of old age in our society. This dissertation focuses on a particular category of beliefs—stereotypic—about late life. The beliefs may be positive or negative and help to structure unfamiliar or ambiguous situations for individuals. A brief examination of the process of aging in our society will underscore the importance of the stereotype of old age to the theoretical development of social gerontology.

The aging process and the stereotype of old age

Aging occurs biologically, with its physical effects, and socially, with the change in roles (Breen, 1960; Butler and Lewis, 1973; Cavan, 1962; Geist, 1968; Williams, 1960). Although the processes of aging may be realized throughout a person's lifetime, generally it is within the later stages of the life cycle when the manifestations of aging become acute. As a person in contemporary society enters his sixth decade, getting old becomes a reality (Neugarten and Moore, 1968; Cottrell, 1974). Physically, certain anatomical changes
occur that indicate the aging process has entered into its later stages (Riley and Foner, 1968; Welford, 1963; Peterson and Peterson, 1960). Health, for example, becomes more problematic (Atchley, 1972; Confrey and Goldstein, 1960; Lowenthal, Thurnher and Chiriboga, 1975; Vedder, 1963). Socially, the cessation of certain roles and the initiation of others becomes a part of the person's life state. The relinquishing of the worker role and the entrance into retirement indicate that one is older (Carp, 1972; Eis dorfer, 1972; Simpson and McKinney, 1966; Neugarten and Moore, 1968; Friedmann and Orbach, 1974).\(^3\) Loss of a spouse and the adjustment of the role of survivor also provides evidence of one's position in the life cycle (Lopata, 1973a, 1972a; Blau, 1973, 1961; Berardo, 1970, 1967). These events underscore the fact that the individual is getting older and entering into a new role.

Sociologists have defined a role as "a set of expectations applied to an incumbent of a particular position" (Gross, Mason and McEachern, 1958:67).\(^4\) These expectations do not only define the behaviors appropriate to the position.

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\(^3\)The effects of retirement on the family have been discussed in terms of generational relationship (Shanas and Streib, 1965), husband-wife expectations (Kerckhoff, 1966a,b; Lipman, 1962) and morale (Kerckhoff, 1966c; Lipman, 1961).

\(^4\)The definition of this concept has been debated since Linton (1936, 1938) presented a conceptualization of this term. For a review of this concept see Borgatta (1969), Rushing (1964), and Neiman and Hughes (1951).
but, also, standards by which the individual assesses his performance in the position. Although the individual may acknowledge that he is getting older, he needs to be aware of the behaviors associated with the "old" position as well as the standards by which he assesses this new position. The acquisition of these expectations, however, is problematic. The position of old does not have explicit expectations. It has been argued that the role of the aged is a "roleless role" (Burgess, 1960). The lack of continuity from earlier age related statuses has been identified as a reason for the lack of role definition and maladjustment during late life (Rosow, 1963). Indeed, it has been argued that the aged are in a state of normlessness because societal norms concerning them "... provide no set of expectations that effectively structure an older person's activities and roles and abstract his pattern of life . . ." (Rosow, 1967). Therefore, an aging individual enters the old position without a clear definition of what is expected and by what standards the performance is to be judged.

To acquire information concerning the expectations associated with the old age position, the aged individual examines the attitudes of friends or acquaintances and develops an idea of what an old person is and the appropriate behaviors for a person of an old status (Rosow, 1963; 1974). Often the opinions that are transmitted reflect societal attitudes
toward old age; many of which are stereotypic.

These stereotypic attitudes structure everyday situations of older people. Since no clearly defined normative structure is associated with old age, ambiguity surrounds the old age position. Aging persons who have defined themselves as old are in a position that has little structure. One result is that older persons have difficulty assessing their performance. Although the normative structure is vague, the societal stereotype of old age provides older persons with the structure necessary to deal with everyday situations. Certain expectations become associated with old age and may be used for self-evaluation. Nonetheless, it should be emphasized that these expectations and standards are stereotypic and do not present the aging person with a factual picture (Bengtson, 1973).

The content of the stereotype of old age is important because aged persons may evaluate themselves vis-a-vis the standards defined by it. But it is proposed in this dissertation that older persons only subscribe to the expectations and standards of the stereotype that are congruent with their own perceptions of themselves. In either case, the content of the stereotype of old is important. The question is: What are the expectations and standards associated with the old age position as defined by the stereotype of old age?

Much research has focused on the perceptions of late life; however, the attitudes of young people toward old age
have been the primary emphasis (For a review of this material, see Brubaker and Powers, 1976; McTavish, 1971; Peters, 1971). Within gerontological literature, stereotypic attitudes toward old age may be characterized as depicting the older person

... as destitute, ill, facing irreparable losses, no longer integrated into society, and no longer subject to society's controls and sanctions. Old age appears as the nadir: the end of a long decline that follows peaks that occur at early life stages in intelligence, capacity to work, income, sexual capacity, and so on. Feelings, too, are often supposed to reflect the relatively deprived status of the aged within society, so that the subjective state of older people is presumably characterized by a loss of self-esteem, a deprecatory view of their low education, a sense of dejection and despair over their losses, and anxiety about their health, finances, and death (Riley and Foner, 1968:7).

This picture of old age has led gerontological theorists to assume that the societal stereotype of old age is negative. This is a basic assumption of the recently conceptualized Social Breakdown Syndrome (Kuypers and Bengtson, 1973; Bengtson, 1973) and Rosow's (1974; 1963) theory of socialization to old age. Both approaches, further, assume that aged persons subscribe to negative perceptions of late life (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963). Thus, recent theoretical developments in gerontology are premised on the assumption that the stereotype of old age is negative and that aged persons subscribe to these negative perceptions of late life.
Recent empirical findings, however, question these assumptions. Studies which have utilized a variety of samples (i.e., young people—Bell and Stanfield, 1973a; students and practitioners—Thorson, Whatley and Hancock, 1974; children—Thomas and Yamamota, 1975; and a nationwide random sample of young and old—NCOA, 1975) have found positive attitudes toward old age suggesting that the stereotypes of old age are not all negative. These research findings suggest that positive as well as negative characteristics are associated with late life. Since findings have not conclusively demonstrated that the stereotype of old age is all negative, it is possible that gerontologists are reflecting their own domain assumptions in their theoretical constructs. Selzter and Atchley (1971) have suggested that gerontologists may be overly sensitized to the negative aspects of old age. Gerontological theorists apparently have accepted an assumption that is supported by inconclusive findings and, consequently, have limited the explanatory power of their theories. In short, the stereotypic attitudes toward old age may not be as negative as gerontologists expect, or as theorists assume.

Since the empirical findings of stereotypic attitudes toward old age and the theoretical assumptions about late life are incongruous, it appears that the concept of the stereotype of old age requires closer examination. What are the characteristics of the aged persons who subscribe to
positive elements of the stereotype of old age? How do these characteristics differ from the characteristics of older people who subscribe to negative elements of the stereotype of old age? What are the linkages of these characteristics? The identification of these characteristics will clarify the assumptions on which many theories of gerontology are based and will provide the basis for formulating explanations about late life. These explanations will, hopefully, apply to aging persons who subscribe to a negative as well as positive stereotype of old age.

Relevancy of stereotype of old age to applied gerontology

The relevancy of the stereotype of old age is not limited to theoretical gerontology. Applied gerontologists also are affected by societal stereotypic attitudes about old people. In the process of developing and implementing programs for the aged, policy-makers and practitioners may structure the programs and delivery of services in terms of stereotypic attitudes.

Many of the programs and policies directed toward the elderly are developed in the political arena. Politicians need to be aware of their own, as well as older persons', stereotypic attitudes toward old age. Senator Charles H. Percy (1974) underscored the fact that legislators may not have an accurate view of old people in our society. A
consequence of social policy based on negative stereotypic attitudes toward old age is that the requirements and procedures mandated in certain programs may threaten the dignity of the elderly (Barrett, 1972; Kahn, 1965; Kent and Matson, 1972). In fact, Barrett (1972) suggested that older persons who do not fit the expectations created by a negative perception of old age are labeled "abnormal." Older persons are characterized as abnormal because they are not included within the boundaries or categories of services provided by the programs.

Stereotypic attitudes toward old age also influence the implementation of societal programs directed toward the elderly. The attitudes of social workers, therapists and practitioners who work with the aged are important to the delivery of services. Not only will negative stereotypic attitudes affect the way practitioners view the aged but also the way the aged view themselves. Kalish (1972) noted that the attitudes of people working with the aged may have an influence on older persons' feelings about themselves. Further, practitioners may expect aged clients to conform to the negative stereotype of old age and, consequently, the delivery of services can become problematic. Pease (1974), for example, has illustrated the negative effects of a sexual stereotype of elderly men in the administration of nursing services. The nature of a nurse's services requires physical
contact with the patient. The stereotype of "old men as asexual" has led many neophyte nurses to define nursing services for old men as difficult. The difficulty arises because many old men interpret some of the nurse's physical contact as sexual and, consequently, may seek positive feedback concerning their sexual prowess. The nurse, however, reacts to the old men's gestures in terms of a "dirty old man syndrome." This provides negative feedback to the old men and threatens their self-concepts as sexual beings. It was suggested (Pease, 1974) that nurses need to realize that aged males are sexual beings and the delivery of nursing services needs to reflect this aspect of the aged client. Otherwise, the services provided may have detrimental effects on the aged male's self-concept. It appears that the delivery of services to the aged may not be providing services in terms of the needs of the aged but rather in terms of the definition provided by the negative stereotypes of old age.

In sum, the examination of the stereotype of old age is relevant to the development of social policy. The practitioners who implement policy and service delivery systems need to be familiar with their own, and the aged's, attitudes toward old age. The structure of delivery systems in terms of negative stereotypic opinions of late life may hinder the effective treatment of older persons. Linden (1957:100) suggested that the preconceptions, biases and erroneous attitudes
(or stereotypes) toward old age "... constitute barriers against effective treatment systems ..." for the aged. Knowledge of factors associated with positive and/or negative stereotypic attitudes toward old age will, hopefully, sensitize policy-makers and practitioners to the self-perceptions held by the elderly and, thereby improve treatment systems for the aged.

Summary

In our contemporary society, many beliefs are associated with old age. Some of these societal beliefs accurately portray the state of old age while others are erroneous conceptions of late life. For gerontologists, the stereotype of old age refers to society's erroneous attitudes, opinions or beliefs that are associated with the old age position. Even though the stereotype of old age provides an inaccurate conception of old age status, it structures the activities and roles in late life. Gerontologists have argued that there is no precisely defined normative structure associated with the old age role. In short, the aged are in a state of normlessness. The stereotype of old age, however, provides one definition of late life and older persons are able to structure their situations in terms of this definition.

The importance of the stereotype of old age concept is illustrated by the assumptions of gerontological theorists.
It has been assumed that the societal stereotype of old age is negative, and further, that aged persons subscribe to negative perceptions of late life. Examination of empirical findings of studies focusing on attitudes toward old age question these assumptions. The findings of research on stereotypic beliefs about old age suggest that young and old people have positive as well as negative perceptions of late life. Thus, the applicability of the assumptions of gerontological theory appears to be limited.

This dissertation seeks to examine correlates of the stereotype of old age because of the inconsistency between current theories and research findings in gerontology. Several concepts—objective indicators of old age, self-definition as old and self-concept—have been related to stereotypic attitudes. In this dissertation, examination of these concepts is proposed to more fully understand theories about late life. Further, knowledge of factors associated with stereotypic attitudes toward old age is relevant to the development of social policy for the aged and delivery of services to the elderly.
CHAPTER II: THEORETICAL ORIENTATION

Introduction

Within this chapter, the theoretical conceptualization of this dissertation is presented. To demonstrate the importance of the stereotype of old age in gerontological literature, two theoretical approaches are discussed. Although other approaches (Cumming and Henry, 1961; Gubrium, 1973) note a relationship between stereotypic attitudes toward old age and adaptation to late life, the Kuypers and Bengtson (1973; Bengtson, 1973) Social Breakdown Model and Rosow's (1974) theory of socialization of older persons are discussed because both are recent theoretical developments in the social psychology of aging. Further, Kuypers and Bengtson and Rosow explicitly build their theoretical conceptualizations on an assumed negative stereotype of old age. Since these two approaches are recent developments and have the potential of becoming major theoretical orientations in gerontology, it is important to examine the assumptions on which they are based.

First, the assumption that stereotypic attitudes toward old age are negative is examined. Studies utilizing young and middle aged samples are discussed. If this assumption is valid, few positive attitudes toward old age should be found in these studies. If, on the other hand, studies based on young and middle aged samples reveal a number of positive
attitudes toward old age, the assumption that stereotypic attitudes toward old age are negative is questionable. Second, studies utilizing aged samples are reviewed to examine the assumption that old people subscribe to negative stereotypic attitudes toward old age. If this assumption is valid, few positive attitudes toward old age should be observed in aged samples.

In this dissertation, model development is proposed in order to determine the factors associated with the stereotype of old age. The dependent variable is the stereotype of old age (positive or negative) and the independent variables are objective indicators of old age, self-definition as old and self-concept. Each of these concepts is suggested in the Kuypers and Bengtson and Rosow approaches. A review of the literature on self-definition as old and self-concept is presented. These two concepts are examined in terms of older persons. Finally, hypotheses and a theoretical model of the linkages of these concepts are presented.

Explication of two theoretical approaches

The first theoretical orientation to be examined is the Social Breakdown Syndrome formulated by Kuypers and Bengtson (1973; Bengtson, 1973). This approach is grounded in labeling theory. Labeling theory assumes that the definition of the situation affects the way an individual behaves in the situation and that the definition of the situation is based on the
way others define the situation. In other words, the labels attached to situations affect the way an individual behaves in these situations. In the aging area, labeling theorists expect old people to behave in accordance with behaviors supposedly associated with the label "old."

The concept of the Social Breakdown Syndrome was developed by Gruenberg and Zusman (1964; Zusman, 1966) and applied to the development of mental illness; specifically, schizophrenia. Their approach emphasized that mental disorders are related to social-environmental factors. Gruenberg and Zusman outlined seven steps of social breakdown to illustrate the dynamic relationship between an individual and his environment: (1) precondition of susceptibility; (2) dependence on external labeling; (3) social labeling as incompetent; (4) induction into a sick, dependent role; (5) learning of "skills" appropriate to the new dependent role; (6) atrophy of previous skills; and (7) identification and self-labeling as "sick" or inadequate. Kuypers and Bengtson based their approach to aging on the Gruenberg and Zusman model, although the Kuypers and Bengtson orientation is applied to "... normal aged individuals in a society that presents an environment conducive to negative labeling" (Kuypers and Bengtson, 1973:187).

The first step of the Social Breakdown Syndrome is the precondition of susceptibility (Step 1). "The social breakdown
syndrome will occur only in persons with weakened or deficient inner standards regarding interpersonal relationships, rules of behavior, social obligations of themselves and others, and social roles" (Zusman, 1966:388). Kuypers and Bengtson (1973:188) argued that older persons are susceptible to social breakdown because "... of the confusion, vagueness, or lack of specificity of standards for appropriate behavior ... ."

In other words, aged persons do not have a clear definition of their role because the norms associated with the role of old age are not specific. This void in the normative structure provides the environmental condition within which the social breakdown syndrome may be initiated.

In the second step, "... the person rendered susceptible ... becomes dependent on current stimuli for cues regarding appropriate behavior, determining what is right and wrong, true and false, and judging which impulses to obey and which to inhibit" (Zusman, 1966:389). The older person becomes dependent on the definitions of other people because the normative structure does not provide specified modes of conduct that may be internalized. Therefore, a critical factor is the nature of the definitions others' provide to the older person (Kuypers and Bengtson, 1973).

