

A NEEDS ASSESSMENT OF EDUCATIONAL PROGRAMS AT  
SENIOR CITIZEN HOMES IN OKLAHOMA

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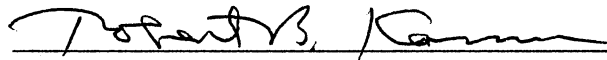
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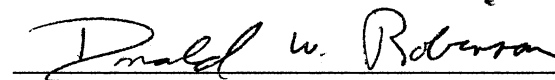
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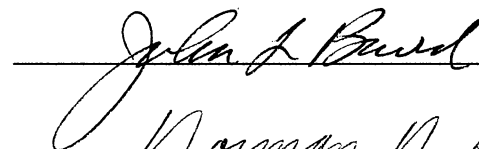
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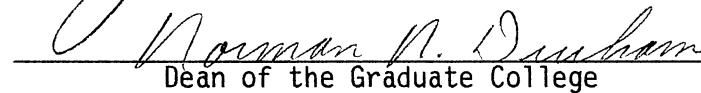
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### THE GOOD SEED

When one grows old and eyes grow dim,  
A kind word means a lot to him.  
A pleasant smile or word each day  
Can send him happily on his way.  
And so to all you young-at-heart,  
I beg of you, please do your part  
And spread a kindly word, I pray  
Before you too are old and gray.  
For time goes on relentlessly  
For everyone--for you, for me  
And if you show a kindness now  
It all comes back to you somehow.  
The good deed that you do today  
Will soon return to bless your way  
And for each seed of love you sow  
A plant called happiness will grow.

Anonymous

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## CHAPTER I

### INTRODUCTION

The population of the world is getting older. In 1970, there were 304 million people over the age of 60, which comprised more than 8% of the world's population. This number has been predicted to increase to 581 million persons by the year 2000, which means that 9.3% of the world's population will be older than 60 years of age by the end of the century (Himmelstrup, Robinson, and Fielden, 1981). In the United States, this segment is a fast-growing one. Trent and Trent (1977, p. 231) noted that: "The United States is rapidly becoming one of the world's older populations. It has been estimated that by the year 2005 more than one-half of the population will be over fifty years." Palmore (1980) (Table I) revealed that:

The number of persons over 65 in the United States has increased and will continue to increase by about 3 to 5 million every ten years. Furthermore, the percentage of the total population over 65 has increased by about one point every decade and will probably continue to do so until 1990. These increases are due to the combination of decreasing mortality and decreasing fertility (p. 436).

The needs for older people have been ranked low in importance. Ignoring their needs is no longer sound public policy in a country whose population over 65 years of age will be more than 30 million by the year 2000. Trent and Trent (1977, p. 231) stated that "Every day approximately 4000 Americans turn 65. Every day approximately 3000 Americans die. The net increase is about 1000 per day, or 365,000 per year."

TABLE I  
ESTIMATES AND PROJECTIONS OF PERSONS 65 AND  
OVER IN THE UNITED STATES\*

Year	Number	Percentage of Total
1900	3.100	4.1
1940	9.036	6.8
1950	12.397	8.2
1960	16.675	9.0
1970	20.087	9.8
1980	24.927	11.2
1990	29.824	12.2
2000	31.822	12.2

\*Numbers measured in thousands.

Source: E. Palmore (Ed.), International Handbook on Aging (1980).

Among the important needs of the elderly are educational requirements which have received little attention until very recently. Past educational efforts have centered on the activities of social and religious organizations such as clubs and churches. The American educational system has focused its primary efforts on the young. Education for working adults has received adequate support; however, senior citizen education has been largely ignored by both educators and governmental policy makers. Trent and Trent (1977) assured that:

A major purpose of education is to provide all individuals with the capacity to participate in society. Unfortunately, current education programs are not designed to meet the needs of older adults who make up a sizeable and increasing segment of population (p. 231).

The need for education continues even after the age of 65 or 70. Senior citizens continue to face development challenge throughout the remainder of their lives. McClesky (cited in Hendrickson, 1973) indicated that

Education for the aging should have a much higher priority in the programs of the educational enterprise than it has now. It should be an instrument for helping deliver the services set up to meet the survival needs of older persons. It should also upgrade the talents of older persons as a resource in nurturing the well being of society (p. 71).

Educational programs for older adults help to provide settings and opportunities in which those persons can experience not only a continuing sense of personal enrichment and fulfillment, but also a sense of being needed by others and having a place in society. Senior citizen educators should not stop with prescribed programs but should use them as opening up new visions of the coming days.

#### Statement of the Problem

In the United States there are thousands of senior citizens in homes that are publicly and privately supported. The purpose of this study was to determine if educational programs currently provided for senior citizens in Oklahoma are meeting the educational needs of the aged.

The following research questions were considered by this study:

1. What are the characteristics of the residents of homes for the aged in Oklahoma?

2. What are the educational needs of the residents of homes for the aged in Oklahoma as perceived by residents, teachers/staff, and administrators?

3. What programs are currently available to the residents of homes for the aged in Oklahoma?

4. How effectively are those programs being implemented?

5. What are ways in which the educational needs of residents of homes for the aged in Oklahoma could be better served?

### Definition of Terms

The following terms have been used in this study:

Aged, Elderly, Older Adults, and Senior Citizens. Individuals who are residents of homes for the aged.

Aging. A term used for different biological, social, and psychological processes whereby a person acquires the socially defined characteristics of later years of life.

Chronological Age. Time lived measured by number of years.

Gerontology. The scientific study of the phenomenon of aging and problems of the aged.

Resident. A person who lives in a senior citizen home.

Senior Citizen Home. A place of residence for the aged which offers those living within a wide range of services, including education, recreation, nutrition, and transportation. People residing in these homes are more or less mentally and physically able.

Retirement. The period that follows the disassociation from the former life-work. Job responsibilities and opportunities are generally minimized during this period.

Retirement Processes. The processes that are followed by an individual preparing for, adjusting to, and living out his or her retirement.

Retirement Education. Any educational programs and activities that an older person enters after he or she has been retired from work.

Adult Education Programs. All educational programs which are supported and supervised by the state or district level. These programs are designed and developed to meet the educational needs of the adults.

Need. Something required and/or desired by older adults to make their lives more useful to them and to society.

Interest. A preference between different alternatives of overt behavior, characterized by a choice between persons, experiences, and/or places.

Motivation. Internal energy and drive that could be aroused or stimulated by experience and opportunity.

#### Assumptions of the Study

The following were the assumptions of this study:

1. Responses submitted by older adults are truthful and representative of senior citizens in other homes within Oklahoma.
2. Individuals who live in senior citizen homes and who are able to participate in programs offered in senior citizen homes are representative of other older adults in Oklahoma.

#### Limitations of the Study

This study was limited by the following considerations:

1. Population is restricted to residents of senior citizen homes.
  2. The geographic area is restricted to the State of Oklahoma.
- Like other states, Oklahoma has aged, institutionalized people whose



educational needs must be met. Nevertheless, it will not be possible to generalize beyond the state's boundaries.

### Need for the Study

For many reasons, social, political, and economic research into the needs and interests of older adults is important to American society at large. Senior adults, those individuals who are 65 of age and older, composed 11.2% (24,297,000) of the population of the United States in 1980. The number will rise to 12.2% (31,822,000) by the year 2000, according to Palmore (1980).

Social reasons obligate society to give more consideration to the mental and emotional well-being of the aged in the future. Heimstra (1976, p. 26) noted that "The change in nature of society requires that nearly every citizen gain new skills, new understanding, and new intellectual orientation throughout his life in order to live satisfactorily." Vickery (1972) added that

Unless there are opportunities for older persons to continue to learn and relearn the facts and forces that will be operating in society in the twenty-first century, a sub-culture of the aged, psychologically isolated from younger age groups, will develop (p. 14).

No matter how long and how good the initial education is, it can never equip people with all the knowledge and skills needed for 40 or 50 working years of a human life. Peterson (1976) wrote that

Early retirement, the dislocations caused by technological unemployment, the need for older persons who are employed to stay current, the growing demand for second careers education--all make adult education for those past fifty imperative. The growing number of persons who have time and energy to devote to social and political fields demand that they be educated so that their investments will be relevant. The great number of persons at leisure invite help to make their free time constructive and creative (p. 170).

Great attention has been given to the causes of infant mortality. Great investments have been made in research efforts to eliminate the causes of children's deaths. Today, there is a growing older population, and the same efforts must be made to enable senior citizens to make the best of their later years.

Understanding older adults and their different needs is important in order to work for and with them. The needs and purposes of education for senior citizens only recently has received the attention of professional educators. Stanford (1972) saw that the four purposes for educating the aged are: (1) to help the older person adjust to the problems common to old age; (2) to help the older person make the best of available resources; (3) to allow the elderly to gain satisfaction from mastery of new skills and knowledge; and (4) to provide a richer social experience for the elderly.

It would seem that special educational programs should be designed to educate older adults. These programs must aim at problems common to older persons. The content of the programs should deal with their problems, handling them in a fiscally responsible manner. Three parties should share in designing those programs: (1) a representative from the elderly, (2) a representative from the faculty having knowledge and experience about the subject of the program, and (3) a representative from adult education. The program must be approved and supported by all members of this committee (Lord, 1976).

Educators, school administrators, and community leaders should also cooperate with the three parties to design educational programs for the aged. Future educational programs must not be bound to the traditional molds of the past. Current knowledge and continuing research of existing older adult educational programs, awareness of rapidly changing cultural

factors, experiences of practitioners--all of these must be used in elderly programs if these programs want to provide opportunities and motivation needed for continuous development and fulfillment. Only these kinds of programs can help older adults experience meaningful involvement in social activities.

Unfortunately, there are many obstacles that inhibit growth of educational programs for older adults. Trent and Trent (1977) listed eight of these obstacles: (1) shortage of financial resources; (2) cost of the programs to potential participants; (3) shortage of trained staff; (4) inadequate supportive services; (5) locating and contacting audience; (6) lack of interest on the part of older people; (7) inadequate educational materials for the age group; and (8) inadequate facilities.

Perhaps the greatest obstacle that confronts those who have a concern for the education of the elderly is the myth that "You can't teach an old dog new tricks." This is definitely untrue. Studies have assured that an individual's primary ability to learn changes little with age. Older adults can acquire new knowledge and new skills through practice and experience, as young people can. McKay and Hixon (1977) noted that:

Learning ability of most older persons still functions well. It is true that when your mind is full of other matters one does not learn as well as when it is free, but learning ability is there. The same laws of learning apply--repetition and satisfaction (p. 160).

Cooper (1975) stated that the Carnegie Commission on Higher Education lists five barriers to educating the aged. The list included the following barriers:

1. Procedural--prerequisites, grading, testing, etc.;
  2. Environmental--curfews, traditions, waiting lines;
  3. Psychological--prejudgement of the older student;
  4. Financial--little assistance for the older persons;
  5. Institutional--regular curriculum, days only, etc.
- (Cooper, 1975, p. 4).

For this study, the researcher considered senior citizen needs and the educational programs which were available to them in Oklahoma and what should be done in addition to improve these programs' abilities to meet the needs of residents at homes for the aged. The researcher conducted the study in the anticipation that these educational programs (present and improved) could be applied to the institutions for the aged in her home country of Libya, where the aged are not currently provided with any educational opportunities. The researcher intends to submit these research findings to the administrators of homes for the aged in Libya, as well as to the Adult Education Department at the Ministry of Education, so that adult education opportunities could be expanded according to a master plan within Libya.

## CHAPTER II

### REVIEW OF LITERATURE

The review of literature for this study considered the following areas: (1) characteristics of senior citizens, (2) myths regarding senior citizens, (3) needs of senior citizens, (4) centers and homes for senior citizens, and (5) educational programs for senior citizens. Chapter concludes with a summary of important literature considered for this study.

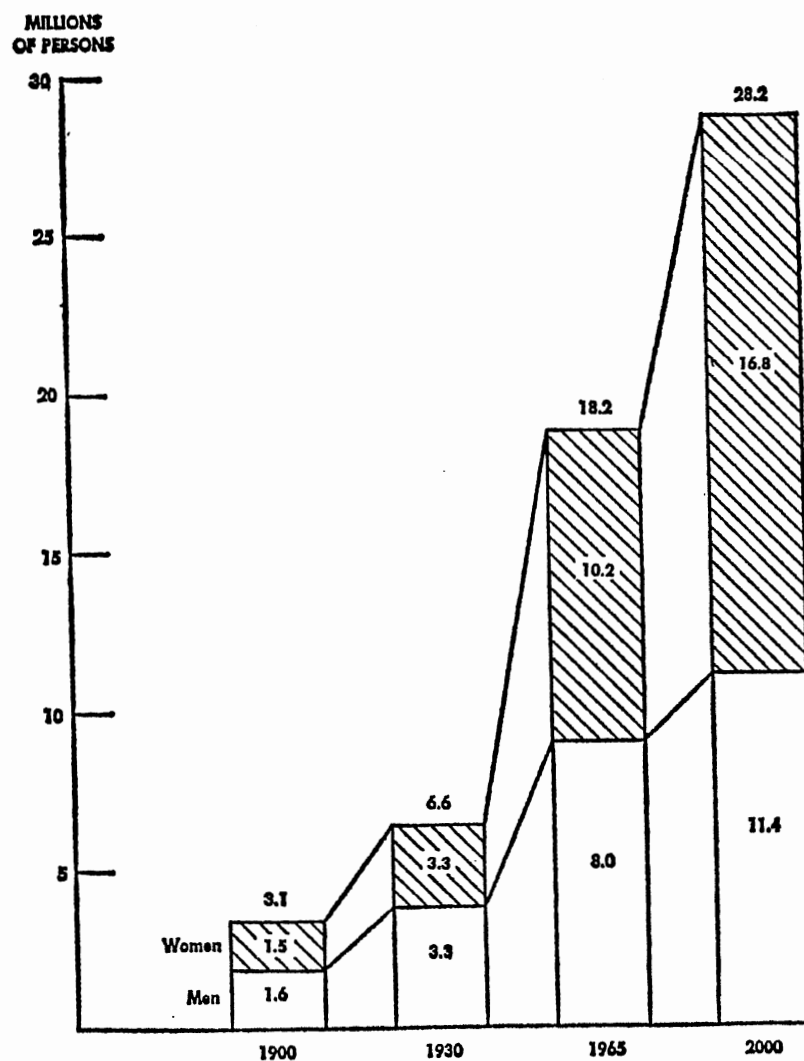
#### Characteristics of Senior Citizens

##### Who are Senior Citizens?

For purposes of this study, the aged will refer to individuals who reside in senior citizen homes. Most of these people are 65 years of age or older. This population is interchangeably referred to as senior citizens, the elderly, older adults, or the aged. The population of the aged segment is growing rapidly in numbers (Figure 1 and Table II). Ernst and Shore (1975) stated that:

In 1900 there were about three million people over the age of sixty-five. Today there are over twenty million. In the past where every twenty-fifth American used to be elderly, by the year 2000 every ninth American will be elderly (p. 17).

Ernst and Shore believed that there are three reasons for this rapid growth:



Source: F. Vickery, Creating Programming for Older Adults: A Leadership Training Guide (1972).

Figure 1. Growth of United States Population Age 65 and Older

TABLE II  
POPULATION AGE 65 AND OVER IN UNITED STATES FOR EACH  
DECENNIAL YEAR WITH PROJECTIONS TO 2020 (1900-2020)

Population Age 65 and Over			Percentage of Increase From Preceding Decade		
Year	No. (In Thousands)	Percentage of Total Population	Age 65 & Over	Total Population	
1900	3,099	4.1	----	----	
1910	3,986	4.3	28.6	21.0	
1920	4,929	4.7	23.7	14.9	
1930	6,705	5.4	36.0	16.1	
1940	9,031	6.8	34.7	7.3	
1950	12,397	8.2	37.4	14.5	
1960	16,679	9.2	34.5	18.5	
1970	20,177	9.9	21.0	13.3	
Projections:					
		Series B <sup>a</sup>	Series E <sup>a</sup>	Series B <sup>a</sup>	Series E <sup>a</sup>
1980	24,051	10.2	10.6	19.2	11.2
1990	27,768	10.0	11.0	15.5	10.4
2000	28,842	8.9	10.6	3.9	7.8
2010	30,940	8.1	10.6	7.3	7.2
2020	40,261	9.1	13.1	30.1	5.7

<sup>a</sup>Assumptions of completed fertility (average number of births per woman upon completion of child-bearing years); Series B: 3.10 (high-fertility assumption); Series E: 2.10 (low-fertility assumption, which mirrors present replacement level trend in the United States).

