

THE EFFECT OF REMINISCING WORKSHOPS ON
LIFE SATISFACTION FOR SOCIALLY
ISOLATED SENIOR CITIZENS
RESIDING IN PUBLIC
HOUSING

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May, 1969

Master of Arts
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May, 1983

Submitted to the Faculty of the
Graduate College of the
Oklahoma State University
in partial fulfillment of
the requirements for
the Degree of
DOCTOR OF EDUCATION
May, 1989

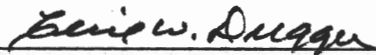
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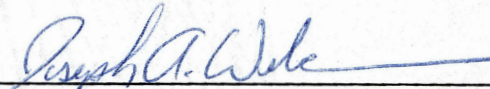
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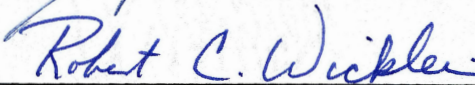
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By

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ACKNOWLEDGMENTS

It is a pleasure to express my appreciation to my adviser, Dr. Robert E. Nolan, for his encouragement and generous support.

I am grateful to Dr. Cecil Dugger for serving as my committee chairman, to Dr. Robert Wicklein for his support, to Dr. Joseph Weber for his interest and practical assistance, and to Dr. Bruce Carpenter for his help with statistics.

Certainly I am indebted to the wonderful senior citizens who made this study possible. They include the tenants and tenant presidents of the public housing facilities.

Mrs. Lou Tull and Mrs. Glenda Whitsett were beneficial in directing me to the right places at the right times.

I also owe a debt of gratitude to Ms. Susan Baston, Ms. Naomi Johnson, Ms. Jane Barnes, Ms. Sydney St. Clair, Mrs. Chris St. Clair, and Mr. Jon James for assisting with the treatment in the study.

Finally, the consideration and encouragement shown me by my family are treasured and hereby acknowledged. Special thanks go to my husband, Allen, and to my mother-in-law, Dr. Susan B. Mitchell. Their support will always be treasured.

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CHAPTER I

INTRODUCTION

Aging is inescapable; we cannot control it. Aging is a process which is physical, mental, and social, and can be a time of social interaction or a time of social isolation. Individuals may decide not to be socially active because they prefer to spend their time and energy alone. Many times the individuals do not have a choice; their isolation is dictated by their social, psychological, or physical conditions.

Bennett (1980) defined social isolation as the absence of the specific role relationship which is usually activated and sustained through direct personal face-to-face interaction. This definition can be translated into absence of purposeful social interaction. Programs enhancing social interaction could reduce social isolation.

Life satisfaction is a measurement of quality of life. When an individual's social, psychological, and physical conditions are optimum, he/she has an optimum quality of life and is satisfied with life.

Aging may be a time of transition for senior citizens. Many senior citizens move into shelter housing for security and financial reasons. Socially isolated individuals find this transition more difficult than those individuals who are socially active.

Discussions about well-being and quality of life often treat

education as one of the resources of well-being (Sihvola, 1985). Educational intervention can be viewed as a social, psychological, and physical support system for the senior citizens residing in government subsidized congregate housing. Many of these individuals are socially isolated and have a need for improved quality of life (MacLean, 1982). The need for this study developed as a result of prior research in the areas of social isolation, quality of life, lifelong learning, and the present and future demographics of the senior citizens. Educational intervention has a place in the treatment of socially isolated senior citizens.

Statement of the Problem

Oklahoma's senior citizen population, those aged 62 and over, will increase 35 percent between 1980 and 2010, from 376,000 to 502,000, as stated in the demographic report to the governor of Oklahoma (Selland, 1987). At the present time, the State of Oklahoma has a variety of housing opportunities available for low-income families, including senior citizens. Senior citizen apartments are occupied by those individuals 62 years old or older who qualify for low-income housing.

In the Tulsa area, a total of five high-rise dwellings are occupied by over 900 senior citizens. There are many excellent programs for the socially active individuals. However, many of the senior citizens have become socially isolated before or after entry into public housing residence. There are no educational programs designated specifically for the socially isolated senior citizens living in the public housing.

The Lifelong Learning Act of 1976, Public Law 94-482, has as an ultimate goal to maintain and improve the quality of life for all American citizens regardless of age, race, sex, previous education or training, handicapping condition, social or ethnic background, or economic conditions. Under the 1978 Amendments to the Older Americans Act, the greatest social need was defined as:

. . . those noneconomic factors such as cultural or social isolation, physical or mental limitations, race or ethnic status, cultural obstacles or language barriers which restricts individual ability to carry out activities of daily living and which threaten an individual's capacity to live an independent life (np).

Section 306 (a) (5) (A) of the 1984 Amendments to the Act added the phrase "with particular attention to low-income minority individuals" (p. 5).

The socially isolated senior citizens in Oklahoma's public housing have a right to an educational program as stated in the Lifelong Learning Act (1976). The problem statement that this research addressed was: The quality of life for senior citizens who demonstrate social isolation in public housing is not being addressed by educational intervention.

Purpose of the Study

The purpose of this study was to determine if an educational intervention, specifically a workshop on reminiscing, could affect life satisfaction for the socially isolated senior citizens residing in public housing as measured by the Life Satisfaction in the Elderly Scale (LSES).

The following objectives were addressed in this study:

1. To increase knowledge of the socially isolated senior citizens residing in public housing.
2. To determine if there is a relationship between improved life satisfaction and educational intervention for the socially isolated senior citizen.

Hypotheses

Hypothesis 1

There is no significant difference in scores on the Life Satisfaction in the Elderly Scale between those exposed to the educational workshops and those who were not exposed to the educational workshops.

Hypothesis 2

There is no significant difference on the Life Satisfaction in the Elderly Scale between the amount of change from pretest to posttest for the group exposed to the educational workshops and the amount of change from pretest to posttest for the group not exposed to the educational workshops.

Definition of Terms

The following definition of terms were used throughout this study:

Social Isolation - The absence of specific role relationship through direct personal face-to-face interaction.

Quality of Life - The social, psychological, and physical

conditions where the needs and expectation from life are met (Campbell, 1971). This was measured on the Salamon-Conte Life Satisfaction in the Elderly Scale (1984).

Life Satisfaction - The eight categories included in the Salamon-Conte Life Satisfaction in the Elderly Scale (1984):

(1) taking pleasure in daily activities; (2) regarding life as meaningful; (3) goodness of fit between desired and achieved goals; (4) positive mood tone; (5) positive self-concept; (6) perceived health; (7) financial security; and (8) social contacts.

Senior Citizens - An individual over 62 years of age and residing in public housing.

Educational Intervention - An educational program for the senior citizens given in a workshop setting. The title for the educational program in this study was "Reminiscing Workshop."

Assumptions

The following assumptions were relevant to this study:

1. Due to the confidentiality for the tenants, the tenant associations who drew the random samples were accurate in following directions for the initial random sampling selection.
2. The senior citizens who took part in the Life Satisfaction in the Elderly Scale were accurate and honest in their responses.
3. The educational intervention delivered in a workshop setting was appropriate for the senior citizens' needs.

Limitations

The study was limited to the senior citizens residing in two of

the five public housing facilities in Tulsa, Oklahoma.

The health of the subjects of this study was declining in many cases due to age-related illness. This could have had a possible effect on the learning and teaching.

The educational intervention used in this study was not field tested prior to use in this study. Rather, it was designed specifically for this study.

Subjects

The subjects of this study were male and female senior citizens identified as socially isolated. These senior citizens were residing in public housing within the Tulsa city limits.

Summary

The socially isolated senior citizens living in two of the public housing facilities in Tulsa were not being served by a specific program dealing with the problem of social isolation. The purpose of this study was to determine if educational intervention in the form of a reminiscing workshop could affect the quality of life as measured by the Life Satisfaction in the Elderly Scale (LSES) for the socially isolated senior citizens residing in public housing.

The Lifelong Learning Act specifies that all individuals have a right for opportunities to improve their quality of life. Educational intervention was a legitimate potential treatment for the socially isolated. Improved quality of life was a need for the socially

isolated. The Life Satisfaction in the Elderly Scale (LSES) offered a measurement of quality of life.

Reporting the Study

This study was designed to examine an educational intervention, specifically a reminiscing workshop to find its effect on the elderly, socially isolated individual.

Chapter II reviewed the literature since 1950 concerning demographical information of the elderly, social isolation related to the elderly, quality of life for the elderly, lifelong learning, and reminiscing for senior citizens.

Chapter III discussed in more detail the design of the study, the treatment of the study, random selection of the sample and location. The chapter also described the instrument for gathering data and the procedure used in analyzing data and testing hypotheses.

Chapter IV presented findings from testing the two null hypotheses.

Chapter V summarized major findings and conclusions. Recommendations were based on findings and comparisons with other similar studies.

CHAPTER II

REVIEW OF LITERATURE

This study concerned the socially isolated senior citizens in public housing. The review of literature on areas pertinent to this study concerned the elderly as to (a) demographical information, (b) social isolation, (c) quality of life, (d) lifelong learning, and (e) reminiscing.

Demographical Information About the Elderly

In 1909, I. L. Nascher coined the word "geriatrics", he envisioned a new field which would parallel pediatrics. There was little response, probably because the specialty by its very nature remains ambiguous. Theorists have yet to define precisely the parameters of the field or to distinguish clearly between normal aging and pathological aging (Haber, 1977).

The New York Times (1987) carried an article which credited the baby boom generation with fascination for the graying of America and a more positive attitude toward the elderly and aging because they wanted to know the effect of aging on them. On the other hand, the baby boom was seen as only one of the factors in the demographical information. Human life expectancy for the year 2000 was projected to increase four years for men to 74.3 years and to increase eight years for women to 86.2 years (Dennis, 1948).

Important implications of American population growth were associated with an increase of aging due to medical advancements and a decline in the birth rate. Funding of benefits for the aged were predicted to increase to more than 40 percent of the federal budget by early in the next century. Rosewaike (1985) predicted that funding the increase would be a major challenge for the government.

Neugarten (1982) did not see all older people as economically and socially needy. On most socioeconomic measures it was the minority, mainly the very old, who had been severely disadvantaged with regard to education, occupational skills, pension systems, and medical care earlier in their lives.

As for aging itself, Riley (1978) stated that the definition of aging had always changed. She viewed individuals who belonged to the same generation as cohorts representing a changing definition of age at any given point in historical time.

In summary, the demographic information about the population of older Americans presented the picture of increased numbers due to the baby boom, the result of medical advancements and decline in the birth rate, the probable increasing drain on the federal budget, regard for a minority of severely disadvantaged very old citizens, and the changing definition of aging.

Social Isolation Related to the Elderly

Social isolation of the elderly has been studied and described by various researchers. In Hancock's (1986) definition of social isolation, alienation was identified as one of the factors. Conversely, Urick (1970) identified social isolation as one of the

factors of alienation.

Bennett (1980) stated that aging could be accompanied by social isolation, voluntary or involuntary. In the voluntary process, as the individual's energy level diminished, the individual was seen to disengage from society. As an involuntary process, social isolation resulted from the simultaneous and successive occurrences of physical deterioration, death of peers, enforced retirement, and predominance of the mobile family. In regard to the loss of these supportive ties, Dunlop (1973) and Pillsak (1980) discussed the importance of being able to estimate the incidence of social isolation or social loss in order to direct a social support network to counteract the effects of such social isolation and social loss.

Delmar (1986) found that the level of loneliness in older individuals appeared to be related to the number of social contacts reported. In this respect, when Felton (1981) researched the habitability of the city for older people, urban older people reported more frequent interactions with friends. Rathbone-McCuan (1982) considered environmental isolators which included the hazards of deteriorating housing and/or neighborhoods or forced relocation to new and unfamiliar areas.

The importance of the number of social contacts was tangentially referenced in Keith (1986). The future aged population was projected to include more unmarried persons since many individuals do not marry, and he found that divorced and never married men were more isolated from family than were widowed men. Levitt (1985-86) found older men in poor health and without supportive relationships were targeted as a high risk group for life satisfaction.

Curry (1973) found that significantly more residents in large nursing homes were isolated from friends and relatives than was true of those in smaller nursing homes. In general, smaller nursing homes were in smaller towns or cities where families were nearby, and many tenants were known to the caretakers.

Phillipson (1986) stated that the Grey Panthers had promoted the idea of interdependence between older and younger people instead of dependence and independence.

In summary, social isolation was described as an identifiable condition in the elderly which occurred voluntarily or involuntarily. Social isolation was recognized as an impairment to the quality of life for the elderly.

Quality of Life for the Elderly

Various life conditions have been identified which affect the quality of life for the elderly. Research designed to measure the quality of life for the elderly, as developed by several researchers, touched on a variety of approaches.

Campbell (1971) reported The Quality of American Life Survey. The survey was designed to measure respondents' perceptions of their social-psychological condition, their needs and expectations from life, and the degree to which these needs were satisfied.

An earlier survey titled, National Survey of the Aged (1957), included medical care and attitudes of the elderly concerning health and living arrangements.

A transition from independent living to a residential home or to a sheltered housing challenged the resilience of all elderly people,

according to Mertens and Wimmers (1987). They found that attitudes to dependency were central to the maintenance of self-esteem and well being. The focus of their study was on preparedness for adaptation to the experience of relocation to a dependent setting.

