

PERCEPTIONS OF SENIOR CITIZENS
EXPERIENCES LIVING IN A
COMMUNE FOR THE AGED

By

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TABLE OF CONTENTS

Chapter	Page
I. INTRODUCTION.	1
Housing and Income of Older Persons.	2
Problems of the Older Person	3
Alternative Living Arrangements for Older Persons.	5
Need for Research.	6
Purpose of the Study	7
II. RELATED LITERATURE.	8
Share-A-Home Association	12
Housing and Finances	16
III. PROCEDURE	20
Selection of Subjects.	20
The Instrument	20
Analysis of Data	22
IV. RESULTS	24
Description of Subjects.	24
Analysis of Perceptions.	24
V. SUMMARY, CONCLUSION, AND RECOMMENDATIONS.	47
Summary.	47
Conclusion	49
Recommendations.	51
A SELECTED BIBLIOGRAPHY.	52
APPENDIX A	54
APPENDIX B	62

LIST OF TABLES

Table	Page
I. Characteristics of the Subjects.	26
II. Why the Respondents Moved into S.H.A..	28
III. Problems Experienced While Living at S.H.A..	29
IV. Benefits Received That Respondents Did Not Receive Before Moving to S.H.A.	30
V. Rewards Obtained While Living in S.H.A..	31
VI. Why Respondents Are Not Living With Their Own Children.	32
VII. Living in S.H.A. Compared With Living In Nursing Home.	34
VIII. Older People Responses Toward Younger People Living in S.H.A..	35
IX. Whether Respondents Have Privacy When They Desire It.	37
X. Whether S.H.A. Will Increase In The Future	38
XI. The Position of Older People In America.	40
XII. Major Problems of American Families Today.	41
XIII. What Needs to be Done to Make Families More Stable Today.	42
XIV. Responses to Perceived Effects of Present Living Arrangements on Morale (PEPLAM) Scale	44

XV. PEPLAM Scores Classified According To
Sex, Age, Type of Living Arrangement,
Previous to Living in S.H.A., Length
of Time Living at S.H.A., Distance
From Nearest Child. 46

CHAPTER I

INTRODUCTION

The idea of group living arrangements in a family type setting is beginning to attract not only the younger generation but the older generation as well. One example of this type living arrangement among older persons is the 35 people in Winter Park and Winter Garden, Florida, between the ages of 60 and 95 who have started three communal living arrangements called Share-A-Home Association (S.H.A.). They share a home and live as a family. A major goal of the Share-A-Home Association is to provide each member with a feeling of self-worth, and financial, social, emotional, physical, and service support through a family type atmosphere. The family members believe that understanding and compassion sets the way for communication and brotherly love. As one of the members of S.H.A., Miss Jessie Ford, said:

"I'd never go back to a retirement home; I've been in one. It was big and beautiful, but it had no love, no freedom. If I have to leave here, I'd go to a park bench first."

Barron (1961, p. 29) has stated:

All people, regardless of age, need adequate food, clothing, shelter, and maintenance of health. They also need emotional security and affection, social status and recognition, and a sense of worth and self respect.

In many instances the older person is deprived of such needs. Often the older person does not live in the type of environment which provides an opportunity for the fulfillment of these basic needs.

In 1900 it was considered unusual for a person to reach his or her 70th or 80th birthday. However, with improved medical technology people are living longer. Life expectancy in America has risen from 54.1 years in 1920 to 70.8 years in 1970. Persons 65 years of age or over now exceed 20 million in the United States. By 1980, it is estimated that our elderly population will exceed 23 million. In this century, so far, the percentage of the U.S. population aged 65 and over has more than doubled from 4.1% in 1900 to more than 10% in 1970, while the number increased more than six-fold from 3 million to more than 20 million. Since women outlive men there are more older women than older men. There are about 134 older women per 100 older men at present. Life expectancy at birth is 74.6 years for females and 67.1 years for males. Life expectancy for women is increasing faster than for men (U.S. Bureau of Census, 1971, 1972).

Housing and Income of Older Persons

McGuire (1967) reports on Cicero who, in Concerning Old Age pointed out, "old age cannot be pleasant in extreme poverty." Many housing programs are starting to internalize this concept, thus trying now to make old age more pleasant for thousands of people, regardless of their income.

Housing is the major item in the elderly person's budget. Indeed the combination of housing, food, and medical services constitutes two-thirds of his total expenses. Formerly, it was expected that those too poor to buy these necessities would rely on philanthropy, church, county home, or hospital ward. Today the picture is changing rapidly. Social Security Insurance, old age pensions, and Medicare and Medicaid laws,

while very limited in what they accomplish, have attempted to provide more dignified and independent ways of meeting expenses.

A report in Aging (May, 1970) states that almost 30% of the older families had incomes of less than \$3,000 in 1965. More than 40% of the older people living alone or with nonrelatives had incomes of less than \$1,500.

In May, 1971, p. 35 issue of Aging and Human Development, Joseph Douglas reports that the aggregate income of persons 65 or over is more than 40 billion a year. The following table shows how they spend their money.

	Percentage of Income
Housing and housekeeping	29.1
Food	26.1
Transportation	11.7
Clothing	10.2
Recreation	7.2
Home Furnishings and Equipment	4.0
Personal Care	2.7
Alcohol-tobacco	2.5

McGuire (1970) suggests that we must desire living environments that will provide older persons with the opportunity to be self-managing, and to follow meaningful pursuits. In short, McGuire (1970) indicates that we should strive for the kind of goal which our Scandinavian friends have set for themselves, not only to add years to life but life to years.

Problems of the Older Person

A meaningful consideration of older persons requires an awareness of some of the common problems during the later years. Barron (1961) states some of the problems as follows:

1. Of the total population of older people approximately 75% live with their own families in their own households. This leaves 25% that live alone, with nonrelatives, institutions, This

implies that many housing arrangements of the older person provide feelings of loneliness, bitterness and a loss of meaning in life.

2. As the life expectancy of the older person increases, the working life span has shortened, resulting in a longer retirement which, in turn, may create more problems.
3. Due to more frequent ill health of older persons, they have more medical expenses and yet less income and fewer opportunities to obtain such care on a prepaid basis.
4. At one time it was thought that mental disorders resulted from an inevitable breakdown of the person as an organism. Today, however, it is believed that the kind of social relations and experiences, such as loneliness and loss of self respect, have much to do with mental health problems.
5. Perhaps one of the most serious problems of the older person is lack of social participation and recreation.

As Barron (1961) comments:

Early, highly active lives in a compatible economy often leave the aged unprepared to spend their time pursuing satisfying interests and hobbies and many still want to lead constructive, meaningful lives... They crave to be recognized as distinctive individuals who count for something. When they fail to achieve these satisfactions they may become bitter and cynical.