Source: A. N. Schwartz and J. A. Peterson, Introduction to Gerontology (1979).

1. The large number of immigrants who came to the United States prior to World War I.

2. The increased number of births in the period 1875-1920.

3. The virtual elimination of killer diseases which have plagued mankind.

Cassata (1985) stated that life expectancy for the American male in 1900 was 46 years; for females, 48 years, and that today, the corresponding figures are 70 and 78 years. He went on to state that there are promises of even greater increments as medical and nutritional advances continue. Hendrickson (1973, p. 36) pointed out that "Modern technology and production methods have made available better nutrition and excellent medical facilities so that older people are in relatively good health."

Do men live as long as women? Ernst and Shore (1975) stated that:

Men do not live as long as women. Therefore, among older groups of people, one is likely to find women in the majority. This is true despite the fact that there are more male babies born than female . . . at sixty-five and beyond, there is an average of 140 women for every 100 men. This means in nursing homes, there will be more older women than older men, and this alone can cause problems. This male-female imbalance should be given careful consideration in planning room assignments for residents, or planning recreational programs or social activities (p. 17).

In Oklahoma, among persons 65 years and older, there are 67.7 males to every 100 females. In the general population of Oklahoma (not only the elderly), there are 96.5 males to every 100 females. Old age for any person is a relative matter and depends on personal and environmental factors. "A man of sixty is a mere kid," according to the octogenarian. Some professionals are not considered too old in their seventies, while clerical workers have difficulty finding jobs after they are 45. Vickery (1972) saw that:

Chronological definitions are convenient, but they are not precise enough, because they tell us only how much calendar



time has passed since an individual was born. The answer to the question of 'How old is old?' will depend upon who is asking the question and what kind of facts he is gathering (p. 51).

When talking about aging, it is important to consider both physical aging as well as emotional aging--mental maturity. Vickery (1972, p. 53) thought that "Physical aging is an inevitable human process; emotional maturity grows out of individual life experiences." Vickery divided the physical development stages according to chronological age (Table III).

TABLE III  
PHSYCIAL DEVELOPMENT STAGES ACCORDING  
TO CHRONOLOGICAL AGE

Physical Development Stage	Chronological Age
Infancy	Birth - 6
Childhood	6 - 12
Adolescence	12 - 18
Young Adult	18 - 21
Adult or Peak	21 - 45
Middle Age	45 - 65
Later Maturity	65 - 80
Old Age	80 +

Senior citizens are a highly diverse group--differing in background, skills, experiences, and physical abilities. A summary by Maxwell (1962)

indicated that the elderly in the United States ranged from 65 to 112 years of age. There are more women than men, with the largest number of women being widows. Few of these persons are employed full-time, some work part-time, but the greatest number have retired from paid employment. About 5% live in institutions such as homes for the aged, nursing homes, or hospitals. Maxwell added that the other 95% live in their own homes or the homes of relatives or friends. It is important to note that more than 50% of this group live on less than \$1000. Only a few are millionaires, and some have no cash income. Most of these people have at least an eighth grade education, although some never learned how to read or write, and some are highly educated. Every nationality and ethnic group and every religion are represented in this age group. Another important fact about the elderly is that many are physically able, keen of mind, active, and interested in the world around them. Of course, there are those who are ill, who cannot get around, who are mentally confused, or who feel defeated. What do these 65 and older persons have in common? The major things these people have in common are their chronological years on earth and the attitudes society has about getting old and being old.

Individual differences among the elderly are important points to be taken in account when planning and working for and with them. Hendrickson (1973) warned:

We ought to beware of the tendency to overgeneralize. It is convenient when speaking of 20,000,000 retirees to group them all together and ascribe certain characteristics to them when actually they differ among themselves as much as or more than the young and middle-aged. In age they range from 60 to 100+. In education they range from the illiterate to the post graduate professional, in talent from the mediocre to the genius, and in stamina from the hale and hearty to the sick and senile (p. 127).

## Different Changes That Occur With Aging

Changes that occur with aging are the following:

1. The first kinds of changes that come with aging are the social changes. Ernst and Shore (1975) stated that:

All people do not age at the same rate. Some individuals may be forty years old and physically, mentally, and socially act much older than a person who is in his eighties. . . . Wrinkles and physical disabilities do not necessarily mean that a person does not have a zest for life; rather, they may simply be a consequence of having lived for a long time.

As people get older they leave their work--either through retirement or illness. This may cause them difficulty because they miss the role they had. Sometimes a loss of prestige occurs, and they feel worthless. . . . Retirement can be quite stressful on many levels.

Another social change which may occur with aging is isolation and loneliness. Often, the death of a spouse or of a loved one may trigger feelings of being alone. Breakdown in health may mean that the person is unable to travel, to visit family and friends. These feelings of loneliness may lead the person to feel a sense of being left out of the world or that life is passing him by (p. 19).

Biological changes are one of the most important changes that come with aging. Moore (cited in Bruwelheide, 1976) indicated that:

Basic to the understanding of any aspect of aging is an awareness that, biologically, the human organism ages from the moment of fertilization, characterized by the parallel process of growth or evolution, and atrophy or involution. Certain cells or tissues of the body die or degenerate to permit or sustain growth of others. Body cells are thus in a continual process of death and regeneration.

This wide variability between and within organisms is an important factor in understanding and effectively serving individuals of advance age. Biologic aging is an uneven process that may have little, if any, relationship to chronological age. Maturation takes place in irregular episodic, and relentless phases (p. 36).

The term "senescence" refers to the degenerative changes that occur after maturity has been reached and which will result in death. Ernst and Shore (1975) indicated that:

Senescence is influenced by two factors: first, the genetic background of the organism (who our parents were) influences the timing and the sequence of senescence; and secondly, the environment can influence the onset of senescence. Biologists who study cells have found, for instance, that the human cell divides a given number of times. When the cell has divided this number of times, there seems to be a mechanism which triggers a 'stopping' sequence. . . .

Environment, however, can also affect the onset of senescence. Such things as air pollution, tobacco smoke, poor diets, and even the amount of income a person makes can influence how long a person will live. A person who does not pay some attention to what he does to this body may experience a biological deterioration sooner than someone who is concerned about his health (p. 24).

2. Gaarder and Cohen (1982) listed the common biological changes that occur to older people. Some of them are:

a. With hearing, in the later years of their life, people lose the ability to hear high-pitched notes. The decline of channel capacity make old people slower in taking in information. Being assertive in communicating with the elderly is a way to deal with this problem.

b. A decline in visual acuity in older people's sight is expected; most of the problems such as glaucoma or cataracts are treatable. Advanced glaucoma could be prevented.

c. The sense of taste declines because the number of taste buds decrease. What is left of the taste buds have a higher threshold and need more stimulation. Old people need more sugar or salt to enhance their food flavor; hence, more nutritional knowledge is required and ways to make mealtimes more enjoyable must be found.

d. The ability to smell may be lessened by aging, placing the safety of older people in jeopardy. Leaking gas, something burning, or other dangers may not be detected.

e. The skin of old people becomes less sensitive, which causes perceptions to be less accurate and can result in hot water burns. Skin dryness and visible blood vessels are common with age.

f. The heart muscle becomes less flexible and accumulates fat deposits.

g. The brain of older people can be affected if the blood flow is reduced. The ability to learn will not change in the healthy elderly. Although their reactions slow slightly, their experiences make up for this loss.

3. Psychological changes are the third group of changes which occur with aging. Many people stereotype the elderly as those who have personality disorders. It is true that some older adults have memory impairment and personality disintegration, but this should be considered as atypical of the elderly rather than typical.

The literature shows that personality changes occur as people grow older. In this case, personality is the distinctive style in which an individual behaves or reacts to different situations.

A second change in psychology of aging is intellectual ability. Bruwelheide (1976) indicated that:

Tests administered in an attempt to assess the effect of age on intelligence suggest a rather consistent pattern. Most test results will confirm the longer held assumption that intelligence, as measured by the ability to learn, increases rapidly from birth to young adulthood. Many findings show continued increase, at less rapid rates, or no decline up through the sixth or seventh decade (p. 57).

Eklund (1969) stated that:

Several studies indicate definite increases in measured intelligence up to age 60 and attribute such age variations as exist, not to age-related declines in any innate intelligence factor, but to the relevancy and recency of the individual's educational experience, health, socio-economic status, and other extrinsic variables (p. 333).

Another psychological change which the person may experience is in one's self-concept. Ernst and Shore (1975) noted that:

Self-concept is the image that a person has of himself. As a person experiences events in life in which he succeeds, his self-concept improves. If a person experiences negative changes in his life, his self-concept may become negative also. Since older people experience success and failure like the rest of us, we may assume that some older people who face disruptions, such as the loss of a job, poor health, or loss of a home, may experience a decline in self-concept. Others, who do not experience these disruptions, may not change their definition of who they are. Depending upon how great a disruption was or how recent the disrupting event occurred, the older person's self-concept would be affected accordingly (p. 23).

A fourth element of psychology and aging is mental health. There are different opinions in the literature regarding mental health and aging. Generally, it could be concluded that a senile pattern of brain deterioration does not commonly accompany advancing age. Usually, when this happens, it must be considered pathological rather than a normal process of aging.

#### Learning and the Senior Citizen

Kidd (1959) defined learning as:

Changes which we anticipate will occur in the learner. These may be primary intellectual changes--acquiring new ideas or some reorganization of presently held ideas. The changes may be in attitude, where we hope that people will come to a different appreciation and more positive feelings about a subject, not simply have more information. Or they may be changes in skill, where we expect the learner to become more efficient in performing certain acts (p. 17).

There is a myth which says, "You can't teach an old dog new tricks," which implies that older people cannot be educated and their ability to learn declines by aging. Siegle (1955) wrote that:

Beginning with Thorndike's early investigation of adult abilities there has been a great deal of research on the physical changes, intelligence, learning ability, interests, motivation, and perception of adults. Although these studies have yielded many conflicting results, they proved that adults never cease

to be able to learn. At the same time they have made clear that some significant physical changes do occur with age, and that these changes are important enough to warrant the attention of educators. As the adult grows older, his speed of reaction and the tempo of his life slow down. His eyesight and hearing lose their youthful keenness, and he tires more easily. . . . Learning ability, like other productive capacities, consists of social and psychological as well as physical factors. When you want brilliance and excitement, you go to youth. When you want considered judgment and reason, with perhaps less flamboyant discovery, you go to older adults. Where speed and stamina are not of prime importance, adults do well (p. 17).

What do we mean by "learning ability?" Siegle (1955) explored the learning abilities of adults and concluded:

Most psychologists define intelligence as the ability to learn, and most intelligence test results indicate that there is a decline in learning ability with age. However, the decline is slight; adults never reach the stage where it is impossible for them to learn (p. 17).

Siegle (1955, p. 17) cited the Lorge and Kushner survey, which found that "No adult needs to be inhibited in learning merely because of his age . . . the failure to learn is dependent more on the learner and his experiences than upon age itself."

According to Vickery (1972), psychologists differ widely on the precise effect of normal age-linked changes on the various aspects of mental functioning, such as learning, imagination, memory, abstract thinking, and association. Psychologists agree that in a physically healthy older adult these processes cannot only be continued at a normal rate, but some may even be developed in the later years.

A desire to learn is an essential aid to learning. Nobody is ever too old to learn. If minds are kept active through exercise of intellectual and creative imagination, older adults will be able to learn even in their 70's and 80's. Rich (cited in Hendrickson, 1973) stated that:

There is a growing body of knowledge that indicates that the ability to learn many kinds of materials increases with age. Of course, at some point, perhaps at the age of 85 or 90 somewhere along the way, there may be decreases and there are

certainly changes in speed and in some other aspects of learning, but primarily there is the ability and the same spread of ability within older age groups as with any other group (p. 7).

If age does not necessarily inhibit learning, then learning is affected by outside factors. Gaarder and Cohen (1982) described nine principles which summarize these factors:

1. Learning is activated by the learner: Learning cannot be imposed by a teacher. People learn what they want to learn, see what they want to see, and hear what they want to hear.
2. Learning requires personal interest in the material: Concepts, knowledge, and skills are more readily accepted if they are relevant to the needs and problems of the learner.
3. Learning is a consequence of experience: People do not change their behavior merely because someone tells them to do so. People must experience responsibility and independence in order to develop their qualities.
4. Learning is cooperative: Interacting with others causes people to be more curious and creative. Cooperation enhances the desire to set goals, plans, and try different approaches to solving problems.
5. Learning requires time and practice: Free and open communication, respect, acceptance, and the right to make mistakes are all important parts of the atmosphere in which learning takes place.
6. Learning is sometimes painful: It is not easy for people to discard familiar ways of doing things and try out new behavior.
7. The learner is his own resource: The learners' experiences, attitudes, and ideas need to be drawn upon for learning and problem solving.
8. Learning is emotional as well as intellectual: Learning is greatest when a person's feelings and thoughts are in harmony.
9. Learning and problem solving are unique to the individual: Once people become aware of their personal styles of learning, they open themselves to other styles and increase their effectiveness (p. 7).

It has been said that Plato once stated that the most rewarding and significant learning cannot take place until a person has lived for 50



years or more. Until a person does live enough life and does experience enough of its meanings, one cannot really appreciate the problems of other people. Quite often, such experience is necessary to understand the problems of the aged.

### Myths Regarding Senior Citizens

Many myths and misunderstandings arise when any segment of a population with different characteristics is set apart from the whole. This can be illustrated by some of the conceptions held concerning older people. Gaardner and Cohen (1982) compiled the following list of myths about older people:

1. Most old people live in institutions.
2. Most old people are constantly in bed because of illness.
3. After 65 years everyone goes steadily downhill.
4. Old people are typically bored, alone, and abandoned by their families.
5. Old people cannot do a decent job and should retire.
6. Old folks are past having sex, and those who are interested in sex should not be.
7. After 65 a mind deteriorates and a person gets senile.
8. Old folks spend all their time sitting around watching TV.
9. Most older people become religious fanatics.
10. Since physical aging is a natural process, it cannot be altered (p. 37).

Older adults must be seen outside the misconceptions of society. They must be seen as a group with special abilities and difficulties just as anybody else. Steps should be taken to dispel these myths which, in effect, exclude the aged from segments of society. One important step is

the acceptance of certain basic but honest concepts about aging. Maxwell (1962) has stated that these concepts are:

1. Aging is universal. It is common to every person and not peculiar to a small portion of the population.

2. Aging is normal. "Growing up" is spoken of with respect, while "growing old" is spoken of with fear. This fear comes from a picture of aging which means physical illness, loss of faculties, living in the past.

3. Aging is variable. Every person ages in a unique way; no two persons react physically, socially, or emotionally in the same manner. The state of an individual's well-being in later years develops from a personal life pattern of work, rest, human association, exercise, and mental attitude.

4. Dying is normal and inevitable. As a society, it is harder to accept dying as a normal part of life than is accepting birth as a normal part of life. The idea of death as a meaningful closure of life is a difficult idea for many persons to accept.

5. Aging and illness are not necessarily coincidental. Many people think that ailments and ills are the natural accompaniment of old age. In fact, there is a difference between the physical consequences of age per se and illness. A healthy old age could be obtained through improved living habits in the early and middle years.

6. Older people represent three generations. This age group known as aging covers from 65-112 years of age. The characteristics of younger-older groups may differ from the middle-older or the older-older groups.

7. Older people can and do learn. The learning patterns of older people may change and differ from learning patterns of children, but

their learning capacity is not necessarily diminished. The speed of learning may slow down but the learning may have a deeper value. The capacity to learn new things and to relearn old things is still great and vital.

8. Older people can and do change. One of the wrong stereotypes is that older people will not change. This exists despite the frequent demand for readjustment from the elderly in giving up a job, physical environment, and way of life of many years' standing.