Leonard (1982) found that older persons were not a homogeneous social category. They differed from each other in life styles, experience, values, social class, ethnicity, health, and income status. Consequently these differences became the key variables in understanding the elderly.

Dowd (1978) did a study on variables which measured life satisfaction on frequency of contact with relatives. The extent of ethnic variation declined across age strata, indicating some support for the age-as-leveler hypothesis when studying the quality of life of the elderly.

The study by Hurst (1981) was similar to past studies as it found that higher status satisfaction was associated with quality of life. Hurst found that different status factors correlated with life satisfaction depending on the older person's involvement in organizations.

Lawton (1982) developed a multilevel assessment instrument for measurement of well being of the aged. It included behavioral competence in the domains of health, activities of daily living and perceived environmental quality.

Lohr's (1988) findings emphasized the importance of multidimensional conceptualization of physical health status in understanding its relationship with life satisfaction. She also found that the specific function of coping at different points in life aided

in the quality of life.

Reker (1987) found the importance of various life attitudes in promoting health and wellness. He suggested that coping skills were based on one's attitude of life.

MacLean (1982) stated that close attention must be paid to physical, mental, and social support systems in order to have optimum quality of life in the later years. Her study implied that quality of life could be controlled to a degree.

Sihvola (1985) recognized education as a resource which could improve an individual's quality of life and well-being. Sihvola's goals for an educational policy for the elderly included satisfying the basic needs of the elderly and creating conditions for personal growth, self-realization, self-determination, and social participation.

In summary, the quality of life for the elderly was affected by attitudes concerning health and living arrangements, by ability to cope, by control over the quality of life exerted by the individual, and by use of education as resource affecting quality of life.

Lifelong Learning

The concepts of learning as a lifelong process, ability of the elderly to learn, and education as a valuable resource for the elderly appeared frequently in the literature on lifelong learning.

Steps to keep the mind active in later years were listed by Hallowell (1985). These steps included: keep involved socially; keep up friendships; make an effort to meet people; keep the mind stimulated; be flexible; be open to new experiences, new types of people and new places. All of these steps required motivation that

stretched the mind and allowed it to grow well into old age.

Wain (1987) stated that the ultimate goal of lifelong education was to maintain and improve the quality of life. Life itself was seen as the major source of learning. Education was seen as not restricted to a particular period of life but as a lifelong process which covered the entire life-span of the individual.

A new dimension of learning that could bring change, renewal, restructuring and problem reformulation was referred to by Knowles (1986). Knowles called this innovative learning and thought it would help one through long-term survival.

Erikson (1986) stated that elders needed the support of training in order to be able to transmit skills effectively. He suggested the development in everyone of an attitude that acknowledged contributions of elders as a worthy and valued gift. Erikson also supported a continued upgrading of all facilities for the health care and education of people at all stages of life. He challenged education to prepare the individual not only for the tasks of early and middle age but for those of old age as well.

Mowesian (1986) defined informational education as the lifelong process by which every person acquired and accumulated knowledge, skill, attitudes, and insights from daily experiences. From an institutional standpoint, informal education is often unsystematic and unorganized learning.

Pifer (1986) and Wharple (1979) discussed the different fields that the older learners find interesting. The range of interests was wide: from the arts, to methods of coping with social change, to programs that teach information about hobbies, physical health needs,

and personal growth. Both researchers found that the most effective programs were those that addressed directly the needs or special interests of the older learner. Wharples referred also to the personality of the instructor and to the convenience of location and time as decided by the participants. He also suggested that some written certificate of completion should be awarded. Pifer (1986) found there was a preference for the kind of participative learning that allowed active involvement as opposed to courses presented in the typical lecture format. Pifer stated that interest in lifelong learning could be expected to grow in the future.

McPherson-Turner (1980) stated two major implications for health education based on the increasing proportion of older adults within the population. The first provision was the likelihood of a new generation of older adults able to enjoy an improved quality of life during the later years. The second provision was self-esteem. Positive emotional health can be enhanced through programs emphasizing positive attitudes regarding this stage of life development cycle.

When Flanagan (1980) studied the Project TALENT survey of 1960, he analyzed the importance assigned to learning by persons with varying amounts of education within each of three age groups, 30 years, 50 years, and 70 years. He found indication of a definite tendency in all three age groups for those with more education to give learning greater importance.

Kowalski (1979) commented on several aspects of the aging process in an effort to address the numerous strengths older individuals tend to possess. More critical changes seem to take place toward the end of the developmental continuum of life. It appears that advancing age

becomes a time when an individual's identity is threatened as a productive, self-reliant citizen due to cultural stereotypes, practices, and available opportunities.

Sihvola (1985) discussed the Committee on Education for the Elderly. He reported their goals of educational policy as being "to satisfy the basic needs of the elderly and to create conditions for personal growth, self-realization, self-determination and social participation on the part of older people" (p. 59). Based on these goals, Sihvola stressed the need for creating better conditions for interaction between generations within the framework of adult education organizations and cultural and other recreational activities.

Knowles (1977) stated one of the purposes of adult education was to help Americans become more aware of the importance of lifelong learning and to assist in identifying national trends and problems that have implications for adult education. Along with this identification would be new programs for older adults.

In summary, lifelong learning was a fully accepted concept, with various researchers suggesting variations of the same general principles of enhancing quality of life through never ending education.

Reminiscing for Senior Citizens

Educational content for the elderly was presented in many forms. One form was reminiscing, which seemed to offer many valuable support features for the elderly.

For instance, Lieberman (1983) questioned why relocation constituted such a profound crisis in the lives of the elderly and why some were able to adapt successfully where others failed. The move

from one environment to another constituted a severe stress, wreaking havoc among a large proportion of the elderly people Lieberman studied. The most compelling evidence for the maintenance of coherent valued self was found in reminiscence. There he found that for the majority of these elderly individuals, the reconstructive efforts directed toward the past more often than not were focused on creating a self-in-the-past that reflected positively on the present self. Personal history was redrawn, not in the service of resolving conflicts and reorganizing one's life prior to death, but for the creation of an enduring and affirming self. Lieberman viewed reminiscence as a coping skill for the elderly.

Cowley (1980) addressed coping as an 80 year old individual. He stated that among the aged, fear was not of death but of becoming helpless. It was a fear of being as dependent as a young child, while not being loved as a child, but merely being kept alive against one's will. Cowley saw it as a play passing judgment on each person's performance. He said to untangle the plot of the play, each person had to gather together the materials that composed their lives. In other words, the first step was simple remembering. Tangible aids to remember were letters, old snapshots, daybooks, and mentos of the past, to help each person say or feel, "I really was", or even, with greater self-confidence, "I was and am this."

Monk (1985) discussed coping and old age. He viewed old age as a time that individuals had to confront losses. These losses included loss of a socially esteemed job and death of mate and peers. He stressed that coping is behavior directed toward dealing with feelings and problem-solving.

Krause (1987) studied the support systems of the elderly. He found that increases in social support tended to increase feelings of control, but only up to a certain threshold. Beyond that point, additional support tended to decrease feelings of personal control. This nonlinear relationship was observed with emotional support and integration (support provided to others) but not with informational or tangible support. Only emotional support and integration were found to influence feelings of control, suggesting that it is important to examine specific types or dimensions of support.

Darkenwald (1982) stated that meaningful material and tasks are more easily learned and longer remembered than nonmeaningful or nonsensical material, especially for older adult learners. The challenge to a facilitator of adult learning is to find ways in which material can be significantly related to the experiences and needs of the learners.

Revere (1980) hypothesized that the elderly would not only be more involved in their past but also mythicize their past as reflected in ratings of dramatization, consistency and certainty. He found that later in life the past became unique, and in the myth was the reality of one's life.

Aubell (1986) studied the effect of a guided program of life review with elderly clients in relation to the presence and degree of loneliness while living in an apartment complex. She found that life review can improve the quality of life as a result of better adjustment to geriatric apartment living.

Huber and Miller (1984) recommended starting and maintaining a reminiscence group. Based on their experience of using reminiscing

with a small group at a health center, they found it to be a learning experience for all who took part. It also created humor and allowed for sadness and joy in the lives of the leader and the group.

Another enriching outcome of reminiscing is the history tale waiting to be told. In his research for writing a book on reminiscing, Kaminsky (1984) learned that the elderly were talking about both personal and public events. Life review was not only a ground to discover their integrity but also a place to discover what history had taken place.

Coleman (1986) raised the question "Does reminiscence promote adjustment in late life?" He stated that this question was too naive. Coleman recommended the need to determine the conditions under which reminiscence is adaptive, and to relate such findings to our understanding of human personality.

Norris (1987) viewed reminiscing as a positive contribution of the elderly. It can be fun and adds to the quality of life of elderly people involved in it. Maintaining an elderly person's self image is important and can be educational using the art of reminiscing.

In summary, reminiscing was credited with providing powerful skills for coping with certain problems and improving the quality of life. Reminiscing was also seen as support for maintaining self-esteem and as a way of adding humor, reviewing sadness, and adding joy to the quality of life. Among its enhancements to life is the source of history uncovered through reminiscing. Researchers were also challenged to determine methods or conditions for improving the power of reminiscing.

Summary

The review of literature related to the aging population showed that the population and condition of the elderly was a major concern of research. The demographic information presented the increasing numbers due to the baby boom, the effect of medical advancements and decline in birth rate, the rising demands on the federal budget, concern for the severely disadvantaged very old citizens, and the reasons for the changing definition of aging. The amount of research on problems unique to the elderly from 1957 to 1988 identified social isolation as a problem for the elderly. The fact that relocation can cause social isolation for many individuals led this researcher to choose the public housing environments as an area of research.

The quality of life issue was well researched since 1950. The studies in the review found that quality of life for the elderly was affected by ability to cope, by attitudes of the elderly concerning adaptation to living arrangements and other life stresses, by control over the quality of life which the individual could exert, and by use of education as an effect on quality of life.

Lifelong learning was a fully referenced concept, with researchers suggesting variations of the same general principles of enhancing quality of life through never ending education.

Reminiscing was credited with providing powerful skills for coping with problems and improving the quality of life. Reminiscing was also seen as support for maintaining self-esteem and a way of adding humor, reviewing sadness, and adding joy to the quality of life. Among its enhancements to life was its role as a source of history uncovered

through reminiscing. Researchers were also challenged to determine methods or conditions for improving the power of reminiscing.

CHAPTER III

METHODOLOGY

Purpose of the Study

The purpose of this study was to determine if an educational intervention, specifically a workshop on reminiscing, could affect life satisfaction for the socially isolated senior citizens residing in public housing as measured by the Life Satisfaction in the Elderly Scale (LSES).

Research Design

The design used in this study was described by Campbell and Stanley (1963, p. 13) as a true experimental design. Campbell and Stanley's code for graphic presentation of the design was:

An X will represent the exposure of a group to an experimental variable or event, the effects of which are to be measured; O will refer to some process of observation or measurement; the Xs and Os in a given row are applied to the same specific persons. The left-to-right dimension indicates the temporal order, and Xs and Os vertical to one another are simultaneously. To make certain important distinctions . . . a symbol R, indicating random assignment to separate treatment groups, is necessary (p. 6).

Their code explained their Design 4, THE PRETEST-POSTTEST CONTROL GROUP DESIGN, used for this study:

R	O ₁	X	O ₂
R	O ₃		O ₄

Campbell and Stanley (1963) further noted that the comparison of X with no X is an oversimplification; that

the comparison is actually with the specific activities of the control group which have filled the time period corresponding to that in which the experimental group received the X. Thus the comparison might better be between X_1 and X_0 . . . That these control group activities are often unspecified adds an undesirable ambiguity to the interpretation of the contribution of X (p. 13).

Campbell and Stanley showed the internal validity of this design was controlled for history, maturation, testing, instrumentation, regression, selection, mortality, and interaction of selection. The external validity showed a weakness for the interaction of testing and X.

Dependent variables were the individual scores obtained from the pretest and posttest of Life Satisfaction in the Elderly Scale (LSES). The independent variable was treatment considered on two levels-- treatment (X_1), and no treatment (X_0). Treatment was withheld from the control group and given to the experimental group.

Public Housing Settings

The two Tulsa Housing Authority (THA) sites randomly selected by the Tulsa City County Health Department (TCCHD) and recruited by the researcher, were both built within five years of each other. These sites were approximately 15 to 20 years old and both sites had 11 floors. Elevators and handrails had been installed to assist the senior citizens. The first level had a lobby and activity room. The activity room was used for the testing and treatment in this study. The activity room had dividers to partition the large area in half for smaller groups. Both sites looked similar from the outside as well as

the inside. The furnishings in the activity room included comfortable chairs and tables, and the large windows which made up the outside walls were adequately draped.

The Tulsa Housing Authority was created to provide good quality housing to families who could not afford to pay for adequate housing on the private market. The tenant's eligibility to live in public housing was determined by income and by age of 62 or older.

One of the two randomly selected sites for this study was located in the western part of the city, the other in the northern part. They were identified in this study as Site A for the western and Site B for the northern complex.

Treatment

Reminiscing was selected for the treatment in this study because of the importance it plays in the lives of senior citizens. Havighurst and Glasser (1972) stated the phenomenon of reminiscence intensifies greatly in early old age. Butler (1963) viewed life review as natural and universal, characterized by the progressive return to consciousness of past experiences, and often resulting in revised or expanded understanding.