In their research study of 408 older husbands and wives, Stinnett,

Carter, and Montgomery (1972) found that the most frequently mentioned problems were housing, poor health, and money. According to this study, housing was the leading problem.

Alternative Living Arrangements for Older Persons

Margaret Mead (1969) in discussing possible alternative living situations for older persons, recommends a "cluster" living concept. The center of this cluster would be a few young families with children and around them would be a group of older people, younger, single people, and mates without children who would be living in the same cluster.

According to Mead this cluster concept in providing age integrated living would have advantages in that the children would be provided with grandmothers or proxy grandmothers, and older adolescents who haven't married would have a place to come where there would always be someone with whom to play a game or talk. Older persons would feel that they were part of a family situation.

Mead (1969) further states that parents with young children need both young people and older people as part of their living environment. Many gerontologists believe the concern is not only what we can do for the aged, but what older persons can do for younger persons and how all age groups can live together in a fulfilling manner.

The cluster living concept is similar to the affiliated family concept which would involve an older person living with a younger couple and their children and would involve monetary and non-monetary rewards for older persons. One advantage of this alternative living arrangement is that it would free young mothers to pursue careers and would also institutionalize a social role for older persons, especially

older women (Clanan and Vatter, 1972).

One alternative living arrangement which has recently been emphasized is community living for the aged. Community living would permit a better matching between needs and services of the elderly. Because each aged person has a different set of needs, more than one general type of service would generally be needed to maintain the elderly outside of institutions. Examples of such services include, short-term "trial-live-in" and "vocation live-in", Home health care, meals-on-wheels, counseling, social club activities, vocational rehabilitation, help provide economic security, and medical diagnoses. Their needs to be a redirection of the service system for the aged: away from the impersonal services and custodial care, and direct monetary payments, toward the more direct personal services and new social role opportunities, (Tobin, Hammerman, Rector, 1972, p. 129-134).

Need for Research

Very little research has been conducted concerning the morale and the perceptions of older persons who are involved in alternative living arrangements such as affiliated families, "cluster" living concept, or communal living arrangements similar to Share-A-Home Association in Florida. Yet alternative living arrangements for older persons is increasingly being discussed. What do such older persons perceive as the most rewarding aspects of living in such alternative arrangements? What do they perceive as the major problem? Why did they choose to live in such alternative living arrangements? How do they view the position of the older person in American society? What are their perceptions of the American Family?

The goal of this study was to obtain information concerning these

questions through interviews conducted with older persons who are residents of Share-A-Home Association. Gaining such knowledge will provide a better foundation for future discussion and planning of alternative living arrangements for older persons.

Purpose of the Study

A major purpose of this study was to examine the perceptions of older persons living in S.H.A. concerning each of the following: (a) why the respondents moved into S.H.A., (b) what is the most rewarding about living in S.H.A., (c) problems experienced while living in S.H.A., (d) benefits received that respondents did not receive before moving to S.H.A., (e) why respondents prefer living in S.H.A. rather than with their own children, (f) living in S.H.A. compared with living in nursing home, (g) younger people as well as older people living in S.H.A., (h) type of social and recreational activities in which the respondents participate in, (i) whether respondents have privacy when they desire it, (j) whether living in S.H.A. has provided more companionship than before, (k) whether living arrangements for older people such as S.H.A. will increase in the future, (l) the position of older people in America, (m) major problems of American families today, and (n) what needs to be done to make families more stable today.

A secondary purpose of this study was to examine the hypotheses that there is no significant difference in Perceived Effect of Present Living Arrangements on Morale Scale scores of S.H.A. residents when classified according to sex, age, type of living arrangement, length of time living at S.H.A., and distance from nearest child.

CHAPTER II

RELATED LITERATURE

Communes are not a recent phenomenon which have evolved from the discontent of our times, but have existed for many generations. Good News for Modern Man, an English translation of the New Testament, gives the following account in Acts 2:44-45:

All believers continued in close fellowship and shared their belongings with one another. They would sell their property and possessions and distribute the money among them according to what they need.

Mead (1970, pp. 51-52) indicates that the "good life" involved the gathering of a small group of people where like-minded idealists would construct a little closed society, whose members would share everything. Their determination to live in a small face-to-face community, in which each was known to all as a person, served as their motivation to continue living in this type of life style.

Probably the first American commune was formed when the Pilgrims came to this land on the ship Mayflower. They adopted the utopian idea where different groups of idealists could venture to the New World and "create a new heaven and a new earth." Such groups as Brook-Farm, Oneida, Amana, New Harmony, Hutterites, the Shakers, the Zoarists, the Icarians, the Faurierests and others are reminders that in the years before the Civil War and even later, more than 100 utopian communities developed. Only a few, such as the Hutterites and the Mormons have survived, and merged with the larger community, but all are part of our

tradition (Kephart, 1966; Mead, 1970).

The 1930's was a point in time when communal living came to be called the "Bohemian" way of life. Groups started to form in various parts of the country with the nucleus being centered in New York City. These people were artistic, political liberals, many of whom produced notable works after World War II. Their decisions to move did not mean that their experience of group living had failed. They had always been transient, cosmopolitan people. Evans (1964) stated that the surprising thing is that they stayed together as long as they did.

The 1960's was a period where the development of a new communal life style had begun. The first of the newborn communes was in the Haight-Ashbury section of San Francisco in 1964. Within three years the mass media and the illegal use of drugs resulted in the banning of the new commune. By October, 1967, the once gentle Haight-Ashbury commune turned into an over-crowded assembly area for the younger generation. Finally, the word was sent by the hippie elite . . . "Haight is not where it's at . . . it's in your head and hands. Gather into tribes; take it anywhere. Desperse." (Newsweek, August 18, 1969, p. 90).

Robinson (1970) indicates the communal movement seems to have been taken over by a more stable, serious-minded people. The younger Americans who take part in the communal movement are in a sense a part of the drop out generation. However, they are beginning to ask questions about how people live and think and, therefore, choose to seek other alternatives.

Otto (1971) notes that drugs, sexual possessiveness and jealousy appear to be less critical and are discussed openly in communes of the late 1960's and early 1970's. Otto (1970, p. 40) states, "Today's

commune members generally have a clear awareness of the importance of establishing good community relations."

A report in Life (July 18, 1969) reports communal members are interested in developing land and homes, as well as seeking a meaningful life in work, mutual love, and spiritual development. As indicated earlier by Otto, Life also reports that drugs and marijuana are permitted in many communes; however, many members do not use drugs and many communes have banned the use of drugs. Also, some take broad views of sexual morality, but many couples practice traditional monogamy.