In the third step, the individual is socially labeled as incompetent. "The social environment defines the person as incompetent, dangerous, incapable of self-control. ... The
key to understanding the relationship between the second and third stages is the fact that a person who has lost confidence in his own judgments, and thus becomes excessively dependent on cues in his immediate environment, is told—directly or indirectly—that he is even more incompetent and dangerous than he had thought previously" (Zusman, 1966:389). The cues and definitions available within the social environment are crucial in the process of socially labeling the aged person. Stereotypic beliefs about old age are a source of these definitions for the elderly person.

The elderly have the additional disadvantage of having vague or ill defined labels. That is, negatively-toned stereotypes associated with the loss of 'productive' roles may become accepted by the individual in describing himself . . . . The elderly person is informed—directly or indirectly—of his uselessness, obsolescence, low value, inadequacy, and incompetence. To the degree that these messages are conveyed and to the degree that the elderly person--rendered susceptible--adopts them as true for the self, a cycle of events is established which leads to a generalized self-view of incompetence, uselessness, and worthlessness (Kuypers and Bengtson, 1973:189).

At this point in their argument, Kuypers and Bengtson omit several steps outlined by Zusman. The subscription to negative attitudes toward old age and acceptance of these attitudes as a "generalized self-view," occur after the individual has progressed through steps four, five and six. In step four, the susceptible person is initiated into a sick, dependent role. For example, for an elderly person, the act
of retirement or loss of a spouse may mark the induction into a dependent role. The aged individual, then, has vacated a relatively independent and productive role and entered a dependent role. As is common with anyone who has embarked on a new role, "skills" and behaviors appropriate for this role need to be learned (Step 5). For example, the retired person no longer occupies his time with work activities and must acquire new behaviors to occupy his time. When no longer employed, previous skills degenerate (Step 6). Finally, the elderly will identify with, or accept, the negative label of old age as a self-definition (Step 7). A graphic depiction of the Kuypers and Bengtson (1973) application of the Social Breakdown Syndrome is presented in Appendix A.

The Kuypers and Bengtson argument requires close examination. First, they suggest that the extant social label attached to older persons is negative because, supposedly, societal beliefs about old age are negative. Specifically, Kuypers and Bengtson suggest that the societal view of the aged is that old people are "useless, obsolete, worthless, inadequate, and incompetent" (Kuypers and Bengtson, 1973:189). It has yet to be determined whether this is a valid assumption.

A second assumption of the Kuypers and Bengtson argument is that the elderly subscribe to these negative definitions of old age, and further, that they accept these definitions as the definitions of themselves (Kuypers and Bengtson, 1973;
Bengtson, 1973). Based on this, Kuypers and Bengtson argued that older persons have negative perceptions of old age and develop negative conceptions of self. In this way, the cycle of increasing incompetence is maintained.

The Social Breakdown Syndrome may be summarized as follows:

The cycle of interaction is created in which a [aged] person, rendered susceptible, is ascribed negative value, is encouraged to develop skills and behavior in concert with this value, and finally incorporates the negative value as true for the self. This, in turn, leads to further susceptibility, dependence, low self-assessment, and the atrophy of coping skills (Kuypers and Bengtson, 1973:190).

A second theoretical orientation to "normal" aging is Rosow's (1974; 1963) discussion of adjustment to old age and socialization processes associated with role transitions. Similar to Kuypers and Bengtson, Rosow viewed the lack of cultural norms and role definitions as problematic to the adjustment of older persons (Rosow, 1963). In fact, old age is characterized as a "roleless role."

... the norms associated with old age provide almost no expectations that effectively structure an older person's activities and general pattern of life. His adjustment in this respect results essentially from his individual decisions and choices, from personal definitions of what is appropriate and desirable. There are no significant expectations and roles for him. In this sense, an older person's life is basically 'roleless,' unstructured by the society, and conspicuously lacking in norms ... (Rosow, 1974:69).
The degree of positive adjustment, according to Rosow, is related to the presence of normative structure and role definition and to the degree of continuity between two periods of a life pattern (Rosow, 1963). From this perspective, entrance into an old age status is viewed as a role transition. A role transition may be continuous (i.e., the preceding role positively prepares the incumbent for the successive role) or discontinuous (i.e., the preceding role negatively prepares the incumbent for the successive role). The transition from middle age to old is viewed as a discontinuous role (Rosow, 1974; 1963). Indeed, old age is seen as a time of decremental change and older persons are not prepared to deal with these changes, thus, negatively affecting adjustment and self-image (Rosow, 1974).

Rosow (1974) contended that the lack of normative structure associated with old age and the negative stereotypic attitudes toward old age are crucial factors to aging persons. Stereotypic attitudes toward old age are assumed to be negative and older persons are seen as subscribing to these negative beliefs (Rosow, 1974). Old people

... are commonly viewed in stereotypes, as other devalued minority groups. Thus, they are seen more as representatives of an age group than as individuals, and various negative characteristics are attributed to them. Significantly, these images of the old are not confined to younger people alone, but are also widely shared by the aged themselves. Old people depreciate other aged persons, and in the same terms (Rosow, 1974:8).
Although negative attitudes may be directed to other adult roles, these negative stereotypic beliefs about old age are crucial because of the conspicuous absence of socialization to the old age role. Thus, an older person, upon entrance into the old age position, does not have the benefit of socialization into this position or the luxury of a well-defined normative structure associated with this position. Negative stereotypes of old age, then, become crucial as the older person seeks to define and evaluate his performance as an older person.

It is apparent that both Kuypers and Bengtson's and Rosow's arguments have similar assumptions: (1) stereotypic attitudes toward old age are negative and (2) old persons subscribe to negative societal definitions about old age. The following summary depicts the dynamic aspect of the aging process implicit in gerontological literature as demonstrated by Kuypers and Bengtson and Rosow:

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5 For Rosow the old age role is unique from other adult roles because "... unlike earlier status changes in American life, people are not effectively socialized to old age" (Rosow, 1974:xii). More precisely, role transition into old age differs from earlier role transitions because (1) no clear passage-les rites de passage-into old age are evident; (2) entrance into old age involves social loss rather than gain; and (3) a lack of role continuity marks this role change (i.e., "no preparation for such role losses and no substitution of new norms, responsibilities and rights") (Rosow, 1974:27).
As an individual chronologically ages, especially during the sixth decade of life, the reality of old age becomes apparent. A person's self-definition as old, however, is not based solely on chronological age (Neugarten and Moore, 1968), although there may be some relationship between chronological age and self-definition. Certain events occur in a person's life space which underscore the fact that one is embarking on old age and, reluctantly, a self-definition as old is acknowledged (Rosow, 1974, 1967; Preston and Gudiksen, 1966; Zola, 1962). Extensive research has identified the events or conditions that encourage a person to accept the old age status as applicable to themselves. Retirement, decline in health, loss of income, death of spouse, institutionalization and loss of independence have been cited as indicators of old age (Atchley, 1972; Cavan, 1962; Mason, 1954a,b; Peters, 1971; Preston, 1968; Preston and Gudiksen, 1966; Rosow, 1974, 1963, 1962). Once a person experiences a number of these events and can no longer deny that he is old, the acquisition of a normative definition of this new age status becomes problematic (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963). Within contemporary society, stereotypic beliefs about old age are negative and structure the situation. The older person subscribes to these negative stereotypic beliefs about old age which in turn affects subsequent behavior of the aged individual. One consequence of the acceptance of the negative stereotype of old age is a loss of self-esteem or a negative self-concept (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963; Bortner, 1967; Neugarten, 1973).

Several concepts have been employed to represent the interrelationships between the individual and processes of aging as suggested in the above summary: objective indicators of old age, self-definition as old, self-concept and stereotype of old age. Objective indicators of old age refer to events an older individual experiences that signify to others and/or himself that he is old. Voluntary or involuntary retirement
is an event that indicates movement into old age (Rosow, 1974, 1963). Since the federal Social Security program specifies retirement (generally at age 65) as one criterion for collecting benefits, retirement has been used to distinguish "old" age from "middle" age (Neugarten and Moore, 1968). Concomitant with retirement is a decline in income as well as a reduction in the number of hours spent in work-related activities. The loss of a spouse and resulting decrease in family activities for older persons also have been viewed as indicators of old age (Rosow, 1974). Finally, poor health is indicative of old age and may result in institutionalization (Rosow, 1974). The fact that a person has experienced one or more of these events provides indicators or signals that old age is very near or has already arrived (Phillips, 1957). It cannot be assumed, however, that an older person who has experienced one or more of these events defines himself as old.

The older person's self-perception of his age status (middle aged, elderly, or old) is a second crucial concept. Self-definition as old refers to the self-evaluation of an individual's age relative to other age categories (Peters, 1971). Numerous studies have focused on this concept and its importance to understanding the social psychological aspects of aging cannot be underestimated (For a review of these studies see Peters, 1971).
The third concept, self-concept is "... the attitude and evaluation an individual has concerning himself ..." (Bengtson, 1973:35). Self-concept refers to the qualities, attitudes or evaluation a person attributes to himself as a result of the process of viewing the "self as an object" (Bengtson, 1973; Mead, 1934; Kinch, 1963; Stone and Faberman, 1970). The self-concept enables individuals to guide and direct their behavior with other people (Kinch, 1963; Meltzer, 1972). Although Kuypers and Bengtson and Rosow emphasized a negative self-concept, the older person may perceive himself in a positive manner. This, however, is an empirical issue and the direction of the older person's self-concept cannot be assumed.

The last concept examined is the stereotype of old age. In accord with Lippmann, Bengtson defined stereotype as

... widely shared expectancies, without specific sanctions regarding the behavior or characteristics of a particular category of people ... . The distinctive thing about such expectations is that they do not acknowledge individual differences among those who are members of that social category. Furthermore, these inaccurate overgeneralizations, often acquired on the basis of limited contact with the group, are usually (but not exclusively) negative, associated with some sort of stigma (Bengtson, 1973:27).

The stereotype of old age refers to erroneous attitudes, beliefs, opinions or expectations associated with the social category of old.
In gerontological literature, Kuypers and Bengtson and Rosow are not the only theorists to use these four concepts to explain social psychological aspects of aging. For example, Gubrium (1973:162) postulated that "... negative public attitudes toward the aged lead to the development of age-awareness among the elderly with subsequent negative self-conceptions . . . ." Generally, it has been argued that a person experiencing a normal aging process, as characterized in gerontological literature, experiences events (objective indicators of old age) that signify entrance into the old age position, reluctantly defines himself as old (self-definition as old), subscribes to negative stereotypic attitudes toward old age (negative stereotype of old age) and, consequently, acquires a negative self-concept. The relationships of these concepts are represented in the following diagram:

![Diagram](image)

Figure 2.1. Model of assumed relationships
Although these concepts are widely used in gerontological literature, it is important to realize that the relationships presented in Figure 2.1 are based on theoretical assumptions. Therefore, the validity of these relationships, as assumed, needs to be carefully examined in terms of the empirical findings on stereotypes of old age. Are stereotypic attitudes toward old age negative? Do positive attitudes toward old age exist? Do older people subscribe to the positive or negative attitudes toward old age? If empirical studies reveal few positive stereotypic attitudes toward old age and if old people subscribe to negative stereotypic attitudes toward old age, then these theoretical assumptions have support. If, on the other hand, empirical studies provide contradictory evidence, these assumptions are questionable.

Review of research on the stereotype of old age: Young and middle-aged samples

In this review, attention is on the assumption that stereotypic attitudes toward old age are negative. Studies of the stereotype of old age and the characteristics of the samples used in these studies are presented in Table 2.1. The size of the total sample, age characteristics of the sample and description of the sample (when available) also are presented.
Table 2.1. Samples of stereotype of old studies differentiated by age

<table>
<thead>
<tr>
<th>Study</th>
<th>Total N</th>
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<th>College</th>
<th>Middle-aged</th>
<th>Old</th>
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<td>Bekker &amp; Taylor, 1966</td>
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<tr>
<td>Bell and Stanfield, 1973a</td>
<td>280</td>
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<td>376</td>
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<td>50</td>
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<tr>
<td>Carp, 1967a</td>
<td>115</td>
<td></td>
<td></td>
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<td>115</td>
<td>Most considered themselves &quot;middle-aged&quot; but 72 was the average age.</td>
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<td>1967b</td>
<td>115</td>
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<td>115</td>
<td>Most considered themselves &quot;middle-aged&quot; but 72 was the average age.</td>
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<tr>
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<td>Crouch, 1972</td>
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<td>Defined as 50 years of age or older.</td>
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<td>Golde &amp; Kogan, 1959</td>
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<td>Kastenbaum &amp; Durkee, 1964a</td>
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<td>Institutionalized juvenile delinquents (n = 102). Opportune sample; mean age of 42 years; age range 13-55.</td>
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<td>372</td>
<td>Noninstitutionalized volunteers 60% professional or managerial status; average education = 13.7 years.</td>
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<td>147</td>
<td>147</td>
<td>Mostly institutionalized aged</td>
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<td>Tuckman and Lorge, 1952b</td>
<td>147</td>
<td>147</td>
<td>Mostly institutionalized aged</td>
<td></td>
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<tr>
<td>Tuckman and Lorge, 1952c</td>
<td>89</td>
<td>89</td>
<td>Mostly institutionalized aged</td>
<td></td>
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</tr>
<tr>
<td>Tuckman and Lorge, 1952d</td>
<td>88</td>
<td>88</td>
<td>Institutionalized aged, n = 48; apartment dwelling (could not function independently) n = 20</td>
<td></td>
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</tr>
<tr>
<td>Tuckman, Lorge and Spooner, 1953</td>
<td>100</td>
<td>50</td>
<td>Institutionalized aged, n = 48; apartment dwelling (could not function independently) n = 19</td>
<td></td>
<td></td>
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<tr>
<td>Weinberger and Millham, 1975</td>
<td>607</td>
<td>607</td>
<td>Parents and students paired for analysis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yomans, 1971</td>
<td>838</td>
<td>364</td>
<td>Rural/urban sample</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Yomans, 1968</td>
<td>397</td>
<td>397</td>
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</tbody>
</table>
An examination of Table 2.1 indicates that samples of children frequently have been interviewed to determine the time at which stereotypic attitudes toward late life are formed. In this research, both positive and negative attitudes were found. Hickey and Kalish (1968) observed that negative beliefs about old age develop very early in life. Similarly, Ahammer and Baltes (1972) reported stereotypic perceptions of old age in children and adolescents. Another study of adolescents (Thomas and Yamamoto, 1975) found positive attitudes toward old people and little support for the existence of a general, negative old age stereotype. Social class, however, may be related to a child's views of late life. Data gathered from 208 third grade children suggest that more favorable perceptions of old age are associated with higher social status (Hickey, Hickey and Kalish, 1968). Thus, the question of when stereotypic beliefs about old age are formed has not been conclusively answered, but it is evident that misconceptions of old age begin at an early age and further that stereotypic perceptions may be either positive or negative.

A large proportion of studies on stereotypes of old age have utilized young or early adult samples. In fact, many studies that found negative attitudes toward old age used samples of college students. Studies of graduate students revealed negative stereotypic attitudes toward old age in
areas of economic security, health and social interaction (Tuckman, 1965; Tuckman and Lorge, 1952a,b, 1953a, 1956). Similarly, Naus (1973), Rosencrantz and McNevin (1969), Lane (1964) and Kastenbaum and Durkee (1964a) found negative stereotypic attitudes toward old age among college students. In general, it seems that younger and early adults hold negative attitudes toward old age.

