

LATER MATURITY: DEVELOPMENTAL TASK
ACCOMPLISHMENT AND LIFE
SATISFACTION

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TABLE OF CONTENTS

ACKNOWLEDGEMENTS	iii
LIST OF TABLES	vi
Chapter	
I. INTRODUCTION	1
Statement of the Problem	2
Purposes	2
Background and Significance	3
Hypothesis	8
Definition of Terms	8
Limitations	9
Delimitations	9
Assumptions	9
Summary	10
II. REVIEW OF LITERATURE	11
Introduction	11
Later Years of Life	11
Personality	15
Life Satisfaction	28
Developmental Tasks	37
Theories of Aging	43
Summary	46
III. PROCEDURE FOR COLLECTION AND TREATMENT OF DATA	48
Introduction	48
Setting	48
Population	49
Tool	49
Data Collection	52
Treatment of Data	53
Summary	54

IV.	ANALYSIS OF DATA	55
	Introduction	55
	Analysis and Interpretation of the Data	55
	Summary	60
V.	SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS	62
	Introduction	62
	Summary	62
	Conclusions	64
	Recommendations	65
	APPENDICES	66
	REFERENCES CITED	88

LIST OF TABLES

1. Age Range of the Subjects by Number and Percentage	56
2. Subjects' Sex Distribution by Number and Percentage	57
3. Subjects' Ethnicity by Number and Percentage	58
4. Means, Standard Deviations, and Ranges of Scores for Life Satisfaction of Developmental Task Achievers	59

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CHAPTER I

INTRODUCTION

Growing older is a normal and continuous life-long process. As an individual ages, his philosophy of life influences the manner in which he copes with the stresses he encounters. A successful transition from one age to the next is determined by the amount of satisfaction he has obtained in accomplishing previous goals and in meeting the expectations that the society in which he lives demands.

Our society has contributed little to lessen those stresses that the older person experiences as he makes adjustments to changes in his physical health, income, and interpersonal relationships. Instead, society has contributed to the stresses of a longer life. The older person has been viewed as senile, unproductive, and of little value to society. These views may reflect a society whose members expect a long life, but are fearful of their own destiny.

Prejudice has fostered ignorance and a lack of attention to the problems that concern the older person. Because our society is rapidly becoming an aging

population, it is apparent that the problems of this group can no longer be ignored. Research has shown success in its efforts to eradicate some of the unpopular myths that have oppressed the older adult.

In order to deal effectively with the problems of an aging society, research must concern itself not only with adding years to life, but also with adding life to years. There is a need to explore those constructive qualities that enable an individual to grow older and to enjoy a fulfilled old age. When this information is obtained, our society will be able to provide its members with a more enhanced opportunity to afford a satisfied and productive later maturity.

Statement of the Problem

The problem for study was to determine if life satisfaction is greater for those older persons who are more successful in accomplishing the developmental tasks of later life than those who are less successful in accomplishing the developmental tasks.

Purposes

The purposes of the study were to determine:

1. The degree of life satisfaction for persons sixty years of age and older

2. The degree of success in accomplishing the developmental tasks of later life for those age sixty and older

3. The difference in life satisfaction between those persons sixty years of age and older who are more successful in accomplishing the developmental tasks than those who are less successful

Background and Significance

The triumphs of modern medicine and scientific technology have made it possible for many to expect and experience a longer life. There are over twenty million persons or 10 percent of the population who are over the age of sixty-five (United States Bureau of the Census 1977). Older persons constitute the fastest growing group in the United States (Butler 1975).

Due to the significantly increasing numbers of older persons, a critical situation exists within the health care delivery system. There is an immediate need for qualified persons who are willing to work with the older clientele. A recent report indicated that there is a need for several thousand workers to be trained in order that the gap between the need for qualified personnel and the needs of the older population be filled by the year

1980 (United States Senate 1973). Skilled workers need an adequate knowledge of the aging process in order to intervene successfully when the older person encounters problems in adjusting to his life.

Aging is a process that occurs from the time of conception to death (Neugarten 1973). In the past, developmental psychology has been equated with child psychology (Herr 1976). The later years of life have not been examined due to the theoretical belief that human development proceeds only through the years of adulthood (Pincus 1967).

Surveys conducted to explore the amount of research done on the developmental phases of the life-span revealed that 87 percent of the literature dealt with the first 25 percent of the life cycle. Only 13 percent of the literature contained content relevant to the adult years (Birren and Woodruff 1973). These findings suggest that present knowledge and understanding of the aging process is limited by a lack of concern for the later years of life.

Data have been slow to appear that would explain what the mechanisms are that enable older persons to adjust to changing life circumstances and to attain satisfaction in the design of their lives (Havighurst 1968). Studies have shown that accomplishment of developmental

tasks of the earlier periods of life influences successful growth in children and youth (Kurtz and Wolk 1975). An application of the developmental task theory to the later years of life could be useful to determine if dissatisfaction with life and lack of adjustment to changes are necessarily the ways an older person will have to perceive his longer life.

According to Havighurst (1953), each culture and society has its own basic skills and behavior patterns that it expects its members to acquire. This acquisition is necessary in order that the individual find personal and social satisfaction to the adjustments that are necessary at each developmental period. Developmental tasks are products of physical maturation, cultural expectations, and one's own personal value system or personality, or a combination of these variables.

A recent study showed that life satisfaction is related to developmental task accomplishment in an older population (Kurtz and Wolk 1975). The findings suggested that accomplishment of the developmental tasks of life is crucial to the individual's life satisfaction. Developmental tasks have been referred to as the stepping stones for achievement of greater happiness and satisfaction with life (Zaccaria 1965).

How successfully a person is able to master the developmental tasks of a certain period or age influences greatly the adjustment he will make to life. Failure to master basic developmental tasks results in personal dissatisfaction with life, society's disapproval, and difficulty in accomplishing or mastering later tasks in life. Successful mastery of such tasks determines effective living and healthy growth and development (Havighurst 1953).

Developmental tasks provide concrete guidelines for predicting the expectations and norms of the later years of life. Havighurst (1972) identified developmental tasks for the periods of infancy through the later years. The developmental tasks of the later years of life are:

1. Adjusting to reduced physical health and strength
2. Adjusting to a lowered or fixed income and retirement
3. Adjusting to loss of spouse
4. Adjusting to and adopting changing social roles
5. Establishing a direct involvement and affiliation with one's own peer group
6. Establishing adequate physical living conditions

An additional task that was constructed for use in a study by Kurtz and Wolk (1975) as a measurement of developmental task accomplishment is included in this study. It was stated as:

7. Maintaining appropriate emotional ties and relationships

The later years of life have the potential of being experienced with success as do the earlier periods of life. Havighurst's theory of successful aging (1961) implied that a person will have an overall feeling of satisfaction with his past and present life to the extent that he (1) obtains enjoyment from any of the activities that involve his everyday life, (2) feels a sense of resolution toward what life has been and accepts his life as being meaningful, (3) feels success in accomplishing the important goals of his life, and (4) shows happiness with life, optimism in his attitude toward people and objects, and a positive tone in mood affect.

The field of gerontology lacks a widely accepted theoretical framework for understanding the aging process. The findings of recent studies (Edwards and Klemmack 1973) challenged the two most prominent theories of successful aging, activity theory, and disengagement theory, as valid interpretations of successful aging. The

developmental task theory and theory of successful aging have promise as a useful framework for the study of life satisfaction. This study is based on Havighurst's theory of developmental tasks and theory of successful aging.

Hypothesis

The hypothesis for the study was that there is no difference in life satisfaction for persons sixty years of age and older who are more successful in accomplishing the developmental tasks of later life than those who are less successful in accomplishing those developmental tasks.

Definition of Terms

The following terms were defined:

1. Developmental task accomplishment--successful mastery of basic skills and behavior patterns throughout periods of life; accomplishment of tasks determines successful adjustment and development of an individual
2. Developmental tasks--those tasks designated by Kurtz and Wolk (1975) and Havighurst (1972) for the later years of life
3. Life satisfaction--a feeling or attitude that an individual has lived an effective life in the past and

is presently satisfied with his own personal and social life status

4. Later years of life--the developmental stage in life arbitrarily assigned to those persons who are sixty years of age and older

Limitation

The limitation was that the questionnaire is a forced-choice type scale that requires subjects to choose between two alternative responses.

Delimitations

The delimitations were that the subjects be:

1. Age sixty and older
2. Participants at senior citizens centers

Assumptions

The assumptions were:

1. Developmental tasks are reference points for determining successful aging
2. Developmental task accomplishment and life satisfaction can be measured by a pencil-and-paper test
3. The later years of life have the potential of being experienced as an emotionally satisfying period

Summary

Later maturity presents an array of problems and frustrations, as well as challenges and opportunities for the older individual. The achievement of life satisfaction, in the later years may be based on the experience of successes or failures in meeting the developmental tasks. This study was designed to determine if life satisfaction is greater for older persons who are more successful in developmental task accomplishment than those who are less successful.