An interview in Look (August 10, 1971, p. 54) assesses perceptions and attitudes of a group of people living in a Boston commune. It was found that these people, three medical students, a Ph.D. candidate, and an artist, believed the main idea is to get people involved. They feel that friendship, joy and fun may be multiplied but so can hangups, fears, problems and tensions. Jerry Avron, 23, a student at Harvard Medical School, believes that:

Everyone from our education to our economic system, pushes us to be out for ourselves only, at the expense of the next guy if necessary. As a result, most of us aren't able to muster enough love, empathy and gentleness to live in any kind of closeness with anyone else.

The five people in the Boston commune believed the reason this group type living works is because they have not saddled everyone with the slave-role of "wife." They all share in the cooking, cleaning, and the financial planning. They realize the characteristics and problems of group living and discuss them openly.

Otto (1971, p. 50) notes the following characteristics which appear to be common to most communes:

1. Interest in ecology.

2. Desire to halt man's dehumanization and to develop it's potential.
3. To bring man closer to himself and to his fellow man through love and understanding.
4. The belief that life is meant to be fundamentally joyous.
5. Strong, inner search for the meaning of one's own life and an openness and willingness to communicate and encounter coupled with a desire for personal growth and development.
6. Strong trend toward ownership of land and homes.
7. Considerable sexual permissiveness, high degree of pairing, and a strong tendency toward interpersonal commitment in a continuing relationship.
8. Interest in spiritual development.

Some of the major problems which appear to face many communes and contribute to their short life are:

1. Problems involving authority and structure, those with transcendental or spiritual values seem to have the highest survival rate.
2. Problems of economics, finances.
3. Drugs, especially in communes where the use is extensive.
4. Overcrowding and lack of privacy.
5. Hostility of surrounding.
6. Interpersonal conflicts, often result from exchange of sexual partners and resulting jealousy (Otto, 1971 and 1972; Hedgepeth, 1971).

Hedgepeth (1971, p. 232) notes as a uniqueness of communal life the concept of relating while living in close proximity; and states:

Their whole life-style is a statement; a commitment to recover those human relationships that make existence make sense and to reclaim, as well, the lost realms within themselves.

Share-A-Home Association

The idea of relating to others while living in close proximity, and feeling a value of self-worth and brotherly love, is also found among older persons. In the Winter Park and Winter Garden, Florida, communes discussed earlier 35 senior citizens have started an association called "Share-A-Home Association." Mr. Gillies (1972), the manager of Share-A-Home Association, described S.H.A. to the investigator. Members share a common ownership in a home and share all facilities. The monthly rent ranges from \$200 to \$375, depending on each member's financial status. Compared to a nursing home, a retirement complex or a boarding house of around \$600 to \$800 per month, the Share-A-Home Association and other "homes" for older persons is that the members of S.H.A. control their environment. S.H.A. members must be ambulatory and the manager gives a 30 day trial period before making an applicant a full member of the association.

The manager of S.H.A., Mr. Gillies (1972), reports the basic goals of S.H.A. are:

1. To establish a family atmosphere.
2. To provide companionship.
3. To eliminate loneliness and depression.
4. To develop empathy on an individual level.
5. To emphasize the individual.
6. To provide love, support, and compassion.
7. To provide a manager who cares and understands.

Through this basic concept of S.H.A., the family members provide an individual with the feeling that he or she is understood and wanted.

With this concept, Mr. Gillies believes each member of the family can help themselves and others.

The association was born through the reference to "communal living" from the Bible in the book of Acts, where people shared together and assisted each other for the well being of all. Only those people who desire to live as a "family", will be considered at S.H.A. Each person or couple contributes to the home and is free to do as he or she desires, coming and going as he or she wishes.

The family members enjoy privacy of their rooms, and the freedom of using the facilities of S.H.A. Food preferences of the members are respected. Home cooking is provided, with food that meets the particular needs of individuals. Pets are part of the family and add another dimension to the many pleasures to be enjoyed. The lake front and large yard provide attractive scenery and the opportunity to be out-of-doors and to exercise. In the living room of the house there is an organ, a fireplace, and colored television to be enjoyed by everyone.

In the kitchen there are cold drinks, desserts, and coffee that are available at all times to the family members and guests. If someone cares to help with the food preparation, cleaning house, or keeping the yard they may do so. The family members are free to do as they wish, unless otherwise ordered by their doctor.

The manager's duties are to meet the needs of the members by taking them to their doctors, to church, to points of interest, and to offer any other assistance the members may require. The S.H.A. manager and his family receive a livelihood for their contribution. The family members have the option of replacing the manager at anytime, if the

need becomes necessary. Toward the end of the year, after all bills are paid, if funds are left in the association's account, members of the family will decide what to do with the surplus money.

Mr. Gillies, the manager of S.H.A., reports that prior to coming to S.H.A., a number of the residents were lonely, despondent, and generally disillusioned with their living situations. In the home and family atmosphere of S.H.A., everyone became interested in everyone else and in their well-being. It was gratifying to see the pleasant changes that came about in their lives, Mr. Gillies reported.

S.H.A. provides a livelihood for people who need assistance. For example, a young mother and her three children have been associated with S.H.A. from its inception. A foster child, now a young girl, makes her home here. The children, and the Gillies youngsters contribute much to the family home environment; especially the three year old baby, one of the three children. The family members enjoy the opportunity to cuddle the small child, and to talk with and observe the activities of the older children.

The principle of S.H.A. is to provide a home for the person(s) who have their "faculties" and can move around on their own power, but cannot stay alone or drive a car or do their shopping. Mr. Gillies indicates in such a home the loneliness is reduced. He reports:

"We haven't found any medicine yet that can cure loneliness which breeds depression, a depth of despair and a feeling of what is the use of living any longer."

The ultimate goal of S.H.A. is to secure an endowment program whereby the principle of this endowment would never be used, but the interest on this endowment would be used to subsidize less fortunate senior citizens, who cannot afford approximately \$275 a month to live

at S.H.A. The individuals who would be taking advantage of this endowment program would have no conception that the program was set up for them individually. They would only realize that this endowment program is for the benefit of the family and not any one individual. This, Mr. Gillies believes, would allow the individual to retain his or her dignity and respect. In other words, S.H.A. could accept someone for what he could afford, whether \$125., \$100. per month or less, and help him without indicating charity.

Mr. Gillies indicates when this is done it enables a person who has worked all his life to feel he is contributing and gaining respect.