The attitudes of college aged adult samples also have been examined to determine various correlates of the stereotype of old age. A study (Tuckman and Lorge, 1953c) of college students and their parents found that a negative stereotype of old was related to an unfavorable view of one's personal future adjustment to old age. Further, attitudes toward old age appear to be related to the contact younger people have with older persons. Association with great-grandparents and direct contact with aged persons have been related to favorable perceptions of late life (Bekker and Taylor, 1966; Stinnett and Montgomery, 1968; Tuckman and Lorge, 1958a). It appears that there is a relationship between perceptions of late life and familiarity with aged persons, although contradictory findings have been reported by Drake (1957). A recent study (Weinberger and Millham, 1975) reported favorable perceptions of old age from the respondents who personalized the older individual in terms of their family unit. This personalization of the old person stimulus was seen as a
result of the respondent's contact with aged family members. Therefore, there appears to be a relationship between attitudes toward late life and contact with the elderly.

Findings from studies utilizing middle-aged samples suggest that this age group subscribes to both negative and positive attitudes toward old age. Studies of adults have demonstrated negative attitudes toward employed elderly (Tuckman and Lorge, 1953c; Tuckman, Lorge and Spooner, 1953). Youmans (1971; 1968) found that middle-aged persons negatively characterized old age in areas of health, money and free time although a majority expected to be happy in their own old age. Kogan and Wallach (1961), however, suggested that middle-aged people have a more positive conception of old age than do younger persons. Finally, both negative and positive attitudes toward old age were evidenced in a sample of urban, middle-aged adults (Neugarten and Garron, 1959). Thus, it appears that middle-aged persons hold favorable and unfavorable attitudes toward the elderly.

Two observations concerning the methodology of these studies can be made. First, a majority of research on the stereotype of old age is based on a single research technique—the survey approach. In fact, only four studies utilized an alternative data gathering technique. Two studies used an experimental design (Bell and Stanfield, 1973a, b), while two employed content analysis (Seltzer and Atchley, 1971; Palmore,
1971). The Bell and Stanfield (1973a, b) experimental design studies suggested that younger people may, in fact, have positive attitudes toward old age. Although Bell and Stanfield's findings were not statistically significant, the direction of the relationships questions whether stereotypic attitudes are all negative. Studies utilizing content analysis have found both positive and negative attitudes toward old age. In an examination of children's literature from 1870-1960, statements reflecting positive attitudes toward old age decreased with time but the number of negative statements about old age were not as great as expected (Seltzer and Atchley, 1971). Further, Palmore (1971) examined the content of jokes and concluded that a majority reflect a negative view of aging but this view applied primarily to older women.\(^6\) The Seltzer and Atchley and Palmore studies, like the survey based analyses, found positive and negative stereotypic beliefs about old age.

A second weakness of the studies on the stereotype of old age is that a large portion of current research is based on availability samples (i.e., volunteers, students, etc.). Only one study is based on a randomly selected nationwide sample of young and old (NCOA, 1975). While positive attitudes were

\(^6\) Further, Palmore (1971) suggested that a double standard may exist in attitudes toward old age. That is, men may be viewed more positively than women.
reported in the NCOA study, younger people viewed old age more negatively than older people.

Thus, research focusing on the stereotype of old age does not support the assumption that stereotypic attitudes toward old age are not only negative. Research, instead, has demonstrated that younger persons in our society view old age as positive and negative. Yet numerous theoretical and policy essays have focused primarily on negative stereotypic attitudes (Barron, 1953; Bennett, 1970; Bennett and Eckman, 1973; Birren, 1964; Ginzberg, 1952; Gubrium, 1973; Linden, 1957; Kalish, 1975; Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963, 1962; Slater, 1964, 1963; Harsanyi, 1970). Since the societal stereotype of old age includes a number of positive perceptions, the applicability of theories premised on the assumption of negative stereotypic attitudes is limited. The lack of support for the first assumption (stereotypic attitudes toward old age are negative) does not directly contradict the second (old persons subscribe to negative societal definitions of old age). Support for this assumption is determined by an examination of research on old people's attitudes toward old age. Studies, therefore, which have utilized an aged sample or subsample need to be reviewed.

Review of research on the stereotype of old age: Aged samples

Less than half of the studies on the stereotype of old age presented in Table 2.1 interviewed aged persons. More
importantly, many of the older persons interviewed were institutionalized and/or unable to function independently. In samples of institutionalized and/or dependent aged, negative attitudes toward old age have been associated with greater chronological age (Tuckman and Lorge, 1953b), an inability to function independently in the community (Tuckman and Lorge, 1953c, 1952c,d; Mason, 1954a,b), a greater number of symptoms of old age (Tuckman and Lorge, 1958b; Tuckman and Lavell, 1957) and social class (Preston and Gudiksen, 1966; Preston, 1968). Not all studies of institutionalized aged, however, found negative stereotypes of old age. For example, Kastenbaum and Durkee (1964b) reported that institutionalized elderly do not subscribe to a negative stereotype of old age. Thus, institutionalized, dependent aged appear to have favorable and unfavorable stereotypic beliefs about old age.

Only thirteen studies interviewed noninstitutionalized, independent aged. The characteristics of the aged sample were not defined in one of these studies (Tuckman and Lorge, 1958a). A number of studies focused primarily on methodological issues and were not directly concerned with the direction of the stereotypic attitudes (Carp, 1967a,b; Kogan and Shelton,
Several other studies (Ahammer, 1971; Ahammer and Baltes, 1972) primarily focused on personality dimensions of older persons and measures of stereotypes about late life were not reported. In six studies that reported the direction of stereotypic attitudes, both positive and negative beliefs about old age were found. For example, in a study of independent aged, older people revealed negative stereotypic attitudes while positive or at least ambivalent attitudes toward old age were found in other aged samples (Aisenberg, 1964; Bell and Stanfield, 1973b; Crouch, 1972; NCOA, 1975; Kogan, 1961a; Youmans, 1971). These studies suggest that noninstitutionalized independent aged hold favorable and unfavorable perceptions of late life.

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7Carp (1967a,b) discussed the scoring and applicability of sentence completion tests as measures of the stereotype of old age. Kogan (1961a,b) and Kogan and Shelton (1962a,b) developed a scale to measure stereotypic attitudes toward old people. In another methodological study, Silverman (1966) examined Kogan's "Old People Scale" in terms of social desirability.

8Aged samples have also been utilized to determine perceptions of events that symbolize passage into old age status as another measure of attitudes toward old age. One such event is retirement. In a recent review of perceptions of retirement, Friedmann and Orbach (1974) concluded that most retired people do not view retirement negatively. Rather, the aged appear to adjust to, and are satisfied with, retirement. Other data suggest that in some situations old people may define old age as desirable. Kaplin and Pokorny (1970) and Miller (1965) reported that some old people welcome old age status, and subsequently, bolster their self-evaluations as a result of passage into old age. Thus, older persons' perceptions of late life symbols do not appear to be congruent with negative stereotypic beliefs about these symbols. This suggests that some older people do not subscribe to the negative stereotype of old age.
Therefore, empirical evidence does not support the assumption that old persons subscribe to only a negative stereotype of old age. While institutionalized, dependent aged have predominantly negative opinions of old age, physically and financially independent older people often subscribe to positive or at least ambivalent attitudes toward old. It, then, is misleading to assume that the "normal" aged subscribe to only negative stereotypic attitudes toward old age. It may be that social gerontologists expect negative stereotypic attitudes, and consequently, find negative stereotypic attitudes. In other words, the interpretation of research may be biased by the researchers' and gerontological theorists' domain assumptions. For example, although none of Lane's (1964) respondents revealed very unfavorable attitudes toward old age and instead were favorable, she concluded that this "neutralism" toward the elderly implied a climate of "tolerance" rather than acceptance of the aged.

In summary, research on attitudes toward old age has not conclusively supported the two assumptions of the Kuypers and Bengtson and Rosow approaches: (1) that stereotypic attitudes toward old age are negative and (2) old people subscribe to negative stereotypic beliefs about old age. Both negative and positive stereotypes of old age have been observed in the research and older people subscribe to both negative and positive attitudes toward old age. Therefore, the two assumptions
do not agree with the evidence of empirical research on perception of late life. Since an incongruency exists between theoretical assumptions and empirical research, a closer examination of the empirical referent of stereotype of old age is needed. Further, theoretical assumptions need to include positive and negative attitudes in their characterizations of stereotypic attitudes toward old age.

Review of research on self-definition as old and self-concept

Theoretical approaches premised on a negative stereotype of old age seek to explain the dynamics of "normal" aging. It appears that Kuypers and Bengtson and Rosow include older persons who subscribe to negative stereotypic attitudes toward old age in the "normal" aging category and ignore the older people who have positive perceptions of late life. Knowledge is needed concerning the factors associated with positive, as well as negative, perceptions of late life held by older persons. This requires a close examination of the stereotype of old age. In this dissertation, it is proposed that the development of a data based model of the relationships of the concepts suggested by Kuypers and Bengtson and Rosow--objective indicators of old age, self-definition as old, self-concept and stereotype of old age--is a step toward providing a more complete understanding of the social psychological aspect of aging. The purpose of the model is to
determine the relationship of objective indicators of old age, self-definition as old and self-concept to stereotypic attitudes toward old age among older people. In this model, the stereotype of old age is viewed as a continuous variable. Theoretically, an older individual can subscribe to positive or negative stereotypic attitudes toward late life. Two other social psychological concepts included in the Kuypers and Bengtson and Rosow approaches will be examined in this dissertation as independent variables—self-definition as old and self-concept. These concepts are included because it is suggested that self-definition as old and self-concept are crucial social psychological concepts in the explanation of normal aging (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1962). To facilitate the development of a model focusing on the stereotype of old age that includes self-definition as old and self-concept as independent variables, a review of the literature on these two concepts is needed.

Self-definition as old Within gerontological literature the perception of one's age status has been a crucial concept. Age identification "... is an indication as to how a person conceptualizes himself in relation to the rest of society, as well as an indication of the more personal positioning of himself in his life cycle" (Guptill, 1969:96). Within gerontological research it has been suggested that there are no clear cultural definitions of the chronological
age that demarcate "old" from "elderly" or "middle-aged" (Tuckman and Lorge, 1953b,c). Although chronological age is not an accurate indicator of old, several studies suggest that old age is generally believed to begin after age 60. Tuckman and Lorge (1953b,c) and Kuhlen (1959) reported that a majority of young and old respondents defined old age as beginning between 60 and 65 years. Old age, however, appears to begin earlier for women than for men. Neugarten, Moore and Lowe (1965) and Neugarten (1968) found that middle class expectations for being an "old man" were between 65 and 75 years of age while for women, the appropriate age range was between 60 and 75 years. Further, Cameron (1969) reported that 65 to 80 years of age was designated as old and ages more than 80 years were defined as aged. An individual who has attained 65 or 70 years of age, however, may not define himself as old. Therefore, to ascertain whether individuals define themselves as middle aged, elderly or old, researchers have asked persons to indicate their own definition of their age status.

Generally, research indicates that aged persons deny or reject the definition of being elderly or old and, further, seek to disassociate themselves from the older categories even though their chronological age may be beyond that expected for middle-aged individuals (Peters, 1971; Riley and Foner, 1968; Bultena and Powers, 1975; Bultena, Powers, Falkman and Frederick, 1971; Masserman, 1957). Although Zola
(1962) found a reluctance to view oneself as elderly and chronological age was not associated with an old age self-definition, "felt" age (the age a person feels) was strongly related to a self-definition as elderly. This suggests that a self-definition as old may be related to an individual's interpretation of his situation. It, therefore, is important to examine the relationships between several indicators of old age and self-definition as old.

In studies of institutionalized dependent aged, certain objective indicators have been associated with an old age self-definition. Tuckman and Lavell (1957) found that indigent older persons classified themselves as "old" and "not old." The self-defined old persons generally were in poorer physical and psychological health than were persons who considered themselves not old. Similarly, persons who classified themselves as old reported more symptoms of poor health as compared to the self-classified young (Tuckman and Lorge, 1954). Low social involvement with other older people (Blau, 1956; Bell, 1967; Rosow, 1967) and low concentration of elderly (Rosenberg, 1970; Rosow, 1967) also have been related to self-definition as old. Bell (1967) suggested that high social involvement, particularly with family, of institutionalized aged is related to the postponement of a self-definition as old. Blau's (1956) data from a noninstitutionalized sample support these findings. Older persons who
interact in friendship groups are less likely to classify themselves as old than are persons who do not participate in such groups (Blau, 1956). Finally, widowhood has been related to a self-definition as old. Tuckman and Lorge (1954) reported that a greater proportion of the self-defined old people were widowed or single. Similarly, Phillips (1957) found that role changes, such as widowhood and retirement, appear to accumulate and relate to a self-definition as old. Thus, self-definition as old is related to certain indicators of old age—health, marital status, employment situation and social participation.

In sum, there appears to be no culturally defined chronological age at which one becomes "old." In fact, a number of studies have reported that older persons reject or deny a self-definition as old. Several studies have examined both objective indicators of old age and self-definition as old and suggest that certain indicators of old are related to a feeling of old age. Older people associate problematic health, retirement, widowhood, and low social participation with a definition of old. It, therefore, appears that objective indicators of old age are related to a self-definition as old. In light of this, it is hypothesized that:

G.H.1 Objective indicators of old age are positively related to self-definition as old.

That is, if an individual has experienced objective indicators of old age (i.e., retirement, widowhood, etc.), then a self-
definition as old is expected. The specific objective indicators used to test this relationship are retirement, widowhood, problematic health and receipt of Social Security benefits.

**Self-concept** Social psychologists and gerontologists have viewed the older person's self-concept as responsive to the social environment (Meltzer, 1972; Sargent and Williams, 1966; Kuypers and Bengtson, 1973; Bengtson, 1973). In the process of interpreting the social milieu, the self-concept enables an older person to guide and direct his behavior with others (Kinch, 1963). In this way, the self-concept contributes to an older person's adaptation to the experiences of the aging process. Thus, as the elderly experience social losses and as their social structure changes (loss of work, spouse) the self-concept enables them to evaluate these losses and changes.

The self-concept, also, helps an older person develop attitudes toward the losses and changes experienced in late life. Watson (1954) suggested that a relationship may exist between a person's self-definition as old and his self-concept. The self-concept is seen as helping the older person evaluate his social losses and change in later life and develop attitudes associated with old age.

Since the self-concept is an important factor in the way a person perceives the social environment, the direction--
positive or negative—of the self-concept is crucial. In an older person's process of interpreting changes in late life, the direction of the self-concept is important because an individual selects attitudes and beliefs that are congruent with his conception of self and filters out attitudes and beliefs that are incongruent with the self-concept (Secord and Backman, 1974). Thus, it is expected that an older person who has a positive self-concept will select, or subscribe to, positive attitudes associated with his age status. Similarly, older persons with a negative concept of self are expected to select, or subscribe to, negative perceptions of their age status. This, of course, contradicts the assumptions of those (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1962; Gubrium, 1973) who suggest that a negative self-concept is a consequence of both a self-definition as old and a subscription to negative stereotypic attitudes toward old age.

In gerontological literature, the relationship between a self-definition as old and self-concept has been examined. Although positive and negative self-concepts have been observed in older people, a number of studies suggest that an old age self-definition is related to a negative self-evaluation. Projective tests of age identification and self-concept indicate that old age and negative self-attitudes are associated (Giedt and Lehner, 1951; Lehner and Gunderson, 1953; Lehner and Silver, 1948). Wallach and Kogan's (1961)
examination of decision making suggested that "less confidence" in one's judgment is associated with old age, especially for males. A lack of confidence in one's judgments and decision making ability may be a consequence of a negative self-concept. Mason (1954a,b) found that institutionalized older persons had a negative self-concept. In the same study, however, Mason noted a significant amount of variability (positive and negative) in older persons' conceptions of self. In a review of the self-definition as old and self-concept literature, Peters (1971) concluded that a self-definition of old appears to be related to a negative self-concept although a great deal of individual variation between these concepts has been found.

