

ATTITUDES AND KNOWLEDGE OF AGING:
THE EFFECTS OF EDUCATIONAL LEVEL

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THE EFFECTS OF EDUCATIONAL LEVEL

An Abstract
Presented to the
Graduate and Research Council of
Austin Peay State University

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

by
Vickie Lynn Smith
October 1992

ABSTRACT

This study was conducted to determine whether the educational level of persons 55 years of age and over had an effect on attitudes toward peers, personal anxiety, overall value of older adults as a group, and knowledge of aging. Seventy persons participated in the study and completed the Aging Opinion Survey (AOS) developed by Kafer, Rakowski, Lachman, and Hickey (1980), and the Knowledge of Aging and the Elderly Questionnaire (KAE) by Kline and Stiers (1989). The results of an ANOVA indicated that subjects with more than 12 years of education were significantly more positive in their attitudes toward peers, had less personal anxiety about aging, and were more positive in attitudes toward older adults as a group. The two groups exhibited no significant differences on the Knowledge of Aging and the Elderly Questionnaire. There was more significant difference between males with different educational levels than female subjects in personal anxiety. Male subjects with more than 12 years of education had lower personal anxiety toward aging than males with less education. The need for further investigation and research is discussed.

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To the Graduate and Research Council:

I am submitting herewith a Thesis written by Vickie Lynn Smith entitled "Attitude and Knowledge of Aging: The Effects of Education Level." I have examined the final copy of this paper for form and content, and I recommend that it be accepted in partial fulfillment of the requirements for the degree Master of Arts, with a major in Clinical Psychology.


Major Professor


Second Committee Member


Third Committee Member

Accepted for the Graduate and
Research Council:


Dean of the Graduate School

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CHAPTER 1

Introduction

By the year 2000, it is projected that there will be 34,882,000 people in the United States ages 65 and over (U.S. Bureau of the Census, 1991). The number of studies that indicate that these older people are being viewed more positively is increasing (Austin, 1985; Harris, Page, & Begay, 1988). One explanation for this finding is that society's attitude is a reflection of improved self-images among the aged (Tibbitts, 1979). Several studies support Tibbitts' rationale that older adults are perceiving themselves in a more favorable light and are moving away from a portrayal of being dependent and unproductive (Borges & Dutton, 1976; Luszc & Fitzgerald, 1986). Kimmel (1988) wrote that the older person's beliefs and attitudes toward the aging process may be more important factor in changing the stereotypical belief about aging than the beliefs held by the general population.

Yet, some studies state that these same older adults who see themselves more positively continue to view their peers in a negative manner (Bird & Fisher, 1986; Luszc & Fitzgerald, 1986). Butler (1969, 1980) states these negative attitudes toward other age peers can influence the way older people are treated in public housing, and in the medical and social community. Kimmel (1988) and Butler

(1969) refer to these negative views held by older adults toward their peers as "ageism."

Miller (1982) states the problem may be that the older person retains the negative beliefs and attitudes toward older people that have been prevalent in the culture in the past and considers himself or herself an exception to the rule. Although gerontological research has tried to expose the myths about the elderly and the aging process, some of the age generalizations continue to flourish. General myths about the elderly include deterioration in physical and mental capacities, social isolation, poor health, poverty, and loneliness (Tuckman & Lorge, 1952). Levin (1988) states that even though information has been presented to refute many of these characteristics, older adults are still being viewed as less intelligent, less attractive, and unhealthier than their younger cohorts. Miller (1982) refers to these widespread negative beliefs as "common sense" views and points out that many people are not aware of the gerontological research and do not take the time to check out the validity of their views. The persistence of negative views may be difficult to change.

CHAPTER 2

Review of Literature

Research on attitudes toward aging and older persons began in the early 1950s. Some of the first studies investigating attitudes toward older people were conducted by Tuckman and Lorge (1952, 1953). Their results suggested that there was a widespread acceptance of negative stereotypes about aging. Although these studies have since been criticized because of methodological shortcomings (Kogan, 1979) they are significant in the respect that they heightened awareness about attitudes toward aging. A comprehensive review in 1971 by McTavish on attitudes and beliefs about aging concluded that views toward older people were generally negative. However, Green (1981) argued that when rated individually rather than as a group, older persons were rated more positive on items.