He further states:

"For the aged, a sense of pride and respect is about all they have left. The worst feeling in the world is to know that you are alone on this planet and no one cares whether you are alive or dead, and the personal attribute of fighting your own way is slowly fading. When we reach a certain age or stage in life, there is not too much life anymore except two feelings, pride and self-respect. If your life has been spent fighting to retain a sense of pride and respect and you come to a stage where you need help, it is very difficult and rough to admit it. Everyone needs help all through their lives, but the tragedy is in the fact that people will not accept their inner feelings, thus they will not admit to needing help."

It has been suggested that this lack of expressing our feelings and emotions is promoted by the fact that society has traditionally educated people against the expression of feeling. For example, society has taught us in order to survive we must act as an independent system or a closed system (Walters, 1972). As indicated earlier, a pre-med student living in a Boston commune indicated that we are all so "wrapped up" in ourselves and technology that we do not have time and the knowledge to muster enough love for ourselves, let alone that of another.

Mr. Gillies indicates that unless we can develop a feeling, or an

expressive concern for other people, no family can exist. This, Mr. Gillies calls the "Helping Hand" concept. He says, "You can grab this concept when you see a 95 year old lady clearing the table, and a 95 year old lady pushing a 65 year old lady up to the table." By involving members of the family in helping one another, one can bring a family together for a common purpose, that purpose being to help the other person, through support, compassion, love, and understanding. This might be termed a plea of "People for People." This is one of the goals of S.H.A.

Housing and Finances

Frances M. Carp (1965) reports that many people over 60 express dissatisfaction with the situations in which they live. They feel that their lives, generally, would be much better if their housing were improved. Often the possibilities are limited by finances. The depression hit members of this generation at a critical point in their earning years, and inflation diminished whatever they were able to save.

While most studies show positive associations between housing and health or adjustment, a few indicate negative findings and others ambiguous ones (Carp, 1965). Carp (1965) indicates that displeasure with housing may be an expression of a more general frustration at growing old and one which cannot be alleviated by changed living quarters, and notes that there may be merit in realizing that importance should be placed not only upon the change or relocation of housing, but also on the awareness and treatment of physical and mental health, on attitudes towards others, on self-concept, and on patterns of day-to-day living. In other words, Carp indicates, there are more variables that directly affect the morale or life satisfaction of the aged, than the single

variable of improved living quarters.

The May, 1971, issue of Aging and Human Development contains a study on housing for the elderly, by Dr. Susan R. Sherman who was surprised to learn that most of the residents in retirement homes, hotels, and apartments did not choose to move to retirement housing because of any wish to be with their own age group. They did so for reasons related to health care, security, and release from household chores. Most of them felt the need for contact with people younger than themselves.

With the growth in public responsibility, social scientists, public officials, civic minded individuals, and the general public have become increasingly concerned with facilities for the aged. Weiss (1971) indicates that many questions are being asked, such as: Is the need for residences greater than that for nursing homes or combined nursing-residential buildings? Where should facilities be located? What number of occupants is ideal? Should the aged be segregated? Would they be happier in mixed age communities than in "retirement ghettos?"

Weiss (1971) reports that just as there is no typical elderly person, there is no single answer to each of these questions. Some older people are spry; they want to play golf and live with a mixed group. Some are annoyed by children and seek quiet surroundings. Evidently, some elderly people want to escape from noise, from children running under foot, and from boisterous teenagers carrying blaring radios. They want to see life going on and have children, but at their option and from safer and more serene surroundings.

Weiss, indicates, the key is freedom of choice for those who want and are able to choose. An affluent society can afford such variety.

Some Scandinavian societies provide it already.

For some people, retirement and "old-age" may be a disturbing emotional experience. Weiss reports that sudden freedom from the routine of work and purposeful activity can be dull and depressing. A man or woman may feel stripped of self respect and the accomplishment of achievement unless there are other outlets for energy and self fulfillment. If people could be prepared to cultivate broader cultural and recreational interests they might need a very different kind of retirement housing and environment than exists today.

Mead (1972) states:

We are beginning to see the tremendous price we've paid for independence and autonomy. We have isolated old people and we've cut them off from their children and young people from their grandparents. We have made older people feel they have to devote their energies to "not being a burden."

There are a thousand ways older people can contribute if society could set up their living arrangements in such a way that they could. There is not any reason society should not be reorganized along new lines by finding places where old people are really useful. Old people themselves have to start asking the question, "Where and how can I continue to make a contribution?" While society keeps asking these questions, however, Bernard E. Nash (1971, p. 22) indicates, "We really have a lot of answers we aren't using."

Older people are beginning to seek different alternatives for living than the standards society has set for them. Communal living may produce a feeling of belonging, a willingness to share, and a feeling of brotherly love, as well as providing the knowledge concerning how to meet human needs. It seems that the need to increase the value and usefulness of people's lives, especially older people, is becoming

more important for the welfare of mankind.

CHAPTER III

PROCEDURE

Selection of Subjects

The 24 subjects of this study were residents of the communal living arrangement (S.H.A.) for older persons living in Winter Park and Winter Garden, Florida. A letter explaining the research study and requesting cooperation was sent to the manager of S.H.A. in the summer of 1972. After cooperation was assured, the investigator went to Winter Park and Winter Garden, Florida, and interviewed 24 of the 35 older persons living in S.H.A. The data were obtained during August of 1972.

The Instrument

To obtain information for this study, the interview schedule was composed of the following:

1. General information sheet (see appendix A) to obtain background information about the respondents such as sex, age, and religion.
2. Open-ended questions (see appendix A) designed to measure the respondents' perceptions concerning each of the following:
 - a. Why the respondents moved into S.H.A.
 - b. What is most rewarding about living in S.H.A.

- c. Problems experienced while living in S.H.A.
 - d. Benefits received from living in S.H.A. that respondent did not receive before moving to S.H.A.
 - e. Why respondents prefer living in S.H.A. rather than with their children.
 - f. Living in S.H.A. compared with living in nursing home.
 - g. Younger people as well as older people living in S.H.A.
 - h. Type of social and recreational activities in which the respondents participate in.
 - i. Whether respondents have privacy when they desire it.
 - j. Whether living in S.H.A. has provided more companionship than before.
 - k. Whether living arrangements for older people such as S.H.A. will increase in the future.
 - l. The position of older people in America.
 - m. Major problems of American families today.
 - n. What needs to be done to make families more stable today.
3. A series of six fixed alternative questions comprising the Perceived Effect of Present Living Arrangements on Morale Scale (see appendix B) which was designed to measure the respondent's perceptions of the effects of his present living arrangements (S.H.A.) on his morale. The PEPLAM Scale was

based upon the review of literature concerning morale and also upon the morale scale, the Life Satisfaction Index - Z (LSIZ) which was developed by Neugarten, Havighurst, and Tobin (1961). The six items in the PEPLAM Scale reflect the respondents perceptions concerning the effects of living in S.H.A. upon the following aspects of morale: (a) meaning in life, (b) sense of belonging, (c) satisfaction in daily activities, (d) optimistic feeling toward life, (e) companionship, and (f) interest in life.