Chapter II presents a review of literature concerning life satisfaction, including a discussion of personality and attitudes toward aging. The psychosocial and demographic variables that influence life satisfaction, developmental task accomplishment related to life satisfaction, and a review of the disengagement and activity theories are included in the chapter. Chapter III outlines the methodology of the study through a presentation of the procedure for collection and treatment of data. The analysis of the data and findings of the study are discussed in Chapter IV. Chapter V presents the summary, conclusions, and recommendations for further study.

CHAPTER II

REVIEW OF LITERATURE

Introduction

Chapter II encompasses a review of pertinent studies related to the concept of life satisfaction and the older adult. Attitudes toward aging, personality, life satisfaction, developmental task accomplishment, and theories of aging are examined as these topics relate to the older person. The studies are presented in five sections in Chapter II.

An overview of the later years of life is presented in the first section, followed by section two which discusses personality and attitudes toward aging. In the third section, life satisfaction in the later years is examined. Studies on developmental task accomplishment are discussed in section four, and in the fifth section, studies relating to the theory of disengagement and activity theory are presented.

Later Years of Life

Later maturity is a unique developmental phase in the life cycle as are the periods of infancy, childhood, adolescence, and adulthood. The time of onset and

process of aging varies greatly from one person to another (Weinberg 1970).

The American societal view that life as one grows older is a straight and narrow path to decline and death has weighed heavily upon the psyche of the older person (Steele and Crow 1970). Similar attitudes have created feelings of devaluation, feelings of being unwanted and nonproductive, and a sense of hopelessness among older persons. The ultimate integrity of the personality is challenged during the later years of life (Schwartz 1975).

Life is a continuing process of development (Butler 1975). Some of the factors having an effect on adjustment in early adulthood and middle age continue to shape the lives of older persons (Hendricks and Hendricks 1977). However there are various problems in old age unlike those experienced in earlier stages of life.

Following the termination of parental and job responsibilities, the older person encounters a change in his social and psychological status. His previous position in the family and community is no longer maintained. Old ways of gaining respect and recognition must be replaced by alternate sources (Havighurst 1972).

A similar event that arises more frequently as one ages is the loss of a spouse or close tie (Havighurst 1972). New sources for developing a close relationship or friend must be found so that appropriate emotional ties and a sense of affiliation exist.

Busse (1969) and Lamy (1973) reported that as the process of biological aging continues, a gradual decrease in energy level and functional capacity occurs. The rate at which these changes occur varies between individuals. Changes in physical health, such as the onset of a chronic illness, may accompany these physiological changes of aging. Health and health-related problems threaten the individual's well-being and require increased attention to health maintenance (United States Senate 1973). The older person is often forced to alter his participation or degree of involvement in social activities.

Another problem facing the older person arises at the time of retirement. Adjusting to a reduced or fixed income is a difficult task to accomplish for many older persons (Havighurst 1972). If health problems exist or present themselves later, the effects produce an additional burden.

Financial problems may force the older person to seek new ways of maintaining satisfactory physical

living arrangements (Havighurst 1972). Other problems which threaten the well-being of the individual include the inability to obtain medical care and to maintain satisfactory health.

Society makes certain demands on individuals at each stage of development. In order to meet these demands, known as developmental tasks, Havighurst (1972) believed that each individual must acquire certain skills and behavior patterns. Zaccaria (1965) found that as the older person conforms to the demands of society, the developmental tasks also give direction to the person's life.

Butler (1974) noted that successful aging is influenced by a person's health, personality, earlier life experiences, and the support systems available. In order to achieve personal and social satisfaction, Butler (1974) strongly suggested that the older person must exercise a sense of flexibility in coping with life. In agreement with this view, Hendricks and Hendricks (1977) also reported that modifications in the way the older person meets and copes with the challenges of later maturity may be required.

Personality

Although the members of a culture or subculture may share some traits in common, each individual is unique (Zaccaria 1965). An individual perceives himself and others according to his own personal value-system (Jourard 1958). Sussman (1972) and Garvey (1975) agreed that the set of values influences a person's thoughts, attitudes, and behavior when there are decisions to be made. Jourard (1958) called the total of a person's habits, attitudes and values which determine his behavior, the personality.

Branden (1969) stated that no value judgment is more important to the development and motivation of man than the judgments he makes about the self. The set of values that an individual holds to be true about the self has been called the self-esteem (Jourard 1958). Maslow (1970) believed that self-esteem is a universal need inherently determined and genetically based within the species of man.

Adler stated that all behavior is meaningful and purposefully directed toward achieving a particular goal (Ansbacher and Ansbacher 1956). Man behaves in certain ways, not only to attain satisfaction of personal wants, but also to achieve a sense of belonging, approval, and

recognition from others (Croake and Glover 1977).

Behavior also is consistent with a person's values and beliefs about the self (Jourard 1958).

Schwartz (1975, p. 470) considered self-esteem to be the "essential ingredient" for determining successful aging or life satisfaction. Success or failure in the areas of living determines an individual's sense of worth or self-esteem (Jourard 1958). When behavior is inconsistent with the standards by which an individual judges himself, the person may suffer feelings of inadequacy and failure (Jourard 1958).

Branden (1969) found that the behavior of the low self-esteem individual is influenced directly by the environment and situation. The person is unable to evaluate effectively the situation and has difficulty making decisions. Maslow (1970) observed that an individual with a high level of self-esteem is able to respond to the situation in a thoughtful manner and in accordance with his own set of standards and values.

Branden (1969) stated that a healthy self-esteem is dependent on the receipt of acceptance and recognition from significant others, and a feeling of control and effectiveness in dealing with the environment. A person's self-esteem has been found to change according to the

societal structure of the environment (Balkwell 1969). A society in which a sense of inferiority is attached to old age tends to suppress the development of a high level of self-esteem (Butler 1975).

The American value-system has been characterized as a production-oriented system (Beck 1979). In a production-oriented society, an individual's position or status within the group is evaluated by his economic contribution to the welfare of the group (Sussman 1972).

During the pre-retirement years, a person assumes the worker-producer role, which denotes value (Sussman 1972). Upon reaching retirement, the change in role from producer to consumer confers a devalued status on the individual. Havighurst (1972) noted that adjusting to retirement is a developmental task in the later years of life. The way in which the older person meets this task is influenced by his self-esteem and previous successes or failures in earlier life experiences (Havighurst 1972).

A study on adjustment and successful aging, in a sample of eighty-seven older men, indicated that personality was the pivotal dimension in predicting future life satisfaction (Reichard et al 1968). Both retired and non-retired males, aged fifty-five to eighty-four, were

interviewed by clinical psychologists. Findings revealed profiles of five distinct personalities among the group, three which were described as well-adjusted, and two as poorly-adjusted. The well-adjusted men showed a strong self-regard and ability to cope with crises throughout their lives, and a sense of resolution toward life experiences. Well-adjusted persons also were involved in more social activities and reported satisfaction in their social interactions, formal or informal.

Palmore (1965) stated that retirement may be more difficult for men because they perceive work as the permanent and central role of life. In a longitudinal study of men and women, Streib and Schneider (1971) found no differences in life satisfaction between the sexes in relation to attitudes pre- and post-retirement. Thompson, et al. (1960), in a study of older persons and their adjustment to retirement, reported that changes in life satisfaction could be predicted for those persons who express a reluctance to retire. Carp (1972) suggested that difficulty in adjusting to retirement also may result in lowered self-esteem and decreased life satisfaction.

In a study of one hundred adults aged fifty and older, Kurtz and Kyle (1977) examined the relationship

between life satisfaction and responsibility exercised during the later years. The sample consisted of both retired and non-retired males and females residing in the Washington-Baltimore area. Those persons who continued to exercise responsibility in the management of their lives showed greater life satisfaction. No significant sex differences were found in life satisfaction.

Dunkle (1972) studied the relationship between life experiences and adjustment of elderly men and women. Two hypotheses were formed. The hypothesis that aged women have a greater degree of life satisfaction than aged males was supported. The findings also supported the second hypothesis, that aged women who have greater role discontinuity and changes in the course of their lives have more life satisfaction than women who have less discontinuity. Results suggested that women are better able to adjust to old age as a result of repeated role discontinuities and impermanence imposed by society.

Lopata (1971) argued in support of the finding (Dunkle 1972) that women adjust to old age more easily than men, due to an increase in role discontinuity. The example was cited that widowhood is also experienced more often by women than men, and is coupled more often with financial loss, due to loss of the husband. Lopata

(1971) suggested that women also have made more adjustments to changes in their lives and are better prepared for their old age than men.