There have been numerous variables investigated for the purpose of finding correlates associated with negative views of old age. One of these is age of the perceiver. Kogan (1961) found no age differences in attitudes toward older adults between young and older groups. McTavish (1971) reported age differences toward older adults within sex, ethnic, and marital status categories. Kafer et al. (1980) indicated an increase in negative attitudes toward

peers as the subject's age increased. Crockett and Hummert (1987) noted that some people hold mixed views, positive and negative in the way they perceive older adults.

Another variable that has received attention in the literature is personality characteristics of people that hold negative attitudes toward older people. Kogan (1961) concluded that negative attitudes toward older adults were correlated with characteristics of anomie. He suggested that these people perceive aging pessimistically and as a time of helplessness. Thorson and Perkins (1981) also explored the association of attitudes and personality traits using the Edwards Personal Preference Schedule. They found subjects scoring higher on aggression held more negative attitudes toward older people.

Recently, Katz (1990b) has examined the association between personality factors and attitudes toward older people using the Cattell 16 Personality Factors Test (16Pf) and the Aging Opinion Survey (AOS). Katz criticized previous studies for not employing measures that have valid predictive value. Her findings state:

While the more anxious person is typically thought to identify with and be concerned about more vulnerable people, a clear finding of this study is that the low anxiety person who is well balanced, resilient, and secure in the deepest sense, has more positive attitudes toward older people. (p. 158)

Educational level of the rater has also been explored in many studies with diverse results. Thorson, Whatley, and Hancock (1974) contended that better educated younger subjects had significantly more positive attitudes toward older people than older subjects with less education. A later study by Thorson and Perkins (1981) indicated that older persons with more education held more positive views toward older people. Kafer (1981) reported that subjects with lower levels of education had less positive attitudes toward the aging process and the social value of the elderly.

A study by Bailey (1991) suggested that education for the older adult as well as the younger adult might improve attitudes toward older people. He stated that most of the research on attitudes toward older persons used college students as subjects and assumed that they were the only ones that needed education about the aging process and older people. He investigated the knowledge of normal aging and attitudes toward aging of 145 young adults from introductory psychology classes and older adults who attended two area senior centers. Educational level of the older adults was not given. The mean age of the young adults was 18.9 and the average age of the older adults was 74.0. He found a small significant difference favoring older adults when measuring positive attitudes. However, there was no significant difference found in knowledge of

aging between the two groups. Bailey concluded that neither age groups were well informed about knowledge of aging.

Another study by Katz (1990a) using the Aging Opinion Survey (Kafer et al., 1980) examined the effects of a introductory gerontology course on three dimensions of attitudes toward aging. These dimensions were (a) attitudes toward familiar older people; (b) personal anxiety toward one's own aging; and (c) attitudes toward the elderly as a group. The subjects in this study were 116 students 20 to 70 years old. They were given a pre-test at the beginning of the course and a post-test at the end of the semester. The results indicated a significant positive change in attitudes toward familiar older people and toward the elderly as a group. However, no significant change was revealed in personal anxiety toward aging.

Because Bailey's (1991) study did not furnish the number of years of education of the older adults in the sample, it is not clear whether educational level was a factor in determining knowledge of aging. A limitation in Katz's (1990a) study was that all subjects had some post-secondary education and the results were reported as a group.

The U.S. Bureau of the Census (1991) reported that the median years of school for individuals 65 and over is 12.1 years and 11.1 percent of this age group have four years or

more of college. The purpose of this study was to determine if educational level has a significant effect on attitudes and knowledge of aging toward persons ages 55 and older.

The following hypotheses were investigated:

1. Older adults with more than 12 years of education were more positive in their attitudes toward the aging process of their peers than older adults with less education as measured by Scale 1 of AOS.
2. Older adults with more than 12 years of education had less personal anxiety toward aging as measured by Scale 2 of the AOS.
3. Older adults with more than 12 years of education viewed older adults as a group as having a higher perceived social value as measured by Scale 3 of the AOS.
4. Older adults with more than 12 years of education had more correct answers on a knowledge of aging test than older adults with less education as measured by the KAE.

CHAPTER 3

Methodology

Subjects

The subjects in the study were 25 male and 45 female individuals who attended either the Ajax Turner Senior Citizens Center or the American Association of Retired People (AARP) monthly meeting in Clarksville, Tennessee. They ranged in age from 55 to 87 years. They were divided into two groups. Group 1 included individuals with 12 years of education or less. Group 2 included individuals with more than 12 years of education.