Various other studies have examined the self-concept and personal adjustment of older persons. Neugarten (1964) and Atchley, (1972, 1969) observed that a person ages, his self-concept becomes more stable and less dependent on external influences. A stress toward consistency of self-evaluations and life situations was suggested. In other words, a person's self-concept appears to stabilize with age and life situations are interpreted in terms of the direction of the self-concept (Neugarten and Associates, 1964; Atchley, 1972, 1969). Although the direction of the self-concept of older persons was not reported, other studies have examined the interrelationships between morale, role loss, achievement and the conception of self in old age (Back, 1974; Back and Gergen,
Examination of the direction of older persons' self-evaluations and personal adjustment to the social situation have been conducted. Although no relationship between self-concept and institutionalization was reported in several studies (Lepkowski, 1956; Pan, 1951; Scott, 1955; Tuckman, Lorge and Zeman, 1961), other investigations suggested that a negative self-concept is related to institutionalization (Laverty, 1950; Mason, 1954a,b; Pollack, Karp, Kahn and Goldfarb, 1962). Anderson (1967), however, examined the relationship between these concepts and concluded that a negative self-concept is not associated with institutionalization per se. Rather, it appears that the quantity of social interaction and self-concept are related; that is, low interaction is associated with low self-esteem. Further, Davis (1962) provided additional support for the interaction and self-concept relationship, but it may be the quality, and not quantity, of social interaction that is crucial in the development of a positive self-concept. The older persons who interacted with "preferred" persons and received favorable reactions from these persons indicated more positive self-concepts than those who received less favorable reactions from their peers (Davis, 1962). Although the findings appear to be inconclusive, a relationship between self-concept and institutionalization is evident. More importantly, older persons
revealed both negative and positive self-conceptions.

In an analysis of the self-concept over the life cycle, it was revealed that a person's self-evaluation becomes more positive with age (Grant, 1969). Men tended to hold a more positive self-evaluation than women. An older person's perception of his past role performance may also be related to his self-concept in old age. Reichard, Livson and Peterson (1962) found that older people who perceive themselves as successful in past role activities are more likely to have a positive self-concept than aged persons who think they have not been successful in the past. In any case, it appears that older persons have positive and negative self-concepts and perceptions of the past contribute to the direction of self-evaluation in old age.

To summarize the research on the self-concept in old age, several observations can be made. Although a number of studies support the Kuypers and Bengtson and Rosow contention that older persons have negative self-concepts, other research suggests that older people reveal positive evaluations of themselves. It may be that the characterization of a negative self-concept in old age provides a limited view of a person's conception of self in old age. Theoretical conceptualizations of the social psychological aspects of aging need to explain the existence of positive as well as negative self-concepts of older people. Therefore, in this dissertation, the self-
concept of older persons is viewed as a continuous variable. Consequently, an older person may reveal a positive or a negative self-concept.

A second observation concerning the self-concept of older persons is that there appears to be a relationship between a self-definition as old and self-concept. In fact, studies (Mason, 1954a,b) support an inverse relationship between a self-definition as old and self-concept. That is, the older a person defines himself, the lower (or more negative) his self-concept. It, therefore, is hypothesized that:

G.H.2 Self-definition as old is inversely related to self-concept.

Finally, it is suggested that there is a relationship between self-concept and the stereotype of old age. Research (Anderson, 1967) has indicated that older persons tend to characterize their life situations in terms of their self-evaluations. It is expected that older persons' attitudes toward their age status (old age) will be congruent with their perceptions of themselves. A positive relationship between self-concept and stereotypic attitudes toward old age is hypothesized.

G.H.3 Self-concept and the stereotype of old age are positively related.

In other words, it is expected that persons who define themselves as old and who have a positive self-concept will subscribe to positive stereotypic attitudes toward old age.
Persons, however, who define themselves as old and who have a negative self-concept are expected to subscribe to negative beliefs about old age. Support for this hypothesis is provided empirically (Neugarten and Associates, 1964; Reichard, Livson and Peterson, 1962) and theoretically (Secord and Backman, 1974; Festinger, 1964; Festinger and Carlsmith, 1959). Neugarten (1964) and Reichard, Livson and Peterson (1962) reported a stability or continuity of the self as a person ages. Neugarten concluded that:

... the self becomes institutionalized with the passage of time. Not only do certain personality processes become stabilized and provide continuity, but the individual builds around him a network of social relationships which he comes to depend on for emotional support and responsiveness and which maintain him in many subtle ways. It is from this point of view that the typical aging person may be said to become, with the passage of years, a socio-emotional institution with an individuated structure of supports and interactional channels and with patterns which transcend many of the intrapsychic changes and losses that appear (Neugarten, 1964:197).

As an older person experiences events indicative of old age and, consequently defines himself as old, the self-concept that existed in middle age is expected to continue into old age. Thus, if a person had a positive self-concept, it is suggested that he will subscribe to attitudes toward his newly acquired age status that are consistent with his self-evaluation. Acceptance of negative stereotypic attitudes toward old age would create dissonance between the private (self-concept) and public opinion (stereotype of old age)
since incongruous cognitive elements produce dissonance (Festinger, 1964; Festinger and Carlsmith, 1959).

Summary

In this chapter the theoretical orientation of this dissertation was presented. Two theoretical approaches—the Kuypers and Bengtson Social Breakdown Syndrome and Rosow's theory of socialization of the elderly—were discussed. These approaches were presented because both: (1) seek to explain social psychological aspects of normal aging, (2) assume that stereotypic attitudes toward old age are negative and that old people subscribe to negative stereotypic attitudes toward old age and (3) emphasize the importance of the stereotype of old age in an older person's adjustment to late life.

Research on the stereotype of old age from young, middle-aged and old samples was reviewed. It was concluded from this review that stereotypic attitudes toward old age are positive and negative and that old people subscribe to positive and negative stereotypic attitudes toward old age. Further, it was concluded that theoretical conceptualizations (i.e., Kuypers and Bengtson's and Rosow's) premised on the assumption of a negative stereotype of old age are limited in applicability. Therefore, the stereotype of old age concept needs to be examined more closely.
To provide a better understanding of social psychological aspects of normal aging, the development of a model focusing on the stereotype of old age is proposed. The objective of this dissertation is to develop a model that presents the interrelationships of objective indicators of old age, self-definition as old and self-concept to the stereotype of old age. Reviews of the research on self-definition as old and self-concept suggested three general hypotheses. The general hypotheses of this dissertation are:

G.H.1 Objective indicators of old age are positively related to self-definition as old.
G.H.2 Self-definition as old is inversely related to self-concept.
G.H.3 Self-concept and the stereotype of old age are positively related.

The relationships of the concepts to be examined in this dissertation are diagramed as follows:
Figure 2.2. Model of theoretical relationships

Objective Indicators of Old Age
1) Retirement
2) Problematic health
3) Recipient of Social Security
4) Widowhood

Self-Definition as Old
(Self-Concept)
(Stereotype of Old Age)

(G.H.1)  (G.H.2)  (G.H.3)
CHAPTER III: METHODS

Chapter III is divided into four sections. Section one is a description of the data sources and collection procedures. In the second section, the operationalization of variables is discussed. Presentation of empirical hypotheses and a model of the empirical relationships is presented in section three. The fourth section is a discussion of multiple regression analysis and the use of dummy variables in regression analysis. A summary concludes the chapter.

Data Sources and Collection Procedures

Data used in this dissertation are from the 1974 phase of a longitudinal survey research project, "Older Workers: Withdrawal Patterns and Adaptation," sponsored by a grant from the Social Security Administration. Principal investigators for the second phase of this project were Drs. Edward A. Powers, Willis J. Goudy and Patricia Keith. The general objective of the Older Workers project was to collect data on the changes experienced by older workers who had retired or partially retired. The data used in this dissertation are from the survivors of a sample selected in 1964. In 1964, a sample of small town, fully employed men aged 50 and over was selected by the Iowa Agricultural Experiment Station Project 1584: "Modes of Withdrawal from Active Occupational Roles by Farmers, Small Town Merchants, Professionals and Factory
Workers." The directors of the 1964 phase of this project were Drs. Jon A. Doerflinger and Ward W. Bauder.

1964 sample: The 1964 sample consisted of fully employed males representing five occupational categories: (1) farmers, (2) factory workers, (3) owner merchants, (4) salaried professionals and (5) self-employed professionals. Since the target population for this study was defined as rural, the universe for this study was limited to 76 communities in Iowa. Although 79 Iowa communities had populations between 2,500 and 9,999 at the time of the 1960 United States Census, three communities were excluded because they were closely associated with metropolitan areas and, therefore, were not comparable to the other 76 rural communities. These 76 communities were categorized into twelve strata based on their geographical location in the state (Iowa was divided into quarters) and size of population (three groups: 2,500-4,999, 5,000-7,499, and 7,500-9,999). (For additional description of sample communities see Bersani, 1965; Chapman, 1966; and Rolston, 1966.)

A standardized sampling procedure for each occupational category was followed to guarantee a random and representative selection. The procedure followed was: (1) utilizing the census data, estimates for the 76 communities were made to determine the number of men aged 50 and older in each of the five occupational categories, (2) sampling rates were
calculated from these estimates to yield approximately 500 respondents in each of the five occupational categories and (3) for each occupational category, the following formula was employed to determine the sampling rate within each community in each strata: 

\[ \text{(sample rate within } i^{\text{th}} \text{ town}) = \text{(sample rate for occupational category)}. \]

To obtain representative samples in each of the five occupational categories, the following procedures were utilized. For the professionals and the owner merchants, samples were selected from existing lists of names (e.g., city directories, telephone books and personal informants). The factory worker sample was drawn at a rate equivalent to the within-town sampling rate for each town. An area cluster sample was selected from the area in close proximity to each sample town for the sub-sample of farmers. In general, the area was limited to two townships for towns of 2,500-4,999 population, three townships for towns of 5,000-7,499 population and four townships for towns of 7,500-9,999 population. The cluster sample was drawn from each community at a rate that corresponded to the within-community rate.

The following table demonstrates the number of cases expected, the number found and the number of completed interviews for each occupational category.
Table 3.1. 1964 sample by occupational categories

<table>
<thead>
<tr>
<th>Occupational category</th>
<th>Number cases expected (N=2,350)</th>
<th>Number cases found (N=2,094)</th>
<th>Number of completed interviews (N=1,922)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farmers</td>
<td>500</td>
<td>380</td>
<td>359</td>
</tr>
<tr>
<td>Factory workers</td>
<td>500</td>
<td>355</td>
<td>335</td>
</tr>
<tr>
<td>Owner merchants</td>
<td>500</td>
<td>516</td>
<td>467</td>
</tr>
<tr>
<td>Salaried professionals</td>
<td>450</td>
<td>431</td>
<td>388</td>
</tr>
<tr>
<td>Self-employed professionals</td>
<td>400</td>
<td>412</td>
<td>373</td>
</tr>
</tbody>
</table>

1974 sample: The 1974 sample consisted of all survivors of the 1964 sample who could be located and who consented to an interview. Attempts were made to locate all respondents of the 1964 sample by utilizing local postal departments, telephone directories, organizational membership (churches, civic, fraternal, etc. listed by respondent in 1964). Moreover, an attempt was made to secure death certificates of the deceased to collaborate the information given by informants. Face-to-face interviews were conducted with 1,359 (70.7%) of the 1,922 respondents of the 1964 sample. The following table illustrates the 1974 status of the 1964 sample in terms of the number of completed interviews, deceased, refusals, too ill
to be interviewed, lost respondents and the respondents who could not be contacted.

Table 3.2. Status of 1964 sample in 1974

<table>
<thead>
<tr>
<th>1974 status</th>
<th>1964 sample</th>
<th>Percent</th>
<th>1974 sample</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>(N=1,922)</td>
<td></td>
<td></td>
<td>(Not deceased) (N=1,488)</td>
<td></td>
</tr>
<tr>
<td>Interviews completed</td>
<td>1,359</td>
<td>70.7</td>
<td>1,359</td>
<td>91.3</td>
</tr>
<tr>
<td>Deceased</td>
<td>434</td>
<td>22.6</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Refusals</td>
<td>69</td>
<td>3.6</td>
<td>69</td>
<td>4.6</td>
</tr>
<tr>
<td>Ill/senility</td>
<td>28</td>
<td>1.5</td>
<td>28</td>
<td>1.9</td>
</tr>
<tr>
<td>Lost respondents</td>
<td>27</td>
<td>1.4</td>
<td>27</td>
<td>1.8</td>
</tr>
<tr>
<td>Could not contact (had address)</td>
<td>5</td>
<td>.3</td>
<td>5</td>
<td>.4</td>
</tr>
</tbody>
</table>

Twenty-seven cases were not included in this dissertation because they were not fully employed in 1964 or did not fit into one of the five occupational categories (N=1332). The age distribution of the 1974 sample is presented in Appendix B.

1974 data collection: The 1974 interviews were conducted by trained interviewers associated with university research departments or sociology departments. All of the in-state interviews were conducted by interviewers affiliated with the Statistical Laboratory of Iowa State University. Each of the
in-state interviewers participated in a two day training session to gain familiarity with the questionnaire prior to any interviewing. The training sessions consisted of discussion of general interviewing techniques, specialized instruction concerning the questionnaire and a trial-run interview supervised by staff members of the Older Workers project. Each interviewer was assigned a list of respondents who resided in a geographical area (town, county, etc.). Generally, the interviewers were assigned to geographical areas in close proximity to the areas in which they resided. The out-of-state respondents were interviewed by either associates of other university research laboratories or colleagues of the investigators located in close proximity to the respondents' 1974 addresses. The training of the out-of-state interviewers was supervised by the Statistical Laboratory at Iowa State University.

The 1974 questionnaire consisted of factual and attitudinal items. Since the questionnaire was designed to collect data on the changes experienced by workers who had retired or partially retired, questions from the 1964 questionnaire were included. Many of the questions from the 1964 questionnaire used in the 1974 questionnaire were designed to gather factual information concerning work and interaction patterns. Most of the attitudinal items included in the 1974 questionnaire were not asked in 1964. A majority of the questions in the 1974
questionnaire were close-ended. The 1974 questionnaire was pretested in the summer of 1974 and certain questions were deleted or revised.

The 1974 interviews were conducted in the Fall of 1974. Interviews ranged from one to three hours in length; approximately one and one-half hours was the average duration of an interview. All questions were checked for accuracy and completeness by the Statistical Laboratory of Iowa State University. The coding of the 1974 questionnaire was completed by experienced coders and graduate research assistants affiliated with the Older Workers project. Training and supervision of the coders were completed by the staff of the Older Workers project. All of the coding was checked for accuracy.

Operationalization of Concepts

In this section the operationalization of the concepts is presented. Each concept will be discussed in terms of the way it has been measured in gerontology, the specific measure used in this dissertation and the theoretical and actual range of values on each measure. The coding of each measure will be stated and briefly explained. Frequencies of responses, means and standard deviations for each variable are presented in Appendix C. Discussion of the measure is presented in the order in which the concepts appeared in the theoretical model
in Chapter II.