Analysis of the Data

A frequency count was used to analyze the background information concerning the respondents, and also to analyze the respondents perceptions of the following:

- a. Why respondents moved into S.H.A.
- b. What is most rewarding about living in S.H.A.
- c. Problems experienced while living in S.H.A.
- d. Benefits received that respondents did not receive before moving to S.H.A.
- e. Why respondents prefer living in S.H.A. rather than with their children.
- f. Living in S.H.A. compared with living in nursing home.
- g. Younger people as well as older people living in S.H.A.

- h. Type of social and recreational activities in which the respondents participate in.
- i. Whether respondents have privacy when they desire it.
- j. Whether living in S.H.A. has provided more companionship than before.
- k. Whether living arrangements for older people such as S.H.A. will increase in the future.
- l. The position of older people in America.
- m. Major problems of American families today.
- n. What needs to be done to make families more stable today.

The Mann-Whitney "U" test was used to examine the hypothesis that there is no significant difference in Perceived Effect of Present Living Arrangements on Morale Scale scores of S.H.A. residents when classified according to sex, age, type of living arrangement, length of time living at S.H.A., and distance from nearest child.

CHAPTER IV

RESULTS

Description of the Subjects

A detailed description of the 24 subjects who participated in this study is presented in Table I. The sample consisted of six males and 18 females. All 24 subjects were white. Their ages ranged from 65 to 97 with the majority of people between 80-84. Most of the subjects lived in a city over 100,000 for the major part of their lives. The majority of the respondents had some college education. Eleven subjects' occupations were skilled, semiskilled, and unskilled, while professional-managerial made up the smallest group (N=6). Ten subjects did not have any children. Five subjects who had children reported over ten visits per year by their children while another five reported one or less visits per year. The majority of the subjects were widowed (N=19). The length of time the subjects had lived in S.H.A. ranged from less than one month to three years. The majority of the people owned their own home before moving to S.H.A.

Analysis of Perceptions

The following perceptions of the respondents were examined: (a) why the respondents moved into S.H.A., (b) problems experienced while living at S.H.A., (c) benefits received that respondents did not receive

before living in S.H.A., (e) why respondents are not living with their own children, (f) living in S.H.A. compared with living in nursing home, (g) older people responses toward younger people living in A.H.S., (h) whether respondents have privacy when they desire it, (i) whether S.H.A. will increase in the future, (j) the position of older people in America, (k) major problems of American families today, (l) what needs to be done to make families more stable today.

TABLE I
CHARACTERISTICS OF THE SUBJECTS

Variable	Classification	Number
Sex	Male	6
	Female	18
Age	60 - 70	3
	71 - 79	6
	80 - 90	13
	91 - 97	2
Race	White	24
Residence for major part of life	On farm or in country	2
	Small town under 25,000	8
	City of 25,000 to 50,000	1
	City of 50,000 to 100,000	3
	City over 100,000	10
Education completed	Less than high school	5
	Some high school	6
	High School graduate	4
	Some college	6
	College graduate	3
Occupation for major part of life	Professional--Managerial	8
	Clerical--Sales	2
	Skilled, Semi-skilled, and unskilled	12

continued

TABLE I - continued

Variable	Classification	Number
Distance from closest child	1-25 miles	8
	25-100 miles	0
	100-300 miles	2
	over 300 miles	3
	Do not have children	11
Visits from children during a year	One time or less	5
	Two-four times	3
	Ten times and over	5
	Do not have children	11
Marital Status	Single	3
	Married	1
	Widowed	19
	Divorced	0
Length of time living at S.H.A.	Less than one month	5
	One-three months	7
	Five-nine months	5
	1 1/2 years	3
	Two-three years	4
Living arrangements before moving to S.H.A.	Nursing Home	3
	Lived with children	3
	Rented home	2
	Owned home	16

Reasons for Moving to S.H.A.

The greatest number of respondents reported the reason for moving to S.H.A. was because they were too old to live alone and they needed help as indicated in Table II. Reasons for moving to S.H.A. were they did not wish to live with children but they wanted the love and companionship of a family type situation.

These findings support the thesis of Mead (1972) that our society has isolated older people and separated them from their children and that older persons have been made very conscious about "not being a burden."

TABLE II

FREQUENCY DESCRIPTION OF THE
PERCEPTIONS CONCERNING
REASONS FOR MOVING
TO S.H.A.

Reasons	Number
Too old to live alone and needed help	12
Wanted the love and companionship of a family type situation	4
Dissatisfied with nursing homes	4
Did not wish to live with children	4
Did not respond to question	1

Perception Concerning Problems
While Living at S.H.A.

The great majority of the respondents indicated no problems associated with living at S.H.A. as illustrated in Table III. A few respondents indicated personal problems such as lack of activities, noise, loneliness, food, sharing bathroom, and interpersonal relationships.

TABLE III
FREQUENCY DESCRIPTION OF THE PERCEPTIONS
CONCERNING PROBLEMS WHILE LIVING
AT S.H.A.

Problems	Number
No problems	17
Not enough activities	2
Noise	1
Loneliness	1
Food	1
Sharing bathroom	1
Interpersonal relationships	1

Perceptions Concerning Benefits
Received at S.H.A. that were
Not Received Before Moving
to S.H.A.

Table IV shows two major benefits that the respondents indicated they received at S.H.A. that they did not receive before coming to S.H.A. they were: Free from daily worries, (such as finances, maintenance of house, and transportation) and the feeling that manager and his family are interested, understanding, and helpful toward us.

TABLE IV
FREQUENCY DESCRIPTION OF THE PERCEPTIONS
CONCERNING BENEFITS RECEIVED AT S.H.A.
THAT WERE NOT RECEIVED BEFORE
MOVING TO S.H.A.

Benefits	Number
Free from daily worries (such as finances, maintenance of house, and transportation)	11
Feeling that manager and his family are interested, understanding and helpful toward us	5
All the good food which is desired	3
Companionship	2
Feeling of Autonomy	2
Feeling of owning this home	1

Rewards Obtained While

Living in S.H.A.

Table V shows that the two most rewarding aspects obtained while living at S.H.A. as perceived most often by the respondents were: fellowship, (being with people who care, are understanding, and interested), the help that is provided, and pleasant and comfortable surroundings.