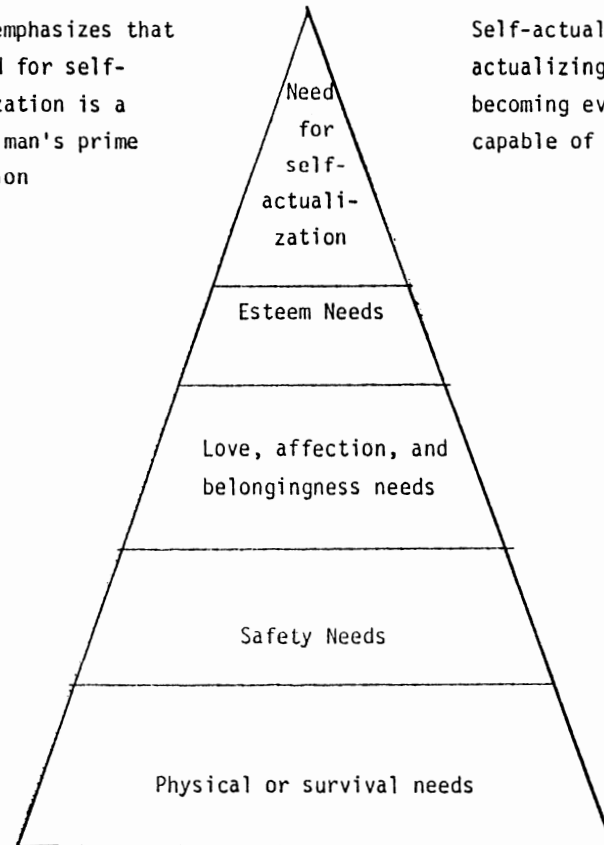
9. Older people want to remain self-directing. Maintaining self-direction is usually the chief desire and a major factor in continuing self-respect to the older person. Any plan for change in their lives must be kept insofar as possible under their own control; their maximum participation in decision-making about their lives should be sought.

10. Older people are vital human beings. One of the misconceptions about older people is that physical limitations and handicaps imply total inadequacy. Where it is appreciated that each aged person is a living, vital, interesting being with whom association can be rewarding and beneficial, and regardless of the state of physical being or life circumstance, a positive response can be anticipated. Clarity of mind is aided by the constant use of mental faculties in learning new things and in maintaining social relationships with others.

#### Needs of Senior Citizens

One of the ultimate goals of a human being is to achieve complete self-identity through the development of full potential. Completing self-development is a universal human need, and the feeling of movement in this direction is a condition of mental health. Figure 2 shows Maslow's (cited in Knowles, 1970) hierarchical order of human needs. Knowles

Maslow emphasizes that the need for self-actualization is a healthy man's prime motivation



Self-actualization means actualizing one's potential, becoming everything one is capable of becoming.

Most basic needs have to do with survival physically and psychological.

On the whole an individual cannot satisfy any level unless needs below are satisfied.

Source: M. Knowles, The Modern Practice of Adult Education (1970).

Figure 2. Human Needs in Hierarchical Order

(1970) believed that Maslow proposed the following principles of operation for these needs:

1. Gratification for the needs on each level, starting with the lowest, frees a person for higher levels of gratification.
2. Those persons in whom a need has been satisfied are best equipped to deal with deprivation of that need in the future.
3. The healthy person is one whose basic needs have been met so that he is principally motivated by his needs to actualize his highest potentialities (p. 24).

In addition to Maslow's model, Cooper (1975) found two other conceptual models in the literature, concluding that:

The three models of need might all form into one model that had material maintenance as its first level, social expression as its second level, and ego satisfaction as its third level. If this were the case, it might aid educators in developing programs for the elderly (p. 20).

The basic human needs, which every individual has, impel human beings continually toward different kinds of social contacts and relationships with other people. Lindeman (cited in Shaw, 1969, p. 139) believed that "Man is born with three instinctive traits which give direction to all his motives and acts." Lindeman further explained that with:

. . . self-preservation, self-perpetuation, and self-assertion  
. . . man is forced to reveal his inherent social nature. In preserving himself, perpetuating himself, and asserting himself, man relies on relationships and cooperation with other human beings (p. 139).

Everyone tries to satisfy basic needs throughout his life span. This satisfying effort becomes more difficult to senior citizens, due to financial means or a changing of roles, priorities, and self-expectation. What society expects from individuals and what individuals expect from themselves changes as they age. People draw upon different resources to meet their needs. For the aged, those resources are subject to the

effects of the aging process and the insensitivities and barriers of society. Bruwelheide (1976) believed:

The logical first step in seeking to meet the needs of the aging is to be aware of the status of the resources which aged persons possess and to attempt to remove the barriers which have arisen and therefore limit the effective use of these resources (p. 27).

The categories of barriers which can impede the process are the following:

1. Financial Resources. The highest priority problem to be faced by many of the elderly is the limited financial resource base during retirement. In effect, a retired person proceeds from steady employment with continuing wage increases to retirement on a reduced and fixed income. Financial independence during retirement is the exception rather than the rule. Add to this situation the rising cost of living and special medical, nutritional, housing, or transportation needs, and a financial crisis results. The elderly cannot supplement income through employment or loans; consequently, the only alternatives may be institutionalization or public assistance.

2. Help and Concern From Others. The American culture places a premium value on youth and employment status. The elderly find themselves members of a group which is low in status, unattractive, unproductive, and impoverished. Perhaps they represent the frightening spectre of the future.

At a time when there are special needs, most people can depend upon help from friends or relatives. The elderly find others uninterested or unwilling to assist, while social contact with friends and peers continues to diminish, due to death. Social isolation leaves few resources to draw upon in time of need.

3. Involvement in Society. In this society, social roles meet the people's needs. The majority of time and energy is devoted to such roles as being a spouse, parent, peer, worker, consumer, and citizen. This involvement declines with the increase of age and the shrinking of responsibilities. For aging persons, roles are dropped; consequently, access is lost to economic, social, and psychological support for survival. In other words, the elderly become nonproductive and nonparticipating nonmembers of society. Until new roles are provided for and assumed by the elderly, they will have fewer opportunities to meet their needs.

4. Physical Resources. The biological aging process diminishes health, strength, speed, coordination, and perceptual abilities. Cells in the central nervous system are lost, and tissues lose elasticity. Nutritional byproducts accumulate in cells and organs, slowing down or interfering with functions.

Although these changes are slow, the pace does accelerate in later life. For some, the changes may occur more rapidly, earlier, or complicate other adjustments. The effects of these changes involve precarious equilibrium, vulnerability to stress and disease, reduction of efficiency in senses (touch, vision, hearing, taste, and smell), and slower responses.

People continually adapt to and compensate for changes so that effects of aging can be minimized. The aged cannot hope to adjust to society's attitudes toward the aging process, however. When society assumes that age means loss of functional abilities and denies opportunities to use their abilities, the adjustments are difficult to overcome to successfully cope with needs. Changing society's attitudes and providing

preventive medical care would do much toward enabling the elderly to cope successfully with their needs.

5. Intelligence and Special Aptitudes. Although biological processes of aging affect intellectual capacities, artistic, mechanical, judgmental, verbal, and reasoning skills are highly stable until very late in life.

Aging effects involving progressive deterioration of brain tissue may result in disorientation and memory disorder for short or extended periods. A small portion of the aged population may suffer similar effects from stroke, malnutrition, drug abuse, alcoholism, toxicity, or may block chemistry imbalances. Early diagnoses and treatment result in a higher degree of independence.

Again, the most serious problem is society's misconceptions about the aging process. Healthy, intelligent, active, and capable elderly persons amaze younger people because this group expects to see the elderly as senile, dependent, and inept.

6. Training, Knowledge, and Experience. The youngest of today's elderly were born in 1923 and reached adulthood in 1943. The milieu of that period represents, literally, a different generation.

Education was not of the same quality, and completion of high school was not likely. The younger generation live in an environment made possible by revolutions in communications, transportation, labor-saving technology, and life sciences which demand daily adjustments. The formal education that some elderly possess is limited when compared with that of the younger generation.

Adult education could be of great value to the elderly if it were available, and if it incorporated the wealth of practical, firsthand



experience the elderly acquired in dealing with the demands made throughout a long life.

7. Time. The elderly need opportunities to meaningfully use the enormous amount of time they have available. For younger people, there is much to do and too little time, but for the elderly, there is too much time. This time should be used to meet the needs of the elderly in appropriate ways for each individual, whether to supplement resources or to provide social inaction.

Sielski (cited in Hendrickson, 1974) defined the needs of older people as:

. . . activities for leisure time, social living, employment, education, good housing, legal information, companionship, good medical care, social work and vocational counseling and often financial aid. Meeting some of these needs for the aged person means the difference between living a happy, useful life and existing in idleness in a state hospital or nursing home (p. 38).

People's interests and needs change as they age. Interests, attitudes, and self-concepts are modified by one of two factors: the physical condition of the individual or by environmental reinforcement for his actions and behaviors. Vickery (1972) indicated that:

Life satisfaction in old age is dependent upon opportunities to find substitutes for the meaningful social roles and relationships of the middle adult years that have become progressively lost. These new relationships and roles will be less personal and broader in scope than the primary ones of earlier life stages, but they will provide some of the needed recognition and affectional responses to give individuals a sense of belonging and a sense of usefulness (p. 104).

Need for education can be one essential need of the aged. Knowles (1970) stated that an educational need is:

Something a person seeks out to learn for his own good, for the good of an organization, or for the good of the society. It is the gap between his present level of competencies and a higher level required for effective performances as defined by himself, his organization, or his society. . . . The more concretely an individual can identify his aspirations and assess

his present level competencies in relation to them--the more exactly he can define his education needs--the more intensely will he be motivated to learn (p. 86).

Providing educational opportunities for the aged is an obligation to the educational systems and to the society as a whole. To meet the basic human needs is a concept with which educational programs must deal.

Educating the aged requires the adoption of a lifelong learning philosophy and plan. Continuing with this opportunity, Niemi (cited in Bruwelheide, 1976) stated:

The formal education hierarchy must recognize that its curricula should aim at the development of a process, rather than the infusion of content. Emphasis needs to be placed upon learning, unlearning, and relearning, as well as learning to learn and upon learning to want to learn. In this view, education becomes a vital continuum in which at any given phase one is already preparing for the later stages. Certainly the notion of a terminal education should be expunged from the profession's lexicon. The duration of education needs to be seen in biological terms, ceasing only when the human organism stops functioning. Perhaps, and not altogether facetiously, the only meaningful terminal degree will be granted by a mortician. The alternative, apathy in the face of encroaching ignorance, has one consequence: a growing number of old people who may function physically but who are dropouts from life with its promise of continuing self-renewal and fulfillment (p. 34).

Older people should be given opportunities to continue to learn and relearn the facts and forces that are operating and will operate in the future. If not, a subculture of the aged will develop. Only by learning and relearning can older adults remain functioning and contributing members of society. Vickery (1972) assured that:

When a society changes so rapidly and with such turbulence as it does today, many older people are left psychologically and emotionally behind in eddies of unrelatedness and alienation. In all societies changing patterns create problems of adjustment for men and women who live in them. New ways of coping have to be learned. New patterns must be designed today to create an environment of opportunity for all older Americans, the majority of whom are relatively healthy and largely self-directed. Opportunities for older people to age with dignity and usefulness and to participate, as they are able, in community planning. Meaningful involvement in society, rather than alienation from it, must be the goal (p. 36).

## Centers and Homes for Senior Citizens

Senior citizens need to come together with others of their own age to exchange experiences, solve problems, and consider the new. It is not a segregation but an integration of age, and such togetherness can be one source of enjoyment for later years. The literature showed that in Boston, clubs were organized for senior citizens only, as far back as 1870.

The history of centers for senior citizens is a short one. Gottsch (1979) indicated that:

The senior citizen center is a relatively new idea in the social programming of the United States which has grown to become one of the most popular programs in the social milieu of the post WWII era. The first center was established in New York City in 1943 and today more than 5000 centers have been established throughout the United States (p. 1).

These centers were established to meet the needs of senior citizens, needs which silently cry out for a solution. Maxwell (1962) stated:

It was the awareness of a group of workers in the Welfare Department of New York City to the conditions of isolation and loneliness among older people with whom they worked which led to the idea of a center. They felt that people needed more than a club. The new dimension proposed was a place available exclusively for older people, open every day of the week (p. 5).

From the opening of the first center, certain new principles and practices emerged, replacing old ones. Maxwell (1962) stated that:

As older people came together, they voiced needs and desires which had not been recognized before. They showed capacities and skills which had been covered over by discouragement and lack of belief in themselves. Centers started as mere places to meet, as places to have fun, but found it was possible also to have people come together and enjoy themselves through service and achievement (p. 6).

Taira (1983) indicated that there are 5,000 senior centers in America now with five million older people. These centers are funded by federal, state, and local government, and also by private sources. Education, socialization, counseling, and the provision of meals and

health services are the different rationales for the centers. The centers are everywhere: in rural, suburban, and inner city areas.

A definition of a center, according to Maxwell (1962) was:

. . . a single purpose or multi-purpose agency established as a result of community planning based on the unmet needs of older people in any given community. The basic purpose of such centers is to provide older people with socially enriching experiences which would help preserve their dignity as human beings and enhance their feelings of self-worth (p. 7).

Vickery (1972) cited the refined and expanded definition by the President's Council on Aging, where

A senior center is a physical facility open to senior citizens the year around, at least five days a week and four hours a day, operated by a public agency or nonprofit private organization. It provides, under the direction of paid professional leadership, three or more of the following services: recreation, adult education, health services, counseling, information and referral, and opportunities for community and volunteer services (pp. 126-127).

Regarding senior citizen homes, Musson (1973) stated that:

This realization may come when the last child leaves home, when the big family house becomes more of a burden than a pleasure, when they retire from the job on a given Friday, never to go back, or when some physical problem makes it a necessity to find a different place to live for safety and comfort's sake, when one of those or all happen, old people realize that their present home does not meet their needs in the best way, and they begin thinking about moving to a retirement residence (p. 19).

By moving to a senior citizen home, old people can usually find: (1) a kind of freedom from many things (care of the house, the yard, maintenance, worry about the house when travelling, etc.), (2) convenience (shopping, banking, library and medical facilities, beauty parlor, etc.), (3) access (new friendships, new activities, education, socializing, etc.), (4) opportunity (companionship, sharing interests and hobbies, helping others, change of climate, etc.), and (5) security (finding someone who can help in such activities as mailing packages, making travel

arrangements, who can understand and care about problems and can assume responsibility in emergencies).

The government housing programs has developed specialized housing facilities and projects for the majority of the old people (about 95%) who do not need institutional care (Coggeshall, 1973). In the decade of 1960-1970, the government produced more than 336,000 subsidized units for the elderly, but many more units should be built. Section 202 of the Federal Housing and the National Housing Act of Housing and Urban Development (HUD) was designed to give loans from the federal government to nonprofit sponsors who are willing to build housing projects for the elderly and the handicapped. The trend is to keep the elderly as independent as possible in their own domiciles, retirement villages, or specialized housing and to postpone as long as possible the need for institutional care.

#### Institutionalized Senior Citizens

According to Riley and Foner (1968), approximately 4% of those 65 and older live in institutions; another 1% live in lodgings, and another 1% live in group quarters (Table IV). (More recent data were unavailable.) Bruwelheide (1976) pointed out that:

Of this group (65+), 61 percent live in private proprietary homes. Of the remainder, 24 percent live in non-profit homes (religious, fraternal, etc.), 12 percent in county and city homes, and 3 percent in federal and state homes (p. 54).

The significance of being in an institution is that the environment of the aged does not always provide education. Eklund (1969) thought that:

Significant to the educator in relating many of these factors to the learning process is the finding that they do not necessarily reflect age-related differences in motivation or ability to learn. Loss of self-confidence, unwillingness to

TABLE IV  
PERSONS IN INSTITUTIONS AND OTHER GROUP QUARTERS,  
UNITED STATES, 1960 (PERCENTAGE DISTRIBUTION)

Age	All Persons	Mental Hospitals	Homes for Aged and Dependent	Others in Institutions	Others in Group Quarters	All Others
35-44	100.0	0.4	0	0.5	0.8	98.3
45-54	100.0	0.6	0.1	0.4	0.8	98.1
55-64	100.0	0.8	0.3	0.3	1.0	97.6
65-69	100.0	0.9	0.6	0.2	0.9	97.3
70-74	100.0	1.0	1.4	0.3	0.9	96.4
75-79	100.0	1.2	3.0	0.3	1.0	94.5
80-84	100.0	1.5	6.3	0.5	1.4	90.4
85+	100.0	1.7	11.4	0.7	2.0	84.2
Total 65+	100.0	1.1	2.4	0.3	1.0	95.2

Source: M. Riley and A. Foner, Aging and Society (1968).

risk failure in the learning situation, and wariness stemming from self-assumption of negative stereotype of old age may all depress the test results on many of these measures (p. 331).