**Objective indicators of old age**

In Chapter II an objective indicator of old age was defined as an event that signifies to others and/or to an older person that he is old. Several role changes or events have been identified as crucial indicators that one is old. Phillips (1957) examined two role changes that signified entrance into old age—retirement and loss of spouse. Both of these role changes were based on a list of significant role changes that included the cessation of certain activities and the addition of others which are typical of older life status (Cavan, Burgess, Havighurst and Goldhamer, 1949). Phillips' (1957) measures of retirement and loss of spouse were based on respondents' indications of whether or not they had experienced these role changes. A number of studies similarly have identified change in either work status, retirement or loss of spouse as indicators of old age (Cavan, 1962; Neugarten, Moore and Lowe, 1965; Miller, 1965; Palmore and Luikart, 1972; Thompson, 1973; Lopata, 1973a).

A third indicator of old age is change in condition of health or problematic health (Atchley, 1972; Breen, 1960; Butler and Lewis, 1973; Cavan, 1962; Geist, 1968; Lopata, 1973a, 1972a; Lowenthal, Fiske, Thurnher and Chiriboga, 1975; Vedder, 1963). In fact, health problems have been related to old age by older and middle-aged persons (Tuckman and Lorge,
Measures of health status have included self-ratings (health as excellent, good, poor, etc.) of health and reports of health problems. Maddox (1962) and Maddox and Douglas (1974) have argued that older people base their self-ratings of health status on the objective condition of their health. Therefore, a number of studies have used a self-rating of condition of health as a measure of an older person's health status (Cutler, 1973; Heyman and Jeffers, 1970; Maddox, 1970; Lopata, 1973a; Palmore and Luikart, 1972; Smith and Lipman, 1972; Thompson, 1973). Suchman, Phillips and Streib (1958) and Friedsam and Martin (1963), however, suggested that a self-rating of health status may not be an accurate measure of the condition of an older person's health. Other studies have used a listing of health problems experienced by the older person as a measure of health status (Lowenthal, Fiske, Thurnher and Chiriboga, 1975; Rosow, 1967; Shanas and Others, 1968; Youmans, 1963). In the studies that utilized self-reports of health problems as a measure of health status, several different indicators have been used. For example, one technique has been to list a number of health problems and ask respondents to identify present or recent problems (Lowenthal, Fiske, Thurnher and Chiriboga, 1975). Another indicator of health status that reflects physical incapacity is the inability of a person to perform certain
minimal tasks (Shanas and Others, 1968). A third measure (Youmans, 1963) has been to ask older persons if they have experienced any illness, injury, or other health condition that has interfered with their usual activities. Each of these three indicators—a list of health problems, an index of incapacity and a report of current health problems—has been used as a measure of the health status of older persons.

Income has been identified as another indicator of old age (Atchley, 1972; Neugarten and Moore, 1968). Several measures have been employed to examine the source and amount of income. Many studies have used yearly income (Rosow, 1967; Cutler, 1973; Palmore and Luikart, 1972; Lopata, 1973a) as a measure of the financial status of older persons. Neugarten and Moore (1968), however, suggested that the source of income is an important indicator of old age. The fact that a person receives Social Security benefits is an indicator that one is old (Neugarten and Moore, 1968). Generally, a person needs to be 62 or 65 years of age before he is eligible to receive Social Security benefits. In short, being a recipient of Social Security benefits signifies to others that one is old.

The four indicators of old age utilized in this dissertation are: retirement, widowhood, problematic health and receiving Social Security benefits. These four indicators are used because each one has been identified in gerontological literature as an event that signifies to others and/or to an older person that one is old. In most cases, researchers
have asked respondents to indicate their present status in each of the four areas. Therefore, the following questions are used to measure each of the four indicators of old age:

- **Retirement:** Are you retired?
- **Widowhood:** Are you (or have you ever been) widowed?
- **Health:** Have you had any major illness or accident in the past five (5) years?
- **Social Security:** Do you receive any Social Security benefits?

The response categories for each of these questions were "yes" and "no." A "yes" response was coded "1" and a "no" response was coded "0."

**Self-definition as old**

Self-definition as old was defined in Chapter II as the age category in which an individual places himself. Generally, researchers have given respondents a number of age categories and have asked them to identify the age category to which they think they belong (Burgess, Cavan and Havighurst, 1948; Cavan, Burgess, Havighurst and Goldhamer, 1949; Havighurst and Albrecht, 1953; Blau, 1956; Busse, Jeffers and Obrist, 1970; Phillips, 1961, 1957, Bultena and Powers, 1975; Bultena, Powers, Falkman and Frederick, 1971; Zola, 1962). For example, Burgess, Cavan and Havighurst (1948) provided respondents with the following age categories: young, adult, middle-aged, elderly and old. Blau (1956) and Phillips (1957, 1961), however, employed only middle-aged, elderly and old age categories.
Two other measures of self-definition as old have been employed. Fry (1976) and Jeffers, Eisdorfer and Busse (1970) have asked respondents to sort cards that represent various age categories (young, middle-aged, elderly, old, etc.) or life events (birth of a child, retirement, death, etc.) into an ordered sequence. Respondents were asked to assign chronological ages to the age categories or life events to identify where they presently place themselves. In this way, the researchers are able to determine the way the respondents order the different age categories or life events as well as where they place themselves in the life cycle. These studies (Fry, 1976; Jeffers, Eisdorfer and Busse, 1970) suggested that some individuals use more than the three age categories employed by Blau (1961) and Phillips (1957, 1961). Further, Cameron's (1969) examination of the age parameters associated with young adult, middle age, old and aged suggested that these four age categories may not be precise enough to measure the later years of the life span. Therefore, additional age categories may be needed to measure self-definition of age during the later years of the life span.

In this dissertation the measure of self-definition as old is similar to the measure used by Burgess, Cavan and Havighurst (1948), Cavan, Burgess, Havighurst and Goldhamer (1949) and Havighurst and Albrecht (1953). The following measure is employed to determine the age categorization of
each respondent:

In what age group do you feel you now fit best?
The response alternatives were "middle-aged," "late middle-aged," "approaching elderly," "elderly," and "old." These response categories provided the respondent with more precise age categories for the middle and later life span than do the middle-aged, elderly and old response alternatives.

The responses were coded as follows: middle-aged coded "1," late middle-aged coded "2," approaching elderly coded "3," elderly coded "4" and old coded "5." The theoretical and actual range of values is 1 to 5. The higher value indicates an old age self-definition.

Self-concept

In Chapter II self-concept was defined as an attitude, quality or evaluation that a person attributes to himself. Gerontologists have employed a variety of measures to determine an individual's self-concept. Burgess, Cavan and Havighurst (1948) and Cavan, Burgess, Havighurst and Goldhamer (1949) developed a Happiness and Leisure scale from the Chicago Attitude Inventory that was utilized by several studies as a measure of older persons' self-concepts (Davis, 1962; Pan, 1951; Scott, 1955). Other measures of the self-concept of older persons have included the 100-item Tennessee Self-Concept scale and the 29-item Mason Self-Concept Questionnaire (Grant, 1969; Mason, 1954a,b; Anderson, 1967). In
addition to these scales and questionnaires, projective tests have been used to measure the self-concept of older people. Several Draw-A-Person tests as well as task performance tests have been employed to determine the older person's self-concept (Giedt and Lehner, 1951; Lehner and Gunderson, 1953; Lehner and Silver, 1948; Tuckman, Lorge and Zeman, 1961; Wallach and Kogan, 1961). In addition to these scales and questionnaires, projective tests have been employed to determine the older person's self-concept (Giedt and Lehner, 1951; Lehner and Gunderson, 1953; Lehner and Silver, 1948; Tuckman, Lorge and Zeman, 1961; Wallach and Kogan, 1961).

More recently the Rosenberg (1965) Self-Esteem scale has been used with samples of older persons (Kaplin and Pokorny, 1970, 1969; Ward, 1974). The Rosenberg Self-Esteem scale was originally developed for use in a sample of junior and senior high school students as a global measure of self-concept (Rosenberg, 1965, 1963, 1962). Since its development, however, Rosenberg's Self-Esteem scale has been used with a variety of samples. For example, Tippett and Silber (1965) and Silber and Tippett (1965) employed this scale as a measure of self-concept in a sample of college students and Yancey, Rigsby and McCarthy (1972) used it in a sample of Black and white adults. (For a review of studies that have utilized the Rosenberg Self-Esteem scale see Wylie, 1974, and Robinson and Shaver, 1973.) The reported reliability coefficients of
the Rosenberg Self-Esteem scale have been high (Rosenberg, 1965--.92; Silber and Tippett, 1965--.85; Ward, 1974--.79).

In this dissertation, the Rosenberg Self-Esteem scale is used as a measure of self-concept. The Rosenberg Self-Esteem scale was chosen because it is a global measure of the self-concept and is reliable in a variety of samples, including aged samples. The Rosenberg Self-Esteem scale includes the following items:

1. I feel that I'm a person of worth, at least on an equal basis with others.
2. I feel that I have a number of good qualities.
3. All in all, I am inclined to feel that I am a failure.
4. I am able to do things as well as most other people.
5. I feel I do not have much to be proud of.
6. I take a positive attitude toward myself.
7. On the whole, I am satisfied with myself.
8. I wish I could have more respect for myself.
9. I certainly feel useless at times.
10. At times I think I am no good at all.

The response format for each item was "strongly agree," "agree," "undecided," "disagree" and "strongly disagree."

Items 1, 2, 4, 6, and 7 were coded "1" (strongly disagree), "2" (disagree), "3" (undecided), "4" (agree) and "5" (strongly agree). Items 3, 5, 8, 9 and 10 were coded "1" (strongly agree), "2" (agree), "3" (undecided), "4" (disagree) and "5" (strongly disagree).^ The theoretical range of values is 10

---

^This coding format was used by Ward (1974) in an older sample. It, however, differs from the format originally utilized by Rosenberg (1965, 1963, 1962). Rosenberg developed three "contrived" items and reduced the number of items to seven. Statements 1,
to 50. The actual range of values is 20 to 36. A high score indicates a positive self-concept. The reliability of the Rosenberg Self-Esteem scale on this sample is .77 (Cronbach's alpha). The inter-item correlation matrix for the Rosenberg Self-Esteem scale is presented in Appendix D.

**Stereotype of old age**

In Chapter II stereotype of old age was defined as attitudes, beliefs or evaluations associated with the social category of old. Measures of stereotypic attitudes toward old age have been varied. Many gerontologists have been concerned with the content of the stereotype of old age and have employed research techniques designed to determine specific attitudes, beliefs or expectations associated with old age. For example, Seltzer and Atchley (1971) and Palmore (1971) used content analysis to determine the stereotypic attitudes in children's literature and jokes. Kogan and Shelton (1962a,b; Golde and Kogan, 1959) employed a sentence completion test to ascertain the content of stereotypic beliefs about old age. Generally, however, survey items or scales have been utilized to measure the content of the stereotype of old age.

The use of survey items to develop a measure of the stereotype of old age is illustrated by Tuckman and Lorge

(Footnote continued from previous page.) 2 and 3 were the basis of the first contrived item. The second contrived item was based on statements 4 and 5 and the third contrived item was formulated from statements 9 and 10.
(1953a; see Table 1.1 for a review of the Tuckman and Lorge studies). Tuckman and Lorge's "Old People Questionnaire" consisted of 137 positive and negative statements about old people. Their Old People Questionnaire was designed to measure stereotypic attitudes toward old people in thirteen categories: activities and interests, financial, physical, personality traits, attitude toward the future, best time of life, insecurity, mental deterioration, interference, sex, family, cleanliness and conservatism. In these thirteen categories, Tuckman and Lorge measured the specific content as well as the direction (positive and negative) of the stereotype of old age. Kogan (1961a,b) developed another scale to measure the direction as well as the content of the stereotype of old age. Kogan's "Old People Scale" consisted of matched positive and negative statements. The seventeen positive and negative statements were designed to measure stereotypic attitudes in the following content areas: residential aspect of old age, feelings of discomfort or tension when around old people, extent to which old people vary, interpersonal relations between age generations, dependency and cognitive style of old people and, finally, personal appearance and personality of old people. Although the Old People Questionnaire and the Old People Scale both were developed to measure the content of stereotypic attitudes in certain areas, the direction (positive or negative) of these stereotypic attitudes is determined.
In this dissertation the direction (positive or negative) of the stereotype of old age is the primary concern. Although the specific content of stereotypic attitudes is not the major issue, several content areas were considered in the development of the measure of the stereotype of old age used in this dissertation. To develop a measure of the stereotype of old age, various items were examined to determine content areas in which stereotypic attitudes have been found. Review papers and theoretical discussions also were examined to ascertain content areas of the stereotype of old age (Peters, 1971; Wood, 1971; Riley and Foner, 1968). Four content areas common to many of the scales were selected for analysis: health, productivity, friendships and dependency. In each of these four areas matched positive and negative statements were developed to avoid a problem in determining the direction of a respondent's stereotypic attitude. For example if a respondent is provided with only a positive statement and disagrees with that statement, the researcher infers a negative orientation in this content area. This, however, may not be the case. The respondent may not have a positive or negative attitude. To avoid an incorrect inference, a negative statement in the same content category is provided. Similar to the question and scoring formats used by Kogan (1961a,b), if a respondent disagrees with both the positive and negative statements in a specific content area, the respondent's score in
this category is in the middle of the positive-negative continuum. Therefore, a researcher can determine the direction of the attitude indicated by a respondent in each category. In this dissertation, the following eight items are used to measure the direction (positive or negative) of the stereotype of old age:

(1) Generally, old people are dependent.
(2) Generally, old people are healthy.**
(3) In general, old people are lonely.
(4) Generally, old people are unproductive.
(5) Generally, old people are independent.**
(6) Generally, old people are sickly.
(7) In general, old people have many friends.**
(8) Generally, old people are productive.**

(**Items worded in positive format.)

The response format for each of these items was "strongly agree," "agree," "undecided," "disagree" and "strongly disagree." Items 1, 3, 4 and 6 were coded "1" (strongly agree), "2" (agree), "3" (undecided), "4" (disagree) and "5" (strongly disagree). Items 2, 5, 7 and 8 were coded "1" (strongly disagree), "2" (disagree), "3" (undecided), "4" (agree) and "5" (strongly agree). The theoretical range of values is 8 to 40. The actual range of values is 16 to 32. A high score indicates a positive stereotype of old age. The reliability of these items on this sample is .68 (Cronbach's alpha). The inter-item correlation matrix for the stereotype of old age statements is presented in Appendix E.
Statement of Empirical Hypotheses

In this section the general hypotheses are stated at the empirical level and a model of the hypothesized relationship is presented. The empirical hypotheses are:

- **E.H.1.1** Retirement is positively related to self-definition as old.
- **E.H.1.2** Health problems are positively related to self-definition as old.
- **E.H.1.3** Receiving Social Security is positively related to self-definition as old.
- **E.H.1.4** Widowhood is positively related to self-definition as old.
- **E.H.2.1** A high self-definition as old score is related to a low self-concept score.
- **E.H.2.2** A low self-definition as old score is related to a high self-concept score.
- **E.H.3.1** A low self-concept score is related to a low stereotype of old age score.
- **E.H.3.2** A high self-concept score is related to a high stereotype of old age score.

Figure 3.1 presents a model of the empirical relationships.