The finding that fellowship was the most frequently mentioned reward indicates the basic importance of the need for satisfying, family-like interpersonal relationships, a need which is so often ignored by the present services to older persons (Preston and Helgerson, 1972). Apparently, a living arrangement such as S.H.A. meets this need.

TABLE V
FREQUENCY DESCRIPTION OF THE PERCEPTIONS
CONCERNING REWARDS OBTAINED WHILE
LIVING IN S.H.A.

Rewards	Number
Fellowship (being with people who care, are understanding and interested)	12
The help that is provided	9
Pleasant and comfortable surroundings	8
Independence and freedom	7
Relationship with manager	5
Don't have responsibility of maintaining a home	4
Being around manager's children	2

Why Respondents are not Living
With Their Children

The three major reasons the respondents indicated for choosing not to live with their children, as shown in Table VI, were: want to lead my own life and not be a burden to my children, life styles too different because of age difference, and children are too busy.

These results are related to by the observations of Rose (1962), that the elderly tend to interact with each other increasingly as they get older, and with younger persons decreasingly. A possible explanation for these findings and for the observation of Rose is the thesis of Mead (1972) that older persons have been isolated from their children and younger age group and have been made to feel very conscious about "not being a burden." The present findings reflect the age segregation practices in American society.

TABLE VI
FREQUENCY DESCRIPTION OF THE PERCEPTIONS
CONCERNING WHY RESPONDENTS ARE NOT
LIVING WITH THEIR CHILDREN

Reason for Not Living With Children	Number
Want to lead my own life and not be a burden to my children	10
Life styles are too different because of age difference	2
Children are too busy	2
Lack of autonomy when living with children	1
Did not respond to question	9

Comparison of S.H.A. to a Nursing Home

The majority of the respondents did not respond to this question as Table VII indicates. However, the majority of respondents who did answer the question indicated that there is more of a feeling of belonging to a family in S.H.A., and services and interpersonal atmosphere in nursing homes are not satisfactory.

These findings reflect that such factors as interpersonal atmosphere, services and belonging, are very important to the respondents. These findings may be examined in relation to Table VII. Table VII indicates that the older persons needs such as interpersonal atmosphere and a feeling of belonging are to develop high morale which is of more importance than being surrounded by the best techniques and facilities for preservation.

Lowenthal and Haven (1968) support the above findings by indicating that the maintenance of closeness with another is the center of existence up to the very end of life, and that existing in the thought and affection of another is a basic element of existence.

TABLE VII
 FREQUENCY DESCRIPTION OF THE PERCEPTIONS
 CONCERNING COMPARISON OF S.H.A.
 TO A NURSING HOME

Perceptions of S.H.A. and Nursing Home	Number
More of a feeling of belonging to a family in S.H.A.	6
Services and interpersonal atmosphere in nursing homes are not satisfactory	3
S.H.A. is more suitable for persons who do not have serious health problems	1
Did not respond to question	14

Older Persons Responses toward Younger
People Living in S.H.A.

The majority of respondents believe that having young children around is good for morale of older persons as indicated in Table VIII. Some respondents indicated that having young children around contributed to a feeling of being part of a home and family.

These findings seem to support the suggestion of Mead (1969) that a "cluster" living concept is a desirable alternative living situation for older persons. The "cluster" concept provides fellowship, support, compassion, love and an age integrated living system. This system would be provided with proxy grand children, grandmothers and grandfathers, as well as provide an environment where both young people and old people could share part of their experiences and living environment.

TABLE VIII

FREQUENCY DESCRIPTION OF THE PERCEPTIONS CONCERNING
OLDER PERSONS RESPONSES TOWARD YOUNGER PEOPLE
LIVING IN S.H.A.

Perceptions toward Younger People	Number
Having young children around is good for morale of older persons	12
Having young children around contributes to a feeling of being part of a home & family	6
Did not respond to question	6

Perceptions Concerning
Recreational Activities

All respondents indicated there was no structured recreation. However, two respondents indicated that they wished S.H.A. would plan some recreational activities. Several respondents indicated that they, as individuals, engaged in various social and recreational activities such as playing cards, reading, knitting, going to town, listening to music, going to church, and taking walks.

These findings suggest that recreational activities were not as important as developing a family atmosphere of love, concern, and support.

These findings also seem to coincide with the thesis that many services to older persons are "tokenism" and avoid meeting the basic needs for self-esteem, sense of belonging, and satisfying interpersonal relationships (Preston and Helgerson, 1972).

Perceptions Concerning

Privacy in S.H.A.

T The greatest majority of the respondents (N=17) indicated that they had privacy anytime it is desired as shown in Table IX. A few respondents (N=6) indicated they do not have privacy anytime it is desired due to the following: (a) noise, (b) sharing bathroom, and (c) roommates.

TABLE IX

FREQUENCY DESCRIPTION OF THE
PERCEPTIONS CONCERNING
PRIVACY IN S.H.A.

Perceptions of Privacy	Number
Privacy anytime it is desired	17
Do not have privacy anytime it is desired	6
Did not respond to question	1

Perceptions Concerning if S.H.A.

Will Grow in the Future

The majority of the respondents believed that S.H.A. will grow in the future as Table X indicates. The following were the most frequently mentioned reasons why the respondents believed it would grow in the future: (a) provides a warm, comfortable "homey" atmosphere, (b) everyone is friendly and helpful, (c) provides companionship (sense of compassion and security), (d) children of older people like it, (e) prices are very reasonable, (f) better than a nursing home, and (g) provides a way that older people can avoid being a burden on their children, and yet retain a sense of self-value and worth. Most respondents believed that the key to the growth of such homes in the future is getting the right people as managers.

TABLE X
 FREQUENCY DESCRIPTION OF THE PERCEPTIONS
 CONCERNING IF S.H.A. WILL GROW
 IN THE FUTURE

Perceptions of S.H.A. Growth	Number
Yes	18
Uncertain	5
Did not respond to question	1

The Position of the Older
Person in America Today

The greatest proportion of the sample believed that older people need living situations similar to S.H.A. in order to deal with problems of loneliness, security, and financial difficulty as Table XI indicates. The second and third most frequently expressed perceptions were older people need more freedom and independence, that older people are neglected because younger people don't have time for them.

These findings reflect the isolation and loneliness that many older persons are currently experiencing. Also reflected is the fact that the needs and problems of older persons are often not being adequately met by the family system or by the various institutional services offered to older persons. The findings definitely indicate the need for alternative living arrangements similar to S.H.A.