Aubell (1986) did a study using treatment titled Life Review. Her study included 30 subjects, 15 each in the experimental group and control group. Her purpose was to explore the relationship between life review opportunity and decrease in loneliness and improvement of physical performance. Aubell met individually with the experimental group members for two hours a week over a four week period. At the conclusion of the study, the decrease in loneliness for the

experimental group was significant at the .05 level. She found no change in functional independence.

In contrast to Aubell (1986), this present study was designed for a total of 80 subjects. Its purpose was to explore the relationship between life review reminiscing and social isolation, and the researcher met the subjects in a group workshop setting. This study did replicate the time used in Aubell's study as well as the life review/reminiscing approaches.

The treatment for this present study was designed especially for this experimental design grouping by the researcher. This study was the field test for the reminiscing curriculum used in the treatment.

The treatment consisted of four sessions of two hours each, using reminiscing in a workshop setting. The goal of the reminiscing workshop was to review one's life from birth to present and to share this review within a social setting.

Workshop leaders included the researcher and three colleagues who were certified public school teachers. Each leader served as a facilitator and recorder for the small group activities. The large group activities, staff and all senior citizens, were led by the researcher. All leaders took part in all activities. Each leader had ten or more years of experience as an elementary school teacher and had prior experience leading adult workshops.

Summary of Treatment

Session I: The main goal of this session was to review early years of life. The objectives included: to get acquainted, to recall time of birth, early childhood, and to share with others in a social

setting. The activities included a baby shower simulation which included the senior citizens' receiving gifts with attached related questions to stimulate memories and conversation; for example, one gift was play money and the attached question was "How much do you think it cost be delivered when you were born?"; childhood songs, stories, and nursery rhymes were recalled to stimulate early childhood memories.

Session II: The main goal of this session was to review early school and teen years. The objectives included: to recall school days and first love. The activities included a simulation of a school day and sharing with others in a social setting.

Session III: The main goal of this session was to review war years, weddings, and work years. The objectives included: to hear about the war times; to recount marriages, to recall past work experiences. The activities included a history review from 1936 to 1945, visual reminders, and sharing with others in a social setting.

Session IV: The main goal of this session was to review the present time and to apply the PMI problem solving techniques developed by deBono (1982). The objectives included: to learn the PMI application of P = plus or the good points, M = minus or the bad points, I = interesting or the interesting points; to evaluate the workshop; to bring closure. Activities included using PMI to explore living conditions in public housing, presentation of certificates; to meet future pen pal; and evaluation and closure to workshop (See Appendix A for Reminiscing Workshop Curriculum.)

Each senior citizen who took part in the treatment, received a fruit basket at the first session and brought the basket to each session to be refilled. The fruit basket served as a reminder and

incentive to come to the sessions. At the conclusion of the treatment each subject was given a certificate of participation (See Appendix B for Certificate of Participation).

Sample

Before beginning the research for this study, the researcher spoke with the Director of Activities for Senior citizens at the Tulsa city County Health Department. The researcher provided the purpose and intentions of this study. The researcher was encouraged to begin the research by the Tulsa City County Health Department (TCCHD). (See Appendix C for Recommendation Letter.) A request application form was submitted to the Oklahoma State University Institutional Review Board and was granted (See Appendix D for OSU Institutional Review Board Approval Form.)

The Tulsa City County Health Department (TCCHD) randomly selected two Tulsa Housing Authority (THA) sites from a total of five Tulsa Housing Authority (THA) sites for the elderly. The two sites were referred to as Site A and Site B in the study (See Figure 1).

The researcher visited with a representative of Tulsa Housing Authority (THA) and was given the names of the respective presidents of the tenant associations of the two sites selected. However, the representative stated that the Tulsa Housing Authority did not have control over the activities within the sites and that the researcher should contact each of the two tenant association presidents.

When the proposed study was presented by the researcher, members of each tenant association approved it. Due to confidentiality requirements for the tenants, the associations agreed to identify the

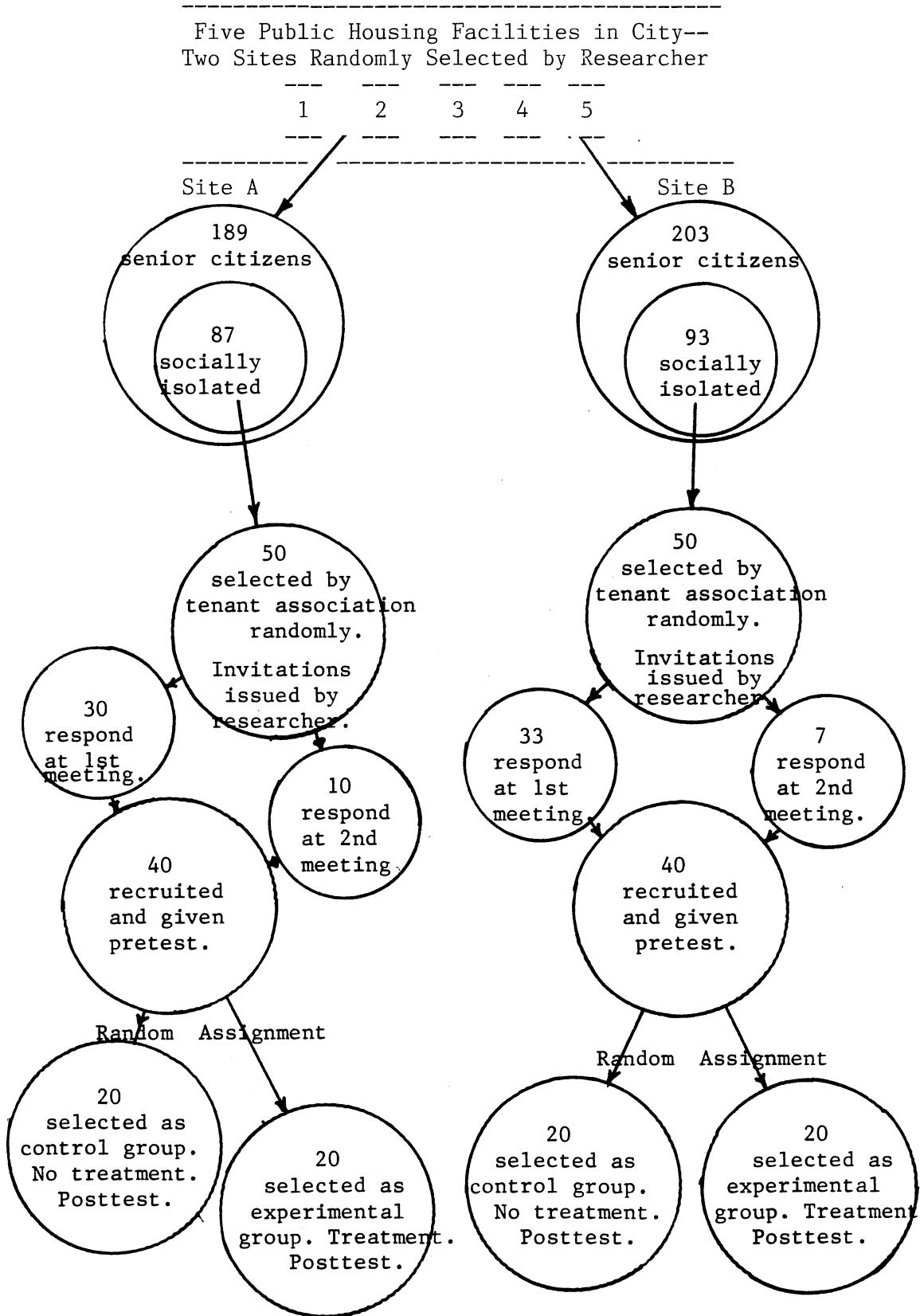


Figure 1. Random Selection Procedures

socially isolated population, using the criteria set by the researcher (See Appendix E for the Criteria for Socially Isolated Population.) The tenant associations also set up a sampling selection committee to follow the researcher's criteria.

The researcher was given a list of 100 randomly selected, socially isolated tenants, 50 from each site. The samples were drawn from each site's total population of identified socially isolated: 87 out of a total population of 189 senior citizens at Site A; 93 out of a total population of 203 senior citizens at Site B. (See Figure 1 for a representation of the subject selection process).

Due to the confidentiality requirement for the tenants, the list did not have telephone numbers or apartment room numbers of the randomly selected socially isolated tenants. In addition, the researcher was not given names of the sampling selection committee. The only person that the researcher had contact with during the selection was the president of each site. The presidents were not part of the selection committees. The presidents served only as delivery persons for the list to protect individual confidentiality.

An invitation was carefully designed and sent by the researcher to each of the subjects (See Appendix F for Invitation to Visit with a Teacher.) Five dollars were promised to each tenant who came to the Activity Room to meet the researcher. The invitations were delivered to the subjects by the tenant associations through the intermediation of the tenant president. Each invitation had the name of the randomly selected socially selected tenant on the envelope. Each site had 50 invitations to deliver to the randomly selected socially isolated tenants. A total of 100 invitations were delivered.

After the first orientation presentation for the socially isolated tenants, the researcher had recruited 63 subjects. The total number who attended the first meeting was 66. Three decided not to take part in the voluntary study. Site A had 32 at the first presentation. Two decided not to take part in the study. Site B had 34 socially isolated tenants at the first presentation. One decided not to take part in the study.

Due to mortality rate, the researcher needed a larger response from the randomly selected 100 subjects. The process was repeated for 34 who did not attend the first orientation presentation. Invitations were sent for a second time with a new date to meet with the researcher. Site A received 18 new invitations for those 18 who did not come to the first orientation presentation. Site B received 16 new invitations for those 16 who did not come to the first presentation. A total of 34 new invitations were delivered.

After the second orientation presentation for the socially isolated tenants, the researcher had recruited 17 additional subjects. The total number who attended the second orientation presentation was 21 of the socially isolated. Site A had 13 socially isolated at the second orientation presentation. Three were not interested in taking part in the study, leaving ten who were recruited. Site B had seven socially isolated at the second orientation presentation. Seven who agreed to participate were recruited. The initial randomly selected socially isolated pool was 100. After scheduling two orientation presentations as described above to meet with the researcher, 20 of the socially isolated had failed to attend the presentations or decided not to take part. The researcher now had 80 subjects to carry out the

study.

From the 80 recruited subjects, the researcher divided the subjects by sites, and drew at random 20 names for the experimental group at one site and 20 names for the experimental group at the other site making a total of 40 subjects for the experimental group. The 40 left over names, 20 at each site, became the control group.

The experimental group total was 40 and the control group was 40 making a total of 80 subjects for this study. After the treatment began, three of the original randomly selected tenants wanted to be part of the study. They had not attended the first or second orientation presentation. The researcher told them that the study had started and recruitment was closed.

Collection of Data

At the first and second orientation presentations, each invited socially isolated tenant was given a name tag with an assigned identification number in the right corner. Site A had sign in sheets with numbers one through 99 in numerical order on five different sheets. Site B had sign in sheets with numbers 100 through 199 in numerical order on five different sheets. Name tags had been prepared in advance for all on the original list of 100 names. When an invited socially isolated tenant picked up his/her name tag, an assistant wrote the name by a number and placed it in the right corner of the name tag. This number became the identification number for the socially isolated tenant.

At the orientation presentation, the researcher explained the purpose of the study. The purpose was stated from the consent form nad

the consent form was explained to the entire group. Those interested remained with the researcher. They signed the consent form and took the pretest (See Appendix G for Individual's Consent for Participation in A Research Project).

In place of a name on the Salamon-Conte Life Satisfaction in the Elderly Scale (LSES), the subjects were asked to use their assigned identification number for confidentiality.

The researcher trained three additional teachers to assist in giving the test to those subjects who needed assistance. The training for the assistants included reading the manual for the Salamon-Conte Life Satisfaction in the Elderly Scale (LSES) and an understanding of the purpose of the study. The training took one hour.

One assistant checked the tests for any incompleated answers before the subjects left the area. Two nurses who serve the sites on clinic days, helped with the name tags and identification numbers for the study at the first presentations at both sites. The researcher and two assistants attended the second presentations.

A total of 80 subjects, 40 from each randomly selected site, took the pretest before the experimental group was randomly assigned during the second week in January.

During the third week of January, 1989 and the first three weeks of February, 1989, identical treatments (See Appendix A for Reminiscing Workshop) were given to the experimental group at the two randomly selected sites. The posttest was given one week after the final workshop in February, 1989. The same three trained assistants helped with the posttest.

The researcher obtained telephone numbers and addresses from the

80 subjects. This allowed reminders to be mailed or telephoned prior to each workshop and the posttest (See Appendix H for Reminders).

Measure Instrument

The instrument used in this study was the Life Satisfaction in the Elderly Scale (LSES) by Michael J. Salamon and Vincent A. Conte. It was purchased from Psychological Assessment Resources (PAR), Inc. A qualification form was required prior to purchase of the instrument (See Appendix I for Qualification Form.) Request for permission to enlarge copies of dissertation research to enable the elderly to more easily read the scale (See Appendix J for Request Letter.) The letter was followed by a permission agreement form letter from PAR. The researcher followed each of the requirements outlined in the letter and obtained permission from PAR (See Appendix K for Permission Agreement Letter.)