Zimmerman (1974), in a study of adjustment to aging among a sample of elderly men and women, found that men showed a higher level of morale and were involved in more substitute activities. The majority of the men was married or living in a household with others. The findings were contradictory to those of Dunkle (1972). Zimmerman suggested that women are more rigidly socialized, and are less able to adjust to aging than men.

A survey of life satisfaction in a sample of retired and non-retired elderly residents from the Columbus, Ohio, area was reported by Chatfield (1977). A total of 2500 persons, 47 percent of them males, and 53 percent females, participated in the study. Results showed life satisfaction was lower among those recently retired within one year. The relationship between health problems and life satisfaction decreased for those persons higher in socio-economic status, when controls were made on income. A relationship between life satisfaction and living within a family setting was shown. This finding was attributed to an increased income, rather than the family setting.

Thompson (1971) studied morale in a sample of 1589 elderly retired men. Social activity was thought to be an intervening variable between all other variables, age, income, perception of health, occupation, physical disability, age-associated morale, and others. The variable, social activity, was defined as interaction with friends and participation in clubs. Findings showed that social activity was a weak predictor of morale, and not an intervening variable. The most significant predictor of morale was self-rated health.

Jourard (1958) stated that attitudes and values define and shape the personality. Peters (1971) found that during each developmental period, at various times, an individual gains an age identification or sense of identity with reference to some group. Peters (1971) suggested that the reference group is commonly the peers.

Attitudes toward life, among various age groups, have been studied. The findings have shown that the aged are not a homogeneous group with respect to attitudes toward life (Bennett and Eckman 1973). Studies on attitudes toward life have failed to show a reliable connection, either positive (Borges and Dutton 1976, Lieberman 1970, Lowy et al 1974, and Youmans 1975) or negative

(Ragan et al 1975, Alston and Dudley 1973), between aging and happiness.

In a study on attitudes toward aging, Borges and Dutton (1976) asked 532 persons, aged six to sixty-five and older, to assess their lives in terms of the past, present, and future. Subjects were assigned to one of seven age groups. Each person rated his own life in terms of the past, present, and future at each of eight age-intervals. Ratings were made on a seven-point scale, ranging from very good to very bad. The age-interval zero to five was added to the original seven age groups. Subjects also evaluated the "average person's life" at each of the age-intervals, and the "best year" of their lives, either to date or projected. Findings showed that younger subjects projected their future lives would not be as good as the older subjects reported their present lives to be. Older subjects projected their future lives would be better than the younger subjects projected their futures would be. When asked to rate their own lives in contrast to the average person of their identical age, both younger and older persons consistently rated their own lives higher than the average person's life. The age identified as the "best year" of life increased with the subject's age until age twenty-five. For subjects,

aged forty-nine to sixty-five, the "best year" cited was age thirty-four. The aged sixty-five and older group cited their "best year" as age thirty-two. Findings suggested that optimism toward the years ahead increases with age. The suggestion also was that a need exists to increase the awareness of young people about old age and its potential for satisfaction.

Lieberman (1970) reported a study of life satisfaction and attitudes toward aging in a sample of older and younger adults. A total of 101 older persons, aged sixty-four to ninety-five, and 78 college students constituted the sample. No differences in life satisfaction between the younger or older cohorts were found. Findings revealed significant differences in attitudes toward aging. Older subjects reported more satisfaction with their past, and only 20 percent of them agreed that their best years were the present. In comparison, almost 66 percent of the young said their best years were in the present. Younger adults showed more optimism toward the future than the elderly. No relationship was found between age, sex, marital status or living conditions, and life satisfaction within the older adult group.

Youmans reported a study on attitudes toward life in a sample of younger-old and older-aged adults

(Youmans 1975). A total of 224 persons, aged fifty-five to seventy-four, and those aged seventy-five and older, from an urban and rural setting in Kentucky were interviewed. Those persons who were seventy-five and older from the urban setting were generally more positive in self-image and morale, and more satisfied with community and family life than the younger-old group.

A study from a 1969 national sample of elderly whites showed that the proportion of respondents who defined life as exciting varied inversely with age (Alston and Dudley 1973). The findings suggested that an increased routinization in life occurs during the later years.

Ragan et al (1975) examined life satisfaction, age identification, and attitudes toward aging in a sample of middle-aged and older-aged adults in southern California. A total of 1200 individuals from three ethnic groups, Negro, Mexican-American, and Anglo, participated in the survey. Findings revealed that satisfaction in life was related to attitudes toward aging and age identification, and that attitudes toward aging and age identification differed for each ethnic group. Elderly Mexican-Americans were lowest in life satisfaction. In general, women were lower in life satisfaction than men.

A pattern of lower life satisfaction among older respondents in comparison to the middle-aged cohorts could not be discriminated (Ragan et al. 1975).

In 1974, Lowy et al. reported on the relationship between attitudes of human service workers toward aging and the morale of their client-patients. The sample consisted of sixty-one elderly residents in an institutional setting and sixty-one social workers and nurses who had direct contact with the elderly patients. The findings showed that elderly patients, cared for by workers with positive attitudes toward aging, had a high degree of life satisfaction. Low life satisfaction was exhibited by those elderly patients who were cared for by workers with negative attitudes toward aging. Findings suggested a need for care-givers to be more cognizant of attitudes toward aging. Negative attitudes, on the part of care-givers, appeared to affect the morale of the elderly patients in their care.

Havighurst (1972) argued that the personality is not fixed early in life, but that it continually evolves. The self-ideal is the "should" of the conscience (Jourard, 1958) or set of standards by which the person judges the self. Garvey (1975) suggested that the thoughts, feelings, and behavior of a person are determined by his

values. Studies of changes in values and personality with age have shown inconsistent findings.

A study was reported on aging and its effects on the self-concept and ideal-self (Hess and Bradshaw 1970). A sample of various ages, ranging from sixteen to sixty-five, were matched for age, sex, education, and income; and placed into four groups. All age groups reported a significantly higher ideal-self than actual-self, or self-concept. Older respondents were higher in self-concept and ideal-self than the sixteen to eighteen year old and eighteen to twenty year old adolescent groups. Ideal-self was related to the levels of aspiration an individual formulated when he was younger. Self-concept was related to life satisfaction and accomplishment of life goals.

Bretysprask and Maddox (1974) examined self-concept of middle- and older-aged adults in a longitudinal study. Their findings showed that changes in actual-versus ideal-self were related to changes in health and locus of control. Arbarbanel (1974), in a study of prestige among older persons, found that there was a relationship between high prestige and resource control, and low prestige and lack of resource control.

A study of self-concept of young-, middle-, and old-aged adults was reported by Grant (1967). Subjects

ranging in age twenty to sixty-nine, were administered the Tennessee Self-Concept Scale, Cattell's 16-Personality Factor Questionnaire Forms A-B, and a personal data form. Women were found to have a positive self-concept more often than men. Self-concept was also shown to increase with age. Findings suggested that the increase, in reported self-satisfaction, may have been a function of denial, rather than an actual increase in self-esteem. Older subjects scored higher in tendency toward denial.

Garvey (1975) examined the relationship between age and personality and changes in values in a longitudinal study of 969 males, thirty years of age or older. Subjects responded to the Allport-Vernon-Lindsey Scale of Values and Cattell's 16-Personality Factor scale. Findings showed that values and personality differed according to age, although not significantly. When age was controlled, only the absolute levels of values were found to differ.

Similar findings were reported by Clements (1972) in a study of the relationship between values and self-esteem of older persons. The sample consisted of older persons living in two retirement communities of southern California. Self-esteem and values were related, although no significant differences in age or sex were observed.

In a study of the relationship between self-disclosure and psychological well-being, Moriwaki and Herr (1972) reported that eight different patterns of self-disclosure were observed. The sample consisted of eighty older adults. Findings showed that reported well-being, as measured by Bradburn's Affect-Balance-Scale, was more strongly related to self-disclosure on items of a negative and threatening nature, than high disclosure on any of the other major areas of self-disclosure. The findings suggested that self-disclosure is associated with positive self-concept.

Life Satisfaction

Studies on life satisfaction in old age and the variables related to life satisfaction have resulted in inconsistent findings (Larson 1978). Age (Lesler 1975, Graney 1973, Bortner and Hultsch 1970, Palmore and Kivett 1977), race (Clemente and Sauer 1974, Heisel and Faulkner 1974), and sex (Palmore and Kivett 1977 and Medley 1976) alone have proven to be inefficient predictors of life satisfaction.

Those variables reported to be more consistently related to life satisfaction are health (Jackson et al. 1978, Sauer 1977, Palmore and Kivett 1977, Medley 1976,

Spreitzer and Snyder 1974, Bild and Havighurst 1976), socioeconomic indicators (Neugarten et al 1961, Spreitzer and Snyder 1974), and social interaction (Sauer 1977, Bild and Havighurst 1976, Medley 1976, and Mancini 1978).