Senior citizens may tend to reflect the societal evaluation of abilities. Dunn (cited in Eklund, 1969) stated:

Once society begins to emphasize maturity instead of aging, education will respond. Educators will join forces with colleagues in mental health and public health education, will give more and more attention to the idea that achievement and maintenance of a high level of health and well being are every man's due. They will be increasingly concerned about the public's understanding of the principles of nutrition and environmental health. They will do more to prepare each person for his struggle against the deterioration of his body and to help him learn how to compensate for the limitations the years may eventually impose on him (p. 332).

Education for better physical health is another broad area of need and opportunity. Swartz (cited in Eklund, 1969) stated:

Understanding of the limitations and capabilities of the human organism in the later years of life is essential to its conservation. Therefore, programs in physical hygiene, body care and exercise, nutrition, intake moderation, safety and various areas of replacement therapy fall under the appropriate aegis of adult education. Insight into the aging process may counter the prevailing emphasis on negative features of physical losses with age by reminding us that time is a measure, not a force, and that the effects of environmental stresses and trauma on the human body are not always chronologically measurable (p. 332).

#### Educational Programs for Senior Citizens

The rapidity of technological change, shorter hours of work, completion of parental responsibilities, and total retirement from the work force may encourage many millions of middle-aged and older-aged persons to seek education. Education can enable them to keep pace with new methods, retrain them for jobs, help them pursue more intensively interests developed earlier in life, learn new skills, complete interrupted education, or pursue knowledge for its own sake and pleasure.

Educational programs should utilize the skills and experiences of the aged in different educational programs. Existing educational institutions at all levels should be involved in some aspect of serving older people. Such service can meet any range of needs, whether to foster or promote development of healthy and satisfying maturity, or to encourage continued intellectual growth in later years. Stanford (1972) stated:

Education can give older people the knowledge, skills, and understanding needed for continued employment, second careers, and rewarding leisure time activities. Education allows older people to further develop old interests, explore new areas of learning, and broaden their outlook on life (p. 281).

Trent and Trent (1977) indicated that older adults have four educational needs:

1. Coping needs refer to that group of requirements which must be met in order to continue adequate social adjustment, psychological health and physical well being. McClusky includes such programs as adult basic education, health education, training for economic improvement. . . .
2. Expressive needs refer to those where individuals engage in activity for its own sake, activity which has intrinsic meaning and pleasure. Educational activities which focus on these needs may include physical education, liberal education, hobby and personal interest areas.
3. Contributive needs are those which encourage older persons to repay society in some way for its past generosity. Many older people feel that they need to serve in some way; to help others less fortunate than themselves, or to repay a past debt. These needs may be satisfied through such activities as leadership and community action education.
4. Influence needs represent the desire of older persons to be able to affect the direction and quality of their lives. Educational programs related to political awareness, community action and problem solving are suggested as useful in meeting these needs (pp. 231-232).

It should never be assumed that senior citizens can cope with their developmental needs without the benefit of a systematic education



program. Society is obligated to extend research and educational efforts to help older individuals enrich their later years. As Mee (1980) pointed out:

Adults have the right to education. . . . An education service for adults should be provided out of the public purse, or at least subsidized to that point where it is available to all adults who wish to use it. . . . Individuals, men and women, must be given the opportunity to develop their abilities and talents in order to be able not only to cope at a personal level, but also to make the maximum possible contribution to the necessarily collective responses to the challenges which face society (pp. xii-xiii).

Educating senior citizens should have higher priority in the programs of the education enterprise. Education should be an instrument to help deliver the services set up to meet the essential needs of all its citizens, including the aged, and to upgrade their talents as a resource in nurturing the well being of society. It should help in progressive attainment by persons of lifelong fulfillment, and in so doing, constitute an essential part of the education of individuals at all ages. Hendrickson (1973, p. ix) stated that "Understanding the special circumstances surrounding the older adult is a virtual necessity for those who would do intelligent planning for him." Bruwelheide (1976) indicated that meeting life needs is a concept with which modern educational programs must deal because "No education that has a terminal point can ever fully meet the needs of life, whether the terminal point is reached at fourteen, eighteen, thirty-five, or seventy" (pp. 33-34). The indication is that meeting the needs of any population will require the adoption of a lifelong learning philosophy and plan.

Stanford (1972) confirmed that:

It is fair to say that Education for Aging is one of the areas in the field of aging with unlimited potential for growth and development. The development of Education for Aging offers a challenge to those responsible for planning programs as well as to older people themselves. Opportunities for educational

experiences should be made available to help meet many needs of older people. One of the greatest needs is to maintain a level of well being sufficient for full participation in the society. There is a compelling need for better coordinated efforts to develop effective programs in adult education and training (p. 258).

Hendrickson (1973) said that the procedures to follow when planning programs for older adults are:

1. Determining needs
2. Ordering priorities among needs
3. Discovering resources
4. Developing the program based on priority ratings and the availability of staff, finance and facilities
5. Promoting the program
6. Operating the program
7. Evaluating the program and replanning (p. 137).

#### Planning Committee

In education program planning for older adults, three groups should participate. Lord (1976) stated that the participants should include:

1. A representative from the clientele group. This person knows more about the nature of the aged problems than anybody else and he can identify them well. He also knows who else should be invited to participate in the program after it is planned--the recruitment of the participants in the program.

2. The faculty representative--having experiences and knowledge to deal with the subject of the program. This person's responsibilities are: (a) to draw a solution from his field of knowledge and experience for the problem which has been identified by the target group; (b) preparation of special educational materials (reading and reference lists, syllabi) which support the educational programs; (c) the setting of

objectives which are realistic and attainable and which are congruent with the problem; (d) developing a plan for evaluating whether or not the program achieved its objectives; and (e) knowing other resources who may contribute to the program and make it more successful.

3. The adult or continuing education member whose responsibilities in the planning committee are: (a) to oversee and supervise the overall planning process--being sure that the planning committee has the right composition (member of the target group and member of the faculty group), and that all members have the opportunity to express their views; (b) to be responsible for the development of the administrative management plan (budget, fees, other sources of income, and other administrative details); (c) to plan for the facilitation of the program (program space, participant housing, food service, coffee breaks, and recreation during free time); (d) to supervise the overall program promotion (development of brochures, press releases and radio announcements, preparation of operational mailing lists drawn from information supplies by the clientele group); and (e) to see that the program is designed in such a way as to maximize the opportunity for adults to learn--being familiar with what affects adult learning and ensuring that there are no artificial barriers to adult learning built into the program.

Members of the planning committee should cooperate and learn to accept good ideas, no matter where they originate. The entire plan must have the approval and confidence of all members of the committee, with each supporting the whole platform as well as that part one has had responsibility for.

#### Basic Principles in Program Planning

Maxwell (1962) pointed out the basic principles which should be

taken into account when planning educational programs for the aged:

1. A complete program should provide for all older people in the community within the stated purposes of the center. Activities should be provided for all races, creeds, economic levels, men and women, those retired or working, those well able-bodied and some provision for those sick and homebound, those who live in institutions or in the community. Programs should provide opportunities for people of varied backgrounds to meet together, share experiences, and work toward common goals.
2. The program should provide a wide variety of program areas to meet individual differences of interests.
3. No one activity should be over-emphasized to the detriment of other program areas, although a certain amount of concentration may be necessary.
4. Activity should be geared to the interests of those persons using the center and/or those whom it desires to attract. This will necessitate some knowledge of the individuals and groups who come, their educational achievement level, physical energy, social interests, past group experiences, financial situation, etc.
5. Occasional joint activity with other age groups will add zest and variety to the program.
6. Expressed interests should be the basis for the first program.
7. In each part of the program requiring skill, it may be necessary to give instruction at different levels.
8. Participation should be divorced from expectations of perfection, since individuals should progress at their own rate.
9. There should be opportunity for participation in special group meetings.
10. The program should be flexible to provide for individual growth and development.
11. New activities should be introduced and organized as interests and needs change.
12. There should be no sudden changes in programs unless such changes are desired by the members.
13. The program should be geared to the mental and physical level of the majority of participants with a constant

view toward self-development and fulfillment. The potentials of older people should be developed, with realistic recognition of limitations. Over-strenuous, difficult activities should be avoided; health and safety precautions should be given high priority in program planning.

14. Careful consideration should be given to the customs and traditions of the community.
15. Programs should be planned well in advance so that a printed copy can be distributed to members in time to choose what they wish and arrange with their friends to attend.
16. The program should provide both active and passive participation. Organized planned activities should be interspersed and balanced with unplanned periods of time for casual, informal socializing or for individual pursuits.
17. There should be organization without rigid structures.
18. All activities should be appropriate to adult behavior which can be entered into with fun and enjoyment but without loss of individual dignity. Cultural patterns and past life will usually determine how people react. What some people consider 'child's play' may be appropriate to others.
19. Activities should be conducted year-round.
20. Programs should provide experiences which enhance the self-respect and respect of family, neighbors and others in the community through successful achievement (p. 63).

One of the important reasons that the elderly do not participate in continuing education activities is because programs or courses have not been specifically designed for them and their needs. Programs or courses dealing with problem-solving situations, liberal arts courses, courses which prepare the older learner to be effective participant in civic or political activities in the community should be programmed for them and should adequately meet their needs. Agruso (1978) confirmed that:

Given the evidence that older people have the ability to exercise cognitive skills throughout their lifetimes, all things being equal, it falls on the educator to provide information to close the gap in knowledge among and within generations. All

situations which have been brought out by rapid technological revolution . . . programs administered through an adult education unit or any other teaching agency (p. 120).

Courses which are considered to be helpful to the older adults and which have been offered by some institutions are courses such as psychological aspects of aging, the role of aging in the modern world, courses which deal with health, housing, financial planning, and the use of leisure time. Education in the arts can be very helpful because it fulfills creative needs of a person and offers a self-perceived opportunity to earn extra money. Another area of interest that can be provided in educational programs might include world and community problems, current legislation, politics, comparative religions, and problems of youth and age. Moody (cited in Pifer and Bronte, 1986) said:

Older learners tend not to be interested in credentials or degrees; tests, grades, and competition hold little attraction for them. The fields they pursue range widely, from the arts or methods of coping with social change to programs that teach information about hobbies, physical health needs, and personal growth. They tend to prefer the kind of participative learning that allows them to be involved and active, as opposed to courses presented in the typical lecture format. The most effective programs have been those that respond directly to the special interests of older learners.

One example of a successful program is 'Elderhostel,' which was founded in 1975 as a summer residential college program for people over sixty. It offers non-credit courses in the liberal arts and sciences. Elderhostel's growth has been extraordinary. It began with two hundred participants, and by 1985 nearly 100,000 were enrolled at eight hundred campuses around the United States. Elderhostel is now both a year-round option and an overseas activity. One of its key features is its residential format, and the fact that it offers an opportunity for travel. The residential program provides a degree of intimacy and socialization that is an important part of the program as a whole. Elderhostel entails no homework, no papers, and no grades; participants enroll simply for the joy of learning. Its participants enjoy a new retirement lifestyle that reinforces feelings of self-worth and personal growth (pp. 209-210).

Agruso (1978) suggested the use of technology when offering courses for the aged:

Recent progress in instrumental technology, such as TV, radio, film, audiovisual tapes, and computers, will not only reduce the cost of instruction but will also reach large numbers of learners. . . . The educators of adults should emphasize instrumental learning activities in programming, while at the same time making the programs available and attractive so as to encourage actual participation (p. 123).

As for all groups, mass communication helps in keeping the aged in touch with the world (Table V). Vickery (1972) indicated that:

Over two-thirds of older people sixty-five and over spend an average of three hours each day watching television. More viewers select programs devoted to information rather than to entertainment; as retired individuals, their days hold many leisure hours. For many older people, the radio and television are a boon that provides companionship and a source of information about happenings at home and around the world, thus keeping them in touch with their society (p. 35).

TABLE V  
USE OF INFORMATION PROGRAMS COMPARED WITH USE  
OF ENTERTAINMENT PROGRAMS ON TELEVISION,  
BY DIFFERENT AGE GROUPS

Age	Percentage of Information Programs Versus Entertain- ment	Average Number of Infor- mation Programs Viewed Per Week
Under 25	20	5.2
25 - 34	33	8.9
35 - 44	31	8.8
45 - 54	35	11.2
55 - 64	44	16.4
65 +	48	22.4

Note: n = 250

Source: W. Schramm, Aging and Society (1969).

Senior citizen homes can provide educational programs, but adult education departments in educational institutions should provide opportunities to make learning a lifelong process. School-centered classes are not easy for older adults to attend because of time or place; therefore, teachers for classes should also be provided at senior citizen homes. McKay and Hixon (1977) indicated that:

Time, place, and transportation are factors in making classes easily available. During periods of physical and emotional stress, outside interests and associations are of particular value. Checking on absentees, arranging transportation, showing personal concern, make great contributions to the welfare and happiness of older people. . . . Crowded corridors, confusing room numbers, stairs, long transportation, should be avoided. Many older persons do not drive or use public transportation at night (p. 160).

Any of the educational programs and experiences should be relevant to needs and interests of older people. Vickery (1972) thought that:

In this culture, learning has always been important as a means to make a living rather than as a value that should continue throughout life. Therefore, the terminology that is used in scheduling activities will affect the individual's desire to participate. Some people associate classes with a school situation and with pedantic methods and goals--and sometimes with failure. Because they have not attended school for many years they have often lost confidence in their ability to learn. A craft studio, a Spanish conversation Club and a round table discussion may help to give a recreational tone to learning situations. . . .

Lectures and films on a variety of subjects of social concern followed by discussions or question-and-answer periods are better learning situations for older adults than formal presentations by a teacher. Many older people who live alone rarely have anyone who serves as a listener before whom they can express themselves and test their ideas. Informal learning experiences give them this opportunity (pp. 205-206).

Programs for the aged are also helpful in social reorientation. Bynum, Cooker, and Acuff (1978) stated that:

Senior adult educational programs are being implemented widely as an avenue to social reorientation and greater fulfillment after retirement. . . . The data indicates that participation in the senior adult educational programs eases the transition



from the primary occupational role into the retirement role (p. 253).

### Educational Leadership

The two most important individuals, in addition to the learner himself, in any educational program, are the teacher and the administrator. Does teaching older persons differ from other types of teaching? This was the question which McKay and Hixon (1977), who taught kids, youth, adults, and older adults, were asked. Their answer was:

Yes, in the same way teaching of small children differs from teaching adolescents and the teaching of adolescents differs from the teaching of adults. The basic principles of teaching are the same, but the application must be adapted to the needs of the students (p. 148).

Many writers repeated that teaching older adults requires an understanding of their needs and characteristics because in this group there are greater individual differences than those found in any other group. An older person who has lived longer has led a unique life, has developed a unique body of knowledge and skills, and has acquired a unique set of attitudes and habits. In the older student's class there is a tremendous resource of knowledge. Organizing and bringing into being a consciousness of this knowledge is the developmental job of the teachers. The teacher must become the facilitator, tutor, and organizer.

Lorge (cited in Donahue, 1955) wrote that:

Teachers of the adults must appreciate that the adult brings with him a past--a past of experiences with attitudes which may be capital to work with, or a deficit to be overcome. Using the capital or cleaning the deficit may be the basis for the complete sense of satisfaction that teaching gives the teacher and that learning gives the learner (p. 57).

As has been mentioned earlier, there are some changes during the years of maturity in the speed of performance in the sensory activities.