Statistical Technique

The statistical technique used in this dissertation is multiple regression analysis because this statistic indicates: (1) relationship between variables, (2) direction of relationship between variables and (3) strength of a relationship between variables. The amount of variance in the dependent variable explained by the independent variables is indicated by $R^2$. 
Objective Indicators of Old Age

- Retirement (E.H.1.1)
- Health Problems (E.H.1.2)
- Recipient of Social Security (E.H.1.4)
- Widowhood

Self-Definition as Old

Self-Concept

Stereotype of Old Age

Figure 3.1. Model of empirical relationships

**Multiple regression analysis**

Multiple regression analysis is a statistical technique that indicates the nature and magnitude of relationships between variables. This statistical technique is applicable to sociological research because it permits an analysis of the relationships between one dependent variable and more than one independent variable. In this dissertation, the concern is for relationships between the dependent variable (stereotype of old age) and the independent variables (objective indicators of old age, self-definition as old and self-concept). Multiple regression may be viewed as either a descriptive or inferential tool. Used as a descriptive tool, multiple regression provides the best linear prediction equation and evaluates its prediction accuracy. Since this dissertation is concerned with the relationships between a
dependent variable and multiple independent variables, multiple regression is used as a descriptive tool. The linear equations resulting from the multiple regression analysis indicate the predictive power and accuracy of the independent variables (objective indicators of old age, self-definition as old and self-concept) in terms of the dependent variable (stereotype of old age).

Multiple regression mathematically defines the regression plane in which the squared errors of prediction are at a minimum (Principle of Least Squares, see Kerlinger and Pedhazur, 1973; Runyan and Haber, 1971). In other words, multiple regression analysis indicates the dependence of the dependent variable \(Y\) on the independent variables \(X_1, X_2, \ldots, X_n\) when squared errors of prediction are at a minimum \(\Sigma(e_{\text{est}} - e_{\text{act}})^2 = \text{minimum}\). The basic model for multiple regression is:

\[
Y = B_0 + B_1 X_1 + B_2 X_2 + \ldots + B_n X_n + e
\]

where

- \(Y\) = score of dependent variable
- \(B_0\) = intercept constant
- \(B_1\) = regression coefficient for \(X_1\)
- \(X_1\) = score of independent variable \(X_1\)
- \(e\) = error term

Regression coefficients (Beta weights) indicate the expected change in the dependent variable \(Y\) with a change of one unit in one independent variable \(X_1\) when the other
independent variables \( (X_2, X_3, \ldots, X_n) \) are held constant (Nie, Hull, Jenkins, Steinbrenner and Bent, 1975). Therefore, \( B_1 \) is a partial regression coefficient. In this way, relationships can be predicted between the dependent variable and one independent variable while controlling for the other independent variables.

The amount of variance explained in the dependent variable \( (Y) \) by the independent variables \( (X_1, X_2, \ldots, X_n) \) is indicated by \( R^2 \). \( R^2 \) is defined as (Nie, Hull, Jenkins, Steinbrenner and Bent, 1975:330):

\[
R^2 = \frac{\text{Variation in } Y \text{ explained by the combined linear influence of the independent variables}}{\text{Total variation of } Y}
\]

The F-ratio indicates whether the \( R^2 \) is statistically significant at a given level.

In multiple regression, dummy variables are used when a categorical or nominal level independent variable is entered into the regression equation (Blalock, 1972). The objective indicators of old age in this dissertation are categorical or nominal independent variables. Thus, a zero-one coding format has been employed. Dummy variable analysis avoids the problem of biased regression coefficients if the independent variable is nonlinear. Unbiased estimates are avoided because the regression coefficients conform to any curvature that may be present (Suits, 1957). Kerlinger and Pedhazur (1973:109) summarize the use of dummy variable analysis in multiple regression:
... when dealing with a continuous dependent variable and a categorical independent variable, one creates K dummy vectors (K = number of groups or categories of the categorical variable minus one). In each vector membership in a given group is indicated by assigning 1's to the members of the group and 0's to all others who are not members of the group. $R^2_{y.12...k}$ is then computed. The $R^2$ indicates the proportion of variance in the dependent variable accounted for by the categorical independent variable. The F-ratio associated with the $R^2$ indicates whether the proportion of variance accounted for is statistically significant at the level chosen by the investigator.

In this way, categorical independent variables can be entered into a regression equation. The objective indicators of old age used in this dissertation are coded in this manner.

Summary

In this chapter the data and data collection procedures have been discussed. Both the 1964 and 1974 samples were presented. The data for this dissertation are based on the 1974 sample. The operationalization of each concept was discussed. Measures of the independent variables--objective indicators of old age, self-definition as old and self-concept--and the dependent variable--stereotype of old age--were presented. A model of the hypothesized empirical relationships was presented. Multiple regression analysis and the use of dummy variables were also outlined.
CHAPTER IV: FINDINGS

In this chapter, an empirical test of the theoretical model of the stereotype of old age, developed in Chapter II, is presented. To evaluate the model, this chapter is divided into four sections. First, the relationship between objective indicators of old age and a self-definition as old is examined. Next, the relationship between self-definition as old and self-concept is evaluated. In the third section, the relationship between self-concept and the stereotype of old age is discussed. A presentation of the empirically supported relationships is included in the fourth section of this chapter. Each empirical hypothesis is evaluated by applying the F test to the regression coefficient (Draper and Smith, 1966). A hypothesis is supported if the F value is significant at the .05 level of significance. Other statistics presented for each hypothesis include regression coefficient, multiple $R$, $R^2$ and change in $R^2$. These statistics are used to determine the direction and strength of the relationships between each variable included in the theoretical model. All regression coefficients reported in this dissertation are standardized. The intercorrelation matrix of the seven variables used in this dissertation are presented in Appendix F.
Objective Indicators of Old Age and the Self-Definition as Old

The first general hypothesis of this dissertation presents the relationship between objective indicators of old age and a self-definition as old:

G.H.1 Objective indicators of old age are positively related to self-definition as old.

Objective indicators of old age measured include retirement, health problems, Social Security and widowhood. Therefore, the empirical hypotheses are:

E.H.1.1 Retirement is positively related to self-definition as old.
E.H.1.2 Health problems are positively related to self-definition as old.
E.H.1.3 Receiving Social Security is positively related to self-definition as old.
E.H.1.4 Widowhood is positively related to self-definition as old.

The four indicators of old age are regressed on self-definition as old. Table 4.1 presents the regression coefficient, multiple $R$, $R^2$, change in $R^2$ and $F$ value for each of the four indicators of old age.

$R^2$ indicates the proportion of variance in self-definition as old explained by the objective indicators of old age (Kerlinger and Pedazur, 1973). The four objective indicators of old age--retirement, health problems, Social Security recipient and widowhood--explain twelve percent of the variance in self-definition as old. The relationships between
Table 4.1. Relationship between retirement, health problems, Social Security and widowhood and self-definition as old.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Regression coefficient</th>
<th>R</th>
<th>( R^2 )</th>
<th>Change in ( R^2 )</th>
<th>( F^* )</th>
</tr>
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<tbody>
<tr>
<td>Retirement</td>
<td>.07650</td>
<td>.23214</td>
<td>.05389</td>
<td>.05389</td>
<td>6.073*</td>
</tr>
<tr>
<td>Health problems</td>
<td>.11338</td>
<td>.26703</td>
<td>.07131</td>
<td>.01742</td>
<td>18.256*</td>
</tr>
<tr>
<td>Social Security recipient</td>
<td>.25582</td>
<td>.34376</td>
<td>.11817</td>
<td>.04686</td>
<td>67.758*</td>
</tr>
<tr>
<td>Widowhood</td>
<td>.03816</td>
<td>.34587</td>
<td>.11962</td>
<td>.00145</td>
<td>2.131</td>
</tr>
</tbody>
</table>

*\( F \) value—4 and 1000 = 2.38 (.05 level of significance).

retirement, health problems and receiving Social Security are statistically significant at the .05 level of significance.

As stated in empirical hypotheses 1.1, 1.2 and 1.3, retirement, health problems and receiving Social Security are positively related to self-definition as old. Although widowhood also is positively related to self-definition as old, the relationship is not statistically significant. Retirement explains slightly more than five percent of the variance in self-definition as old while health problems explain less than two percent of the variance. Approximately five percent of the variance is explained by receiving Social Security. These three variables—retirement, health problems and being a
Social Security recipient—explain twelve percent of the variance. Thus, if an individual experiences retirement and health problems and receives Social Security benefits, he is more likely to define himself as old.

The significant relationships of the first part of the theoretical model are presented in Figure 4.1.

![Diagram of relationships between objective indicators of old age and self-definition as old](image)

**Objective Indicators of Old Age**

- Retirement
  - +0.07650
- Health Problems
  - +0.11338
- Social Security Recipient
  - +0.25582
- Widowhood
  - +0.03816

--- statistically significant at .05 level of significance
----- not statistically significant at .05 level of significance

Figure 4.1. Diagram of relationships between objective indicators of old age and self-definition as old
In sum, empirical hypotheses 1.1, 1.2 and 1.3 are empirically supported. Therefore, as stated in general hypothesis 1, objective indicators of old age are positively related to a self-definition as old.

Self-Definition as Old and Self-Concept

The second general hypothesis suggests that there is a relationship between self-definition as old and self-concept:

G.H.2 Self-definition as old is inversely related to self-concept.

The empirical hypotheses are:

E.H.2.1 A high self-definition as old score is related to a low self-concept score.
E.H.2.2 A low self-definition as old score is related to a high self-concept score.

Table 4.2 presents the regression coefficient, $R^2$ and $F$ value when self-definition as old is regressed on self-concept.

Table 4.2. Regression coefficient when self-definition as old is regressed on self-concept

<table>
<thead>
<tr>
<th>Variable</th>
<th>Regression coefficient</th>
<th>$R^2$</th>
<th>Degrees of freedom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-definition</td>
<td>-0.02252</td>
<td>0.00051</td>
<td>Regression 1</td>
</tr>
<tr>
<td>as old</td>
<td></td>
<td></td>
<td>Residual 1294</td>
</tr>
</tbody>
</table>

* $F$ value--1 and 1000 = 3.85 (.05 level of significance).
R² indicates that the self-definition as old explains less than one percent of the variance in self-concept. The F value is not statistically significant. This suggests that there is no relationship between self-definition as old and self-concept. Further, the regression coefficient (-.0278) is not statistically significant. Therefore, empirical hypotheses 2.1 and 2.2 and general hypothesis 2 are not empirically supported.

It is important to determine if there is a direct relationship between any of the four indicators of old age, self-definition as old and self-concept. Table 4.3 presents the regression coefficient, multiple R, R², change in R² and F value for each of the four objective indicators of old age and self-definition as old when regressed on self-concept.

R² indicates that the combined effect of the four objective indicators of old age and self-definition as old explain two percent (.02030) of the variance in self-concept. Retirement, however, explains the largest amount of variance in self-concept. Two of the objective indicators of old age are related to self-concept. Retirement and health problems are inversely related to the self-concept. Thus, the retirees and persons with health problems are more likely to have negative self-concepts.
Table 4.3. Relationship between the four objective indicators of old age, self-definition as old and self-concept

<table>
<thead>
<tr>
<th>Variables</th>
<th>Regression coefficient</th>
<th>R</th>
<th>$R^2$</th>
<th>Change in $R^2$</th>
<th>$F^*$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retirement</td>
<td>-.12092</td>
<td>.13251</td>
<td>.01756</td>
<td>.01756</td>
<td>13.560*</td>
</tr>
<tr>
<td>Self-definition as old</td>
<td>.01873</td>
<td>.13278</td>
<td>.01763</td>
<td>.00007</td>
<td>.407</td>
</tr>
<tr>
<td>Health problems</td>
<td>-.05044</td>
<td>.14193</td>
<td>.02014</td>
<td>.00251</td>
<td>3.200*</td>
</tr>
<tr>
<td>Social Security recipient</td>
<td>-.01534</td>
<td>.14248</td>
<td>.02030</td>
<td>.00016</td>
<td>.208</td>
</tr>
<tr>
<td>Widowhood</td>
<td>.00089</td>
<td>.14248</td>
<td>.02030</td>
<td>.000</td>
<td>.001</td>
</tr>
</tbody>
</table>

*F value--5 and 1000 = 2.22 (.05 level of significance).

Self-Concept and the Stereotype of Old Age

The relationship between self-concept and the stereotype of old age is suggested in general hypothesis 3:

G.H.3 Self-concept and the stereotype of old age are positively related.

The empirical hypotheses are:

E.H.3.1 A low self-concept score is related to a low stereotype of old age score.
E.H.3.2 A high self-concept score is related to a high stereotype of old age score.

Table 4.4 presents the regression coefficient, $R^2$ and $F$ value when self-concept is regressed on stereotype of old age.
Table 4.4. Regression coefficient when self-concept is regressed on stereotype of old age

<table>
<thead>
<tr>
<th>Variable</th>
<th>Regression coefficient</th>
<th>$R^2$</th>
<th>Degrees of freedom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-concept</td>
<td>.17053</td>
<td>.02908</td>
<td>Regression 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Residual 1294</td>
</tr>
</tbody>
</table>

$F$ value—1 and 1000 = 3.85 (.05 level of significance).

Self-concept is positively related to the stereotype of old age. Although the self-concept explains only three percent of the variance in stereotype of old age, the relationship is statistically significant at the .05 level of significance. The general hypothesis is supported. This suggests that an older person with a positive self-concept subscribes to a positive stereotype of old age while an older person who evaluates himself negatively subscribes to negative stereotypic beliefs.

Although there is a relationship, the self-concept explains only three percent of the variance. Analysis of the combined effects of the four objective indicators of old age, self-definition as old and self-concept on the stereotype of old age is needed. This will reveal if there are any direct effects, in addition to the self-concept, on the stereotype of old age. Table 4.5 presents the regression coefficient.
Table 4.5. Relationship between the four indicators of old age, self-definition as old, self-concept and the stereotype of old age

<table>
<thead>
<tr>
<th>Variables</th>
<th>Regression coefficient</th>
<th>R</th>
<th>$R^2$</th>
<th>Change in $R^2$</th>
<th>$F^*$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retirement</td>
<td>-.00546</td>
<td>.05877</td>
<td>.00345</td>
<td>.00345</td>
<td>.028</td>
</tr>
<tr>
<td>Self-definition as old</td>
<td>-.00824</td>
<td>.06211</td>
<td>.00386</td>
<td>.00040</td>
<td>.080</td>
</tr>
<tr>
<td>Health problems</td>
<td>-.01436</td>
<td>.06700</td>
<td>.00449</td>
<td>.00063</td>
<td>.262</td>
</tr>
<tr>
<td>Social Security recipient</td>
<td>-.04913</td>
<td>.07977</td>
<td>.00636</td>
<td>.00187</td>
<td>2.161*</td>
</tr>
<tr>
<td>Widowhood</td>
<td>-.03704</td>
<td>.08786</td>
<td>.00772</td>
<td>.00136</td>
<td>1.824</td>
</tr>
<tr>
<td>Self-concept</td>
<td>.16448</td>
<td>.18500</td>
<td>.03422</td>
<td>.02650</td>
<td>35.376*</td>
</tr>
</tbody>
</table>

*F value--6 and 1000 = 2.10 (.05 level of significance).

The only objective indicator of old age that has a significant effect on the stereotype of old age is being a Social Security recipient. The relationship, though weak, is in the inverse direction. Thus, being a recipient of Social Security is related to a negative stereotype of old age. The self-concept is positively related to the stereotype of old age.
Model of Empirically Supported Relationships

Two of the three general hypotheses are empirically supported by these data. Generally, objective indicators of old age are positively related to the self-definition as old (G.H.1). Three events (retirement, health problems and being a Social Security recipient) are related to the self-definition as old. The relationship between widowhood and a self-definition as old is not empirically supported. The other general hypothesis supported by these data is general hypothesis 3, which states that there is a positive relationship between self-concept and the stereotype of old age. Examination of the direct effects of other variables examined in this dissertation on the stereotype of old age indicates a relationship between receiving Social Security and the stereotype of old age. Although the relationship is weak, it suggests that Social Security recipients have slightly more negative stereotypic attitudes toward old age.