The permission agreement granted allowed the researcher to use information in the test manual in this dissertation and to print the scale (See Appendix L for Life Satisfaction in the Elderly Scale [LSES]). Salamon and Conte (1984) stated in their test manual:

The LSES is designed to be a self-report paper and pencil examination. It can be used one-to-one in an interview format or administered to groups with varying degrees of supervision, depending on the functional level of the participants. Usually the entire scale can be completed in 15 to 25 minutes. When presented to a group, the tester should foster an atmosphere of privacy and undisturbed attention to the task. Individuals who function at a lower level of cognitive ability may require individual administration. When used within an interview, the tester should read the questions, as worded, and all five response options. Respondents should be encouraged to listen to all response options, and those options may be repeated as often as necessary.

The LSES provides a total satisfaction score and eight subscale scores. The chosen subscales are daily activities, meaning, goals, mood, self-concept, health, finances, and social contacts. (See Appendix M for LSES Items by Scale.)

LSES Scores are recorded on scoring sheets. (See Appendix N for LSES Scoring Sheets.) Scores are tabulated according to the following formula: The response anchor to the far left is scored as one point. The next response anchor 2 is scored as two points. The center anchor 3 is scored as three points. The anchor right of center (anchor 4) is scored as four points.

Finally anchor 5 to the far right is scored as the maximum of five points. All items use the same graphic scale regardless of the verbal anchor in each. The score for each item should be entered for each line in the space provided under the appropriate column (pp. 21-22).

Dixon (1988) reviewed the Salamon-Conte Life Satisfaction in the Elderly Scale. He stated:

The LSES provides a total satisfaction score and eight subscale scores. The chosen subscales are consistent with those definitions of satisfaction found in the literature. Five of the domains of satisfaction (daily activities, meaning, goals, mood, and self-concept) are also assessed by Life Satisfaction Index scales developed by Neugarten, Havighurst, and Tobin (1961). The three additional subscales are health, finances, and social contacts.

Reliability data support the internal consistency and stability of the total scale. Coefficient alpha reliabilities of .93 and .92 and test-re-test reliability coefficient of .67 (6 month) and .90 (1 month) are reported. Subscale reliabilities are adequate for most subscales; however, the goals and self-concept subscales are questionable (coefficient alpha reliabilities of .60, .50 and .61, .47 respectively for two different samples.

Validity data, derived by factor analysis and cluster analysis procedures, generally support the subscale structure of the LSED. These data also raise questions about the goals and self-concept subscales.

No criterion-related validity is presented in the manual. Minimally, it would be useful to know how the LSES correlates with other measures of life satisfaction (pp. 170-171).

Analysis of Data

Upon completion of the Life Satisfaction in the Elderly Scale (LSES), both pre-posttest scores for the subscales and totals were hand scored and recorded on the Life Satisfaction in the Elderly Scale (LSES) Scoring Sheets by the researcher. The demographic variables were age, sex, marital status, and race. The Statistical Package for the Social Sciences (SPSS) computer program was used in this study.

The following information gathered from each pre-posttest for each subject was entered into the computer in the following order:

1. Subject assigned identification number
2. Group (1 = control, 2 = experimental)
3. Location (1 = western site, 2 = northern site)
4. Age of each subject
5. Sex (1 = male, 2 = female)
6. Marital status (1 = single, 2 = married, 3 = widowed, 4 = divorced)
7. Subscale scores (8 on the pre-test)
8. Total for pre-test subscale scores
9. Subscale scores (8 on the posttest)
10. Total for posttest sub scale scores

Descriptive and inferential statistics were used in the analysis of data. One way analysis of variance for mixed effects where there were two levels of the independent variable were used for analysis. Values for main effects and interaction were computed at the .050 level of significance to determine if the hypotheses were rejected or failed to be rejected.

= eight hours.

8. Posttest was given to the control group and the experimental group at both sites.

9. The Measurement Instrument used was the Life Satisfaction in the Elderly Scale (LSES), which had eight subscales: Daily Activities, Meaning, Goals, Mood, Self-Concept, Health, Finances, and Social Contacts.

10. Pretest and posttest scores were hand scored and recorded on scoring sheets by researcher.

11. Statistical Package for The Social Sciences (SPSS) computer program was used to run Analysis of Variance.

Each of the steps which were delineated throughout this chapter were part of the true experimental design used for the findings presented in Chapter IV.

CHAPTER IV

FINDINGS

Description of Dependent and Independent Variables

The purpose of this study was to determine if an educational intervention, specifically a workshop on reminiscing, could effect life satisfaction for the elderly as measured by the Life Satisfaction in the Elderly Scale (LSES).

H_0 1 stated: There is no significant difference in scores on the Life Satisfaction in the Elderly Scale between those exposed to the educational workshops and those who were not exposed to the educational workshops.

H_0 2 stated: There is no significant difference in scores on the Life Satisfaction in the Elderly Scale between the amount of change from pretest to posttest for the group exposed to the educational workshops and the amount of change from pretest to posttest for the group not exposed to the educational workshops.

The scores on the pretest and posttest represented the dependent variables in this study. The treatment (X_1) and no treatment (X_2) represented the two levels of the independent variable. The experimental group was manipulated with the presentation of treatment (X_1). The control group was manipulated by withholding treatment (X_0).

Description of Demographic Variables

The randomly selected subjects were the socially isolated senior citizens residing in two public housing sites. The demographic variables for the subjects included age, sex, marital status, and race. The grouping variables for the subjects included Site A and Site B for location of subjects. Additional grouping variables were control and experimental groups related to this experiment. The subjects in the study were $N = 80$ on the pretest and $N = 72$ on the posttest.

The age variable of the subjects depicted in Table I included all 80 subjects who took the pretest. Obviously, it does not indicate which subjects dropped out of the study.

The three other demographic variables included with age were sex, marital status, and race. Table II represented the 80 subjects who took the pretest.

Description of Demographic Variable

Comparisons

Table III represented the comparison of the grouping variable location with the demographic variables of sex, marital status, and race.

Table IV represented the comparison of sample by age means and standard deviations with demographic variables. The sample was listed by the demographic variables of sex, marital status, and race.

Description of Mortality Rate

The dropout was ten percent; eight subjects did not take the

TABLE I
PRETEST FREQUENCIES AND PERCENTILES BY AGE

Age Years	Frequency	Percentile	Valid Percentile	Cumulative Percentile
62	1	1.2	1.2	1.2
65	1	1.2	1.2	2.5
66	6	7.5	7.5	10.0
67	7	8.7	8.7	18.8
68	9	11.2	11.2	30.0
69	3	3.7	3.7	33.7
70	3	3.7	3.7	37.5
71	1	1.2	1.2	38.7
73	4	5.0	5.0	43.8
74	2	2.5	2.5	46.2
75	2	2.5	2.5	48.7
76	4	5.0	5.0	53.7
77	2	2.5	2.5	56.3
78	4	5.0	5.0	61.2
79	4	5.0	5.0	66.2
80	2	2.5	2.5	68.8
81	3	3.7	3.7	72.5
82	3	3.7	3.7	76.2
83	7	8.7	8.7	85.0
84	2	2.5	2.5	87.5
85	4	5.0	5.0	92.5
87	1	1.2	1.2	93.8
89	1	1.2	1.2	95.0
90	1	1.2	1.2	96.2
91	1	1.2	1.2	97.5
92	1	1.2	1.2	98.7
95	<u>1</u>	<u>1.2</u>	<u>1.2</u>	100.0
Total	80	100.0	100.0	

N = 80

TABLE II
PRETEST FREQUENCIES AND PERCENTILES BY SEX/MARITAL STATUS/RACE

Variable	Frequency	Percent	Valid Percentile	Cumulative Percent
<u>Sex</u>				
Male	21	26.2	26.2	26.2
Female	<u>59</u>	<u>73.7</u>	<u>73.7</u>	100.0
Total	80	100.0	100.0	
<u>Marital Status</u>				
Single	22	27.5	27.5	27.5
Married	2	2.5	2.5	30.0
Widowed	50	62.5	62.5	92.5
Divorced	<u>6</u>	<u>7.5</u>	<u>7.5</u>	100.0
Total	80	100.0	100.0	
<u>Race</u>				
White	46	57.5	57.5	57.5
Black	33	41.2	41.2	98.7
Indian	<u>1</u>	<u>1.2</u>	<u>1.2</u>	100.0
Total	80	100.0	100.0	
N = 80				

TABLE III
COMPARISON OF SITE A AND SITE B BY
GENDER, MARITAL STATUS, AND RACE

<u>Gender</u>							
	Male	Female				Total	
Site A	8	32				40	
Site B	<u>13</u>	<u>27</u>				<u>40</u>	
Total	21	59				80	
<u>Marital Status</u>							
	Single	Married	Widowed	Divorced			Total
Site A	8	1	30	1			40
Site B	<u>14</u>	<u>1</u>	<u>20</u>	<u>5</u>			<u>40</u>
Total	22	2	50	6			80
<u>Race</u>							
	White	Black	Indian			Total	
Site A	26	13	1			40	
Site B	<u>20</u>	<u>20</u>	—			<u>40</u>	
Total	46	33	1			80	

TABLE IV
 SAMPLE COMPARISON OF AGES WITH DEMOGRAPHIC VARIABLES

Demographic Variable	N	Age Mean	Age S. D.
<u>Gender</u>			
Males	21	73.23	6.9
Females	59	76.47	7.9
<u>Marital Status</u>			
Singles	22	73.72	7.5
Married	2	67.50	.7
Widowed	50	77.30	7.6
Divorced	6	71.33	6.4
<u>Race</u>			
White	46	75.41	7.3
Blacks	33	75.75	8.5
Indian	1	81.00	

posttest due to the following reasons: illness , five subjects; moved, one subject; did not want to be part of the study, one subject; and death, one subject. Site A had a dropout of one in the experimental group and four in the control group. Site B had a dropout of one in experimental group and two in the control group.

The ages of the eight dropouts were: illness, 87 years, 84 years, 70 years, and 62 years; moved, 65 years; did not want to be part of the study, 79 years; death, 76 years.

The male variable remained at 21 after the dropout. The female variable changed from 59 to 51 after the dropout. The marital status variable for single changed from 22 to 21; married remained at two; widowed changed from 50 to 43; and divorced remained at six after the dropout. The race variable for White changed from 46 to 39; Black changed from 33 to 32; and Indian remained at one after the dropout.

Statistics on the Dependent Variable

Descriptive Statistics of Scores

Table V describes the means and ranges of the pretest and posttest scores. The eight subscales had a possible score of 25 each.

Table VI illustrated the frequency distribution of total scores on the pretest and posttest. The total possible score was 200. The range of total scores was 101 to 166 on the pretest and 86 to 171 on posttest.

Testing for Significance of H_0

The t-test values in Table VII compared pretest scores between the

TABLE V
COMPARISON OF PRETEST/POSTTEST SUBSCALE AND COMPOSITE SCORES

Subscale	Range	Mean
<u>Pretest</u>		
Daily Activities	9 - 24	16.80
Meaning	12 - 25	18.33
Goals	9 - 24	16.45
Mood	13 - 25	18.84
Self Concept	13 - 24	17.75
Health	6 - 25	13.00
Finances	5 - 21	14.39
Social Contacts	11 - 25	19.44
Composite Score	101 - 166	134.91
N = 80		
<u>Posttest</u>		
Daily Activities	7 - 25	17.67
Meaning	11 - 24	18.51
Goals	10 - 22	16.37
Mood	13 - 25	18.99
Self Concept	10 - 24	17.88
Health	6 - 22	13.20
Finances	5 - 24	15.32
Social Contacts	11 - 25	19.50
Composite Score	86 - 171	137.44
N = 72		

TABLE VI

COMPARISONS OF PRETEST/POSTTEST TOTAL SCORES OF COMBINED GROUPS

Score	Frequency	Score	Frequency	Score	Frequency
<u>Pretest</u>					
101	1	104	2	105	1
106	1	111	2	112	1
113	2	116	2	117	3
118	2	120	2	121	1
122	2	123	2	124	
125	1	126	2	127	1
128	1	129	2	130	1
131	2	132	1	133	3
134	1	135	2	136	1
137	3	140	1	141	2
142	1	143	3	144	2
145	1	146	1	149	2
150	2	151	1	152	3
154	1	156	1	158	2
159	1	160	2	161	2
159	1	164	<u>2</u>	166	2
163	<u>1</u>				<u>1</u>
167					
Total	24	Total	28	Total	28
N = 80	Mean = 134.91	Mode = 117.00		SD = 17.36	
<u>Posttest</u>					
86	1	102	2	105	1
113	2	115	1	116	1
118	1	119	1	120	2
121	4	122	1	125	3
126	1	127	1	128	2
129	1	130	2	132	1
133	1	134	2	137	4
138	1	139	1	140	4
141	1	142	4	143	2
144	1	146	2	148	4
149	1	150	2	153	1
158	1	160	3	161	1
163	1	164	1	165	1
166	1	167	<u>1</u>	171	<u>2</u>
179	<u>1</u>				
Total	<u>19</u>	Total	24	Total	29
N = 72 (8 drop out)	Mean = 137.44	Mode = 121.00		SD = 18.37	

TABLE VII

T-TEST VALUES FOR PRETEST ONLY ON THE LIFE SATISFACTION IN THE
ELDERLY SCALE (LSES) CONTROL GROUP VERSUS EXPERIMENTAL GROUP

Subscale	<u>N</u>	<u>t</u>	<u>df</u>	<u>p</u>
Daily Activities	40	.58	78.00	.391
Meaning	40	- .12	77.35	.903
Goals	40	1.05	73.86	.298
Mood	40	.35	74.53	.730
Self-Concept	40	.86	73.67	.391
Health	40	.60	77.89	.551
Finances	40	.94	77.96	.348
Social Contacts	40	- .24	75.72	.813
Composite Scores	40	.75	77.59	.455

p = <.050

control group and the experimental group. The t-test value .75, $p < .455$, for the composite score comparison found no significant difference between the two groups on the pretest scores at $p < .050$.