TABLE XI
 FREQUENCY DESCRIPTION OF THE PERCEPTIONS
 CONCERNING THE POSITION OF OLDER
 PERSONS IN AMERICA

Positions of Older People	Number
Older people need living situations similar to S.H.A. in order to deal with problems of loneliness, security, and financial difficulty	10
Older people need more freedom and independence	5
Older people are neglected because younger people don't have time for them	4
Older people have knowledge and experience which are not being utilized	2
Older people suffer extreme financial difficulties	3

Major Problems of the American
Family Today

The subjects perceived the following to be the major problems as shown in Table XII: (a) financial, (b) social mobility, (c) working mother, (d) overly permissive childrearing, (e) parents do not spend enough time with children, (f) in-law conflict, (g) self-centeredness and pleasure seeking, (h) decline in teaching christian living, and (i) taking care of old people.

TABLE XII

FREQUENCY DESCRIPTION OF THE
PERCEPTIONS CONCERNING MAJOR
PROBLEMS OF THE AMERICAN
FAMILY TODAY

Problems	Number
Financial	5
Social Mobility	3
Working mother	2
Overly permissive childrearing	4
Parents do not spend enough time with children	2
In-law conflicts	1
Self-centeredness and pleasure seeking	2
Decline in teaching christian living	1
Taking care of older people	1

What is Needed to Make
Families More Stable

The greatest number of respondents reported that family members should spend more time together as indicated in Table XIII. The second most frequently expressed perception indicated there is a need to express more affection and support.

These findings seem to reflect the feelings that many older persons have today concerning their position in the family--that other family members do not spend enough time with them and that the expression of support and affection from family members is limited. These findings, particularly that family members should spend more time together was the most frequent response, are consistent with the findings concerning youth who live in communes and their criticisms of their family experiences (Otto, 1971; Fullerton, 1972).

TABLE XIII
PERCEPTIONS CONCERNING WHAT IS
NEEDED TO MAKE FAMILIES
MORE STABLE

Needs	Number
Family members spend more time together	9
Express more affection and support	4
Financial security	3
Mother stay at home with children	2
Keeping busy with work	2
Put less emphasis upon materialism	1

Responses to the FEPLAM Items

The two major benefits that the respondents perceived themselves experiencing more while living in S.H.A. than they had experienced before moving into S.H.A. are presented in Table XIV. One benefit was the respondents felt they belonged more and the other was the respondents felt they had a more optimistic feeling toward life.

TABLE XIV

RESPONSES TO PEPLAM ITEMS

Do you feel that living in your present home:	Yes	Uncertain	No
Has helped you to feel that life has more meaning than you felt it had before?	9	4	9
Has helped you to feel that you "belong" more than you felt you "belonged" before?	14	1	6 (one did not respond)
Has helped you to find more satisfaction and pleasure in your daily activities than you found before moving here?	8	4	10
Has given you a more optimistic feeling toward life than you had before?	14	1	6 (one did not respond)
Has given you more companionship than you had before	10	1	9
Has helped me to become more interested in life than I was before?	7	1	12 (two did not respond)

Perceived Effects of Present Living
Arrangements on Morale
(PEPLAM) Scale

The Perceived Effects of Present Living Arrangements on Morale (PEPLAM) Scale scores were examined in relation to sex, age, type of living arrangements, length of time living at S.H.A., and distance from nearest child, and the results are reported in Table XV. The results indicates that two of the variables examined were significantly related to PEPLAM Scale scores: age was related ($p=.001$), with those respondents in the 60-79 age category reflecting more positive perceptions than those over 80. Too, those respondents who reported that they lived 25 miles or more from their nearest child reflected significantly more favorable perceptions than those who lived nearer at least one of their children.

These data reflect that morale is negative affected by increasing age and that living close to children adversely affects morale of older persons. Such factors as sex of the respondent; the type of living arrangements, i.e., owned home or other; and the length of time which the respondent lived at S.H.A. were unrelated to morale as measured by the PEPLAM Scale.

TABLE XV

PEPLAM SCORES CLASSIFIED ACCORDING TO SEX, AGE, TYPE OF
LIVING ARRANGEMENTS PREVIOUS TO LIVING IN S.H.A.
LENGTH OF TIME LIVING AT S.H.A., DISTANCE
FROM NEAREST CHILD

Classification	Median PEPLAM Score	"U" Value	Level Of Sig.
Sex			
Male	11.5	32	N.S
Female	14.5		
Age			
60-79	12		
80 and over	11	2	.001
Type of Living Arrangements			
Owned Home	12		N.S
Other	12	45	
Length of Time Living at S.H.A.			
3 months or less	11		N.S
5 months or over	14	31	N.S.
Distance From Nearest Child			
1-25 miles	14		
25 miles and over	15.5	11.5	.01
Two subjects did not respond.			

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The purpose of this study was to investigate the perceptions of senior citizens living in a commune for the aged concerning their living experiences.

The sample was composed of 24 subjects, six males and 18 females. Their age ranged from 65 to 99 with the majority of people between 80-84. They were predominately in the skilled, semi-skilled, and unskilled occupational category for the major part of their life. The length of time the subjects had lived in S.H.A. ranged from less than one month to three years. The data were obtained during the month of August, 1972.

To obtain information for this study, the interview schedule was composed of the following:

1. general information sheet for securing various background data.
2. open-ended questions designed to measure respondents' perceptions concerning their living experiences in S.H.A. and modern family life.
3. A series of six fixed alternative questions comprising the Perceived Effects of Present Living Arrangements on Morale Scale (PEPLAM), which was designed to measure the respondents

perceptions of the effects of the present living arrangements (S.H.A.) on morale.

A frequency count was used to analyze the background information concerning the respondents, and also to analyze the respondents' perceptions of their living experiences in S.H.A. and of modern family life.

The Mann-Whitney "U" test was used to examine the following hypothesis that there is no significant difference in PEPLAM Scale scores classified according to (a) sex, (b) age, (c) type of living arrangement, (d) length of time living at S.H.A., and (e) distance from nearest child.'

The results of the study were as follows:

1. Financial, overly permissive childrearing, and social mobility were found to be the three major problems of the American family today.
2. Most of the respondents responded that the American family members should spend more time together and express more affection and support toward one another.
3. The majority of respondents wanted to be around people who were caring, understanding, interested, and could provide help.
4. Being too old to live alone and needing help was reported as being most important factor in moving to S.H.A.
5. The majority of respondents indicated no problems associated with living at S.H.A.
6. Free from daily worries and feeling manager and his family are interested, understanding, and helpful, were the two major benefits the respondents received at S.H.A.