A study on the relationship between life satisfaction and age was reported by Neugarten et al. (1961). A sample of 177 older adults, ranging in age from fifty to seventy and seventy to ninety, from the Kansas City area participated in the study. The elderly sample was representative of the white middle-income population, none of them low in socioeconomic status, and none immobilized by serious health problems. Findings showed no relationship between age and life satisfaction. Both males and females, nonmarried in status, from the younger-old and older-aged groups had significantly lower life satisfaction than the married cohorts. A significant relationship between life satisfaction and socioeconomic status was shown.

Clemente and Sauer (1974) examined the relationship between race and morale. Interviews, in conjunction with the Lawton Philadelphia Geriatric Center Scale, were used to determine life satisfaction among an elderly black and white population in the Philadelphia area. The sample consisted of 721 black and 211 white persons,

aged sixty-five and older. The findings indicated that black aged were higher in morale than white aged, with 76 percent of the black sample showing high morale.

In a study on self-concept and morale of an elderly black sample, Heisel and Faulkner (1974) found that the majority of the older blacks, when asked to evaluate themselves, and to compare themselves with their peers, had a high, positive self-concept. A need for special services was indicated by almost one-third of the sample who reported feelings of isolation, unhappiness, and demoralization.

Findings from a study on life satisfaction among elderly blacks in the Detroit area indicated that certain variables were more significant in predicting life satisfaction (Jackson et al. 1978). Those variables identified were education, perceived health, religious attitudes, need affiliation, and attitudes toward retirement. Self-esteem also was related to changes in life satisfaction. Attitudes toward life, both present and future, were related to changes in life satisfaction, although not significantly. Marital status, income, and voluntary social participation were not significantly predictive of life satisfaction.

Sauer (1977) reported on the differences in life satisfaction of low-income elderly whites and blacks in the Philadelphia area. Interviews and the use of Lawton's Philadelphia Geriatric Morale Scale to measure morale, and Breslau's Health Scale to measure functional ability, indicated some differences between the groups. Health and participation in solitary activities were the most frequently identified predictors of morale. For blacks, solitary activities were second in importance only to health, and for whites, a reverse in this order was shown. There were no significant differences in the mean scores on morale. Morale was related to sex and family interaction among the elderly whites.

A study of morale in an elderly population was reported by Rubenstein (1971). The sample of elderly blacks and whites was selected from a 1968 national senior citizens survey. Demographic variables were examined to determine a causal relationship between differences in morale of elderly blacks and whites. The hypothesis was that black aged persons living alone, or without a spouse, have lower morale. Results showed that the elderly blacks were no more alone, or isolated, than whites, although more blacks were living in households without a spouse. Only about 21 percent of the blacks

lived alone, as compared to almost 25 percent of the aged whites. Of those not living alone, a larger percentage of the blacks shared a household with more than one person. Socioeconomic status was lower among blacks, with 70 to 80 percent of them indicating incomes near the poverty level. No differences were reported in morale between elderly blacks and whites.

Lesler (1975) examined life satisfaction from a past and present perspective in an elderly population. Life satisfaction, as measured by the Vanderbilt-University of Georgia Quality of Life Scale, was found to increase across the life cycle. The criteria by which the older person evaluated his life during the parental period was found to differ from the post-parental period. A shift from family level factors during the parental period toward personal level criteria, such as integrity and spirituality, in the post-parental period was shown.

Graney (1973) reported similar findings in a study of happiness among a sample of elderly females. Responses to the Bradburn-Affect-Balance Scale showed that happiness was not related to age differences among the elderly women. Findings indicated that personal happiness was more influenced by an individual's

non-age-specific gains and losses, such as physical incapacity, widowhood, and remarriage.

Bortner and Hultsch (1970) studied life satisfaction in relation to socio-psychological variables, as measured by the Cantril Ladder, in a sample of elderly persons. Life satisfaction was measured in terms of a person's present feelings about life. Findings showed that opportunities to select goals, and access to a means for achieving those goals, were most predictive of life satisfaction. The variables of age and income showed less significant influence on life satisfaction.

Chirboga and Lowenthal (1971) studied happiness, a measure of psychological well-being, in a sample of persons aged sixteen to sixty-one. Happiness was defined as a person's feeling that resources are available to promote self-esteem and psychological well-being. The findings failed to show the expected proportional increase in deficits with age. Persons who reported a greater degree of happiness had more resources and many deficits, and those least happy, had fewer resources and many deficits. Findings suggested that the resources compensate for the deficits and that happiness is actually enhanced by the interaction of deficits and resources (Chirboga and Lowenthal 1971).

In a longitudinal study of life satisfaction in an adult population, aged forty-six to seventy, Palmore and Kivett (1977) found that a person's assessment of his health was the most important predictor of future life satisfaction. The sample was representative of both middle- and upper-income persons. Subjects were followed over a period of six years. No significant changes in life satisfaction were found for any of the ten age-sex cohorts, although about one-fourth of the sample indicated substantial changes toward a greater or lesser degree of satisfaction. Predictions of changes in life satisfaction could not be made in terms of initial scores or changes in the scores of other variables. The findings suggested that life satisfaction is basically stable during the middle and later adult years.

Medley (1976), in a study of older adults found that health was an important variable influencing life satisfaction. A sample of older adults was selected from a larger 1971 national probability sample. Subjects were aged sixty-five and older, and the majority was white. Family life was an important variable predictive of life satisfaction, common to both sexes. Satisfaction with standard of living, rather than actual financial condition,

was the second most important predictor for females, and third for males.

A study by Bild and Havighurst (1976) showed similar findings. The sample consisted of seven different ethnic and residential groups of older people in the Chicago area. Findings showed that health, $r = .55$, and neighborhood satisfaction, $r = .29$, correlated higher with life satisfaction than marital status, $r = .19$; education, $r = .14$; employment status, $r = .16$, or income, $r = .22$.

Spreitzer and Snyder (1974) also found that perceived health and perceived financial satisfaction were both significantly related to life satisfaction in an elderly sample. Controlling for socioeconomic status did not eliminate the significance. Results showed that women under age sixty-five had the highest scores on life satisfaction. For both men and women over age sixty-five, there was a curvilinear effect on life satisfaction (Spreitzer and Snyder 1974).

Crandall (1975) examined the relationship between self-concept and selected demographic variables. A total of twenty-six men, who were members of senior citizen centers, participated in the study. The sample was representative of white, middle-class persons living in the southeastern Michigan area. Median income of the sample

was \$5,000 to \$9,999. A personal data form and the Tennessee Self-Concept Scale were used to collect the data. Findings showed that retirement had a negative influence on the self-concept. Those persons with incomes lower than the median range reported a higher self-concept than those in the median income range, and only slightly lower self-concepts than the high-income elderly. No differences in self-concept were found for those persons who reported good health, as opposed to those with poor health.

Mancini (1978) reported a study on the relationship between leisure satisfaction and psychological well-being. A total of seventy-four older adults, residing in a high-rise public housing complex in Greensboro, North Carolina, was interviewed. The majority of the sample was women, almost 75 percent. Incomes ranged from less than \$1,000 to about \$5,000, with a modal yearly income between \$2,000 to \$3,000. Incomes of less than \$3,000 were reported by 75 percent of the sample. The Cantril Self-Anchoring Striving Scale, in conjunction with a two-item, ordinal-level scale, and a personal data form were used to gather the data. Two hypotheses were formulated. The hypothesis that there is a positive relationship between leisure satisfaction and psychological well-being

was supported ($r = .45, p < .001$). When controlling income ($r = .42, p < .001$) and self-rated health ($r = .35, p < .003$) separately, and concurrently ($r = .34, p < .005$), the relationship remained significant. The control variables failed to provide support for the second hypothesis that the relationship between leisure satisfaction and psychological well-being is significantly influenced by the self-rated status of health and income. Findings suggested that the older person who is satisfied with the use of his free time tends to feel more satisfied with life in general. Neither financial resources or health status tend to have any significant effects on that satisfaction.

Developmental Tasks

The gerontological literature makes little reference to developmental task theory as proposed by Havighurst (1972). Due to its limited application, only four studies on developmental tasks and the older person were cited (Kurtz and Wolk 1975, Wolk and Kurtz 1975, Wolk and Teleen 1976, and Wolk 1976).