The t-test values in Table VIII compared posttest scores only between control group and experimental group. The t-test value, $-.53$, $p .598$, for composite score comparison found no significant difference between the two groups on the posttest scores at $p < .050$.

Using a one-way analysis of variance, ANOVA, procedure as shown in Table IX, the control group and experimental group were compared on overall performance on composite scores. The F value, $.03$, $p .87$, for composite score comparison (first column) revealed no significant difference between the two groups on the overall performance scores at $p < .050$. H_0 failed to be rejected.

Testing for Significance of H_0

The t-test values in Table X for the control group only compared the scores on the pretest and posttest for the amount of change. The t-test value $.44$, $p .659$, for the comparison of amount of change in scores from the pretest to the posttest found no significant difference between the amount of change in scores for the experimental group at $p < .050$.

Table XI presented the t-test values for experimental group only comparing the scores on the pretest and posttest for the amount of change. The t-test value, -4.17 , $p .001$, for the comparison of amount of change in scores from the pretest to the posttest found significant difference between the amount of change in scores for the experimental group at $p < .050$.

TABLE VIII

T-TEST VALUES FOR POSTTEST ONLY ON THE LIFE SATISFACTION IN THE
ELDERLY SCALE (LSES) CONTROL GROUP VERSUS EXPERIMENTAL GROUP

Subscale	<u>N</u>	<u>t</u>	<u>df</u>	<u>p</u>
Daily Activities	34/38	- .83	63.06	.415
Meaning	34/38	- .53	62.04	.603
Goals	34/38	- .38	65.50	.705
Mood	34/38	.30	67.25	.766
Self-Concept	34/38	.40	59.92	.692
Health	34/38	- .01	64.61	.996
Finances	34/38	- .91	68.37	.368
Social Contacts	34/38	- .85	66.58	.400
Composite Scores	34/38	- .53	66.58	.598

p = <.050

TABLE IX
ANALYSIS OF VARIANCE ON THE LIFE SATISFACTION IN
THE ELDERLY SCALE (LSES)

Subscale	Between		Within		Interaction	
	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>
Daily Activities	.0006	.98	4.73	.03	4.23	.04
Meaning	.006	.93	.06	.79	.86	.36
Goals	.21	.65	.15	.70	3.81	.055
Mood	.27	.61	.008	.93	.14	.71
Self-Concept	.79	.38	.12	.73	.80	.38
Health	.001	.97	1.70	.20	.82	.88
Finances	.000	.99	6.27	.02	5.25	.03
Social Contacts	.38	.54	.00	1.00	.49	.49
Composite Scores	.03	.87	2.18	.14	4.81	.03

p = .050

TABLE X
 T-TEST VALUES FOR CONTROL GROUP ONLY ON THE LIFE SATISFACTION
 IN THE ELDERLY SCALE (LSES) PRETEST VERSUS POSTTEST

Subscale	<u>N</u>	<u>t</u>	<u>df</u>	<u>p</u>
Daily Activities	34	.01	33	1.000
Meaning	34	.45	33	.655
Goals	34	1.36	33	.182
Mood	34	.30	33	.765
Self-Concept	34	.41	33	.682
Health	34	- .74	33	.462
Finances	34	- .05	33	.958
Social Contacts	34	.47	33	.638
Composite Score	34	.44	33	.659

p = <.050

TABLE XI

T-TEST VALUES FOR EXPERIMENTAL GROUP ONLY ON THE LIFE SATISFACTION
IN THE ELDERLY SCALE (LSES) PRETEST VERSUS POSTTEST

Subscale	<u>N</u>	<u>t</u>	<u>df</u>	<u>p</u>
Daily Activities	38	-3.71	37	.001
Meaning	38	- .92	37	.363
Goals	38	-1.46	37	.153
Mood	38	- .21	37	.831
Self-Concept	38	- .86	37	.393
Health	38	-1.11	37	.274
Finances	38	-3.56	37	.001
Social Contacts	38	- .52	37	.608
Composite Score	38	-4.17	37	.001

p = <.050

The one-way analysis of variance, ANOVA, was used for the mixed model 2 x 2 (experimental/control groups x pre/posttest). The interaction with the main effect of treatment (X_1) and no treatment (X_0) was significant at the $p < .050$ level. Table XII represented the value of $F_{4.81}$, $p = .03$, significant at $p < .050$ for the total interaction. H_0^2 was rejected.

To better understand the patterns of differences in interaction, Tables XIII and XIV illustrated the cell means for the Life Satisfaction in the Elderly Scale (LSES). The marginal numbers were the means of the means in the horizontal rows (within) and vertical columns (between). The number located on the corner of the right margin represented the grand mean of the rows and columns. The experimental group pretest means were lower than the control group in all eight (8) subscales. The experimental group posttest means increased. The control group posttest means decreased in five of the subscales, remained the same in one subscale, and increased in two subscales. Table XIV compared the means of composite scores for the control group and experimental group.

To further illustrate the effect shown in Table XIV, the data were presented pictorially in Figure 2. Comparison of Control and Experimental Groups on Pretest and Posttest on Life Satisfaction in the Elderly Scores (LSES). The interaction of these values did not reveal which group was interacting. The figure more clearly illustrates that the control group change between the pretest and posttest. The difference in improvement between the two groups was represented by the interaction in ANOVA.

TABLE XII
 ANALYSIS OF VARIANCE ON THE LIFE SATISFACTION IN
 THE ELDERLY SCALE (LSES)

Subscale	Between		Within		Interaction	
	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>
Daily Activities	.0006	.98	4.73	.03	4.23	.04
Meaning	.006	.93	.06	.79	.86	.36
Goals	.21	.65	.15	.70	3.81	.055
Mood	.27	.61	.008	.93	.14	.71
Self-Concept	.79	.38	.12	.73	.80	.38
Health	.001	.97	1.70	.20	.02	.88
Finances	.001	.99	6.27	.02	5.25	.03
Social Contacts	.38	.54	.00	1.00	.49	.49
Composite Scores	.03	.87	2.18	.14	4.81	.03

p = <.050

TABLE XIII

COMPARISON OF MEANS ON LIFE SATISFACTION IN THE ELDERLY SCALE (LSES)

	Means for Subscale 1 Daily Activities				Means for Subscale 2 Meaning		
	<u>Pretest</u>	<u>Posttest</u>			<u>Pretest</u>	<u>Posttest</u>	
Control	17.32	17.32	17.32	Control	18.55	18.32	18.44
Experimental	16.71	17.97	17.34	Experimental	18.32	18.68	18.50
	17.0	17.65	17.33		18.44	18.50	18.51
	Means for Subscale 3 Goals				Means for Subscale 4 Mood		
	<u>Pretest</u>	<u>Posttest</u>			<u>Pretest</u>	<u>Posttest</u>	
Control	16.94	16.24	16.59	Control	19.24	19.09	19.17
Experimental	16.08	16.50	16.29	Experimental	18.82	18.89	18.86
	16.51	16.37	16.44		19.03	18.99	19.01
	Means for Subscale 5 Self-Concept				Means for Subscale 6 Health		
	<u>Pretest</u>	<u>Posttest</u>			<u>Pretest</u>	<u>Posttest</u>	
Control	18.15	18.00	18.08	Control	12.91	13.20	13.06
Experimental	17.47	17.76	17.62	Experimental	12.84	13.21	13.03
	17.81	17.88	17.85		12.88	13.21	13.05
	Means for Subscale 7 Finances				Means for Subscale 8 Social Contacts		
	<u>Pretest</u>	<u>Posttest</u>			<u>Pretest</u>	<u>Posttest</u>	
Control	14.85	14.88	14.88	Control	19.38	19.15	19.27
Experimental	14.03	15.71	15.71	Experimental	19.61	19.8	19.72
	14.44	15.30	15.30		19.50	19.49	19.50

TABLE XIV
COMPARISON OF MEANS FOR COMPOSITE SCORE ON LIFE SATISFACTION
IN THE ELDERLY SCALE (LSES)

	Means for Composite Score		Total
	Pretest	Posttest	
Control	137.35	136.21	273.55
Experimental	133.71	138.55	272.21
Total	271.06	274.70	272.86

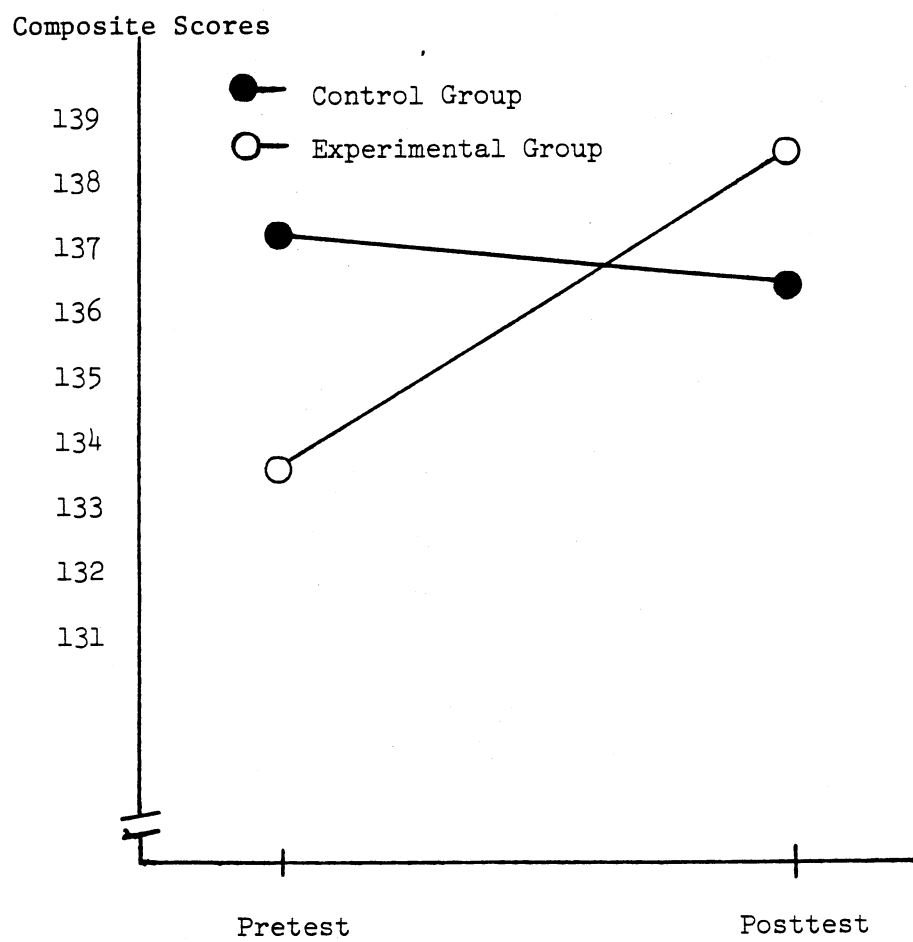


Figure 2. Comparison of Control and Experimental Groups on Pretest and Posttest on Life Satisfaction in the Elderly Scale (LSES)

Supplementary Analysis

Several demographic variables were considered to cause potential interference, therefore, an ANOVA of covariance was used to remove the effect of these variables. Table XV summarized the findings of the analysis of covariance. As can be seen, F values are quite similar to those of the original ANOVA. This supported the conclusion that differences found were not due to race, sex, or age at the $p < .050$ level of significance.

Qualitative Findings From Treatment

Although this experimental design was not intended to measure qualitative findings, the wide scope of qualitative comments, affective reactions, and the informal networks which formed during the reminiscing workshop treatment merit reporting.

The identical curriculum treatment was followed for the experimental group at each site. Attendance from Site A was 100 percent for the first session; 85 percent for the second session; 90 percent for the third session; and 90 percent for the fourth session. Attendance from Site B was 95 percent for the first session; 95 percent for the second session; 90 percent for the third and fourth sessions. The combined locations made up the experimental group of 40. The combined attendance was 97 percent for the first session; 90 percent for the second, third, and fourth sessions.

At the end of the fourth session, the researcher asked the senior citizens what prompted them to attend all four sessions. The senior citizens' answers fell into three categories: (1) Social Reasons, (2) Mental Reasons; and (3) Workshop Activities and Teaching Reasons.