General hypothesis 2 is not empirically supported. It appears that self-definition as old and self-concept are not related. Further analysis of the data indicates that self-definition as old is not related to the stereotype of old age. In fact, examination of the intercorrelation matrix (Appendix F) reveals that self-definition as old correlates only with three objective indicators of old age--retirement, health problems and being a Social Security recipient. Although
self-definition as old appears to be independent of both self-concept and the stereotype of old age, two indicators of old age are related to the self-concept. Retirement and health problems are inversely related to self-concept. Thus, retirees and persons who have experienced health problems tend to have more negative self-evaluations.

The empirically supported relationships are presented in Figure 4.2.

Objective Indicators of Old Age

![Diagram](image)

Figure 4.2. Model of empirically supported relationships
CHAPTER V: DISCUSSION OF FINDINGS

The findings reported in Chapter IV are discussed in this chapter. This chapter is organized into six sections: (1) objective indicators of old age and a self-definition as old, (2) a self-definition as old and self-concept, (3) self-concept and the stereotype of old age, (4) overall model, (5) implications for theory and research and (6) implications for applied gerontology. In each section, emphasis is focused on the relationship between the empirical findings in this dissertation and theory and research in gerontology.

Objective Indicators of Old Age and the Self-Definition as Old

In gerontological theory, it is argued that events occur in a person's life that indicate the nearness or presence of old age (Bengtson, 1973; Kuypers and Bengtson, 1973; Rosow, 1974; Gubrium, 1973). Retirement, health problems, receiving Social Security and loss of a spouse have been identified as indicators of old age. As hypothesis 1 stated, there is a positive relationship between objective indicators of old age and a self-definition as old. Generally this hypothesis was supported. A person who is retired, receives Social Security or experiences health problems is more likely to define himself as old.
The loss of a spouse, however, is not related to a self-definition as old. It appears that the death of a spouse, at least for this sample, is not a crucial factor in the process of defining oneself as old. Contradictory findings, however, have been reported in other studies. Tuckman and Lorge (1954) found that widowhood was related to a self-definition as old in their sample of elderly men and women. Likewise, the loss of a spouse was related to an old age self-definition in men and women aged 60 years and over (Phillips, 1957). In both the Tuckman and Lorge (1954) and Phillips (1957) analyses, the category of widowed was not differentiated by sex. Further, in neither study is the total number of widowed presented by sex. One explanation for the incongruency between the findings may be the sample. Since the sample used in this dissertation included only males and previous studies included both male and female respondents, it may be that widowhood has a differential impact on males and females. While numerous studies have examined widowhood (Blau, 1961, 1956; Lopata, 1973a,b,c, 1972a,b, 1970; Pihlblad and Adams, 1972; Berardo, 1967), little attention has been focused on the widower (noted exceptions include Berardo, 1970, 1967; Pihlblad and Adams, 1972; Kutner and others, 1956; Atchley, 1975). The evidence nonetheless, suggests that the impact of the death of a spouse differs by sex. While female survivors experience a loss in
social status (Lopata, 1973a, 1972a), widowers appear to become socially isolated (Berardo, 1970, 1967; Pihlblad and Adams, 1972; Kutner and other, 1956). Further, widowers do not experience the income problems commonly experienced by widows (Atchley, 1975). It may be that the loss of a spouse has a different impact on the male's self-definition as old than on the female's self-definition. For males, at least, the data used in this dissertation suggest that the loss of a spouse is not related to a self-definition as old. Additional research is needed to determine if the impact of the death of a spouse is sexually differentiated.

A second explanation for the lack of a relationship between the loss of a spouse and a self-definition as old involves the social definition attached to widowhood. Unlike other objective indicators of old age the loss of a spouse is not socially induced but is the consequence of a natural event (Blau, 1973, 1956). Thus, Blau (1956:200) argued:

Lopata (1972a:285), for example, reported that "... most Chicago interviewees find the condition of being minus a husband one of loneliness and definite status loss. Few are able to use their own social roles to build a status equivalent to the one they carried by being married, by being married to that specific husband, and by belonging to various status groups through his social roles."
... retirement is a social pattern which implies an invidious judgment on the part of others in the society about the lack of fitness of old people to perform a culturally significant role, whereas the death of the marital partner, being a natural event, and not a socially induced one, does not have such implications in our culture. Thus, the retired individual but not the widowed has reason to believe that he is socially defined as old.

Blau (1973:106) also contended that retirement has a greater impact on a person's social relations than does widowhood:

... because retirement disrupts the many informal relations developed on the job, whereas widowhood disrupts only a single relationship, I suggest that exit from a peer group has more pronounced effects on the individual's self-concept than does the loss of an intimate relationship. This helps to explain the different effects of retirement and widowhood on age identity.\textsuperscript{11}

In short, retirement, not the loss of a spouse is related to a self-definition as old because the former event is socially induced and the latter is naturally induced. It, therefore, is concluded that retirement has a greater effect on an older person's self-definition as old.

Similarly, receiving Social Security is a socially induced event that is generally associated with old age. Neugarten and Moore (1968) have noted that receiving Social Security benefits

\textsuperscript{11}Blau (1973) examined the relationship between group membership and age identity to determine the validity of this argument. It was concluded that "... participation in a friendship group does, indeed, serve to postpone shifts in age identity, and this supports the hypothesis that loss of the work group is one of the reasons why retirement influences an older person's self-concept more than widowhood does" (Blau, 1973:108).
has provided a reference point that distinguishes old from middle age. While health problems are naturally induced, the presence of health difficulties are commonly associated with old age (Tuckman and Lavell, 1957; Tuckman and Lorge, 1954; Shanas and Others, 1968). Thus, receiving Social Security and experiencing health difficulties are associated with a self-definition as old.

A relationship between objective indicators of old age and a self-definition as old is supported by the findings in this dissertation. Retirement, health problems and receiving Social Security benefits explain only twelve percent of the variance in self-definition as old. Are there any variables that may explain more variance in self-definition as old? Recently, Bultena and Powers (1975) suggested that an older person's comparison of his situation vis-a-vis other older people is related to a self-definition as old. It was concluded that:

data point up the importance of considering reference-group judgements, along with objective statuses, in explaining the denial of aging that is found in later life. While many older persons experience adverse changes in their statuses, these changes in themselves may be insufficient to precipitate an age identity. Rather, it is important to know how these changes are personally defined (Bultena and Powers, 1975:10).

In another study, it is suggested that this comparative process may help an older person face the losses associated with old age without experiencing a low level of life satisfaction (Bultena and Powers, 1976).
One way to determine an older person's definition of the events that indicate a nearness of presence of old age is to examine the way a person compares himself to other older people. Thus, the addition of an older person's self-comparison with other older people may have increased the amount of explained variance in self-definition as old.

In sum, the findings on the objective indicators of old age in this dissertation are congruent with gerontological theory and research although little total variance is explained. Retirement, health problems and receiving Social Security benefits are related to a self-definition as old. Loss of a spouse, however, is not related to a self-definition as old. It is suggested that the inclusion of an older person's comparison of his situation to other older people may increase the amount of variance explained in one's self-definition as old.

**Self-Definition as Old and Self-Concept**

Gerontological theorists (Bengtson, 1973; Kuypers and Bengtson, 1973; Rosow, 1974, 1963; Gubrium, 1973) contended that the aged have negative self-concepts because societal definitions of old age are negative. It is assumed that when a person defines himself as old, the negative definitions of old age are accepted as self-definitions. The consequence is a negative self-concept. Gubrium (1973), for example, presented this argument and its implications for social interaction:
Because the object of public definitions is a negative self, so is the personal perception of this object a negative self. To an old person, what he perceives in himself is a devalued entity. Since persons tend to avoid, or are disinterested in, devalued objects or situations, it should not be surprising that aged avoid themselves. The process of perception and avoidance of a negative self is enhanced to the extent that public devaluations are increasingly pronounced and the elderly are aware of this. The outcome of such an alienating process is a collection of aged persons who are age-aware and possess negative self-images (Gubrium, 1973:159-160).

Although writers suggest there is a relationship between self-definition as old and the self-concept, the research evidence is not conclusive. Peters (1971:70) summarized the research as follows:

Self-identification as old generally carries negative connotations. Data suggest that aging individuals may have less positive attitudes toward themselves. However, individual variations in this regard tend to be greater among older groups than among the young.

Nonetheless, it is clear that the general trend in both theory and research is to suggest that the aged individual who defines himself as old is expected to have a negative self-concept.

The data used in this dissertation suggest there is no relationship between a self-definition as old and self-concept. For the sample in this dissertation it cannot be assumed that "... what he [an old person] perceives in himself is a devalued entity" or the elderly are "... persons who are age-aware and possess negative self-images" (Gubrium, 1973:
In short, the findings of this research do not support those who suggest that there is no relationship between self-definition as old and self-concept. Since this finding is incongruent with some gerontological literature, there is a need to examine the self-definition as old and self-concept to determine if any other concepts are more relevant.

One might expect that the lack of relationship between self-definition as old and self-concept may be a consequence of the fact that few persons in this sample defined themselves as old. Only fourteen percent of the respondents defined themselves as "elderly" or "old." Additional analysis of the data, however, reveals that a self-definition as old is not related to self-concept in the subgroup of respondents who defined themselves as elderly or old ($r = -.0706$). Contrary to other research (Mason, 1954a,b), this indicates that there is no relationship between self-definition as old and self-concept in this sample.

Incongruency between the findings in this dissertation and other research might have also been affected by the fact that this sample included only males and further, that none of these males were institutionalized. Mason's (1954a,b) finding of a relationship between self-definition as old and self-concept is based on a group of aged males and females who were institutionalized. Most of the projective tests of
age and self-concept used samples of both men and women, some of whom were institutionalized (Giedt and Lehner, 1951; Lehner and Gunderson, 1953; Lehner and Silver, 1948; Wallach and Kogan, 1961). Since the sample used in this dissertation differs from samples utilized in other research, it may be that the relationship between self-definition as old and self-concept differs by sex and institutional setting. Additional research is needed to determine if there is a differential impact of self-definition as old on the self-concept for males and females.

Theoretically, two alternative explanations for the lack of a relationship between self-definition as old and self-concept can be suggested. First, it may be that significant others' evaluations of one's performance in an age category are more important to self-concept than his own self-definition of age status. Not only do significant others' evaluations affect a person's self-concept but a person's self-definition as old may also be influenced by these evaluations. In short, others' evaluations of an older person's age status and evaluations of the performance in this age status may be two concepts that link self-definition as old and self-concept. Second, it may be argued that indeed there is no relationship between self-definition as old and self-concept because the self-concept is developed prior to such a self-definition and is not affected by it.
In social psychology the development of the self-concept is seen as a result of interaction with other persons. In fact, the Meadian conception of self argued that the self could not be developed without interaction with other people. A person's conception of himself is, in part, a reflection of others' attitudes toward him.

The individual experiences himself as such, not directly, but only indirectly, from the particular standpoints of other individual members of the same social group, or from the generalized standpoint of the social group as a whole to which he belongs. For he enters his own experience as a self or individual, not directly or immediately, not by becoming a subject to himself, but only in so far as he first becomes an object to himself just as other individuals are objects to him or in his experience; and he becomes an object to himself only by taking the attitudes of other individuals toward himself within a social environment or context of experience and behavior in which both he and they are involved (Mead, 1934:138; emphasis added).

Thus, attitudes other people have of an older person are important to the older person's conception of himself. A negative self-concept may not be a consequence of a self-definition as old but, rather, a result of negative evaluations by significant others. Similarly, a positive self-concept may be a result of positive evaluations by others and have no relationship to a self-definition as old.

Others' definitions of an individual's age status may also be related to the individual's definitions as old. If significant others define a person as old, the person may define himself as old. Theoretical gerontology, however, has
not included the evaluations of significant others in their explanations of aging. It seems that theoretical gerontology would be advanced if two additional concepts were included: (1) significant others' evaluations of older person's performance in an age status and, (2) significant others' definitions of older person's age status. The saliency of these concepts, however, needs to be empirically evaluated.

An alternative explanation for the lack of a relationship between self-definition as old and self-concept is that these concepts may be independent. Recent theoretical approaches in gerontology (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963; Gubrium, 1973) assumed that an older person's self-concept is similar to the self-concept of a younger person. The sensitivity to other's definitions and the flexibility to be accepted by others that are characteristics of younger persons are used to explain the older person's acceptance of negative stereotypic attitudes and the development of a negative self-concept (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963; Gubrium, 1973). It, however, has been argued that the self-concept of an older person is more crystallized than the self-concept at an earlier age (Neugarten, 1968, 1964; Erikson, 1963, 1959; Havighurst, Neugarten and Tobin, 1968; Neugarten, Havighurst and Tobin, 1968; Wheelwright, 1959). While the self-concept at earlier ages is flexible and sensitive to other's definitions, the "mature"
self-concept (self-concept of an older person) is more established. Thus, the older person's evaluation of himself is not as sensitive to others' or society's definition of him. Consequently, other people, or society in general, may negatively define an older person while the older person's self-evaluation may not be negative. Lowenthal, Thurnher and Chiriboga (1975) reported that males' self-concepts appear to become increasingly stabilized as they age and Reichard, Livson and Peterson (1962) concluded that older persons tend to accept their extant self-concepts and rely less on the acceptance of others. Therefore, even though old age may be devalued and defined negatively by others, an older person who has defined himself as old may not have a negative self-evaluation. If this argument is correct, no relationship between a self-definition as old and self-concept is expected. Further empirical investigation is needed to evaluate validity of these contradictory theoretical arguments.

The finding of no relationship between self-definition as old and self-concept suggests that current theorization in gerontology may be inaccurate. Theoretical orientations (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963; Gubrium, 1973) that assume a person who defines himself as old will also evaluate himself negatively, appear to emphasize only the unfavorable aspects of aging. At least for rural men, no relationship between a self-definition as old and self-concept is evident. Therefore, gerontologists need
to develop theoretical orientations to normal aging that are congruent with the aging process as experienced by rural older persons.

Self-Concept and the Stereotype of Old Age

The stereotype of old age is generally characterized as negative in gerontological literature and older persons are seen as subscribing to this negative perception of late life (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963). In this dissertation, however, it is argued that old people have positive and negative stereotypic beliefs about old age and that there is a relationship between an older person's self-concept and the direction of the stereotypic attitudes to which he subscribes. As general hypothesis 3 stated, a positive relationship between self-concept and the stereotype of old age is supported. Older persons who have a positive self-concept subscribe to positive stereotypic beliefs, while those who exhibit negative self-evaluations subscribe to negative stereotypic attitudes.

Although self-concept and the stereotype of old age are related, self-concept explains little variance in the stereotype of old age (.02908). Another variable may be suggested to explain additional variance in the stereotype of old age. There is evidence that a person's attitudes are influenced by the evaluations and beliefs held by significant others (Brim, 1966; Lowenthal, Thurnher and Chiriboga, 1975; Mead,
1934; Secord and Backman, 1974; Bloom, 1961). The definitions significant others attach to old age may explain more of the variance in the stereotype of old age than an older person's conception of himself. In other words, the positive and/or negative stereotypic attitudes that are held by family members, friends and other people who are significant may be important in an aged individual's development of a definition of old age. If significant others are positively defining old age, an aged person may also define old age positively. Conversely, if an older person's significant others negatively characterize old age, then the older person may be expected to negatively define old age. The relationship between the stereotypic beliefs held by an older person's significant others and an older person's stereotypic attitudes toward old age needs to be empirically examined. The inclusion of this variable may increase the amount of variance explained in the stereotype of old age.