Havighurst (1972) in his theory of developmental tasks stated that if an older person is to experience feelings of personal and social satisfaction in the later years, he must accomplish the tasks of:

1. Adjusting to reduced physical health and strength
2. Adjusting to a lowered or fixed income and retirement
3. Adjusting to loss of spouse
4. Adjusting to and adopting changing social roles
5. Establishing a direct involvement and affiliation with one's own peer group
6. Establishing adequate physical living conditions

An additional task was added to Havighurst's theory by Kurtz and Wolk (1975), stated as:

7. Maintaining appropriate emotional ties and relationships

Kurtz and Wolk (1975) studied life satisfaction and developmental task accomplishment with a sample of forty-six elderly males and females. Subjects were sixty years of age and older and lived independently in the community. Both white and nonwhite elderly persons participated in the study. The sample also included forty-six college-aged students who were relatives of the older adults. The college-aged subjects were required to have regular contact with the older relative and be

familiar with the older person's personality and life. Data were collected with the Life Satisfaction Index-A to measure life satisfaction, and a fourteen-item index of developmental task accomplishment, devised by Kurtz and Wolk (1975). The developmental task scale lacked reliability and validity testing. To add some measure of construct validity to the instrument, the college-aged adults were asked to answer all of the items on the questionnaire, as they thought the older relative should answer. The college-aged adults also were directed to respond, in a similar manner, to the life satisfaction index. Older-aged subjects responded to both indexes and a personal data form.

Kurtz and Wolk (1975), in the same study, found that developmental task accomplishment and life satisfaction were significantly related ($r = .52, p < .01$). The findings also showed a correlation between age and life satisfaction ($r = -.22, p < .05$), and age and developmental task accomplishment ($r = -.24, p < .05$). Inter-correlations for adjustment, and for life satisfactions, with sex and retirement were all not significant. A t-test to compute the differences in the mean scores of both college-aged and older-aged adults, for adjustment ($t = 7.04, p < .01$), and for satisfaction ($t = 6.61, p < .01$)

added support to the validity of the adjustment index. Findings suggested that those elderly persons who scored higher on developmental task accomplishment have greater life satisfaction. Those persons, under seventy years of age, showed more success in developmental task accomplishment and more life satisfaction.

Wolk and Kurtz (1975) reported a study of adaptive behavior and locus of control with a sample of elderly males and females. The sample had an age range of sixty to eighty-five. Data were collected with the Internal-External Locus of Control Scale (Rotter), and indices of developmental adjustment, active involvement, and emotional adaptation. Findings showed that the elderly had a high degree of internal control as measured by Rotter's Internal-External Scale. Those persons who reported a high level of internal expectancy for control showed more involvement in life and a higher degree of developmental task accomplishment and life satisfaction, than the externally-controlled person. Differences between the sexes were not significant, although for females, adaptive behavior was lower in the externally controlled. Findings suggested that the elderly person is more internally controlled because of his previous

experiences in the successful resolution of developmental crises.

A study of the relationship between locus of control and adjustment, with a sample of 166 elderly men and women from two retirement, residential settings, was reported by Wolk (1976). The median age range for persons in both settings was seventy-four to seventy-seven. About 96 percent of the sample were retired and living on a fixed income. The majority rated their health, on a scale of one to five, between good and excellent. Both residential settings differed in the degree of constraint imposed by the environment. The low constrained setting, or Setting 1, enforced no rules or regulations on the activities or behavior of the residents. In the high constrained setting, or Setting 2, more controls were imposed on residents' activities, but the setting allowed some potential for personal freedom. The findings showed that persons from Setting 1 perceived the environment as low-constraining, and reported a greater degree of internal control than those in Setting 2. The subjects from Setting 2 reported more external expectancy of control and less successful adjustment. Subjects from the high- and low-constrained settings showed significant differences in perception of their settings, and differences in

locus of control, life satisfaction, and developmental task accomplishment. The findings suggested that the differences in perceived personal control, between the two groups, may be due to the environment, or that the internal and external persons choose settings harmonious with their beliefs for control.

Wolk and Teleen (1976) reported similar findings in a study to assess the variables of health, education, self-concept, perceived autonomy, developmental task accomplishment, and activity level, as predictors of life satisfaction. The sample consisted of 129 ambulatory males and females residing in a high- and a low-constraining setting. Health was the most important predictor of life satisfaction in the high-constrained setting. Perceived autonomy and self-concept were most important to life satisfaction for persons in the low-constrained setting. The findings also showed that persons in the low-constrained setting had a greater degree of life satisfaction, developmental task accomplishment, and perceived autonomy. Developmental task accomplishment was significantly related to life satisfaction in both settings.

Bengston and Lovejoy (1973) have observed that older persons appear to accept the limitations placed on

them by society, and are able to manipulate their values and behaviors to fit society's expectations. In a related study, Nehrke, et al. (1975) examined the relationship of age to life satisfaction, locus of control, and self-concept among institutionalized, elderly male veterans. Results showed a relationship between age and self-concept. Those persons aged seventy and older reported significantly higher life satisfaction. Findings suggested that the elderly veteran, within the constraints of his environment, was able to reconcile himself to the situation, and, as a result, was more satisfied with his life and himself.

Theories of Aging

Studies on disengagement and life satisfaction have resulted in inconsistent findings (Havighurst et al. 1968, Tobin and Neugarten 1961). Proponents of disengagement theory believed that disengagement from an active involvement in society is a normal process, and is necessary for satisfaction in the later years. With a shrinking in the life-space, the older person tends to focus on himself in preparation for death. Both society and the individual are said to welcome this mutual disengagement (Havighurst 1961).

In contrast, activity theory does not regard disengagement from society as a desirable process.

Activity theory proposed that a person must continue his involvement in activities maintained during middle age into old age, if he is to achieve happiness (Havighurst 1961).

The relationship between activity, life satisfaction, and personality was reported in a study of fifty-nine adults, aged seventy to seventy-nine, in the Kansas City area (Havighurst et al. 1968). The relationship between level of activity involved in, and degree of life satisfaction, was associated with personality and a response to role changes. Similar findings were reported by Tobin and Neugarten (1961), in a study of an elderly population. The movement toward interaction, or involvement with others, was associated with personality, rather than age. These findings tended to discredit the theory proposal of Cumming and Henry (1961), that when disengagement is chosen as the style of life, the older person experiences life satisfaction as he conforms to society's expectations.

Zibbell (1972) found that activity level and life satisfaction were significantly related, for women, in a sample of older adults. Health was the most significant determinant of life satisfaction and activity level, for

men. The less healthy men reported a decrease in activity and a lower life satisfaction.

Knapp (1976) reported on a study of life satisfaction in a sample of adults, aged sixty and older. Findings indicated that a decrease in informal activity, defined as contact with friends or kin, significantly related to lower life satisfaction. Suggestions were made that persons who were low in activity level had greater role loss, a lower self-concept, and less life satisfaction. Apparently those who engaged in less activity received less role supports.

In a national survey of more than four thousand older adults, Cutler (1972) reported that age had a curvilinear effect on participation in voluntary associations. When controls for education and socioeconomic status were introduced, the differences were eliminated. Findings suggested that a decline in voluntary association participation, with age, is related to low income.

A study of morale of the aged (Fowler and McCalla 1969) showed that degree of social contact outside the home, health status, and income were important predictors of life satisfaction. Toseland and Sykes (1977) reported similar findings in a study of morale of 137 older adults, who were participants and nonparticipants, at a

multipurpose senior center. Results showed no differences in life satisfaction between senior citizen participants and nonparticipants. Level of activity, financial status, and health status, respectively in importance, were variables more predictive of life satisfaction. The findings suggested that, in planning programs appropriate to the needs of older persons, the needs and characteristics of the elderly in the community should be considered (Toseland and Sykes 1977).

Lowenthal and Haven (1968) also studied morale in a sample of older persons. Findings showed that morale was not affected by changes in activity, for those persons who had a confidant, or someone in whom he confided. The lower morale associated with widowhood was diminished or eliminated when the person had a confidant. Findings suggested that intimacy in social interactions is more beneficial to an older person's self-esteem than frequency of involvement in social activities.

Summary

The gerontological literature indicates that the theory of disengagement and activity theory have failed to explain life satisfaction in the later years of life. A review of the literature on life satisfaction, and the

variables predictive of life satisfaction, revealed inconclusive findings. Recent studies have shown a significant relationship between life satisfaction and developmental task accomplishment. Due to the limited research on developmental task accomplishment, the literature recommended the need for further study of this concept.

CHAPTER III

PROCEDURE FOR COLLECTION AND TREATMENT OF DATA

Introduction

This chapter is a presentation of the methodology employed to determine the difference in life satisfaction between those older persons who are more successful in developmental task accomplishment and those older persons who are less successful. Chapter III includes a description of the setting of the study and the population. The tool and the validation of the tool are discussed. The procedure for data collection and treatment of the data are described.