Lorge (cited in Donahue, 1955) explained what the teacher should do because of these performance differences:

The teacher must be prepared to adjust to the facts that older individuals, on the average, will tend to be slower and that they will need some help to compensate for their lessened vision and hearing. To overcome the handicap of hearing loss, the teacher should talk somewhat louder, more clearly, and more deliberately. She should be seen by all the adults in the room. For as individuals become older, they unconsciously learn to depend more and more upon auxiliary cues from lip-reading. This means, of course, that the teacher should not turn her back to the group, nor move out of their lines of sight. The exception to the rule, however, would be to use the blackboard to reinforce the oral communication. Unusual words, new names, strange expressions should be written on the blackboard to give additional strength to the spoken messages. . . . Lesson length must be considered not only within the class hours but also outside the school. The assignment, for instance, whenever there must be one, should be long enough to challenge but not so long as to frustrate (p. 57).

A teacher must take steps to set the aged group at ease, to establish a friendly climate, and to initiate purposeful activities so that learning can take place. Some suggestions to the teacher from Cleugh (1962) are:

1. Make sure the older student has plenty to do at the beginning. Do not explain everything on the first meeting; just give a brief explanation of the principles on which the course is planned. Leave the student with one clear idea of what will be done at the next meeting.

2. The first assignment could be a piece of practical work or a visit of observation, which will give a lead for discussion and help people in the group to know each other. Even if there are some who do not join the discussion, those who do will probably enjoy themselves. Such a discussion will help also to release any tension and give the chance to the teacher to know his students and the students to know their teacher.

3. The periods devoted to set instruction and early lectures should not be taught by the tutor as a chance for erudite display, nor should they plunge into a mass of details. It is also a mistake to give only an abstract framework. Find an easy topic which is interesting, relevant, and one which does not assume too much background knowledge. The lack of such can be unnerving to students who are probably somewhat tense.

4. Written work is often difficult to the impractical adult. Written work should involve more than a mere recapitulation of material given in lectures. The work must be simple in the sense that it does not demand too much background knowledge or too elaborate a scheme or organization; yet should still demand accuracy, thought, and individual judgment.

5. Reading lists--book lists are intended to be used flexibly and not as a set of rigid requirements, and students should be left in no doubt that this is so.

6. If the tutor wants to set a friendly tone, he needs to consider his jokes and asides and make sure that these do not set up gratuitous competition.

In determining what to teach and what to reject, the educator should ask himself these questions (Morgan, Holmes, and Bundy, 1963):

1. Is it interesting to the people participating in the learning program?

2. Can it be useful to the learner? Will it help them to attain the objectives of the educational activity?

3. Is it related to the subject under consideration?

Mueller (1938) saw four chief qualifications needed by adult teachers for carrying on the work most effectively:

1. The teacher of adults must have an attractive personality, with a keen insight into human personality. That person should have good

judgment, a dignified yet responsive personality to the traits of his students, and the ability to be a sympathetic, tactful, resourceful, and appreciative of the efforts put forth by the students.

2. The teacher of adults must be a mature person so that the teacher can instill confidence in adults. The teacher who talks from experience can talk the languages which adult students can understand and appreciate. When the teacher sympathizes with them, the adult students know that it is a sympathy born of understanding. The teacher can lead and guide, with confidence, for the students can expect that there is a seasoned guide, who has been over the ground and knows it well. The position requires people of full maturity, not only in years, but also in understanding and appreciation of the problems of adult students, and of the professional techniques involved in education.

3. The teacher of adults should possess a good general educational and cultural background. This is needed if the teacher of adults is to inspire students on to a greater self-realization that comes through education. The teacher must have a broad range of knowledge.

4. The teacher should be specifically trained for adult education work. Special training makes it possible to handle problems peculiar to this field. This training should include specific courses, such as principles methods of teaching and educational psychology, with special emphases on adult psychology, practice teaching, and sociology; stressing social conditions and racial and cultural backgrounds of the foreign groups represented in the classes.

Samuel (cited in Hendrickson, 1973) recommended some expectations older adult teachers should plan for in their work:

1. Expect quality from adult learners, but remember: it will take longer to be produced as age advances.

2. The scope of lessons must be planned with due regard for speed capabilities of members of the group.

3. Present new material in the most logical sequence and relate it to what is already known. Short units of work will give older adults a feeling of success and mastery.

4. Use various instructional aids to help establish important concepts and relationships.

5. To help compensate for slower correlation of ideas, select the central idea, then plan class demonstrations, explanations and discussions, so as to develop and reinforce the basic, central idea.

6. Repeat important points frequently.

7. Summarize often.

8. Because of the negative attitudes about the aged's ability to learn, the teacher has to make a special effort to reassure adults about this point. He must overcome their feelings of insecurity and of fair competition with younger adults and give them a new sense of security and mastery.

9. The teacher must make sure that the older person sees a relationship between the tasks performed in the learning process and his ultimate objectives.

10. Because learning flows from the consequences of reward and satisfaction, the teacher should take every opportunity to praise his students' good work. Errors should be minimized and punishment avoided.

11. Do not forget the importance of short recesses for adults.

12. The older adult may expect more rapid achievement than he is capable of producing. The teacher must be keenly observant for signs of this difficulty and give encouragement so the individual will not drop out with the feeling of frustration.

The teacher of the older adults can be much more effective if he can be constantly mindful of the unique characteristics of adult learners--characteristics which result from developments during the aging process. The teacher should be aware of individual differences that are found among older adults in age, ability, previous education, needs, and interests. One of his important jobs is discovering each person's particular interest or need. Unless the adult gets what he is coming for, he will soon stop attending the class.

Grabowski (1976) cited the desirable adult teacher competencies as:

The teacher's foremost concern must be the adult student, and his effectiveness in this concern must be judged on his ability to help the student to develop and maintain self-confidence. The ideal teacher could be described as people-oriented, more interested in people than things, more interested in individuality than conformity, and more interested in finding solutions than in following rules. He would be considered a mature, integrated personality, that had chosen his own role and relationships to society and coveted for everyone else the same privilege. . . . The teacher must have understanding, flexibility, patience, humor, practicality, creativity, and preparation (p. 7).

All people involved in an adult education program are concerned about instruction. The participant is anxious about his or her ability to learn and with the kind or quality of instruction available to him. The teacher's priority should be to meet the needs of the students. The administrator also should care about instruction, but in a different way. The administrator is involved with the quality of instruction for all people and all groups in the program. His responsibility is a broad one, and successfully fulfilling it requires extensive information about the total educational program. Grotelueschen, Gooler, and Knox (1976) warned that the administrator:

. . . keeps records, completes forms and answers questionnaires. The administrator worries about finance, about where to get the necessary dollars to do a job well. He is the public relations person, the legislative liaison and the prime

contact for people wanting to know about the program. If these responsibilities are inadequately performed, the rest of the program, particularly its instructional aspects, will suffer (p. 59).

The administrator shares in the program development, works with committees, and supervises the work of the professional staff. Besides the mentioned tasks, there must be time to develop a warm, one-to-one relationship with the employees and as many participants in the program as possible. To be a successful leader one should develop a "we" feeling and a sense of community with all the people involved in the program. This role should not include an assuming or authoritarian approach.

Vickery (1972) saw that:

The maintenance of an effective organization that permits growth and development of the senior center program and harmonious, cooperative relationships among board, staff, and members is the responsibility of the executive director.

The structure of the center establishes a framework to facilitate cooperative relationships and communication among the individuals and groups involved in the management of the program. The structure will differ, depending on the size and diversity of the program (p. 257).

Maxwell (1962) listed the areas and skills identified as of major importance for the director:

1. Knowledge and understanding of individual development--the physical, social, and emotional growth patterns of all ages, with special knowledge of the physical, social, emotional, and spiritual aspects of the older years, and interests in learning more.
2. Knowledge and understanding of groups, and the skill and ability to help people in groups work together to achieve their goals.
3. Knowledge about the learning process for all ages, with special emphasis on the learning process and patterns of older people, including motor learning. The understanding and ability to help older people use their learning ability, and overcome the blocks to their own learning.

4. Knowledge of the literature in the field of the aging, and a continuing interest in keeping up with the new literature.
5. Knowledge and skill of administration, including supervision of paid and volunteer staff.
6. Knowledge and skill in developing an atmosphere and structure conducive to a democratically based self-government to operate in the areas of decision-making appropriate to the membership. In some centers this may mean skill and knowledge of parliamentary procedures.
7. Knowledge and skills in several areas of program activities.
8. Skills in community organization.
9. A knowledge in the research being done in the field, and how it applies to the work of the center, an ability to identify areas which observation and experience of the center reveal, the skill to present these needs in a manner that permits study.
10. Public relations knowledge and skills (p. 42-43).

Hendrickson (1973) believed that:

If a program is worth doing, it is worth examining to see if, or how well, it is doing what it is supposed to do. . . . Evaluation always assumes goals or objectives. When one is operating an informal program it is more difficult to be explicit about objectives than with a formal program (p. 171).

Maxwell (1962) agreed that accurate evaluation at best is hard to achieve, and he asked:

How can the center measure whether the lives of its members are being enriched? Whether those who were lonely have found companionship? Whether those who wanted to learn have been challenged? Whether the capacities and skills of members are being used to the full? Whether the people feel they are useful, contributing members of their community? (p. 77).

Even if it is difficult to get absolute answers to such questions, the home should search continuously by examining all aspects of its program, service, and method of operation.



Hendrickson's (1973) techniques for evaluation and assessment depend on the purpose and how extensive an evaluation is desired. Kinds of data that could be useful in evaluating the program are:

1. Adequacy of program coverage. How many offerings matured, i.e., had enrollments been large enough to sustain them? If all matured, perhaps the program was not experimental enough. If too many failed to mature, maybe the needs and desires of the potential clients were not properly assessed; or perhaps promotion and recruitment were inadequate.
2. Persistence of attendance. How regular were the enrollees in attendance and how many stayed to the end of the activity?
3. Continuance in the program. How many of the enrollees expressed a desire to re-enroll; i.e., to take up a similar activity or to enroll in an advanced stage of the same one?
4. Student satisfaction. End of year assessment by students can be done by means of a detailed form in which various aspects of the program can be scored on a point scale, each section having a space for comments. Single meetings or single courses can be evaluated by means of an end-of-meeting slip expressing degrees of approval or disapproval of the event as a whole or of selected aspects of it.
5. Evidence of client growth. Some of these data are easy to gather, some not. The extent to which clients lose weight in a weight-watchers' class, and the number of job placements growing out of a job-training activity are illustrations of easily obtainable data. Evidences of broadened intellectual horizons, improvement in mental health, the therapeutic value of learning a craft, though often somewhat evident, are hard to measure with any degree of precision. Hopefully, innovative and committed adult educators will accept this as a challenge.
6. Satisfaction with administrative arrangements, such as times and places of meetings, fees, transportation and parking arrangements, physical facilities and equipment can be measured on a point scale for each time with open spaces for alternative suggestions (pp. 174-175).

#### Summary

A review of the literature indicated that the aged group in the

American population is growing rapidly and that this group is plagued by many misunderstandings held by other groups in society. This factor, added to other problems (such as declining health, confusion about themselves, lack of public understanding) make senior citizens a special educational group.

This study attempted to specify many of the misconceptions, to define who the aged actually are, and to identify some of this group's greatest problems. A review of the literature indicated that to better serve the elderly we must recognize and meet this group's needs, primarily through education. Eklund (1969, p. 350) concluded that "Education is, in fact, implicated in every problem of the aging. The question today is the degree to which the educational hierarchy is willing to commit resources to solutions."

Older people should be helped and served through education by whatever philosophy and method works best. These aged people deserve to be helped and society can reap benefits from them. This ever-increasing segment of society represents a growing resource whose potential is too precious to be neglected or ignored.

Leadership and administration in a senior citizen home requires special personal attitudes which should be brought to the situation or be learned if the home wants to offer real opportunities toward meaningful later years. Maxwell (1962) thought these attitudes to be:

1. Warmth of personality, friendliness, the acceptance of people as they are, the capacity to continue to extend these qualities despite negative or small response.
2. A liking for old people which, if it is genuine, is rooted in a feeling for and with them.
3. Security and maturity, encouraging others to take the limelight and credit, willingness to accept criticism or blame, to admit lack of knowledge, or mistakes, ability to be relaxed and easy, yet stimulating.

4. Ability to be fair, to maintain justice and equal opportunity for all, willingness to explain a situation until it is understood and at least tacitly accepted.
5. Preparedness for continuity of service, promptness, and faithfulness in attendance.
6. Sympathetic concern and helpfulness, tact and sensitivity, evidence of respect for mature capacities.
7. Respect for the individual older person and his culture, with appreciation for differences.
8. Willingness to try new ideas, but not impose them, and to offer choices (p. 40).

## CHAPTER III

### METHODOLOGY

The purpose of this study was to determine if the educational programs which are currently provided for senior citizens at homes for the aged in Oklahoma are meeting their educational needs. This chapter describes the general procedures used in this investigation. This review of methodology section has been divided into five sections: (1) design of the study, (2) population and sample, (3) research instruments, (4) data collection, and (5) data analysis.

#### Design of the Study

Descriptive statistics were the most appropriate techniques for gathering the required information for this study. As Gay (1981) indicated, a descriptive study determines and reports the way things are. Van Dalen (1966) indicated that there are three types of information which could be obtained by using descriptive survey: (1) data concerning existing status, (2) comparisons of status and standards, and (3) means of improving status. Descriptive research gathers information which can help to improve the existing situation, and could establish the foundation for future research in a developing area.

#### Population and Sample

According to the Oklahoma Department of Human Services, Division of

Service for the Aging, there are more than 200 places with retirement housing facilities for the aged in Oklahoma. Seventy Oklahoma homes for the aged were randomly selected for purposes of this study. Twenty-eight of these homes offered educational programs and were thus eligible for further consideration in this study. The sample for this study consisted of 100 aged residents in 28 homes for the aged in Oklahoma. Questionnaires were sent to the 100 residents, as well as to 36 administrators and teachers/staff in the 28 selected homes. Since the residents' questionnaires were given to administrators to distribute, the possibility existed that some respondents experienced a degree of intimidation. This possibility, however, was discounted as a major concern of the research. The findings and conclusions of this study should have implications for similar groups of the aged in Oklahoma. The knowledge regarding the aged and their educational programs that are provided for the elderly provided depth and insight to the analysis.

### Research Instruments

Two instruments were developed to facilitate the collection of data from residents and the administrators and teachers/staff for the 28 homes. These instruments were as follows:

1. Instrument A, a questionnaire that provides an accurate description of the administrators and teachers/staff studied. This is believed to be necessary since the literature pointed out important information which must be known about the characteristics of the institutions, their administrators, and residents (Appendix A).

2. Instrument B, a ranking Likert-type scale, which includes a series of items to which the subject responds. The respondent indicated his or her agreement or disagreement with each item. The Likert

technique produced an ordinal scale that generally requires nonparametric statistics. This questionnaire was submitted to the residents of the homes for the aged in Oklahoma (Appendix B).

#### Validity of Instrument

Wiersma (1975, p. 171) defined validity as ". . . the extent to which a test measures what it is supposed to measure." Gay (1981) indicated that validity is the most important quality of any test.

There are two basic approaches to determine validity. The first, used in this study, is content validity, which refers to how well the test items represent the total content of that which is being measured. Gay (1981) noted that there is no formula that computes content validity and there is no way to express it quantitatively. It should be determined by expert judgment.

The validity of the questionnaire was established by having it reviewed prior to mailing by two professors of gerontology, two administrators of nursing homes, and two senior citizens. These reviewers examined the instrument and suggested helpful alterations and the establishment of content validity.

#### Reliability of the Instrument

Reliability is an important concept of measurement. Wiersma (1975, p. 167) stated that ". . . it means consistency--consistency of the test in measuring whatever it does measure." There are different ways for estimating the reliability of a test. For every test, only one method is used, depending upon conditions of the test administration. The three procedures that Gay (1981) suggested are:

1. Administer the test to a group.

2. After a period of time (two weeks), administer the test to the same group again.

3. Correlate the two sets of answers.

In this study, the test-retest method was applied. This involved administering the same test (Instrument B) to a group (13) of senior citizens and to two teacher/staff members in one of the homes available in Stillwater, Oklahoma, and after an intervening time period, repeating the test.

The researcher discovered some members of the group who had different responses, but none of them had changed his/her basic position. There were two persons who did not participate in the second run of the questionnaire because of health problems. The two teacher/staff members also reviewed Instrument A for administrators and teachers/staff.