7. The three major reasons respondents did not want to live with their children were: children are too busy, life styles are different, and do not want to be a burden to my children.
8. Most of the respondents reported that having young children around S.H.A. is good for their morale.
9. The respondents believe older people need living situations similar to S.H.A. in order to deal with problems of loneliness, security, and financial difficulty.
10. The respondents believed that S.H.A. will grow in the future, if the right people are found for managers.
11. All respondents indicated there was no structured recreation.
12. The greatest majority of the respondents indicated they had privacy anytime it is desired.
13. In the subjects responses to PEPLAM Items, the two most rewarding aspects of living at S.H.A. which the respondents reported experiencing more at S.H.A. than before moving to S.H.A. were feeling a sense of belonging and a more optimistic feeling toward life.
14. There was a significant difference in PEPLAM Scale scores according to age, and distance from nearest child.
15. There was no significant difference in PEPLAM Scale scores according to sex, type of living arrangements, and length of time living at S.H.A.

Conclusion

The findings of the present study support the thesis of Mead (1972) that society has isolated older people and separated them from their

children, and that older persons have been made very conscious about "not being a burden."

The results of this study emphasize the basic importance of the need for self-esteem and fellowship or companionship within a warm, caring, family oriented atmosphere. The findings indicated that these needs were not adequately met by the families and/or children of the older persons in this study. The results tend to support the thesis that these basic psychological needs are too often not met by both families of older persons and institutional services offered to older persons (Preston and Helgerson, 1972).

The great majority of the respondents indicated that having young children around would be good for morale of older persons and would contribute to a feeling of being part of a home and family. This finding tends to support the desirability of the cluster living concept advocated by Mead (1969) which would provide an age integrated living system.

The major conclusion which might be drawn from this study is, as Lowenthal and Harn (1968) have suggested, the maintenance of a close relationship with another accompanied by interest, warmth, support, and belonging, is the center of existence up to the end of life. As the family system and institutional services to older persons continue to ignore dealing with this basic need and center of existence for older persons it can be expected that recommendations and experiments concerning alternate living arrangements for older persons will increase. On the basis of the positive perceptions which the older persons in this study expressed toward their living situation in S.H.A. it appears that S.H.A. represents one type of living arrangement for older persons which

offers great potential for meeting the need for close family-like relationships and the related need for self-esteem.

Recommendations for Future Research

There would be merit in designing future research projects which would examine the personality characteristics of older persons who choose to live in a communal living arrangement such as Share-A-Home Association. Also, it would be interesting to compare the personality characteristics of older persons who have favorable perceptions toward a living arrangement such as Share-A-Home Association and those who have unfavorable perceptions toward such a living arrangement. It would also be beneficial to conduct research in the future which would compare the self concept and morale of a group of older persons before and after moving into Share-A-Home Association.

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APPENDIX A

INTERVIEW SCHEDULE

Oklahoma State University

Summer 1972

SCHEDULE NUMBER _____

- ___ 1. Sex: ___ A. Male ___ B. Female
- ___ 2. Age: ___ A. 65-69 ___ D. 80-84
 ___ B. 70-74 ___ E. 85 or over
 ___ C. 75-79
- ___ 3. Religious preference:
 ___ A. Catholic ___ D. Mormon
 ___ B. Protestant ___ E. Other _____
 ___ C. Jewish
- ___ 4. For the major part of your life have you lived:
 ___ A. On a farm or ___ D. City of 50,000 to
 in the country 100,000
 ___ B. Small town under ___ E. City over 100,000
 25,000
 ___ C. City of 25,000 to
 50,000 population
- ___ 5. Years of education completed:
 ___ A. Less than high school
 ___ B. Some high school
 ___ C. High school graduate
 ___ D. Some college
 ___ E. College graduate
- ___ 6. What was your occupation for the major part of your life?
- ___ 7. Generally, how often do you visit or receive a visit from
 one of your children?
 ___ A. Once a year ___ D. 8-10 times a year
 ___ B. 2-4 times a year ___ E. Over 10 times a year
 ___ C. 5-7 times a year ___ F. Do not have children

- ___ 8. About how far do you live from your child who lives closest to you?
- | | |
|-------------------------|-----------------------------|
| ___ A. Less than 1 mile | ___ E. 50-100 miles |
| ___ B. 1-5 miles | ___ F. 100-300 miles |
| ___ C. 5-25 miles | ___ G. Over 300 miles |
| ___ D. 25-50 miles | ___ H. Do not have children |
- ___ 9. Marital Status:
- | | |
|----------------|-----------------|
| ___ A. Married | ___ C. Widowed |
| ___ B. Single | ___ D. Divorced |
- ___ 10. How long have you lived in your present home?
- ___ 11. What type of living arrangement did you have before you moved to your present home?
- | | |
|----------------------------|--------------------|
| ___ A. Nursing Home | ___ D. Rented Home |
| ___ B. Lived with children | ___ E. Owned home |
| ___ C. Retirement complex | |
- ___ 12. Race:
- | | |
|--------------|--------------------|
| ___ A. White | ___ C. Indian |
| ___ B. Black | ___ D. Other _____ |
- ___ 13. What do you feel are the major problems of the American family today?

____14. What do you feel needs to be done to make families stable?

____15. What do you find to be most rewarding about living in your present home?

___16. Why did you decide to move into your present home?

___17. What problems have you experienced while living in your present home?

___18. Are there any benefits you are receiving from living in your present home that you did not receive before coming here? If so what are they?

___19. Do you prefer living here to living with your children? Why?

____ 20. How do you compare your present living arrangement with living in a retirement village? A nursing home?

____ 21. What would you think about younger people as well as people your own age living with you in your present living situation?

____22. What do you think about the position of the older person in America today? Do you think it should be changed? If so, how?

____23. Do you feel that the type of home which you have now will increase in the future? If so, why? If no, why?

___24. What type of social and recreational activities do you do?

___25. Where do your social and recreational activities take place:

- ___A. Within your present home
- ___B. Outside your present home

___26. Do you feel you have privacy when you want it?

APPENDIX B

Do you feel that living in your present home: (questions 27-33)

- ___27. Has helped you to feel that life has more meaning than you felt it had before?
 ___A. Yes ___C. Uncertain
 ___B. No
- ___28. Has helped you to feel that you "belong" more than you felt you "belonged" before?
 ___A. Yes ___C. Uncertain
 ___B. No
- ___29. Has helped you to find more satisfaction and pleasure in your daily activities than you found before moving here?
 ___A. Yes ___C. Uncertain
 ___B. No
- ___30. Has given you a more optimistic feeling toward life than you had before?
 ___A. Yes ___C. Uncertain
 ___B. No
- ___31. Has given you more companionship than you had before?
 ___A. Yes ___C. Uncertain
 ___B. No
- ___32. Has helped me to become more interested in life than I was before?
 ___A. Yes ___C. Uncertain
 ___B. No.
- ___33. Do most of your friends live:
 ___A. Within your present home
 ___B. Outside your present home

VITA

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