Setting

This study was carried out in a community of a metropolitan city which was located in the southeastern section of the United States. This city is the third largest in the state and is inhabited by more than 38,000 residents. Because of its central location in the state, the city is regarded as the "Hub City." The area has a rich supply of agricultural, industrial, and educational

resources. A number of services and programs are available to those persons 65 years of age and older who comprise almost 15 percent of the county's population.

Population

The population consisted of persons sixty years of age and older who attended senior citizen centers. Both males and females of Anglo-American and Negro ethnicity were included. The majority of the population was retired.

The sample consisted of forty subjects. Subjects were sixty years of age and older and were participants at senior citizen centers. They were able to respond to the questionnaire in writing. Subjects who volunteered were selected for participation in the study.

Tool

A questionnaire was the tool used to collect the data. The questionnaire was divided into three parts: Part I, demographic data; Part II, Life Satisfaction Index A-A (Adams 1969); and Part III, Adjustment Index (Kurtz and Wolk 1975).

Part I consisted of demographic data relating to sex, age, and ethnicity. The ages of the subjects were

divided into the following ranges: 60 to 64, 65 to 69, 70 to 74, 75 to 79, and 80 and older.

Part II was the Life Satisfaction Index A-Adams's modified. The index is a forced-choice type scale that measures the subject's extent of personal satisfaction with past and present life phenomena. It consists of eighteen statements. The statements are divided into four categories: (1) mood tone, (2) zest for life versus apathy, (3) congruence between desired and achieved goals, and (4) resolution. Subjects may respond only "agree or disagree" to the questionnaire. The scores range from zero to eighteen. Only designated responses are scored (appendix F).

An item analysis of the original Life Satisfaction Index-A (Neugarten 1961) by Adams (1969) resulted in dropping two items of the original scale. An alternative scoring method was devised. The validity coefficient of correlation was .97 between the resulting eighteen-item Life Satisfaction Index A-A (Adams 1969) and the original LSIA ratings. The validity correlation coefficient was found to be .93 with the modified system suggested by Wood et al. (1969).

An alternate-forms method of testing for reliability of the Life Satisfaction Index A-A resulted in a

reliability coefficient of .99 between the LSIA-A and the original 20-item LSIA, and a reliability coefficient of .95 with the 13-item Life Satisfaction Index-Z (Lohmann 1977).

Part III included the Adjustment Index. The instrument measures developmental task accomplishment of the later years. The index consists of seven behavioral statements that require the subject to report his success or failure in each developmental task of the later years, paired with seven perceptual statements that assess the subject's attitude or resolution toward each task. The fourteen paired-comparison statements require the subject to choose between only two alternative responses. Subjects may respond only "mainly yes or mainly no" to the questionnaire. The forced-choice scale is advantageous because it reduces response bias (Kerlinger 1973). The scores range from zero to fourteen. Only designated responses are scored (appendix G).

The content validity of the Adjustment Index was verified by a panel of experts who scored the Instrument. A study by Kurtz and Wolk (1975) reported findings in support of the instrument's construct validity. The instrument was administered to a sample of older-aged persons and their college-aged relatives. The

college-aged relatives were asked to estimate the answers that the older-aged persons should report on the Adjustment Index. A t-test analysis of the difference in the mean scores showed no significant differences. Wolk and Kurtz (1975), in a study of an older population, reported an alpha coefficient of .61 in an item analysis of the responses to the index.

Data Collection

Prior to collection of data, approval to conduct the study was obtained from the Human Research Review Committee of Texas Woman's University (appendix A). Permission to collect the data and to attend the programs sponsored by the centers was obtained from the directors of the senior citizen centers (appendix B). Data were collected from April 24, 1979 to May 4, 1979, at the time that programs were scheduled for the older individuals. Individuals were approached at the sessions and were given an oral description of the study (appendix C). After obtaining verbal consent, each participant was requested to sign a consent form (appendix D).

After written consent to participate was obtained, each participant was interviewed with the use of the Life Satisfaction Adjustment Tool (appendix E). Interviews

were conducted in a private room to provide privacy for the participant. The investigator read the statements and the participant responded in writing. The tool was administered in a serial order from Part I through Part III.

Anonymity of participants was assured. Names were not written on the questionnaires. Consent forms and questionnaires were filed separately so that names on the consent forms would not be identified with the questionnaires.

Treatment of Data

Demographic data from Part I of the Life Satisfaction Adjustment Tool were summarized and used to describe the sample. Data from Part II of the instrument relates to life satisfaction. Subjects' responses were totaled and scored from this section. Data from Part III were totaled and scored to measure developmental task accomplishment.

Scores from Part III, Adjustment Index were ranked to determine the median score. Two groups were identified with high and low scores on developmental task accomplishment. Scores equal to and above the median identified the group which scored high on developmental task accomplishment, while scores below the median determined the group with low scores.

Scores from Part II, Life Satisfaction Index A-A were totaled for the groups which scored high and low on developmental task accomplishment to compute the means. A t-test for independent samples was used to determine if there is a significant difference between the mean scores on life satisfaction for the groups which scored high and low on developmental task accomplishment. The significance was assigned at the .01 level to test the hypothesis that there is no difference in life satisfaction between persons 60 years of age and older who are more successful in developmental task accomplishment than those who are less successful.

Summary

Chapter III presented the methodology used to determine the difference in life satisfaction for those persons who are more successful in developmental task accomplishment than those who are less successful. The setting and population for the study were described. A description of the Life Satisfaction Adjustment Tool and the validation of the tool were discussed. The procedures for collection of data and analysis of the data were summarized.

CHAPTER IV

ANALYSIS OF DATA

Introduction

This study was conducted to determine if life satisfaction is greater for those older persons who are more successful in accomplishing the developmental tasks of later life than those who are less successful in accomplishing the developmental tasks. Chapter IV presents an analysis and interpretation of the data, followed by a summary of the findings.

Analysis and Interpretation of the Data

Data were collected by use of the Life Satisfaction Adjustment Tool. The tool consisted of three parts: Part I, demographic data; Part II, Life Satisfaction Index A-A (Adams 1969), and Part III, Adjustment Index (Kurtz and Wolk 1975).

Part I of the Life Satisfaction Adjustment Tool collected data about sex, age, and ethnicity. The sample consisted of forty individuals, sixty years of age and older, from two senior citizen centers. Interviews were conducted in a period of twenty to forty-five minutes.

Some of the participants prolonged the interviews by voluntarily elaborating more detail than required in response to the items.

The age distribution of the subjects ranged from ages 60 to 80 and older. Five, 12.5 percent of the subjects were between 60 and 64 years of age. The largest group, eleven, 27.5 percent, of the subjects were in the age range of 65 to 69. Ten, 25 percent, were between 70 and 74 years of age. The age range of 75 to 79 included eight, 20 percent, subjects. Six, 15 percent, were age 80 and older. Table 1 summarizes the age range of the subjects by number and percentage.

TABLE 1
AGE RANGE OF THE SUBJECTS BY
NUMBER AND PERCENTAGE

Age Range	Number	Percentage
60 - 64	5	12.5
65 - 69	11	27.5
70 - 74	10	25.0
75 - 79	8	20.0
80 +	6	15.0

N = 40

The sample included both males and females. Thirty-one, 77.5 percent, were female and nine, 22.5 percent, were males. Table 2 presents the sex distribution of the subjects by number and percentage.

TABLE 2
SUBJECTS' SEX DISTRIBUTION BY
NUMBER AND PERCENTAGE

Sex	Number	Percentage
Female	31	77.5
Male	9	22.5

N = 40

Analyzed according to ethnicity, the majority, twenty-eight, 70 percent, of the subjects was Anglo-American. Twelve, 30 percent, of the subjects were Negro. The distribution of the subjects according to ethnicity is summarized in Table 3.

Part II, Life Satisfaction Index A-A, was used to determine degree of life satisfaction. Responses were "agree or disagree." The possible range of scores was from zero to eighteen. The attained scores of the subjects ranged from five to eighteen.

Part III, Adjustment Index, determined degree of success in developmental task accomplishment. The

TABLE 3
SUBJECTS' ETHNICITY BY NUMER
AND PERCENTAGE

Ethnicity	Number	Percentage
Anglo-American	28	70.0
Negro	12	30.0

N = 40

possible range of scores was from zero to fourteen. The attained scores of the subjects ranged from six to thirteen, with a median score of ten. Subjects' scores were divided at the median to determine which subjects scored higher and which subjects scored lower in developmental task accomplishment. Older persons with scores of ten to thirteen were assigned to the high group in developmental task accomplishment. Older persons with scores of six to nine were assigned to the low group in developmental task accomplishment. Twenty, 55 percent, of the subjects were assigned to the high group in developmental task accomplishment. Eighteen, 45 percent, constituted the low group in developmental task accomplishment.