Overall Model

In Chapter II, a theoretical model of the relationships between objective indicators of old age, self-definition as old, self-concept and the stereotype of old age was developed. The concepts included and the relationships proposed in the model were based on gerontological literature. The importance of the dependent variable, stereotype of old age, was demonstrated in a review of recent theoretical approaches in
gerontology (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963). Although Kuypers and Bengtson and Rosow characterized the stereotype of old age as negative, a review of research suggested that stereotypic attitudes toward old age are negative and positive. Therefore, the stereotype of old age was conceptualized as continuous in the model developed in this dissertation. A relationship between objective indicators of old age—retirement, health problems, receiving Social Security and widowhood—and a self-definition as old was proposed (G.H.1). General hypothesis 2 suggested that self-definition as old is related to the self-concept. Finally, it was hypothesized that the self-concept is related to stereotypic attitudes toward old age (G.H.3). The following diagram presents the relationships that were proposed in the theoretical model (Figure 5.1). The findings reported in Chapter IV suggest that this theoretical model needs to be modified. Generally, objective indicators of old age are related to a self-definition as old. Being retired, experiencing health problems and receiving Social Security are related to a self-definition as old. But contrary to general hypothesis 2, such a self-definition is not related to an older person's self-concept. In fact, the data suggest that self-definition as old and self-concept are independent. The self-concept is related to the stereotype of old age as suggested in general hypothesis 3. Though not hypothesized, a relationship between receiving Social Security and stereotypic attitudes also was evidenced. Social Security recipients tend
Figure 5.1. Model of theoretical relationships
to subscribe to negative stereotypic attitudes toward old age. Thus, it appears that elderly persons who subscribe to negative stereotypic attitudes toward old age have negative self-concepts and may be receiving Social Security benefits.

Two other relationships are revealed in the data analysis. First, retirement is inversely related to self-concept. The retired tend to have more negative self-evaluations than the nonretired. A number of studies (Back, 1974; Back and Morris, 1974; Back and Guptill, 1966; Clark and Anderson, 1967; Lowenthal, Thurnher and Chiriboga, 1975; Miller, 1965) have reported a similar relationship between retirement and self-concept. It has been argued that retirement is inversely related to an older person's self-evaluation because:

Work not only provides the individual with a meaningful group and a social situation in which to develop a culturally approved and personally acceptable self-concept, it also provides an identity with an accompanying rationale for his performance in other social situations . . . . In other words, the retired person may find himself without a functional role which would justify his social future, and without an identity which would provide a concept of self tolerable to him and acceptable to others (Miller, 1965:78).

Second, an inverse relationship between health problems and self-concept is reported. Older persons who have experienced health difficulties indicate more negative conceptions of themselves than the healthy aged. This finding is congruent with the research of Taves and Hansen (1963), Ward (1974), Ellenbogen (1967) and Montgomery (1965). These findings, therefore, suggest that an older person who has retired and experienced health difficulties is likely to have a negative
conception of himself.

While the findings of this dissertation partly support the theoretical model, the link between self-definition as old and self-concept is not supported. The following diagram presents a model of the empirically supported relationships reported in Chapter IV:

Objective Indicators of Old Age

- Retirement
- Health Problems
- Social Security Recipient

Self-Definition as Old
- Self-Concept

Stereotype of Old Age

Figure 5.2. Model of statistically significant relationships

One explanation for the incongruency between the theoretical model and the empirically supported relationships is the sample used in this dissertation. There are two characteristics on which this sample differs from previous research. First, this sample included only males. Generally, research on the stereotype of old age has utilized male and female
respondents (see Table 2.1). Since evidence suggests that self-evaluations and attitudes toward old may differ by sex (Back, 1974; Back and Morris, 1974; Breytspraak, 1974; Lowenthal, Thurnher and Chiriboga, 1975), it may be that the inclusion of female respondents in this dissertation would have changed the results. In short, the findings reported in Chapter IV may be sex-specific. For example, retirement and receiving Social Security may have a different effect on the self-concept of a female. Women may not negatively evaluate themselves if they have become retired. Women may also be more sensitive to the evaluations of others. Lowenthal, Thurnher and Chiriboga (1975) reported that, unlike men's, women's self-concept did not become increasingly crystallized. Apparently, a older woman's self-evaluation is more greatly influenced by others' definitions. Therefore, the inclusion of women may change the relationships found in a male sample.

Second, the sample was limited to rural respondents. While most of the research in gerontology does not differentiate between rural and urban samples, it has been suggested that aging may have a differential impact (Youmans, 1963). Differences have been reported in the areas of retirement and health (Ellenbogen, 1967; Youmans, 1963), two of the events used to measure old age. Additional research is needed to determine if the findings reported in Chapter IV are applicable only to males in rural settings or if these findings represent the attitudes and self-evaluations of both rural and urban men and women. Until additional research is
completed, the generalization of these findings is limited to rural males.

**Implications for Theory and Research**

Several implications of this dissertation for theory and research are evident. As already noted, these relationships need to be tested in both female and urban samples. In the area of objective indicators of old age and self-definition as old, the findings of this dissertation provide support for gerontological theory. As Kuypers and Bengtson (1973), Bengtson (1973) and Rosow (1974, 1963) contend, persons experience events that are indicative of old age. As an individual experiences retirement or health problems or begins to receive Social Security benefits, a recognition of old age status may be expected. These events are important because their presence indicates entrance into a new position—that of an old person. Thus, identification of the events indicative of this status transition is important to the development of gerontological theory. The finding that widowhood is not related to a self-definition as old suggests that future research needs to focus on the impact of widowhood for both males and females. Although the death of a spouse appears to have a differential effect on males and females, research is needed to determine if females identify widowhood as an indicator of old age.
Since there is no relationship between self-definition as old and self-concept, at least for rural men, gerontological theories need to be closely examined. Theoretical approaches (Kuypers and Bengtson, 1973; Bengtson, 1973; Rosow, 1974, 1963; Gubrium, 1973) that suggest a relationship between these concepts need to be scrutinized. It may be that the addition of the evaluations of significant others, as a concept, will provide a link between a self-definition as old and self-concept. Or, it may be that these two concepts are independent and are not related. The validity of these alternative explanations needs to be empirically determined. Thus, future research should include the evaluations of significant others to determine if this concept does, in fact, link a self-definition as old to an older person's self-concept. Additional research on the self-concept in later life is needed to determine if the self-concept becomes crystallized and less reliant on the attitudes of others. The findings of additional research need to be integrated into the theoretical approaches to late life. In this way, the schism between theory and research in gerontology can be narrowed.

The findings of this dissertation suggest that older people subscribe to both positive and negative stereotypic beliefs about old age. Thus, the stereotype of old age should be viewed as a continuous concept. Gerontological theory should not emphasize simply the negative stereotype and ignore
positive attitudes toward old age. Consequently, theory should be developed that applies to the "normal" aging process of older people who subscribe to a positive stereotype of old age. Additional research is needed to determine the source of stereotypic attitudes about old age. Do older people's significant others provide definitions of old age? Are these definitions subscribed to by older people? What relationship, if any, does a person's self-concept have to the definitions of old age held by the elderly? Future research will, hopefully, examine these questions to facilitate the development of theoretical gerontology.

Implications for Applied Gerontology

The findings of this dissertation are relevant to practitioners who work with the elderly, especially in a rural setting. To provide the necessary services to aged clients, practitioners need to be aware of the way the person views himself (Brill, 1973; Johnson, 1975). Retirement, health problems and receiving Social Security are events that suggest to the practitioner that the elderly client may define himself as old. Further, retirement and health problems may be indicative of a negative self-evaluation. Services may be provided in terms of the client's desires if the practitioner is aware of the client's self-definition. Practitioners, however,
should not view widowhood as an indicator of old age. The loss of a spouse is not indicative of old age status and if a practitioner is not sensitized to this finding, a misinterpretation of the client's situation may occur. It, also, is important that practitioners who work with the elderly become aware of the lack of a relationship between a self-definition as old and self-concept. Social workers, like theorists, cannot assume that a person has a negative conception of himself because he defines himself as old. Contrary to Lowy's (1962) suggestion, practitioners should not approach older clients with the belief that their self-images need to be modified. Rather, the practitioner needs to be sensitive to the way the older client evaluates himself and, then, deal with the client's self-concept. In this way, practitioners can work with older clients on the client's level and deal with the problems of the client.

The finding that older people subscribe to both positive and negative stereotypic attitudes toward old age and that older people have positive and negative self-concepts has important implications to applied gerontology. Many practitioners have negative beliefs about old age and often their delivery of services to the elderly is affected by these beliefs (Barrett, 1972; Brody, 1970; Linden, 1957). One way in which the delivery of services is affected is that practitioners may provide, or encourage older persons to accept
services that create dependency because practitioners are providing services in terms of the negative stereotype of old age. Brill (1973) suggested that practitioners should not provide services that create dependency. If practitioners are aware that old people may evaluate themselves and old age positively, an attempt to ascertain each client's needs is more likely because the practitioner cannot assume that the elderly view themselves or old age as negative.

Another way these findings are relevant to applied gerontology relates to the selection of services for the elderly. In the social work literature, it is suggested that the elderly need to choose the services they receive (Looft, 1973; Kahn, 1965). If elderly have negative self-concepts and subscribe to negative stereotypic attitudes, the social worker ought to be actively involved in the choice of services for the aged because the elderly may perceive themselves as unable to choose the necessary services. But if the aged have positive self-concepts and subscribe to positive stereotypic beliefs about old age, they will be likely to view themselves as capable of choosing the services they require. If, in the latter case, a social worker assumes that the aged negatively evaluate themselves and their age status, their assistance in the choice of services needed may be perceived by the aged as an intervention into an area in which the aged are capable of making their own decisions. In short, the practitioner
should be aware that the aged have positive and negative self-evaluations and stereotypic attitudes toward old age and the delivery of service process should be oriented to these different self-evaluations and attitudes.
CHAPTER VI: SUMMARY

This dissertation has focused on the stereotype of old age; that is, attitudes, opinions or beliefs about late life that are based on few, if any, facts, produced by illogical reasoning, not easily changed and not necessarily positive or negative. Although stereotypic attitudes toward late life may be positive or negative, theoretical orientations in gerontology have assumed that these attitudes are negative and that persons who define themselves as old subscribe to these negative beliefs. Theorists have also argued that older persons develop negative self-concepts because they subscribe to the negative stereotype of old age. Since findings from recent research have suggested that stereotypic attitudes toward old age are positive and negative, the objective of this dissertation was to develop a model that explicates the correlates of the stereotype of old age.

To develop the model, literature on the stereotype of old age was reviewed. Stereotypic beliefs have received attention in both theory and research. Theoretically, these attitudes have been associated with objective indicators of old age, self-definition as old and self-concept. Although it has been assumed that stereotypic beliefs are negative, research has found that young, middle age and older persons have positive and negative conceptions of late life. Thus, in the theoretical model proposed in this dissertation the
stereotype of old age was viewed as continuous; that is, positive and negative attitudes were included.

Theory and research have linked several other concepts to the stereotype of old age. Objective indicators of old age, such as retirement, health problems, receiving Social Security and widowhood have been related to a self-definition as old. If an older person has experienced one or more of these events, it is expected that he will define himself as old. This self-definition as old has been related to the self-concept. A self-defined older person is expected to have a negative evaluation of himself. Finally, the self-concept has been related to the stereotype of old age. A negative self-evaluation has been linked to a negative stereotype of old age while a positive view of self has been related to a positive perception of late life. A theoretical model of the stereotype of old age and objective indicators of old age, self-definition as old and self-concept was developed.

Data from 1,322 rural men aged 60 years and over were used to empirically test the relationships in the theoretical model. It was found that the theoretical model, in part, was supported. The findings revealed a relationship between three of the four events used to measure old age and self-definition as old. As expected, retirement, health problems and receiving Social Security were positively related to a self-definition as old. Although there was a relationship
between widowhood and self-definition as old, it was not statistically significant. Approximately twelve percent of the variance in self-definition as old was explained by these three indicators.

The findings also demonstrated a relationship between the self-concept and stereotype of old age. As hypothesized, a positive self-evaluation was linked to positive stereotypic beliefs and a negative self-concept was related to a negative stereotype of old age. Although the self-concept was significantly related, little variance in the stereotype of old age was explained.

A relationship between self-definition as old and self-concept was not supported by these data. This suggests that, at least for this sample, self-definition as old and self-concept are independent. Other concepts that possibly mediate the relationship between self-definition and self-evaluation were suggested for further study.

The findings revealed three additional relationships. Although a self-definition as old and self-concept were not related, two objective indicators of old age—retirement and health problems—were inversely related to self-concept. Thus, an older person who has retired or experienced health problems was more likely to have a negative self-concept. Receiving Social Security benefits was also inversely related to the stereotype of old age. This suggests that a Social Security
recipient is more likely to subscribe to negative stereotypic attitudes toward old age.

While certain relationships were significant, less than four percent of the variance in the stereotype of old age was accounted for by the objective indicators of old age, self-definition as old and self-concept. One explanation for the lack of explained variance may be that the sample used in this dissertation included only males. Since it appears that the self-concept in late life differs by sex, it may be that the inclusion of responses from females would increase the total amount of explained variance. There also may be rural-urban differences that affect the older persons' self-evaluations and stereotypic attitudes. Additional research needs to determine if the relationships found in this dissertation are sex specific and if there are rural-urban differences.

Although little variance in the stereotype of old age was explained, the model developed in this dissertation is important to gerontology. The primary contribution to gerontology is that the development of this model empirically tested two assumptions on which many gerontological theories are based. Specifically, it cannot be assumed, at least for rural men, that stereotypic attitudes toward old age are negative and that persons who define themselves as old subscribe to these negative beliefs. Further, self-defined old
persons do not develop negative self-evaluations. The findings in this dissertation indicate that a self-definition as old is independent of the self-concept. In short, the assumptions of gerontological theory are not supported in this dissertation.

In conclusion, since current assumptions held by gerontological theorists are not supported, additional research should be conducted to determine if the lack of support for these assumptions is sample specific. If further research fails to provide support for these assumptions, gerontological theorists will need to closely examine the assumptions on which their theories are based. This dissertation will, hopefully, give impetus to research that empirically tests the assumptions prevalent in gerontology.
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Acknowledgement is expressed to the other members of my Program of Study committee (in alphabetical order): Drs. Dwight G. Dean, Mary E. Heltsley, Patricia Keith and Charles L. Mulford. Each of these committee members provided excellent professional role models in their areas of specialization. Their contribution to my development as a sociologist cannot be measured.

Drs. Edward A. Powers, Patricia Keith and Willis J. Goudy are thanked for permitting me to use their data in this dissertation. A special appreciation is acknowledged for allowing me to be associated with the "Older Workers" project. Their direction, criticism, patience and encouragement contributed enormously to my development of sociological research skills.
The Midwest Council for Social Research in Aging is acknowledged for providing financial support during the final two years of my graduate study. Appreciation is also expressed to the Midwest Council for creating an intellectual atmosphere, at the periodic seminars, in which gerontological theories and research could be critically examined. Faculty, postdocs and fellow predocs contributed extensively to my development as a gerontologist.

Last, but not least, my deep appreciation is expressed to my wife, Ellie. As a colleague, she provided invaluable assessments of my ideas in sociology. As a friend, she provided encouragement and support throughout my coursework, prelims and dissertation. Without her, this graduate program would not have been completed.
APPENDIX A: SOCIAL BREAKDOWN MODEL

12Kuypers and Bengtson, 1973:190.
### APPENDIX B: AGE DISTRIBUTION OF 1974 SAMPLE

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Missing Cases = 0
APPENDIX C: FREQUENCIES OF RESPONSES
FOR EACH VARIABLE

Objective Indicators of Old Age

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