#### Data Collection

The following procedures were utilized in data collection for this study:

1. The selection of respondents was accomplished as follows:

Homes for the aged were randomly chosen and a number assigned to each of them, as they were listed in the 1985 Housing Directory for Older Oklahomans (1984). The only requirement was that selected homes should have more than 20 residents, for it was the researcher's belief that more residents at homes ensured their having educational programs.

2. The questionnaires (Appendixes A and B), a cover letter (Appendix C), and a stamped, return addressed envelope were mailed to the 70 administrators of the homes selected during the first week of February, 1986. Each questionnaire was coded to identify nonrespondents. Two weeks after the initial mailing, follow-up telephone calls were made for

those who had not returned the questionnaires. Another questionnaire and a return addressed envelope were sent to those who said they had not received the first one.

### Analyses of Data

Descriptive statistics were used in the analyses of data from the 28 homes for the aged whose administrators and residents completed the questionnaires. The final number of respondents totaled 100 senior citizens and 36 administrators and teacher/staff members. The total number of residents ranged from 29 to 292 for the homes which returned the questionnaire.

The data collected for the study were coded and transferred to a statistical computer program (Micro Crunch), produced by Softex Micro Systems, Houston, Texas. The computed results were analyzed according to the objectives of the study. The data were analyzed by means of frequency distribution. Distributions were obtained in terms of both numbers and percentages. Tables were constructed to illustrate information collected from the questionnaire. Cross tabulations were constructed to show the correlation between some of the variables. All of the responses were combined to develop the findings and conclusions for the study regarding the educational programs offered by samples of Oklahoma's institutions for the aged.



## CHAPTER IV

### PRESENTATION AND ANALYSES OF DATA

This study was designed to respond to five research questions: (1) what are the characteristics of the residents of the homes for the aged in Oklahoma?; (2) what are the educational needs of the residents of homes for the aged in Oklahoma, as perceived by residents, administrators, and teacher/staff members?; (3) what programs are currently available to the residents of homes for the aged in Oklahoma?; (4) how effectively are those programs being implemented?; and (5) what are ways in which the educational needs of residents of homes for the aged in Oklahoma could be better served?

The research questions for this study were:

1. Research Question 1. What are the characteristics of the residents of homes for the aged in Oklahoma? Demographic data describing senior citizens at senior citizen homes in Oklahoma may be found in Table VI. Of the 100 respondents, 91 (91%) were female, and 9 (9%) were male. The five age groups ranged from 55-59 to 75 and over, with 5% being 55-59, 9% being 60-64, 13% being 65-69, 25% being 70-74, and 48% being 75 years of age and older. Marital status revealed that 11% were married and 86% were single (three responses were missing). Concerning occupation, 30% were professionals, 13% were skilled, 15% were housewives/mothers/wives, 10% were a combination, and 29% were "other" occupations (three missing values).

TABLE VI  
DEMOGRAPHIC DATA DESCRIBING RESPONDENTS

Variable	Frequency	Percentage
<u>Sex</u>		
Female	91	91
Male	9	9
<u>Age</u>		
55-59	5	5
60-64	9	9
65-69	13	13
70-74	25	25
75 +	48	48
<u>Marital Status*</u>		
Married	11	11
Single	86	86
<u>Occupation*</u>		
Professional	30	30
Skilled	13	13
Housewife/Mother/Wife	15	15
Combination	10	10
Other	29	29
<u>Education</u>		
1-6 Years	3	3
7-8 Years	11	11
9-12 Years	50	50
Two+ Years of College	36	36
<u>Mode of Transportation**</u>		
Taxi	1	1
Public Transportation	1	1
Friends/Relatives	23	23
Combination	35	35
Other	39	39

\*There were three missing responses in this category.

\*\*There was one missing response in this category.

With regard to educational level, 3% of the respondents had educational levels of six years, 11% had completed 7-8 years of education, 50% had completed 9-12 years, and 36% had finished two or more years of college.

When asked about mode of transportation within town, 1% reported that they used taxis, 1% used public transportation, 23% depended upon friends or relatives, 35% used a combination, and 39% used other ways (such as their own car, the home's van, church bus, etc.). (There was one response missing from this category.)

In Table VII, the degrees of satisfaction of senior citizens living in these homes is displayed. From the average of responses for questions 8-11 and 50, it can be seen that 86.4% of the residents were satisfied, 3.8% were not, and 7.8% gave agree/disagree as their answers to the questions.

TABLE VII  
SATISFACTION WITH LIFE IN A SENIOR CITIZEN HOME

Question	Agree	A/D	Disagree
I am interested in living in the home.	95	3	2
I really feel part of this home.	92	5	3
I can say what I think here.	85	9	6
I feel that I am doing something worthwhile at this home.	72	18	6
I am really proud of being a part of this home.	88	4	2
Average Percentages	86.4	7.8	3.8

## Cross Tabulations

### Education by Age

Table XIV (Appendix D) presents the cross tabulation of the education by age of the senior citizens at homes for the aged in Oklahoma. Of the respondents completing from one to six grades of education, there was 1 (33.3%) in the aged 65-69 group, 1 (33.3%) in the 70-74 group, and 1 (33.3%) in the group aged 75 and over. In the education group of seven to eight years of education, there was 1 (9.0%) in the 56-59 age group, 1 (9.0%) in the 65-69 age group, 2 (18.0%) in the 70-74 age group, and 7 (63.0%) in the group aged 75 and over. In the education group of 9-12 years of education, there were 3 (6.0%) in the 55-59 age group, 7 (14.0%) in the 60-64 age group, 9 (18.0%) in the 65-69 age group, 18 (36.0%) in the 70-74 age group, and 13 (26.0%) in the group aged 75 and over. In the education group of two or more years of college, there was 1 (2.7%) in the 55-59 age group, 2 (5.5%) in the 60-64 age group, 2 (5.5%) in the 65-69 age group, 4 (11.0%) in the 70-74 age group, and 27 (75.0%) in the group aged 75 and over.

Table XV (Appendix D) presents a cross tabulation of education groups with the leisure time activity of reading. Only two (67.0%) people with education of between one and six years preferred to read in their leisure time. This number changed to seven (64.0%) for the group who had completed between seven and eight years of education. In the 9 to 12 years of education group, there were 36 (72.0%), and 27 (75.0%) persons enjoyed reading in their leisure time in the two or more years of college group. Tables VIII and IX display the elderly's educational backgrounds, their ages, and their attitudes toward education.

TABLE VIII  
EDUCATION BACKGROUND/ATTITUDE TOWARD EDUCATION

Question	Agree			
	1-6	7-8	9-12	2+ Years
I like to read in my leisure time.	2	7	36	27
I am interested in continued educational study.	2	3	21	26
I enjoy being part of an educational group/home.	2	3	17	19
Educational programs are a necessity at senior citizen's homes.	2	6	23	24
The more I attend educational programs, the more benefit I get.	2	5	17	22
I would advise my friends to attend educational programs at this home.	2	5	17	21

TABLE IX  
AGE/ATTITUDE TOWARD EDUCATION

Question	Agree				
	55-54	60-64	65-69	70-74	75+
I like to read in my leisure time.	4	3	8	22	35
I am interested in continued educational study.	2	4	5	13	28
I enjoy being part of an educational group/home.	2	4	5	7	23
Educational programs are a necessity at senior citizen homes.	3	3	7	12	30
The more I attend educational programs, the more benefit I get.	4	2	5	9	26
I would advise my friends to attend programs at this home.	3	4	5	11	22

Research Question 2. What are the educational needs of the residents of the homes for the aged in Oklahoma, as perceived by residents, teachers/staff, and administrators? Senior citizens were asked to rank the need for educational programs/opportunities about health (health conditions, nutrition, health insurance, health care/self-health care, weight control, medicine purchases), finance (financial planning/taxes, social security benefits, low-cost services), and housing and transportation. The rankings were designed with a range of five to one, with five being the highest and one the lowest. Results of the rankings showed that 64% of the older people felt a need for three kinds of programs (health, finance, and housing/transportation). Only 4% desired programs concerning health only, there were no requests for programs concerning finance, and none for programs concerning housing/transportation. There were 12% requests for programs concerning health and finance together, 6% for programs about health and housing/transportation, and only 2% for programs concerning finance and housing/transportation. (There were 12 missing responses).

When administrators and teachers/staff were asked about major educational needs of the senior citizens residing at their homes, answers reflected the following: 30.6% believed the major educational need was for health programs, 8.3% believed it to be finance, 13.9% believed that it was finance and housing/transportation, 5.6% believed it to be health and finance, and 22.2 percent thought the major need for educational programs was in the area of housing and transportation combined. (There were 19.4% missing responses.)

These conclusions were obtained by the administrators through direct contact with the residents (72.2%), their own experiences (5.6%), direct

contact and questionnaires (2.8%), and direct contact and experience (8.3%). (There were 11.1% missing responses.)

Research Question 3. What programs are currently available to the residents of homes for the aged in Oklahoma? Of 100 senior citizens who answered the questionnaire, 13% reported that they currently have programs concerning health, 2% said that they have programs concerning finance, 7% have programs concerning housing and transportation, 2% have programs about health and finance, 14% have programs about health and housing/transportation, 4% have programs about finance and housing/transportation, and 28% have programs concerning health, finance, and housing/transportation combined. (There were 30% missing responses.)

When the senior citizens were asked about educational opportunities provided at home, only 48% agreed that there were many of them. When the administrators and teachers/staff were asked about the availability of educational programs, 19.4% stated that they had programs concerning health, 25% had programs about general education (library, discussion groups, slide programs, etc.), 5.6% had programs about health and finance, 5.6% had programs about health and general education, 8.3% had programs about health, finance, and general education, and 16.7% had programs about religion, arts, and hobbies. (There were 19.4% missing responses.)

Of the administrators, 55.6% thought that the major purpose of their senior citizen educational programs was to enable them to cope better with daily life problems (health, finances) and social development (understanding self and others). Coping better with daily life/other as a purpose for their educational programs was reported by 3%. Basic or remedial education (intellectual development, general education, and academic studies) was given as a major purpose by 2% of the

administrators. Other purposes was reported by 2% and an additional 2% reported basic or remedial education, intellectual development, coping better with daily life problems, and social development as the major purpose of their educational programs for senior citizens. (There were 19.4% missing responses.)

When the administrators were asked about what learning methods have been used in the educational programs, 47.2% reported using the classroom method (short courses, classes, seminars, discussion groups, and lecture series), and the media method (educational television programs, radio programs, film series, demonstration), and field trips, visit, and tours. All of the alternatives given in question number 16 were used by 16.7%; 11.1% were using the classroom method, 5.6% were using media and the trips method, and 2.8% were using other ways. (There were 16.7% missing responses.)

Of the administrators, 66.7% reported that there were educational programs offered by outside groups, 30.6% reported that these programs were offered at the center (home), 27.8 reported the programs being offered at other locations, 8.3% reported the programs being offered at the home and at other locations, and 16.7% reported that there were no outside group programs available. (There were 16.7% missing responses.)

Regarding the program's contexts, 5.6% said that the program was about crafts, 5.6% about religion, and 16.7% reported it to be education. (There were 72.2% missing responses.)

When asked if any kind of assistance came from the community agencies, 44.4% of the administrators said yes, 30.6% said no, and 25% did not give any answer. Specifying any kind of help, 27.8% of them reported that they were provided with speakers from their community agencies, 2.8%



were provided with media and trips, and 8.3% were provided with both kinds of help. (There were 61.6% missing responses.)

Research Question 4. How effectively are those programs being implemented? The answers from the senior citizens noted their attitudes are displayed in Table X.

TABLE X  
EFFECTIVENESS OF EDUCATIONAL PROGRAMS IN  
SENIOR CITIZEN HOMES

Question	Agree	A/D	Disagree	Missing
Materials for educational programs are provided.	36	13	26	25
Equipment for educational programs are provided.	29	17	27	27
I'm satisfied with educational programs.	47	9	23	21
More effort should be provided to improve educational programs.	38	19	17	26
More opportunities for education could be offered at the home.	36	20	20	24
I would advise my friends to attend educational programs at this home.	45	22	13	20
Average Percentages	38.5	16.7	21.0	23.8

Regarding the effectiveness of the educational programs at their homes, 36% of the residents agreed that materials were provided for educational programs, although 26% disagreed, 13% answered agree/disagree, and 25% did not answer the question. When asked about equipment for

educational programs, 29% agreed that it was provided at their homes, 27% disagreed, 17% answered agree/disagree, and 27% gave no answer. The satisfaction with educational programs varied: 47% were satisfied, 23% were not satisfied, 9% agreed/disagreed, and 21% gave no answer.

Of the senior citizens, 38% thought that more effort should be provided to improve educational programs, 17% disagreed, 19% agreed/disagreed, and 26% gave no answer. In responding to the question about whether more opportunities for educational programs could be offered at the home, 36% agreed, 20% disagreed, 20% agreed/disagreed, and 24% gave no answer. When the elderly people were asked if they would advise their friends to attend educational programs offered by the homes, 45% agreed, 13% disagreed, 22% agreed/disagreed, and 20% gave no answer.

Administrators and teachers/staff were asked about the effectiveness of their educational programs. In response, 19.4% thought that they were excellent, 30.6% reported them to be good, 19.4% said that they were poor, 13.9% gave other comments, and 16.7% gave no answer. Those administrators and teachers/staff were asked if adequate space to offer educational programs was provided, and 97.2% of them said yes, while 2.8% said no. Regarding equipment adequacy, 55.6% of the same group said that it was adequate, 41.7% said that it was not, and 2.8% gave no answer.

From the point of view of administrators and teachers/staff, the main obstacles to the implementation of effective educational programs for senior citizens were as follows: 5.6% thought that the obstacles were shortages (funds and trained staff), 27.8% thought the problem to be inadequacy (inadequate supportive services, locating audiences, lack of interest on the part of older people, inadequate educational materials for age groups, and inadequate facilities), 5.6% chose other problems for their answer, 41.7% thought that shortages and inadequacy together were

the main obstacles, 5.6% thought that the obstacles were inadequacies and "other," 2.8% said that the problems were shortages, inadequacies, and "other," and 11.1% gave no answer.

Research Question 5. What are ways in which the educational needs of residents of homes for the aged in Oklahoma could be better served? Senior citizens were asked several questions involving ways their educational needs could be better served. As can be seen in Table XI, 38% of the senior citizens agreed that more effort should be provided to improve the educational programs they had, 17% disagreed, while 19% agreed/disagreed and 26% gave no answer.

TABLE XI  
WAYS TO BETTER SERVE EDUCATIONAL NEEDS OF  
SENIOR CITIZENS

Question	Agree	A/D	Disagree	Missing
More effort should be provided to improve educational programs.	38	19	17	26
More opportunities for education could be offered at the home.	36	20	20	24
More professional educators should be employed.	27	19	39	25
Educational programs should concentrate on reading.	35	25	23	17
Educational programs should concentrate on consumer education.	38	25	17	20
Educational programs should concentrate on understanding others.	67	10	8	15
Educational programs should concentrate on general education.	52	19	10	19

When asked if more opportunities should be given for education, 36% agreed, 20% disagreed, 20% agreed/disagreed, and 24% gave no answer. Regarding the employment of more professional educators, 27% of the older people agreed, 39% disagreed, 19% agreed/disagreed, and 25% gave no answer. When asked if educational programs should concentrate on reading, 35% agreed, 23% disagreed, 25% agreed/disagreed, and 17% gave no answer. An educational program concentrating on consumer education had 38% agree answers, 17% disagree, 25% agree/disagree, and 20% who gave no answer. The topic of understanding others as an educational program was agreeable to 67%, disagreeable to 8%, agreeable/disagreeable to 10%, with 15% giving no answer. General education (e.g., art appreciation, courses about other countries, music, literature, etc.) received 52% agree answers, 10% disagree answers, 19% agree/disagree answers, and no answer by 19%.

In responding to the question concerning when the senior citizens preferred educational programs to be held, 16% said that they preferred mornings, 49% preferred them to be offered in the afternoons, 14% preferred the evenings, 1% responded with both afternoons and evenings, and 10% did not answer the question.