TABLE XV
 ANALYSIS OF COVARIANCE (COVARIATES: AGE, RACE, GENDER) ON
 THE LIFE SATISFACTION IN THE ELDERLY SCALE (LSES)

Subscale	Between		Within		Interaction	
	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>	<u>F</u>	<u>P</u>
Daily Activities	.03	.86	.40	.53	5.48	.02
Meaning	.11	.74	.24	.63	.64	.43
Goals	.27	.61	.88	.35	4.06	.05
Mood	.20	.66	.26	.61	.29	.59
Self-Concept	.96	.33	.06	.81	.38	.54
Health	.47	.50	1.36	.25	.01	.92
Finances	.18	.67	.12	.73	4.83	.03
Social Contacts	.39	.54	1.27	.14	.90	.35
Composite Scores	.01	.91	.23	.63	5.00	.03

p + <.050

Social Reasons

1. "I enjoyed the conversation."
2. "Fellowship, looked forward to seeing everyone."
3. "We were all here together."
4. "I liked to be involved."
5. "Tired of sitting alone in the apartment."
6. "Something to do out of the apartment."
7. "Friendship!"
8. "Getting to know other tenants at the workshop."
9. "Enjoyed the company and participation."

Mental Reasons

1. "Made you think back."
2. "Made me think back on a whole lot of things that happened a long time ago."
3. "I wanted to keep learning."
4. "It's wonderful to see human psychology working."
5. "I learned a lot."
6. "Learned from each other."
7. "Learned history."
8. "Learned how others grew up and lived."
9. "Learned how to be thankful for things we take and took for granted."
10. "Interesting . . . something to have on my mind during the week days."
11. "Having pen pals will be wonderful . . . having children and

the children having us will cause learning to happen."

12. "I learned that reminiscing is life."

Workshop Activities and Teaching Reasons

1. "Sponsors and helpers great!"
2. "This was something special."
3. "Please give another time for those tenants who wanted to be here."
4. "I loved it!"
5. "Interesting."
6. "Wonderful job; we were all teachers."
7. "We appreciated the fruit and the five dollars but that is not why we came."
8. "I enjoyed the teaching and learning."

The researcher and three other leaders saw friendships grow within the workshop. Tenants who did not know each other became friends living in the same building. The shy seniors started talking, laughing, and became open. Learning took place and was recorded on tapes and pictures.

Summary

The findings reported in this chapter were related to the two null hypotheses on which this experiment was based are as follow:

Hypothesis 1. There is no significant difference in scores on the Life Satisfaction in the Elderly Scale between those exposed to the educational workshops and those who were not exposed to the educational workshops.

This hypothesis failed to be rejected based on the t-test and one-way analysis of variance values. Both found no significant difference between the two groups on the pretest and posttest scores at $p < .050$.

Hypothesis 2. There is no significant difference on the Life Satisfaction in the Elderly Scale between the amount of change from pretest to posttest for the group exposed to the educational workshops and the amount of change from pretest to posttest for the group not exposed to the educational workshops.

This hypothesis was rejected based on the t-test and one-way analysis of variance values. Both found significant difference between the amount of change for the experimental group at the $p < .050$ level.

Qualitative Findings. The affirmative comments from the socially isolated senior citizens in attendance at the reminiscing workshops demonstrated the affective success of the treatment.

These findings and other studies were used in Chapter V to make recommendations for the future.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The demographical information in the literature review forecasted increase of the geriatrics population. Aging was viewed as a physical, process. Social isolation was seen as occurring at any age. Aging was noted to be a time when some senior citizens moved into sheltered housing for security and financial reasons. Socially isolated individuals found this transition more difficult than those who were active socially. Quality of life was seen to be affected by educational intervention.

Oklahoma's senior citizens who were 62 or older and qualified for low-income housing found a variety of public housing opportunities. In the Tulsa area there were five high-rise dwellings occupied by more than 900 senior citizens. Many of the tenants were socially isolated and there were no educational programs designated specifically for them. The problem that this research addressed was: The quality of life for senior citizens who demonstrated social isolation in public housing was not being addressed by educational intervention. The lifelong learning concept indicated that an educational interaction could be planned for the improvement of quality of life.

The purpose of this study was to determine if an educational intervention, specifically a workshop on reminiscing, could affect life satisfaction for the socially isolated senior citizens residing in

public housing as measured by the Life Satisfaction in the Elderly Scale (LSES).

Two hypotheses were developed from the stated purpose. Hypothesis 1 compared difference in scores on the LSES between those who were exposed to the educational workshops and those who were not.

Hypothesis 2 compared the amount of change from pretest to posttest for the group exposed to the workshops. An experimental design was used to test the null hypotheses. Random selection and assignment resulted in 80 subjects, 40 in the experimental group and 40 in the control group. The experimental group received treatment in the form of a reminiscing workshop. Treatment was withheld from the control group. Both groups simultaneously took the Life Satisfaction in the Elderly Scale (LSES) for a pretest and posttest.

The findings were based on the t test and ANOVA results as related to the null hypotheses. There was no significant difference between the two groups on the pretest and posttest scores at $p < .050$. However, there was significant difference of the interaction between the two groups in the amount of change from pretest to posttest, which indicated that change measured was due to the workshop and/or the interaction of testing and the workshop rather than chance.

Conclusions

Derived From Quantitative Findings

The finding that no significant difference at the $p < .050$ level existed between the two groups on pretest scores indicated that at the outset of the study the two groups had similar life satisfaction

scores.

There was a significant difference of the interaction between the two groups in the amount of change from pretest to posttest, $F_{4.81}$, $p = .03$. The significant change that occurred may have been brought about by the workshop and/or the interaction of testing rather than just chance. The analysis of covariance indicated that differences in scores were not significant due to race, age, sex, or marital status. This implied that the change between pretest scores and posttest scores was due to the treatment in the form of a Reminiscing Workshop rather than the demographic variables. The possibility of the Hawthorne effect could neither be ignored nor measured (Hoy and Miskel, 1987).

Derived From Qualitative Findings

Four conclusions were derived from the qualitative findings. The workshop was successful in promoting social interaction, in giving enjoyment, in soliciting participation, and in achieving a high level of attendance among the workshop participants.

The workshop setting promoted social interaction. The participants were able to interact freely during the small group activities and at break times. The small group selection made by the workshop leaders required participants to mix with new participants each session.

The treatment in the form of a reminiscing workshop was enjoyed by the participants. The evidence of this conclusion was the appreciation notes from the participants. The qualitative statements made by the participants also supported this conclusion.

All participants made a contribution. All who attended the

workshop shared their past experiences within a small group setting. The participants took part in all activities as offered in the reminiscing curriculum (See Appendix A, Reminiscing Workshop Curriculum.)

Dropout rate was exceedingly low. Of the eight dropouts, seven were due to circumstances beyond the participant's control--illness (5), moving (1), and death (1).

Derived from Related Literature

The relationship between this present study and that of Aubell (1986) showed similar findings in that the latter found a significant difference between pretest and posttest scores when using reminiscing for a treatment. Aubell called her treatment "Life Review"; this researcher titled the treatment "Reminiscing Workshop."

Aubell's main purpose was to explore the relationship between life review opportunity and decrease in loneliness and improvement of physical performance as measured by Loneliness Rating Scale and the Index of Independence in Activities of Daily Living. This present study's main purpose was to determine if an educational intervention, specifically a workshop on reminiscing, could affect life satisfaction for the socially isolated senior citizens residing in public housing as measured by the Life Satisfaction in the Elderly Scale.

In contrast to this study, Aubell (1986) used only 15 subjects in the experimental group and 15 in the control group. Another difference in her sample was its middle to upper class socioeconomic composition. This present study used 40 subjects in the experimental group and 40 in the control group, and the sample included lower middle to lower

socioeconomic classes. Thus, the two studies implied that reminiscing treatment was beneficial to both lower and higher socioeconomic classes. This study further implied that other educational intervention treatments would be beneficial to various socioeconomic classes.

Unlike Huber and Miller (1984), who used a small group for reminiscing and found that reminiscence was a learning experience for the participants, this researcher used both large group and small group activities and concluded that reminiscing can be used in a large or small group setting.

Important social dynamics were beginning to occur in this study as reported in the findings. New friendships were developed during the workshop. This relates to Erikson's suggestion that education should be for old age as well as for the young. This study supported Wharples' (1979) conclusion that nonformal education can occur with individuals over 65 years of age. This researcher included Wharples' suggestion to give a written certificate at the end of the treatment. The senior citizens were appreciative of the tangible rewards.

Sihvola (1985) suggested that interaction between generations was beneficial. Consequently the pen pal program was part of the workshop activities delivered in the treatment. The senior citizens in the experimental group and the elementary age children started implementation of this part of the treatment by writing each other within the first week. The researcher concluded this aspect of the program implied future beneficial interactions.

This study supported Leonard's (1982) findings that older persons were not a homogeneous social category but had different experiences

and life styles. The treatment, Reminiscing Workshop, given in this study gave additional proof of this finding. As senior citizens shared their life experiences, it was evident that these experiences varied greatly and demonstrated the heterogeneity of the group. On the variable of social class, however, the group was very homogeneous at the time of observation due to living in subsidized low income public housing.

Recommendations for Further Research

Based on the assumptions stated in Chapter I, the researcher recommended a replication of this study. The initial sampling in this project was conducted by the tenant associations rather than under the direct control of the researcher because of confidentiality. Further research should attempt to find a way to gain some direct control over sampling by the researcher. The high pretest scores indicated the sample may not have been as socially isolated as was defined in the sampling criteria for both groups in this study. Stricter control was recommended for random identification of the socially isolated.

The Life Satisfaction in the Elderly Scale was easy to administer to fully functioning elderly subjects in a large group. There was a problem, however, with nonreaders who needed to be read the stems and anchors. For individuals having this test read to them, the researcher recommended reading in a small group setting.

The Reminiscing Workshop was determined to be appropriate for the needs of the senior citizens residing in public housing as stated in the qualitative findings. The researcher recommended use of Reminiscing Workshops for senior citizens in other environments.

The researcher recommended that this workshop be given in different settings, be longer, and be offered without incentives due to the possible influence of the Hawthorne effect. Questions to be addressed in this further research included:

1. Would a field trip activity generate more participation?
2. Did the onsite workshop aid the attendance?
3. If there was a Hawthorne effect, would it wear off if more sessions were given?
4. Did the expectation of reward influence the attendance?

The qualitative data was so informative in this study that the researcher recommended that a qualitative study should be done on reminiscing in order to obtain the valuable information concerning the elderly.

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APPENDIXES

APPENDIX A

REMINISCING WORKSHOP CURRICULUM

REMINISCING WORKSHOP

Location: Site A and Site B Date: Saturday, January 21, 1989 Times: Site A = 9:00 a.m. - 11:00 a.m.
Site B = 1:00 p.m. - 3:00 p.m.

Session Number: I Session Goal: to review early years of life. Attendance: Site A = _____
Site B = _____

Name Tags for each group and color coded for small groups. 5-Red 5-Orange 5-Yellow 5-Green

Objective	Activity	Person Responsible	Time	Materials Needed
to get acquainted	Small group (5 plus 1 leader) leader records place of birth, year of birth and amount of siblings.	Leaders & Senior Citizens	10min.	Newsprint & Markers
	Total group shares recorded information	Leaders	10min.	Recorded Sheets
to recall time of birth	Each small group receives a sack of gifts. Baby Shower activity each Sr. Citizen receives a gift with a question on it: (each small group has the same gifts) pampers diaper - Were your diapers different from today's?; plastic baby bottle - How did you receive your milk?; baby spoon - What kind of spoon did you use?; Teddy bear - What kind of soft toy did you have?; play money - How much do you think it cost to be delivered when you were born? Questions read by Sr. Citizen or leader if requested. Leader records responses from total small group for each question.	Leaders & Senior Citizens	20min.	Baby gifts 4 each of diaper, bottle, spoon, Teddy bear, play money. Newsprint & Markers
	Total group shares recorded information	Leaders	10min.	Recorded Sheets
to break for refreshments and restroom	Baby Shower cake, coffee, & juice	All	15min.	Cake, forks, cups, juice, coffee, sugar, and cream, Napkins & Plates

SESSION I - Continued

Objective	Activity	Person Responsible	Time	Materials Needed
to recall early childhood songs, nursery rhymes, stories	Total group activity - Leader asks total group to recall, 1 leader records Sing songs if anyone knows the words or wants to lead.	Leaders & Senior Citizens All	10min.	Newsprint & Markers
to recall early childhood pets	Small group activity - Leaders explain "We are going to make our early pets out of playdough." Leader may demonstrate. All are given a can of playdough. If no pet, make one that you'd like to had have. Share name of pet with small group and share any story about the pet. Total group - shared pets	All All	15min. 5min.	Playdough for each group Created Pets
to close session	Total group receives printed reminders about future sessions. Questions & Answers or Concerns Each Senior Citizen receives a fruit basket to fill and return next time to re-fill.(Basket serves as a reminder and an incentive to return.)	Leaders All	15min.	Printed reminders, baskets, fruit - apples, oranges, Grapefruit, and Banannas

Note: 10 extra minutes to use in any of the above objectives.

Evaluation Notes: _____

REMINISCING WORKSHOP

Location: Site A and Site B DATE: Saturday, February 4, 1989 Times: Site A = 9:00 a.m. - 11:00 a.m.
Site B = 1:00 p.m. - 3:00 p.m.