Scores on the Life Satisfaction Index A-A were paired with subjects' scores on the Adjustment Index. Subjects with high scores on developmental task

accomplishment attained a mean score of 13.5 on life satisfaction. The attained scores ranged from eight to eighteen. Subjects with low scores on developmental task accomplishment attained a mean score of 11.5 on life satisfaction. The attained scores ranged from five to sixteen. Table 4 presents the means, standard deviations, and ranges of scores for life satisfaction of subjects from the high and low groups in developmental task accomplishment.

TABLE 4
MEANS, STANDARD DEVIATIONS, AND RANGES
OF SCORES FOR LIFE SATISFACTION
OF DEVELOPMENTAL TASK
ACHIEVERS

Developmental Task Achievers	Life Satisfaction Scores		
	Range	Mean	Standard Deviation
High	8 - 18	13.5	3.00
Low	5 - 16	11.1	3.04

N = 40

The t-test for independent samples was used to test the hypothesis that stated there is no difference in life satisfaction for those older persons who are more successful in developmental task accomplishment than

those who are less successful in developmental task accomplishment. Significance was assigned at the .01 level. There was no significant difference in the mean scores for life satisfaction of persons who scored higher in developmental task accomplishment than those persons who scored lower in developmental task accomplishment ($t = -2.49$, $df = 38$, $p < .02$). The null hypothesis was accepted.

Summary

Chapter IV presented an analysis and interpretation of the data collected to determine the difference in life satisfaction for persons who are more successful in developmental task accomplishment than those who are less successful in developmental task accomplishment. The majority of the sample was Anglo-American and female. Subjects from the high and low groups in developmental task accomplishment were determined by the scores attained on the Adjustment Index. Subjects' scores attained on developmental task accomplishment were paired with the scores attained on life satisfaction. The hypothesis was tested by use of a two-tailed t-test for independent samples. A comparison of the mean scores for life satisfaction of persons who scored higher in developmental task accomplishment and those who scored lower in

developmental task accomplishment showed no significant difference at the .01 level. The null hypothesis was accepted.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Introduction

Chapter V contains a summary of the study and the conclusions based on the findings. Recommendations for further study are presented.

Summary

The problem for study was to determine if life satisfaction is greater for those older persons who are more successful in developmental task accomplishment than those persons who are less successful in developmental task accomplishment.

Data were collected at two senior citizen centers in an urban community of the southeastern United States. The population consisted of persons sixty years of age and older who attended senior citizen centers. The majority of the population was retired and included both males and females of Anglo-American and Negro ethnicity.

The sample consisted of forty subjects. Subjects were sixty years of age and older and were participants

at the senior citizens centers. The majority of the subjects was Anglo-American and female.

Subjects were interviewed by use of the Life Satisfaction Adjustment Tool. The tool consisted of three parts: Part I, demographic data; Part II, Life Satisfaction Index A-A (Adams 1969), and Part III, Adjustment Index (Kurtz and Wolk 1975).

Subjects with higher scores and lower scores on developmental task accomplishment were determined by the scores attained on the Adjustment Index. The attained scores of the subjects ranged from six to thirteen, with a median score of ten. Fifty-five percent of the subjects with scores of ten to thirteen were assigned to the high group in developmental task accomplishment. Forty-five percent with scores of six to nine were assigned to the low group in developmental task accomplishment.

Scores on the Life Satisfaction Index A-A were paired with subjects' scores on the Adjustment Index. Subjects with high scores on developmental task accomplishment attained a mean score of 13.5 on life satisfaction. A mean score of 11.5 on life satisfaction was attained by subjects with low scores on developmental task accomplishment.

A t-test for independent samples was used to determine the difference in the mean scores of life satisfaction for persons who scored higher in developmental task accomplishment and for persons who scored lower in developmental task accomplishment. No significant difference was found at the .01 level. The null hypothesis, which stated that there is no difference in life satisfaction for those persons 60 years of age and older who are more successful in developmental task accomplishment than those who are less successful in developmental task accomplishment, was accepted. The findings are inconsistent with those of Kurtz and Wolk (1975), Wolk and Kurtz (1975), Wolk and Teleen (1976), and Wolk (1976), who reported that life satisfaction is greater for those older persons who are more successful in developmental task accomplishment.

Conclusions

The conclusions of the study were drawn:

1. Older persons who are more successful in developmental task accomplishment may have lower life satisfaction

2. Older persons who are more successful in developmental task accomplishment may have greater life satisfaction

3. Older persons who are less successful in developmental task accomplishment may have lower life satisfaction

4. Older persons who are less successful in developmental task accomplishment may have greater life satisfaction

Recommendations

Recommendations for further study were made:

1. A study be conducted with a larger sample
2. The Adjustment Index be further refined and modified, by increasing the number of items and altering the scale of yes-no responses to a Likert-type scale

APPENDIX A

TEXAS WOMAN'S UNIVERSITY

DENTON, TEXAS 76204

THE GRADUATE SCHOOL

June 13, 1979

Miss Carolyn Ann Pouncey
1810 Inwood Road
Room 611
Dallas, Texas 75235

Dear Miss Pouncey:

I have received and approved the Prospectus for your research project. Best wishes to you in the research and writing of your project.

Sincerely yours,



Phyllis Bridges
Dean of the Graduate School

PB:cn

cc Dr. Jean Stair
Dr. Anne Gudmundsen
Graduate Office

TEXAS WOMAN'S UNIVERSITY

Human Research Committee

Name of Investigator: Carolyn Pouncey Center: Dallas
Address: 209 South 29th Avenue, Heritage Apts. #209 Date: 1-19-79
Hattiesburg, Mississippi 39401

Dear Ms. Pouncey:

Your study entitled The Older Person: Developmental Task Accomplishment and Life Satisfaction.

has been reviewed by a committee of the Human Research Review Committee and it appears to meet our requirements in regard to protection of the individual's rights.

Please be reminded that both the University and the Department of Health, Education and Welfare regulations require that written consents must be obtained from all human subjects in your studies. These forms must be kept on file by you.

Furthermore, should your project change, another review by the Committee is required, according to DHEW regulations.

Sincerely,

Estelle D. Kung

Chairman, Human Research
Review Committee

at

Dallas

APPENDIX B

TEXAS WOMAN'S UNIVERSITY
COLLEGE OF NURSING
DENTON, TEXAS

DALLAS CENTER
1810 Inwood Road
Dallas, Texas 75235

HOUSTON CENTER
1130 M.D. Anderson Blvd.
Houston, Texas 77025

AGENCY PERMISSION FOR CONDUCTING STUDY*

THE SOUTHEAST MISSISSIPPI COMMUNITY ACTION AGENCY

GRANTS TO Carolyn Pouncey

a student enrolled in a program of nursing leading to a Master's Degree at Texas Woman's University, the privilege of its facilities in order to study the following problem:

The Older Person: Developmental Task Accomplishment
and Life Satisfaction

The conditions mutually agreed upon are as follows:

1. The agency (may) (may not) be identified in the final report.
2. The names of consultative or administrative personnel in the agency (may) (may not) be identified in the final report.
3. The agency (wants) (does not want) a conference with the student when the report is completed.
4. The agency is (willing) (unwilling) to allow the completed report to be circulated through interlibrary loan.
5. Other: _____

Date April 20, 1979

Dorothy L. Ward
Signature of Agency Personnel

Carolyn Pouncey
Signature of student

Jean Stair, R.N., Ed.M.
Signature of Faculty Advisor

Fill out and sign three copies to be distributed as follows: Original --
Student; first copy - agency; second copy - T.W.U. College of Nursing.

TEXAS WOMAN'S UNIVERSITY
COLLEGE OF NURSING
DENTON, TEXAS

DALLAS CENTER
1810 Inwood Road
Dallas, Texas 75235

HOUSTON CENTER
1130 M.D. Anderson Blvd.
Houston, Texas 77025

AGENCY PERMISSION FOR CONDUCTING STUDY*

THE Pearl River Valley Opp. Inc. (Senior Citizens)
GRANTS TO Carolyn Pouncey

a student enrolled in a program of nursing leading to a Master's Degree at Texas Woman's University, the privilege of its facilities in order to study the following problem:

**The Older Person: Developmental Task Accomplishment
and Life Satisfaction**

The conditions mutually agreed upon are as follows:

1. The agency (may) (may not) be identified in the final report.
2. The names of consultative or administrative personnel in the agency (may) (may not) be identified in the final report.
3. The agency (wants) (does not want) a conference with the student when the report is completed.
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Date 4-30-1979

Carolyn Pouncey
Signature of student

Jean Ann R. D., Ed. M.
Signature of Agency Personnel

Paul Carter, Ed. & R. Coordinator
Signature of Faculty Advisor

*Fill out and sign three copies to be distributed as follows: Original -- Student; first copy - agency; second copy - T.W.U. College of Nursing.