When the administrators and teachers/staff were asked for recommendations to improve the educational programs offered to senior citizens at their homes, 19.4% said none, 13.9% said new methods and new topics should be used, 22.2% thought that present programs should be modified, 2.5% said that both new methods and modifying present programs should be tried, and 41.7% gave no answer.

Responding to areas which require new or increased educational programs, 2.8% said that it was education only; 5.6% noted finance (supplemental income and consumer education); 16.7% said health and recreation (health-related subjects, nutrition and avocational and recreational

subjects); 2.8% thought both education and finance; 22.2% said finance, health, and recreation together; 33.3% answered all areas combined (education, finance, and health); and 16.7% of the administrators and teachers/staff gave no answer for this question.

It appears that the senior citizen attitudes toward teachers (any member of the staff who help with educational programs offered by the home) and toward administrators were positive. Tables XII and XIII present these figures.

TABLE XII  
SENIOR CITIZEN ATTITUDES TOWARD TEACHERS

Question	Agree	A/D	Disagree	Missing
Teachers at this home give credit to good ideas and praise good work.	54	7	11	28
Teachers at this home try to get our ideas and suggestions.	54	10	10	26
Teachers at this home get us to work as a team.	51	9	9	31
Teachers at this home understand and sympathize with our special problems.	59	11	8	22
Teachers at this home have good personalities.	67	5	7	21
Average Percentages	57.0	8.4	9.0	25.6

TABLE XIII  
SENIOR CITIZEN ATTITUDES TOWARD ADMINISTRATORS

Question	Agree	A/D	Disagree	Missing
The administrator does everything he/she can to provide us with educational opportunities.	52	12	8	28
The administrator gets everyone working together as a team.	44	15	11	30
The administrator does everything he/she can to make us happy.	80	7	2	11
Average Percentages	58.7	6.0	52.0	25.0
The administrator ignores our suggestions and/or our complaints.	17	6	52	25
The administrator has an inadequate way of handling residents' complaints	22	7	49	22
Average Percentages	19.5	6.5	50.5	23.5

### Summary

Chapter IV has presented data gained from the respondents (senior citizens and the administrators and teachers/staff of senior citizen homes in Oklahoma), as well as analyses of these data in accordance with the research questions. Descriptive statistical procedures were used in the analyses. Chapter V will present the findings, conclusions, and recommendations of the study.

## CHAPTER V

### FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

#### Introduction

The purpose of this study was to respond to five research questions: (1) what are the characteristics of the residents of homes for the aged in Oklahoma?; (2) what are the educational needs of the residents of homes for the aged in Oklahoma as perceived by residents, teachers, and administrators?; (3) what programs are currently available to the residents of homes for the aged in Oklahoma?; (4) how effectively are those programs being implemented?; and (5) what are ways in which the educational needs of residents of homes for the aged in Oklahoma could be better served?

Most of the literature used 65 years of age as the definition of "old." In the researcher's opinion, chronological age can be a poor criterion of aging. There are many categories which should be taken into account when determining the quality of being old. Some of these are: the individual himself (does the person feel old?); efficiency (does he/she still function?); and interest and enjoyment in job and life.

After observation of a senior citizen's home (Roxie Webber Plaza, Stillwater, Oklahoma), several nursing homes (Stillwater Nursing Home, Westhaven Nursing Home, and Rosewood Nursing Home), and a senior citizen center, the researcher found that the age of residents varied from the 50's to more than 100 years of age. For the questionnaire, it was

decided to begin the range from the age of 55 in order to include more people in senior citizen homes. The intent of the study was to gain more ideas about the educational needs for the residents in Oklahoma homes for the aged. The majority (86%) of the sample, however, was 65 years and over; only 14% of the respondents were between 55 and 65 years of age.

### Findings

In answering the research questions of this study, many resources have been used: reviewing the literature; visiting many of the Oklahoma places for the elderly; and spending time talking with senior citizens, staff, and family of those in homes; attending seminars about aging; and visiting churches with senior citizen programs. All of this input was used, in addition to the answers from the research questionnaires. Data reported in the survey closely corresponded to the findings in the literature. Most of the older people at senior citizen homes were female (91%), which was expected, since women outlive men. The largest age representation was in the 75 years of age and over (48%) group. The majority (86%) were single, while only 36% had education above the high school level.

A review of the findings about older people's educational needs revealed that they felt the need for educational programs concerning daily life affairs. While 64% stated that they needed programs about health, finance, and housing and/or transportation, 45% of the administrators returned the questionnaires and stated that they could not answer because they were not being offered any educational programs. They added that they were offered shelter and food, as if this were all that the elderly required. Only 8.3% of the homes offered programs about health, finance, and general education.



While the number of elderly is large and increasing, older people participate in fewer educational programs than any other age group. As answered by administrators and teacher/staff members, 72% reported that one of the main obstacles to implementing effective educational programs to senior citizens was the lack of interest on the part of older people. However, 22% of the older people stated that the opportunities which were offered by the homes did not meet their needs. In addition to lack of motivation, the gap between what these older people wanted and what they have is as great today as it has ever been. Closing this gap should be a matter of concern to policy makers in education.

When the administrators were asked about their recommendations to improve their educational programs, nearly one-fourth of the group (22.2%) stated that they were considering modification of their present programs. Some of the improvements being considered were new methods, new topics, or modification of the present programs.

Participation in educational programs was also related to prior education. From this survey it was found that the more educated the respondents, the more programs they desired. More than 70% of the group having two or more years of college agreed that they were interested in continuing education. Sixty-seven percent said that they thought educational programs were a necessity at senior citizen homes, and 61% of the same group said that the more they attended educational programs, the more benefit they received. Meanwhile, the researcher found that percentages from other groups (with less than two years of college education) were much below that level (Appendix D).

When asked if they liked to read in their leisure time, 72% of the sample stated that they enjoyed reading. Also, 71% said that they liked to watch television, and 41% said that they enjoyed being part of an

educational group in their leisure time. These percentages showed that older people would like to increase their knowledge if they have the opportunity and freedom to do so.

A review of the findings dealing with the educational level held by the administrators and teacher/staff members showed that 19.4% had only high school degrees, 33.3% had associate degrees, 30.6% had bachelor's degrees, and only 13.9% had graduate degrees. When asked about their professional experience, it was found that 38.9% had direct experience with older people's affairs, 36.1% had related experience, and 16.7% noted that their professional experience was not related (8.3%--3 persons--did not answer the question).

Comments made by both the senior citizens and the administrators and teacher/staff members may be found in Appendix E. Both groups agreed that more efforts should be made and educational programs should be offered, in spite of all the obstacles and barriers that currently exist.

### Conclusions

It was appropriate to reach the following conclusions, based on the findings of this study:

1. A major barrier to educational programs is the lack of needs assessment for the elderly, making it difficult to determine programming needs.
2. Most policy makers evaluate elderly programs from a cost and benefit standpoint. The argument which often is heard is, why should society pay for the older person's education when the elderly are not going to live long enough to benefit or repay society? The question is not asked about the purposes education could serve for older people and

the benefits of these programs in meeting the basic needs of the elderly and in fostering effective participation in society.

3. There is a conveyed notion that all older people are similar in their needs and interests. However, the opposite is true, because as people age they become more and more individualized and greater differences are evident. These differences are a complicated problem for educational planners. The older that people become, the more varied programs they need. Such multiple programs are expensive and thus more difficult to obtain.

4. Administrators and teachers/staff need educational programs to educate them how to better treat the elderly and how to react to their needs. Since the educational level of the staff is low, this fact could help to explain the lack of educational programs at senior citizen homes.

### Recommendations

Recommendations based on the findings and conclusions of this study are as follows:

#### Recommendations for Policy Change

In general, older people are not involved in forming educational policy, designing programs, or helping as teachers, which lowers the rate of participation by the elderly. To solve this problem, the elderly should be involved more in educational planning and in teaching. Elderly teachers should be recruited.

It is probable that older people do not need another diploma. It is known that long reading assignments and long lectures or examinations are not conducive to learning. More informal and comfortable arrangements,

such as short classes or lectures, discussion groups, slides programs, or short films, are the most recommended methods of educating older people.

Transportation is a major concern for the elderly. When classes are scattered throughout the community (churches, halls, or other homes), there is less response. The more programs are provided at the homes, the greater the attendance. When this is not possible, the home should provide transportation.

Timing is another barrier to participation. As this study indicated, most (49%) of the aged do prefer to have educational programs in the afternoons, while 26% like to have programs in the mornings, and 14% in the evenings.

The goal of any educational program should be clear to the learners. Unless a person can answer the question, "What am I going to get out of this program?" the effort to participate will not be made. Also, the importance of the program should be evaluated in relationship to others. Education for the elderly should serve their basic needs and foster their participation in society.

Senior citizens feel healthier and happier when they are engaged in meaningful activities or volunteer work. Studies have proved that volunteers are better off socially, emotionally, and physically than those who do not volunteer. Volunteers were less lonely, and believed that their help was vital to the well-being of others. In 1981, the organized world of older volunteers was estimated to be 36 billion annually. In Stillwater, Oklahoma, there are many seniors who volunteer in programs such as the Arts and Humanities Council, Stillwater Medical Center, the public schools, the public library, and various religious organizations. If those senior volunteers took the day off, the city would feel the effect. Therefore, it is highly recommended to policy makers and senior citizen

home administrators that they consider the volunteer work of the elderly when planning and involving those volunteers in educational programs.

### Recommendations for Future Research

The following recommendations for future research were based on this study:

1. To establish fulfilling and enriching programs, research should be done to determine who volunteers, why, how much, where they serve, why they volunteer, and why they stop (men are more likely to volunteer for recreational and work-related activities, while women choose health, educational, or religious activities). Such research should be done to establish an effective way of recruiting older volunteers.

2. In other countries, there are few educational programs which are offered to and concentrate on older citizens. In the researcher's home country, Libya, there is no such thing as volunteering in public schools or hospitals or any other community services, because most of the senior citizens are illiterate. Hopefully, proposals for research in this and related areas can be presented to policy makers, education planners, and administrators of senior citizen homes in Libya--although there is a small number of them--to reap as much benefit as possible from the experiences of the elderly in the United States.

3. More research should be done to anticipate older people's educational needs, to determine the best programs to meet those needs, and to help the elderly continue to grow. In doing so, older persons will have substantial benefits, but the final results will benefit society as a whole.

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## APPENDIXES

APPENDIX A

QUESTIONNAIRE FOR ADMINISTRATORS AND TEACHERS/  
STAFF OF SENIOR CITIZEN HOMES

A Needs Assessment of Educational Programs  
at Senior Citizen Homes in Oklahoma

Questionnaire for Administrators and Teachers/Staff

Please read each question and provide a response.

1. Name \_\_\_\_\_
2. Position \_\_\_\_\_
3. Institution \_\_\_\_\_
4. Highest Academic Degree \_\_\_\_\_  
Professional Experiences \_\_\_\_\_  
\_\_\_\_\_
5. Number of persons who reside in the home \_\_\_\_\_
6. Does your home offer residents any of the following types of activities?  

	<u>% of Residents Who Currently Participate</u>
Educational? _____	_____
Recreational? _____	_____
Social? _____	_____
Other? _____	_____
7. What would you identify as the major educational needs of the senior citizens who are residents of your home?  
 \_\_\_\_\_  
 \_\_\_\_\_
8. How do you determine these needs?  
 \_\_\_\_\_  
 \_\_\_\_\_
9. What educational programs are currently available at your institution for its residents?  
 \_\_\_\_\_  
 \_\_\_\_\_

10. In your opinion, how effectively are these educational programs being implemented?

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11. What recommendations for improvement of these educational programs would you make?

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12. Does the home have adequate space to offer educational programs?

Yes \_\_\_\_\_ No \_\_\_\_\_

13. Does the home have adequate equipment to offer educational programs?

Yes \_\_\_\_\_ No \_\_\_\_\_

14. What is the primary source of funding for the home?

Public support \_\_\_\_\_ Private support \_\_\_\_\_

15. What is the major purpose of the educational programs that are offered at your institution?

☐ Basic or remedial education: reading, math, citizenship  
☐ Intellectual development, general education, academic studies  
☐ Coping better with daily life problems: health, finances  
☐ Social development: understanding self and others  
☐ Other (please specify) \_\_\_\_\_

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16. Check the learning method(s) which have been used in your educational programs:

☐ Short courses, classes, seminars  
☐ Discussion groups  
☐ Lecture series  
☐ Educational television programs  
☐ Radio programs  
☐ Film series, demonstrations  
☐ Field trips, visits, tours  
☐ Other (please specify) \_\_\_\_\_

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17. Are educational programs, administered by outside groups, available to your residents within the home or at some other location(s)? If so, please describe.

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18. Do your educational programs receive any kind of help from other community agencies? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please specify the form of assistance.

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19. What are the main obstacles to implement effective educational programs for the senior citizens in your home?

☐ Shortage of financial resources  
☐ Cost of programs to potential participants  
☐ Shortage of trained staff  
☐ Inadequate supportive services  
☐ Locating or contacting audience  
☐ Lack of interest on the part of older people  
☐ Inadequate educational materials for age group  
☐ Inadequate facilities  
☐ Other (please specify) \_\_\_\_\_

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20. Which areas do you think require new or increased educational programs?

☐ Basic education, literacy  
☐ Supplemental income  
☐ Health-related subject, nutrition  
☐ Consumer education  
☐ Avocational and recreational subjects  
☐ Other (please specify) \_\_\_\_\_

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Please add any comments regarding the education of older adults or the educational programs at your institution that you would like to make. Thank you for your help with this research study.

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APPENDIX B

QUESTIONNAIRE FOR RESIDENTS OF SENIOR  
CITIZEN HOMES

A Needs Assessment of Educational Programs  
at Senior Citizen Homes in Oklahoma

Questionnaire for Residents of Senior  
Citizen Homes

Please read each question and provide a response.

1. Name \_\_\_\_\_ (optional)
2. Age: 55-59 \_\_\_\_\_ 60-64 \_\_\_\_\_ 65-69 \_\_\_\_\_ 70-74 \_\_\_\_\_ Over 75 \_\_\_\_\_
3. Sex: Male \_\_\_\_\_ Female \_\_\_\_\_
4. Current marital status: Married \_\_\_\_\_ Single \_\_\_\_\_
5. What was (is) the nature of your occupation?  
Professional \_\_\_\_\_ Skilled \_\_\_\_\_ Home mother \_\_\_\_\_  
Other (please specify) \_\_\_\_\_
6. What was the highest grade you completed at school?  
None \_\_\_\_\_ 1-6 \_\_\_\_\_ 7-8 \_\_\_\_\_ 9-12 \_\_\_\_\_  
Two or more years of college \_\_\_\_\_
7. How do you get from place to place in town?  
Taxi \_\_\_\_\_ Public Transportation \_\_\_\_\_ Friend or relative \_\_\_\_\_  
Other (please specify) \_\_\_\_\_

Please circle the number that best shows how much you agree or disagree with the following statements:

Strongly Agree 5	Agree 4	Agree as Much as Disagree 3	Disagree 2	Strongly Disagree 1
8. I am interested in living in this home.	5	4	3	2 1
9. I really feel part of this home.	5	4	3	2 1
10. I can say what I think here.	5	4	3	2 1
11. I feel that I am doing something worth- while at this home.	5	4	3	2 1
12. The staff here is friendly and helpful.	5	4	3	2 1

13. The staff provides us with all of our necessities.	5	4	3	2	1
14. Everybody working at the home tries to do his/her best.	5	4	3	2	1
15. I am interested in participating in the home's activities.	5	4	3	2	1
16. I like to watch television in my leisure time.	5	4	3	2	1
17. I like to read in my leisure time.	5	4	3	2	1
18. I am interested in continued educational study.	5	4	3	2	1
19. I enjoy being a part of an educational group in this home.	5	4	3	2	1
20. Educational programs are a necessity at senior citizen homes.	5	4	3	2	1
21. There are plenty of good educational opportunities here for those who are looking for them.	5	4	3	2	1
22. Materials for educational programs are provided here at the home.	5	4	3	2	1
23. Equipment for educational programs are provided here at the home.	5	4	3	2	1
24. I am satisfied with the educational programs provided by the home.	5	4	3	2	1
25. More effort should be provided to improve those educational programs.	5	4	3	2	1
26. The more I attend educational programs, the more benefit I get from them.	5	4	3	2	1
27. More opportunities for education could be offered here at the home.	5	4	3	2	1
28. The opportunities that are offered here do not meet my needs.	5	4	3	2	1
29. More professional educators should be employed by the home.	5	4	3	2	1
30. I have had opportunities to use my strengths and abilities at this home.	5	4	3	2	1

31. I would advise my friends to attend educational programs at this home. 5 4 3 2 1
32. Educational programs should concentrate on reading. 5 4 3 2 1
33. Educational programs should concentrate on consumer education. 5 4 3 2 1
34. Educational programs should concentrate on understanding others. 5 4 3 2 1
35. Educational programs should concentrate on general education (e.g., art appreciation, courses about other countries, music, literature, etc.) 5 4 3 2 1
36. My health worries me a lot. 5 4 3 2 1
37. We need educational programs/opportunities to be offered by the home about:
- a. Health conditions 5 4 3 2 1
  - b. Nutrition 5 4 3 2 1
  - c. Health insurance 5 4 3 2 1
  - d. Health care, self-health care 5 4 3 2 1
  - e. Weight control 5 4 3 2 1
  - f. Medicine purchase 5 4 3 2 1
  - g. Financial planning, taxes 5 4 3 2 1
  - h. Social security, other benefits 5 4 3 2 1
  - i. Low cost services 5 4 3 2 1
  - j. Housing 5 4 3 2 1
  - k. Transportation 5 4 3 2 1
38. Which of the above programs are currently offered in your home?  
(Please circle appropriate letter.)
- a   b   c   d   e   f   g   h   i   j   k
39. I prefer meetings/programs that are held during the (please circle one):

Mornings

Afternoons

Evenings

Note: In questions 40 through 44, "teacher" means any member of the staff who helps with educational programs offered by the senior citizen home.