Session Number: II Session Goal: to review early school years and teen years. Attendance: Site A = _____
B = _____

New Name Tags to mix small groups - color coded - 5 - Pink 5 - Blue 5 - Purple 5 - Dark Blue

Objective	Activity	Person Responsible	Time	Materials Needed
to recall morning exercises in early school years	Total group says the pledge of allegiance and sing a song from 1st session recall list.	Leader & Senior Citizens	5 min.	flag and song
to get reacquainted	Naming game - Total group hears name of a place where a person was born (1st session) and group will guess which individual in the workshop.	Leader	5 min.	list of places from 1st session.
to recall arrival to school	Each individual including leaders receive a slate and chalk. All are to draw how you usually went to school. Walk?Bus?Horse? ????	All	10min.	slates and chalk
	Share with total group.	All	5 min.	completed drawing
to recall school and teachers	Divide into small groups - Leaders use a "Big Chief" Tablet & Pencil to record responses to the following: Name your first school, tell the size and name your favorite teacher & why. Share with total group	Leaders & Senior Citizens	20min.	BigChief table, pencil
to break for refreshments and restroom	Coffee and doughnuts.	All	10 min.	Recorded responses
		All	15 min.	Cups, napkins, doughnuts, O.J.coffee

SESSION II - Continued

Objective	Activity	Person Responsible	Time	Materials Needed
to have school picture	Extra person to take slides and polaroid pictures during the session in order to give them to the senior citizens at the end of the session.	1-2 extras	During session	camera and film
to recall lunch time at school	Small groups--each person is given a brown lunch sack. Leaders request each to write or draw their favorite school lunch. Small groups share within and create a menu for their group.	Leaders & Sr. Citizens	15 min.	markers and lunch sacks
	Total group share recorded menu.	All	5 min.	Recorded lunch menu
to recall 1st love	Small group activity - use slates to create a heart with the initials of first sweetheart. Leader demonstrates to total group.	All	15 min	Slates and chalk
	Small groups share within. Additional questions were asked in the small groups: "How old on 1st date?, Where did you go? What was the 1st car you drove?" Leaders record & share with total group.	All	10 min.	Newsprint to record.
			5 min.	
to close session	Questions or Concerns, Fruit baskets refilled.		10 min.	Fruit baskets, pictures to take home.

Evaluation Notes: _____

REMINISCING WORKSHOP

Location: Site A and Site B DATE: Saturday, February 11, 1989 Times: Site A = 9:00 a.m. - 11:00 a.m.
Site B = 1:00 p.m. - 3:00 p.m.

Session Number: III Session Goal: to review war, weddings, and work years. Attendance: Site A = _____
New Name Tags to mix small groups - color coded - 5 -Red 5-Orange 5-Yellow 5-Green Site B = _____

Objective	Activity	Person Responsible	Time	Materials Needed
1936-1945 Review	Leader holds up large dates one at a time 1936 through 1945 in order and gives a brief historical recount of each year - included the big events in the world, the heroes in sports, and styles in America. Ending with the Marines raising Old Glory on Iwo Jima. Total group stand to say pledge.	Leader	20 min.	Cards with dates Flag
to use visual and auditory memory	Leader demonstrates milk bottles clinking together, a pair of nylons with seams, and a uniform from the Marines. Total group reactions shared. All	Leader	15 min.	Milk bottles, nylons, and Marine uniform.
to review the war years	Small group activity - Leaders ask each small group "What were you doing during the war years?" Leaders record information. Each small group creates a scene from the war. Group leaders share with total group.	Leader & Sr. Citizens	20 min.	Markers and newsprint. Toy soldiers and clay.
to break for refreshments and restroom	Coffee and doughnuts.		All	War scenes Cups, coffee, doughnuts Napkins, cream, sugar, Orange Juice.

SESSION III - Continued

Objective	Activity	Person Responsible	Time	Materials Needed
to recall wedding	Small group - marriages and children were recorded on paper plates with hearts. Family travel was discussed. Note: Singles may state any wedding they were in and talk about nieces & nephews. Share with total group.	Leaders & Sr. Citizens	15 min.	Pens and plates.
		Leaders	5 min.	Recorded plates.
to review work years	Small group - Each group was given a large cylinder bag to record occupations held during life time. These were shared by the total group and tied into a "W".	Leaders & Sr. Citizens	15 min.	Wind bags and markers.
		Leaders	5 min.	Occupation wind bags.
to close session	Fruit baskets distributed.	All	15 min.	Boxes of fruit.
	Volunteers for Pen Pals were recruited.	Leader		List of names.

Note: Next session is last one at the end of session time elementary students will come to meet pen pal.

Evaluation Notes: _____

REMINISCING WORKSHOP

Location: Site A and Site B Date: Saturday, February 18, 1989 Times: Site A = 9:00 a.m. - 11:00 a.m.
 Site B = 1:00 p.m. - 3:00 p.m.

Session Number: IV Session Goal: to review present time and problem solving techniques.
 Name Tags for each group and color coded for new small groups. 5-Red 5-Orange 5-Yellow 5-Green

Objective	Activity	Person Responsible	Time	Materials Needed
to learn to apply a PMI to solve problems	Leader explains a PMI to group. P = +'s; M = -'s; and I = It would be interesting if....Do one with total group before dividing into small groups. i.e. Let's do one about buying food.	Leader	10 min.	Newsprint & Marker
	Small group activity - Living in public housing. Leaders lead the small groups and record.	Leaders & Sr. Citizens	25 min.	News print & marker
	Share PMI's with total group.	All	10 min.	Recorded lists put on wall - masking tape.
to evaluate Reminiscing Workshop	Small groups ranked ordered the four sessions Share comments about the +'s and -'s of the sessions. Leaders recorded comments. Leaders shared with total group	Leaders &	15 min.	Newsprint & Marker
to receive recognition for taking part	Recognition activity. Each leader and sr. citizen received a certificate.	Leader	10 min.	Certificates signed.
to break for refreshments and restroom	Coffee and doughnuts	All	15 min.	Juice, coffee, doughnuts

SESSION IV - Continued

Objective	Activity	Person Responsible	Time	Materials Needed
to meet future pen pal	Elementary aged students recruited to be pen pals arrive for meeting new senior citizen pen pal. Children and Sr.Citizens have been paired by leader prior to meeting. Directions and decisions are given: How often? What are your interests? Birthday?	Leader Children Sr.Citizens	45 min.	Pen pal stationary pencils - folders envelopes stamps
Closure Refreshments for All	Say good byes and meet parents of pen pal, pictures taken of pen pal and child. Fruit baskets were distributed Reminders for 2nd survey - Next Saturday			film and camera fruit baskets REMINDERS FOR 2nd SURVEY
NOTE: Senior citi				
NOTE: Senior citizens who did not want to be pen pals were invited to meet the children and visit or free to leave after 1st break.				

Evaluation Notes:

APPENDIX B

CERTIFICATE OF PARTICIPATION

Certificate
of
Participation

REMINISCING WORKSHOP
January 21 - February 18, 1989

Workshop Coordinator

February 18, 1989

APPENDIX C

RECOMMENDATION LETTER



TULSA CITY-COUNTY HEALTH DEPARTMENT

4616 East 15th • 918 744-1000
Tulsa, Oklahoma 74112

October 12, 1988

Dear Board Members,

I am writing in support of a program proposed by Linda Mitchell, to serve socially isolated elderly. As program coordinator of the Health Support Services for the Elderly, I work with low income older people on a daily basis. Social isolation is a profound problem among this population and contributes greatly to mental and physical illness. Compounding the problem, of course, is the lack of transportation which makes most of our clients home bound. Linda's proposal to do her work on site, breaks that barrier.

I have worked with Linda on other projects and found her to be energetic and creative. Her enthusiasm is contagious and I am very excited about her proposal. Although I hope it provides her with the research data she desires, I am more impressed with the planned activities, as they are meaningful and pertinent. In fact, it is my hope that the Seniors she has touched will continue the program after Linda has gone.

Linda is aware that she has our support and we will be available to assist her in any way we can. We look forward to the approval and subsequent implementing of this program.

Sincerely,

A handwritten signature in cursive script, appearing to read "Glenda Whitsett".

Glenda Whitsett, R.N., B.S.N.
Program Coordinator
Health Support Services
Tulsa City County Health Dept.

APPENDIX D

OSU INSTITUTIONAL REVIEW BOARD APPROVAL FORM

INSTITUTIONAL RESEARCH BOARD
FOR HUMAN SUBJECTS
OKLAHOMA STATE UNIVERSITY

Proposal Title: Adult Education Effectiveness on the Quality of Life for
the Socially Isolated Senior Citizens Residing in Public Housing

Principle Investigator: Robert Nolan/Linda Ann Mitchell

Date: November 8, 1988 IRB # ED-88-030

This application has been reviewed by the IRB and

Processed as: Exempt Expedite Full Board Review
Renewal or Continuation

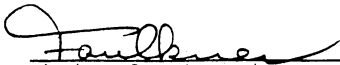
Approval Status: Approved

Disapproved

Conditional

Deferred

Comments, Modifications/Conditions for Approval or Reason for
Disapproval:

Signature: 
Chair of University Board

Date: 11/14/88

APPENDIX E

CRITERIA FOR SOCIALLY ISOLATED POPULATION

CRITERIA FOR SOCIALLY ISOLATED POPULATION

Definition of socially isolated: The absence of specific role relationship through direct personal face-to-face interaction.

NOTE: The socially isolated are the individuals who stay in their apartments and do not attend meetings or social activities. They stay with themselves.

DIRECTIONS:

1. Go through the directory for the entire population of the public housing unit and place all names of individuals who demonstrate social isolation into a hat.
2. Draw 50 names from the hat.
3. Provide a list of the 50 randomly selected socially isolated tenants to the researcher.

THANK YOU FOR YOUR TIME AND CONCERN.

Linda Mitchell
1717 East 61
Tulsa, Oklahoma 74136

APPENDIX F

INVITATION TO VISIT WITH A TEACHER

YOU have been selected

NOTE: Site A received: 1st Meeting 3:45 pm 1/11/89
2nd Meeting 9:00 am 1/18/89
Site B received: 1st Meeting 3:45 pm 1/18/89
2nd Meeting 3:45 pm 1/19/89

to receive
\$5 in cash! **\$5**

Why: To visit with a teacher
for 45 minutes

When: Wed. Jan. 18th 3:45 pm.

Where: 1st floor Activity Room
of your building.

****Punch and cookies will be served...**

APPENDIX G
INDIVIDUAL'S CONSENT FOR PARTICIPATION
IN A RESEARCH PROJECT

OKLAHOMA STATE UNIVERSITY
INDIVIDUAL'S CONSENT FOR PARTICIPATION
IN A RESEARCH PROJECT

Ms. Linda Ann Mitchell, who is a graduate student at Oklahoma State University, has requested my participation in a research study for this institution. The title of the research is "The Effect of Reminiscing Workshops on Life Satisfaction for Socially Isolated Senior Citizens Residing in Public Housing." The study will include 30 subjects from Pioneer Plaza and LaFortune Towers.

I understand that the purpose of the study is to study the effectiveness of adult education for Senior Citizens.

My participation will involve four weeks of two-hour, weekly meetings with the researcher. A brief description is as follows:

First Week: Introduction of the group by way of reviewing birth place and early childhood years. Each member in the group will share experiences.

Second Week: Entire group will continue to review school years and early young adult years.

Third Week: Family, occupation, and travel years will be shared.

Fourth Week: Coping skills with present will be discussed. Elementary children will visit group and become pen pals for the entire group.

I understand that there are no possible risks to me if I agree to take part in this study. If I do need help because of the subject matter, I realize that the counselor for our building will be informed and present for the workshops.

I understand that my name will not appear on any pretest or posttest papers. I will be assigned a number; my identity will be known only to the researcher.

I understand that the possible benefits of my participation in this study are resolutions for programs for our building and future curriculum may be taught by individuals residing in our building.

I understand that my participation is voluntary and that refusal to participate will involve no penalty to me or loss of benefits to which I am otherwise entitled. I also understand that I may withdraw from the research study at any time without penalty or prejudice.

I have read the above statement and have been able to ask questions and express concerns, which have been satisfactorily responded to by the investigator. I believe that I understand the purpose of the study as well as the potential benefits and risks that are involved. I hereby give my informed and free consent to be a participant in this study.

Date _____ Signature of Subject _____

Name of Subject _____
(Please print)

Date _____ Witness _____

I certify that I have explained to the above individual the nature and purpose, the potential benefits and possible risks associated with participating in this research study, have answered any questions that have been raised, and have witnessed the above signature.

I have provided the subject a copy of this signed consent form. If the subject has any questions or needs to report an adverse effect about the research procedures, he/she may contact the principal investigator, Linda Mitchell, at the following telephone numbers: 742-0782 (home) or 538-5808 (work). If the subject has any questions about their rights as a research subject, he/she may take them to the Office of University Research Services, Oklahoma State University, 001 Life Science East, Stillwater, Oklahoma, 74078 or telephone the University Research Services office at 1-405-744-991.