APPENDIX C

ORAL DESCRIPTION OF STUDY

My name is Carolyn Pouncey. I am a registered nurse in this community and I am doing a study about older people. People live their lives differently and I would like to know, now that you are older, how you feel about life in general. My study may not directly benefit you, but it may prove helpful in planning programs needed by our community for older people. Your participation will be very helpful.

Your decision to take part in this study is entirely voluntary. If you agree to participate, there are some questions that I will ask you. A private place will be selected for you to respond to the questionnaire. The answers that you give me will be kept confidential. A summary of the answers will appear in a report of the study.

If you are willing and agree to take part in this study, I will ask that you sign a consent form indicating you have agreed to participate. The consent form will be kept separate from the questionnaire so that your name will not be identified with your answers. If after you have agreed to participate, but decide that you do not wish to continue, you may withdraw at any time. The questions

that you have answered will then be omitted from the report of the study. Will you participate in this study?

APPENDIX D

TEXAS WOMAN'S UNIVERSITY

Consent to Act as a Subject for Research and Investigation:

I have received an oral description of this study, including a fair explanation of the procedures and their purpose, any associated discomforts or risks, and a description of the possible benefits. An offer has been made to me to answer all questions about the study. I understand that my name will not be used in any release of the data and that I am free to withdraw at any time.

Signature_____
Date_____
Witness_____
DateCertification by Person Explaining the Study:

This is to certify that I have fully informed and explained to the above named person a description of the listed elements of informed consent.

Signature_____
Date_____
Position_____
Witness_____
Date

APPENDIX E

LIFE SATISFACTION ADJUSTMENT TOOL

Part I

Please place an "X" in the space beside the appropriate response to the following questions.

Sex	Age
Male _____	60-64 _____
Female _____	65-69 _____
	70-74 _____
Ethnic Group	75-79 _____
	80 and older _____
Anglo-American _____	
Negro _____	

Part II

Here are some statements about life in general that people feel differently about. Please read each statement carefully. If you mainly agree with the statement, place an "X" in the space under "AGREE." If you mainly disagree with the statement, place an "X" in the space under "DISAGREE." PLEASE BE SURE TO ANSWER EVERY QUESTION ON THE LIST.

	<u>AGREE</u>	<u>DISAGREE</u>
1. As I grow older, things seem better than I thought they would be.	_____	_____
2. I have gotten more of the breaks in life than most of the people I know.	_____	_____
3. This is the dreariest time of my life.	_____	_____
4. I am just as happy as when I was younger.	_____	_____
5. My life could be happier than it is now.	_____	_____

	<u>AGREE</u>	<u>DISAGREE</u>
6. These are the best years of my life.	_____	_____
7. Most of the things I do are boring or monotonous.	_____	_____
8. I expect some interesting and pleasant things to happen to me in the future.	_____	_____
9. The things I do are as interesting to me as they ever were.	_____	_____
10. I feel old and somewhat tired.	_____	_____
11. As I look back on my life, I am fairly well satisfied.	_____	_____
12. I would not change my past life even if I could.	_____	_____
13. Compared to other people my age, I make a good appearance.	_____	_____
14. I have made plans for things I'll be doing a month or a year from now.	_____	_____
15. When I think back over my life, I didn't get most of the important things I wanted.	_____	_____
16. Compared to other people, I get down in the dumps too often.	_____	_____
17. I've gotten pretty much what I expected out of life.	_____	_____
18. In spite of what some people say, the lot of the average man is getting worse, not better.	_____	_____

Part III

The following statements are about the later years of life. Please read each statement carefully. If the statement is mainly yes for you, place an "X" in the space under "YES." If the statement is mainly no for you, place an "X" in the space under "NO." PLEASE BE SURE TO ANSWER EVERY QUESTION ON THE LIST.

	<u>YES</u>	<u>NO</u>
1. Reduced strength keeps me from doing the things I need to do.	_____	_____
2. One can learn to live a good life even in reduced health.	_____	_____
3. I manage to live a good life even with limited income.	_____	_____
4. Retirement is as worthwhile as work.	_____	_____
5. I find it (or would find it) difficult to live alone.	_____	_____
6. A surviving husband or wife can learn to get along.	_____	_____
7. I avoid being with old people.	_____	_____
8. Making new friends is hard for me.	_____	_____
9. I still do many worthwhile things.	_____	_____
10. Younger people can do most things better than older people.	_____	_____
11. My living arrangements suit me fine.	_____	_____
12. I would be satisfied only living in my own household.	_____	_____
13. Family and friends help when I have troubles.	_____	_____
14. I could accept being dependent on my children or on others.	_____	_____

APPENDIX F

ADAM'S LIFE SATISFACTION INDEX A

	<u>AGREE</u>	<u>DISAGREE</u>
MOOD TONE		
3. This is the dreariest time of my life.	_____	<u> x </u>
4. I am just happy as when I was younger.	<u> x </u>	_____
5. My life could be happier than it is now.	_____	<u> x </u>
6. These are the best years of my life.	<u> x </u>	_____
7. Most of the things I do are boring or monotonous.	_____	<u> x </u>
16. Compared to other people, I get down in the dumps too often.	_____	<u> x </u>
<hr/>		
ZEST FOR LIFE VS. APATHY		
1. As I grow older, things seem better than I thought they would be.	<u> x </u>	_____
8. I expect some interesting and pleasant things to happen to me in the future.	<u> x </u>	_____
9. The things I do are as interesting to me as they ever were.	<u> x </u>	_____
10. I feel old and somewhat tired.	_____	<u> x </u>
13. Compared to other people my age, I make a good appearance.	<u> x </u>	_____
14. I have made plans for things I'll be doing a month or a year from now.	<u> x </u>	_____

	<u>AGREE</u>	<u>DISAGREE</u>
CONGRUENCE		
11. As I look back on my life, I am fairly well satisfied.	<u>x</u>	<u> </u>
12. I would not change my past life even if I could.	<u>x</u>	<u> </u>
17. I've gotten pretty much what I expected out of life.	<u>x</u>	<u> </u>

RESOLUTION

2. I have gotten more of the breaks in life than most of the people I know.	<u>x</u>	<u> </u>
15. When I think back over my life, I didn't get most of the important things I wanted.	<u> </u>	<u>x</u>
18. In spite of what some people say, the lot of the average man is getting worse, not better.	<u> </u>	<u>x</u>

Adapted from Adams, David L. 1969. Analysis of a life satisfaction index. Journal of Gerontology. 24:470-474.

Note: Score one point for each response marked "x."

APPENDIX G

ADJUSTMENT INDEX

	<u>YES</u>	<u>NO</u>
<hr/>		
A. ADJUSTING TO DECREASING PHYSICAL STRENGTH AND HEALTH		
1. Reduced strength keeps me from doing the things I need to do.	<u> </u>	<u> x </u>
2. One can learn to live a good life even in reduced health.	<u> x </u>	<u> </u>
<hr/>		
B. ADJUSTMENT TO RETIREMENT AND REDUCED INCOME		
3. I manage to live a good life even with limited income.	<u> x </u>	<u> </u>
4. Retirement is as worthwhile as work.	<u> x </u>	<u> </u>
<hr/>		
C. ADJUSTING TO DEATH OF SPOUSE		
5. I find it (or would find it) difficult to live alone.	<u> </u>	<u> x </u>
6. A surviving husband or wife can learn to get along.	<u> x </u>	<u> </u>
<hr/>		
D. ESTABLISHING AN EXPLICIT AFFILIATION WITH ONE'S OWN AGE GROUP		
7. I avoid being with old people.	<u> </u>	<u> x </u>
8. Making new friends is hard for me.	<u> </u>	<u> x </u>
<hr/>		
E. ADOPTING AND ADAPTING SOCIAL ROLES IN A FLEXIBLE WAY		
9. I still do many worthwhile things.	<u> x </u>	<u> </u>

	<u>YES</u>	<u>NO</u>
10. Younger people can do most things better than older people.	<u> </u>	<u> x </u>
<hr/>		
F. ESTABLISHING SATISFACTORY PHYSICAL LIVING ARRANGEMENTS		
11. My living arrangements suit me fine.	<u> x </u>	<u> </u>
12. I would be satisfied only living in my own household.	<u> </u>	<u> x </u>
<hr/>		
G. MAINTAINING APPROPRIATE AFFECTIONAL RELATIONSHIPS		
13. Family and friends help when I have troubles.	<u> x </u>	<u> </u>
14. I could accept being dependent on my children or on others.	<u> x </u>	<u> </u>

Adapted from Kurtz, John J. and Wolk, Stephen.
 April 1975. Continued growth and life satisfaction.
Gerontologist. 15:129-131.

Note: Score one point for each response marked
"X."

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