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 40. Teachers at this home give credit to good ideas and praise good work.                                  | 5 | 4 | 3 | 2 | 1 |
| 41. Teachers at this home try to get our ideas and suggestions.  | 5 | 4 | 3 | 2 | 1 |
| 42. Teachers at this home get us to work as a team.  | 5 | 4 | 3 | 2 | 1 |
| 43. Teachers at this home understand and sympathize with our special problems.                             | 5 | 4 | 3 | 2 | 1 |
| 44. Teachers at this home have good personalities.   | 5 | 4 | 3 | 2 | 1 |
| 45. The administrator of the home does everything he/she can to provide us with educational opportunities. | 5 | 4 | 3 | 2 | 1 |
| 46. The administrator here ignores our suggestions and/or our complaints.                                  | 5 | 4 | 3 | 2 | 1 |
| 47. The administrator here gets everyone working together as a team.                                       | 5 | 4 | 3 | 2 | 1 |
| 48. The administrator here has an inadequate way of handling residents' complaints.                        | 5 | 4 | 3 | 2 | 1 |
| 49. The administrator here does everything he/she can to make us happy.                                    | 5 | 4 | 3 | 2 | 1 |
| 50. I am really proud of being part of this home.  | 5 | 4 | 3 | 2 | 1 |

Please comment here on ways to improve educational programs offered by your home. Thank you for your cooperation and assistance.

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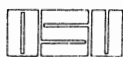
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## APPENDIX C

### CORRESPONDENCE



## *Oklahoma State University*

DEPARTMENT OF EDUCATIONAL ADMINISTRATION  
AND HIGHER EDUCATION

February 6, 1986

STILLWATER, OKLAHOMA 74078  
309 GUNDERSEN HALL  
(405) 624-7244

Dear

I am a doctoral student at Oklahoma State University, conducting research on educational programs currently offered at homes for the aged in Oklahoma.

Your institution was randomly selected for inclusion in this project. As an administrator who works with senior citizens, your participation is vitally important to the success of this study. Individual responses will be kept confidential. Numbers on the envelopes will help to identify nonrespondents for any necessary follow-up.

Enclosed you will find two types of questionnaires: one for you and your staff to complete regarding the institution, and another to be completed by residents of your home. Please invite five residents of your home to complete the form, possibly the first five alphabetically listed names. I would appreciate the return of all completed questionnaires by February 20, 1986.

I hope you and your staff will be willing to participate in the study, as it is essential to the research project. An abstract of findings resulting from questionnaire analyses will be available upon request.

Thank you for your help.

Sincerely,

Kadija Ali  
Doctoral Candidate  
Higher Education Administration  
Oklahoma State University  
(405) 372-8256

John J. Gardiner  
Director of Graduate Studies  
309 Gundersen Hall  
Oklahoma State University



APPENDIX D

CROSS TABULATION TABLES

TABLE XIV  
EDUCATION BY AGE

	1 55-59	2 60-64	3 65-69	4 70-74	5 75-over	6 missing
1 none						
2 1-6			1 7.7%	1 4.0%	1 2.1%	
3 7-8	1 20.0%		1 7.7%	2 8.0%	7 14.6%	
4 9-12	3 60.0%	7 77.8%	9 69.2%	18 72.0%	13 27.1%	
5 2yrs colleg	1 20.0%	2 22.2%	2 15.4%	4 16.0%	27 56.3%	
6 missing						
	5 100.0%	9 100.0%	13 100.0%	25 100.0%	48 100.0%	0 0.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XV  
EDUCATION BY DESIRE TO READ IN LEISURE TIME

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 none						
2 1-6			1 7.7%		2 4.4%	
3 7-8		1 14.3%	1 7.7%	2 7.4%	5 11.1%	2 28.6%
4 9-12	1 100.0%	3 42.9%	8 61.5%	11 40.7%	25 55.6%	2 28.6%
5 2yrs colleg		3 42.9%	3 23.1%	14 51.9%	13 28.9%	3 42.9%
6 missing						
	1 100.0%	7 100.0%	13 100.0%	27 100.0%	45 100.0%	7 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XVI  
EDUCATION BY INTEREST IN CONTINUED EDUCATION

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 none						
2 1-6		1 6.3%			2 7.1%	
3 7-8		2 12.5%	3 18.8%	2 8.3%	1 3.6%	3 27.3%
4 9-12	4 80.0%	10 62.5%	9 56.3%	8 33.3%	13 46.4%	6 54.5%
5 2yrs colleg	1 20.0%	3 18.8%	4 25.0%	14 58.3%	12 42.9%	2 18.2%
6 missing						
	5 100.0%	16 100.0%	16 100.0%	24 100.0%	28 100.0%	11 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XVII  
EDUCATION BY BEING A PART OF AN EDUCATIONAL GROUP

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 none						
2 1-6		1 9.1%			2 9.5%	
3 7-8			4 23.5%	2 10.0%	1 4.8%	4 17.4%
4 9-12	5 62.5%	7 63.6%	8 47.1%	9 45.0%	8 38.1%	13 56.5%
5 2yrs colleg	3 37.5%	3 27.3%	5 29.4%	9 45.0%	10 47.6%	6 26.1%
6 missing						
	8 100.0%	11 100.0%	17 100.0%	20 100.0%	21 100.0%	23 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XVIII  
EDUCATION BY EDUCATIONAL PROGRAMS ARE A NECESSITY

	1 Strongly d	2 disagree	3 Agree/disa	4 Agree	5 Strongly a	6 mising
1 none						
2 1-6		1 20.0%			2 5.6%	
3 7-8			2 11.8%	5 26.3%	1 2.8%	3 17.6%
4 9-12	5 83.3%	2 40.0%	9 52.9%	6 31.6%	17 47.2%	11 64.7%
5 2yrs colleg	1 16.7%	2 40.0%	6 35.3%	8 42.1%	16 44.4%	3 17.6%
6 missing						
	6 100.0%	5 100.0%	17 100.0%	19 100.0%	36 100.0%	17 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XIX  
EDUCATION BY MORE BENEFIT BY ATTENDING EDUCATIONAL PROGRAMS

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 none						
2 1-6			1 4.8%		2 8.3%	
3 7-8	1 33.3%		3 14.3%	5 22.7%		2 9.5%
4 9-12	2 66.7%	6 66.7%	12 57.1%	8 36.4%	9 37.5%	13 61.9%
5 2yrs colleg		3 33.3%	5 23.8%	9 40.9%	13 54.2%	6 28.6%
6 missing						
	3 100.0%	9 100.0%	21 100.0%	22 100.0%	24 100.0%	21 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XX  
AGE BY DESIRE TO READ IN LEISURE TIME

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 55-59	1 7.7%		3 11.1%	1 2.2%		
2 60-64		2 28.6%	3 23.1%	1 3.7%	2 4.4%	1 14.3%
3 65-69	1 100.0%	2 28.6%	2 15.4%	4 14.8%	4 8.9%	
4 70-74				2 7.4%	20 44.4%	3 42.9%
5 75-over		3 42.9%	7 53.8%	17 63.0%	18 40.0%	3 42.9%
6 missing						
	1 100.0%	7 100.0%	13 100.0%	27 100.0%	45 100.0%	7 100.0%
	Valid Cases = 100			Missing Cases = 0		



TABLE XXI  
AGE BY INTEREST IN CONTINUED EDUCATION

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 55-59			3 18.8%	2 8.3%		
2 60-64		2 12.5%	2 12.5%	3 12.5%	1 3.6%	1 9.1%
3 65-69	1 20.0%	5 31.3%	1 6.3%	3 12.5%	2 7.1%	1 9.1%
4 70-74	2 40.0%	3 18.8%	3 18.8%	3 12.5%	10 35.7%	4 36.4%
5 75-over	2 40.0%	6 37.5%	7 43.8%	13 54.2%	15 53.6%	5 45.5%
6 missing						
	5 100.0%	16 100.0%	16 100.0%	24 100.0%	28 100.0%	11 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XXII

AGE BY BEING A PART OF AN EDUCATIONAL GROUP

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 55-59	1	2	1	2	2	2
	5.9%	10.0%	8.7%	10.0%	9.5%	4.3%
2 60-64	2	2	2	2	2	1
	18.2%	11.8%	10.0%	9.5%	4.3%	4.3%
3 65-69	2	2	3	3	2	1
	25.0%	18.2%	17.6%	15.0%	9.5%	4.3%
4 70-74	3	3	3	2	5	9
	37.5%	27.3%	17.6%	10.0%	23.8%	39.1%
5 75-over	3	4	8	11	12	10
	37.5%	36.4%	47.1%	55.0%	57.1%	43.5%
6 missing	8	11	17	20	21	23
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XXIII  
AGE BY EDUCATIONAL PROGRAMS ARE A NECESSITY

	1 Strongly d disagree	2 Agree/disa	3 Agree	4 Strongly a	5 missing	6
1 55-59	1 5.9%	2 10.5%	1 2.8%	1 5.9%		
2 60-64	4 80.0%	2 11.8%	1 5.3%	2 5.6%		
3 65-69	1 16.7%	1 20.0%	2 11.8%	2 10.5%	5 13.9%	2 11.8%
4 70-74	2 33.3%		5 29.4%	2 10.5%	10 27.8%	6 35.3%
5 75-over	3 50.0%		7 41.2%	12 63.2%	18 50.0%	8 47.1%
6 missing						
	6 100.0%	5 100.0%	17 100.0%	19 100.0%	36 100.0%	17 100.0%
	Valid Cases = 100			Missing Cases = 0		

TABLE XXIV  
AGE BY MORE BENEFIT BY ATTENDING EDUCATIONAL PROGRAMS

	1 Strongly d	2 Disagree	3 Agree/disa	4 Agree	5 Strongly a	6 missing
1 55-59			1 4.8%	3 13.6%	1 4.2%	
2 60-64		4 44.4%	2 9.5%	1 4.5%	1 4.2%	1 4.8%
3 65-69	1 33.3%	1 11.1%	5 23.8%	2 9.1%	3 12.5%	1 4.8%
4 70-74		2 22.2%	6 28.6%	3 13.6%	6 25.0%	8 38.1%
5 75-over	2 66.7%	2 22.2%	7 33.3%	13 59.1%	13 54.2%	11 52.4%
6 missing						
	3 100.0%	9 100.0%	21 100.0%	22 100.0%	24 100.0%	21 100.0%
	Valid Cases = 100			Missing Cases = 0		

APPENDIX E

COMMENTS FROM SENIOR CITIZENS, ADMINISTRATORS,  
AND TEACHERS/STAFF

## COMMENTS FROM SENIOR CITIZENS

We have no educational programs. It would be nice if we did.

We have a good library.

I would like to see more educational programs here.

With the number of staff members and finances available, I believe additional programs are not advisable.

Courses on how to tutor or best help the uneducated adult and/or illiterate population as a service by volunteers.

Many have poor eyesight, poor memory, or poor health, and cannot take part in educational programs. We do not have time to do all we want to do.

We have many programs, some of which would appeal to each of us. However, not every program appeals to every resident because of individual interests, background, age, health, and experience.

Personally, I am not interested in educational programs.

Any suggestions are always considered by our staff. We have plenty of variety and encouragement. Come join us!

With my qualifications in four or five fields, I need more than schooling.

Educational programs are not a must with me. After working most of my life, I prefer more relaxing things to do, such as my hobbies.

The only thing I believe would be of benefit and attended would be sewing, alterations, and dress-making.

I do not consider this as a home. It is apartments for seniors.

Only a few would be interested in an educational program in a housing complex like this.

This is a senior citizen apartment; we have no teachers.

Do things now; not 'I'll be back.'

## COMMENTS FROM ADMINISTRATORS

Some would welcome educational opportunities.

Most senior citizens are not interested in educational programs. They would rather have social programs.

These senior citizen apartments are not the same as a nursing home. We do not plan parties, trips, or tours.

I feel we do have a need for more educational programs, but I also find that I have a hard time trying to get an audience.

Older people prefer a class/program less than one hour in length.

Some programs (i.e., fire safety, health, etc.) are more effective where presented in about three sessions in the evenings.

Continuing education and skill classes, on the other hand, need to be at a regularly scheduled time each week, in order to establish a routine.

Residents here are very receptive of persons other than staff who come to provide information/instruction.

Lack of persons available for programs is a major problem.

It appears that our residents are not motivated to participate in educational programs that require any effort or commitment on their part.

Residents like to be entertained without putting forth any effort on their own.

The staff consists of myself and a part-time secretary. We do not have funds for any teachers or even an activity director.

I would like to have a physical activity class to help the people stay healthier.

We do have a tenant-elected 'activities committee.' I feel it would be very beneficial to all if they could have any type of educational program related to good health or health insurance or expenses.

Many of the seniors in this particular place have been forced in very early ages to join the work force, thus sacrificing their education. Consequently, many are illiterate and in the habit of rejecting anything unfamiliar or anything requiring reading comprehension or complex steps, which could mean more than three steps.

We have tried offering many types of programs to our residents. The problem we have is getting the residents interested in new ideas. By this age, the majority of people are very set in their ways and most do not want to try anything new.

In my opinion, senior citizens are at the time of life when they are not interested in higher education.

APPENDIX F

OKLAHOMAN SENIOR CITIZEN HOMES UTILIZED

IN STUDY



Senior Citizen Homes in Oklahoma Utilized  
in Study

Altus

The Towers

Bethany

Bethany Place

Broken Arrow

Treetops Apartments

Edmond

College View Apartments  
Oklahoma Christian Apartments

Miami

Miami Senior Citizens  
Nine Tribes Tower

Midwest City

Autumn House

Muskogee

Kate Frank Manor

Norman

Norman Housing Authority  
Rose Rock Villa

Oklahoma City

Andrew Square Seniors  
Candle Lake Seniors  
Classen Seniors  
Danforth Center  
Hillcrest Seniors

Jeltz Senior Citizens  
Oklahoma City Housing Authority  
Shartel Towers  
Southwood Apartments  
Westminister Manor Retirement

Tahlequah

Go-Ye Retirement Village

Tulsa

Disciples Village  
Oklahoma Methodist Home for  
the Aged  
Quail Creek Apartments

Sheridan Terrace  
St. Simon's Episcopal Home  
West Edison

VITA

Kadija Ahmed Ali

Candidate for the Degree of  
Doctor of Education

Thesis: A NEEDS ASSESSMENT OF EDUCATIONAL PROGRAMS AT SENIOR CITIZEN  
HOMES IN OKLAHOMA

Major Field: Higher Education

Biographical:

Personal Data: Born in Benghazi, Libya.

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