Date _____

Signature of Investigator

APPENDIX H

REMINDERS

**WORKSHOP
DATES:
JANUARY 21,
FEB. 4, 11, 18
9:00-11:00 AM
FREE GIFT
FRUIT BASKET**

**WORKSHOP
DATES:
JANUARY 21,
FEB. 4, 11, 18
1:00-3:00 PM
FREE GIFT
FRUIT BASKET**

**EARN \$5
BY TAKING
2ND SURVEY
THIS SATURDAY
FEBRUARY 25
9:00 AM
DOWNSTAIRS**

**EARN \$5
BY TAKING
2ND SURVEY
THIS SATURDAY
FEBRUARY 25
1:00 PM
DOWNSTAIRS**

APPENDIX I
QUALIFICATION FORM

Qualification Form

75485
Customer Number

working on

Name/Degree _____ Dr. Bruce Carpenter - ^{PhD} Psychology

Licensed As Okla. State #321 APA License Number 41699-4108

Address University of Tulsa - 600 S. College Lorton Hall
Tulsa, Okla. 74104

Organization Professor

Type of Organization University Job Title Professor
(e.g., government, counseling, consulting, private, other (specify))

Please describe the kinds of activities which involve the use of and interpretation of standardized tests.

Disertation for Experimental Design
Pre/Post Test

If your organization is non-profit, please name the sponsoring group or accrediting body.

Within your organization, who is responsible for this testing program? Graduate
Name Linda Ann Mitchell Title Student at Ok. State University

Academic Training Degree	Year	Institution	Major Field
<u>B.S.</u>	<u>'69</u>	<u>Univ. of Tulsa</u>	<u>Educ.</u>
<u>M.A.</u>	<u>'83</u>	<u>Univ. of Tulsa</u>	<u>Educ.</u>

Coursework taken which deals with tests and measurement:

Course Title	Units/Year	Institution
<u>Review of Educational Research</u>	<u>3</u>	<u>Univ. of Tulsa</u>
<u>Research Design</u>	<u>3</u>	<u>Univ. of Tulsa</u>
<u>Interpretive Research</u>	<u>3</u>	<u>Okla. State University</u>

Experience/Training in interpretation of and use of tests:

Employer/Organization	Position Held	When	Tests Used (specify)
<u>Tulsa Public Schools</u>	<u>Teacher of Gifted</u>	<u>'83-'88</u>	<u>Otis Lennon</u>

Professional Organizations of which you are a member: (spell out)

Okla. Educ. Assoc. Tulsa Classroom Teachers Association

I certify that I and/or other persons who may use the test materials being ordered by me have a general knowledge of measurement principles and of the limitations of test interpretations as called for in the APA standards for educational and psychological tests and that I/we are qualified to use and interpret the results of these tests being purchased as recommended in the APA standards.

Signature Linda Ann Mitchell Date 10/30/88

I am a graduate student. My professor has endorsed my order below.

I agree to supervise this student's use of items ordered.

Professor's Name Robert E. Nolan Date 10/30/88

Signature Robert E. Nolan

Department Department of Adult Education Institution Oklahoma State University

Dr. Carpenter will assist me in using test, too, his name is listed above.

APPENDIX J

REQUEST LETTER

PAR Psychological Assessment Resources, Inc.

Mailing Address: PO Box 998 / Odessa, Florida 33556
Street Address: 16102 N. Florida Ave. / Lutz, Florida 33549

Telephone (813) 968-3003
Telefax (813) 968-2598

November 21, 1988

Linda Mitchell
1717 E. 61st
Tulsa, OK 74136

Dear Ms. Mitchell:

In response to your recent request, permission is hereby granted to you to enlarge 50 copies of the Life Satisfaction Scale for your dissertation research to enable the elderly to more easily read the scale.

This permission agreement is subject to the following restrictions:

- (1) Any and all material used will contain the following credit line:

"Adapted and reproduced by special permission of the Publisher, Psychological Assessment Resources, Inc., 16102 North Florida Avenue, Lutz, Florida 33549, from The Salamon-Conte Life Satisfaction Scale in the Elderly Scale by M.J. Salamon, Ph.D., and V.A. Conte, Ph.D. Copyright, 1984. Further reproduction is prohibited without permission from PAR, Inc."

- (2) None of the material may be sold, given away, or used for purposes other than those described above without written permission of PAR, Inc.
- (3) One copy of any of the material reproduced will be sent to the Publisher to indicate that the proper credit line has been used.
- (4) Payment of a royalty/license fee of \$8.80.

Celebrating 10 years of Customer Service

Linda Mitchell
November 21, 1988
Page 2

BOTH COPIES of this Permission Agreement should be signed and returned to me, along with your check for \$8.80 to cover the royalty/license fee, to indicate your agreement with the above restrictions. I will return a fully executed copy to you for your files.

Sincerely,



R. BOB SMITH, III, Ph.D.
President

RBS/bm

ACCEPTED AND AGREED:

ACCEPTED AND AGREED:

BY: Linda Mitchell
LINDA MITCHELL

BY: 
R. BOB SMITH III, Ph.D.

DATE: Dec. 20, 1988

DATE: 12-28-88

APPENDIX K

PERMISSION AGREEMENT LETTER

November 17, 1988

Psychological Assessment Resources, Inc.
P.O. Box 998
Odessa, Florida 33549

Dear Sir:

At the present time I'm working on my dissertation for Ed.D. in Adult Education. I plan to use the Life Satisfaction in the Elderly Scale (LSES) for a pre/post test in an experimental design.

Title: Adult Education Effectiveness on the Quality of Life for the Socially Isolated Senior Citizens Residing in Public Housing

I've received 50 yellow copies of the LSES. I need to have permission to enlarge 50 copies so the elderly will be able to read it easily. I'd be happy to pay the additional cost.

Please let me know as soon as possible. I need to begin the study. My husband, Allen Mitchell, placed the original order. The Order Number 98485 is the original order.

Thank you for your time.

Sincerely,



Linda Mitchell
1717 E. 61 St.
Tulsa, Oklahoma 74136

APPENDIX L

LIFE SATISFACTION IN THE ELDERLY SCALE - LSES

PLEASE NOTE:

Copyrighted materials in this document have not been filmed at the request of the author. They are available for consultation, however, in the author's university library.

These consist of pages:

111-114, Appendix L

116, Appendix M

118-119, Appendix N

U·M·I

- | | | | | | |
|--|-----------------------------|-----------------------------|---------------------------|-------------------|------------------------|
| 1. My daily routine is: | very <u>boring</u> | <u>boring</u> | <u>average</u> | <u>satisfying</u> | very <u>satisfying</u> |
| 2. I am most satisfied with my life situation: | <u>never</u> | <u>almost never</u> | <u>sometimes</u> | <u>often</u> | <u>always</u> |
| 3. I think about what I would like to accomplish: | <u>very often</u> | <u>often</u> | <u>sometimes</u> | <u>seldom</u> | <u>never</u> |
| 4. I am ___ in a bad mood. | <u>always</u> | <u>often</u> | <u>sometimes</u> | <u>seldom</u> | <u>never</u> |
| 5. Physically I am: | <u>unhealthy</u> | <u>somewhat unhealthy</u> | <u>average</u> | <u>healthy</u> | <u>very healthy</u> |
| 6. I take medication: | <u>very often</u> | <u>often</u> | <u>sometimes</u> | <u>seldom</u> | <u>never</u> |
| 7. I have enough money to enjoy myself: | <u>never</u> | <u>rarely</u> | <u>sometimes</u> | <u>often</u> | <u>always</u> |
| 8. I try to spend time with people: | <u>never</u> | <u>rarely</u> | <u>sometimes</u> | <u>often</u> | <u>always</u> |
| 9. I have ___ friends. | <u>no</u> | <u>few</u> | <u>some</u> | <u>many</u> | <u>a great many</u> |
| 10. I generally plan ___ activities. | <u>no</u> | <u>few</u> | <u>some</u> | <u>many</u> | <u>a great many</u> |
| 11. In general I feel: | <u>very unsatisfied</u> | <u>unsatisfied</u> | <u>average</u> | <u>satisfied</u> | <u>very satisfied</u> |
| 12. I feel pain: | <u>always</u> | <u>often</u> | <u>sometimes</u> | <u>seldom</u> | <u>never</u> |
| 13. Compared to any other time in my life, I am now: | <u>very unsatisfied</u> | <u>unsatisfied</u> | <u>average</u> | <u>satisfied</u> | <u>very satisfied</u> |
| 14. In my life I have achieved: | <u>nothing</u> | <u>very little</u> | <u>something</u> | <u>a lot</u> | <u>a great deal</u> |
| 15. How important are you to others: | <u>not at all important</u> | <u>of little importance</u> | <u>somewhat important</u> | <u>important</u> | <u>very important</u> |

16. Being with other people is _____ pleasurable.
- never rarely sometimes often always
17. My current income is:
- very inadequate inadequate fairly adequate adequate very adequate
18. I find the company of others to be:
- very uncomfortable usually uncomfortable somewhat comfortable usually comfortable very comfortable
19. I worry about finances:
- always often sometimes seldom never
20. My financial situation is:
- very bad bad fair good excellent
21. In looking back, I feel that I have done _____ of the things that I've wanted to do.
- very few few some almost all all
22. My schedule of activities is:
- very unsatisfying not really satisfying occasionally satisfying satisfying very satisfying
23. As I look back on my life, I am:
- completely dissatisfied dissatisfied partially satisfied satisfied very satisfied
24. The things I do every day give me:
- no pleasure little pleasure some pleasure a lot of pleasure a great deal of pleasure
25. My usual mood is:
- severe depression mild depression sometimes happy usually happy always happy
26. My intelligence is:
- far below average below average average above average superior
27. My physical appearance is:
- very unattractive somewhat unattractive average somewhat attractive very attractive
28. I am generally:
- quite ill ill in average health healthy very healthy

PLEASE CONTINUE ON NEXT PAGE ➡

29. The time I spend with friends is:
- completely unsatisfying usually unsatisfying sometimes satisfying usually satisfying always satisfying
30. People say that I am:
- very moody often moody sometimes moody usually in good spirits always in good spirits
31. My present situation is:
- very difficult difficult I get by pleasurable very pleasurable
32. When it comes to taking care of myself, I:
- totally depend on others often depend on others am sometimes independent am usually independent am always independent
33. I regard my life as:
- without meaning having little meaning having some meaning meaningful very meaningful
34. People think that I am financially well off:
- never rarely sometimes often always
35. I visit my doctor:
- very often regularly sometimes rarely almost never
36. I am happy with the way things turn out:
- never almost never sometimes often very often
37. I consider myself to be:
- always pessimistic usually pessimistic sometimes pessimistic usually optimistic always optimistic
38. I am ___ with my outlook on life.
- very dissatisfied dissatisfied somewhat dissatisfied satisfied very satisfied
39. I am satisfied with the way things are:
- never almost never sometimes often very often
40. I am pleased with my daily activities:
- never seldom sometimes usually always

APPENDIX M

LSES ITEMS BY SCALE

Table 1
LSES Items by Scale

Scale	Items
Daily Activities	01. My daily routine is _____.
	10. I generally plan _____ activities.
	22. My schedule of activities is _____.
	24. Things I do every day give me _____.
	40. I am pleased with my daily activities _____.
Meaning	02. I am most satisfied with my life situation _____.
	11. In general I feel _____.
	31. My present situation is _____.
	33. I regard my life as _____.
	39. I am satisfied with the way things are _____.
Goals	03. I think about what I would like to accomplish _____.
	14. In my life I have achieved _____.
	21. In looking back, I feel that I have done _____ of the things I've wanted to do.
	23. As I look back on my life, I am _____.
	36. I am happy with the way things turn out _____.
Mood	04. I am _____ in a bad mood.
	25. My usual mood is _____.
	30. People say that I am _____.
	37. I consider myself to be _____.
	38. I am _____ with my outlook on life.
Self-concept	13. Compared to any other time in my life I am now _____.
	15. How important are you to others? _____.
	26. My intelligence is _____.
	27. My physical appearance is _____.
	32. When it comes to taking care of myself I _____.
Health	05. Physically I am _____.
	06. I take medication _____.
	12. I feel pain _____.
	28. I am generally _____.
	35. I visit my doctor _____.
Finances	07. I have enough money to enjoy myself _____.
	17. My current income is _____.
	19. I worry about finances _____.
	20. My financial status is _____.
	34. People think that I am financially well off _____.
Social Contacts	08. I try to spend time with people _____.
	09. I have _____ friends.
	16. Being with other people is _____ pleasurable.
	18. I find the company of others to be _____.
	29. The time I spend with friends is _____.

APPENDIX N

LIFE SATISFACTION IN THE ELDERLY SCALE (LSES)

SCORING SHEET

Life Satisfaction in the Elderly Scale (LSES) Scoring Sheet

Name _____ Age _____ Sex _____ Marital Status _____

ITEM #	SCALE 1	SCALE 2	SCALE 3	SCALE 4	SCALE 5	SCALE 6	SCALE 7	SCALE 8
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____
15	_____
16	_____
17	_____
18	_____
19	_____
20	_____
21	_____
Sub-totals	_____	_____	_____	_____	_____	_____	_____	_____
	SCALE 1	SCALE 2	SCALE 3	SCALE 4	SCALE 5	SCALE 6	SCALE 7	SCALE 8

Score items 22 through 40 on side 2.
(over)

VITA

Linda Ann Mitchell

Candidate for the Degree of

Doctor of Education

Thesis: THE EFFECT OF REMINISCING WORKSHOPS ON LIFE SATISFACTION FOR
SOCIALLY ISOLATED SENIOR CITIZENS RESIDING IN PUBLIC HOUSING

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