Questionnaire

The two questionnaires used in this study were the Aging Opinion Survey (AOS) by Kafer et al. (1980) (see Appendix D) and the Knowledge of Aging and the Elderly (KAE) Questionnaire (Kline & Stiers, 1989) (see Appendix E). The AOS is a 45-item attitude instrument developed to assess attitudes toward older people. Kafer (1981) found substantial evidence to support the reliability and validity of the test.

There are three 15-item scales. AOS Scale 1, Stereotypic Age Decrement consists of items regarding the aging process of friends and peers. Scale 1 has a

coefficient alpha index of reliability of 0.81. AOS Scale 2, Personal Anxiety Toward Aging, taps into areas concerning fear or dread toward one's own aging. This scale has a reliability index of 0.68. AOS Scale 3, Social Value of the Elderly, is targeted at older people as a group and their contribution to society. Coefficient alpha index of reliability for this scale is 0.76.

Items are scored as follows: 1=Strongly Agree, 2=Agree, 3=Uncertain, 4=Disagree, and 5=Strongly Disagree. Certain items are reversed in scoring in order to correct for response set. Reversed items are scored as follows: 5=Strongly Agree, 4=Agree, 3=Uncertain, 2=Disagree, and 1=Strongly Disagree. Scale scores are then obtained by summing item scores across the 15 items. Possible scores on each scale range from 15 to 75 with lower scores indicating a more negative attitude toward the aging process and older adults.

The KAE is a 25-items true/false questionnaire which is patterned after Palmore's (1977) Facts on Aging Quiz and based on factual statements. Both tests have been used to measure knowledge of older adults and the aging process. However, a comparison of the two tests indicated that the KAE has been found to be relatively independent of bias effects unlike the Facts on Aging Quiz (Kline, Scialfa, Stiers, and Babbitt, 1990).

procedure

Persons attending the Ajax Turner Senior Citizens Center and the American Association of Retired People's monthly meeting were invited to complete the Aging Opinion Survey and the Knowledge of Aging and Elderly Questionnaire. Questionnaires were given to volunteering subjects at the organizations with instructions to complete the consent form before beginning. Consent forms (see Appendix A) were detached separately from the questionnaires in order to assure anonymity. Included with the questionnaires were the following materials: an informed consent form; a cover sheet (see Appendix B) that explained the purpose of the study and intended uses of the data; and a demographic sheet (see Appendix C) asking age, sex, and years of education.

Participants either completed the surveys at their meetings or returned it to the author by mail. Directions and questions were read to any person unable to read that wished to participate in the study. Individuals requesting results of the study were asked to fill out the form at the bottom of the cover letter and to return it to the author of the study.

CHAPTER 4

Results

Of the 76 questionnaires turned in, six were eliminated either because of inadequate demographic information or because the subjects did not complete all of the items. Five of the subjects in the study requested that directions and questions be read orally by the author because of visual problems. The subjects were divided into two groups based on educational level for analysis. Group 1 included subjects with 12 years of education or less. Group 2 included subjects with more than 12 years of education.

Scale 1 of the AOS (AOS1, Stereotypic Age Decrement) was significantly affected by educational level. Lower scores indicate an endorsement of the declining process of aging in friends and peers. In Table 1, the results of an ANOVA indicated that subjects with more than 12 years of education (Group 2) had significantly more positive attitudes ($M = 41.94$) toward the aging process of peers than those with 12 years or less education (Group 1, $M = 34.97$), $F = 12.891$, $p < .001$. In the measure of AOS Scale 2, where a higher score indicates less personal anxiety toward the aging process, results showed that subjects with more than 12 years of education (Group 2) had significantly

less personal anxiety ($M = 47.74$) toward aging than subjects with 12 years or less education ($M = 43.64$), $F = 4.924$, $p < .030$. Furthermore, on the AOS3, subjects in Group 2 with more than 12 years of education also had a higher perceived social value ($M = 54.81$) toward older adults as a group than those with less education ($M = 45.51$), $F = 40.341$, $p < .000$.

Table 1

Means and F Scores for the Two Educational Groups

	N	Group 1 Mean	Group 2 Mean	F	p
AOS1	70	34.97	41.94	12.891	.001**
AOS2	70	43.64	47.70	4.924	.030*
AOS3	70	45.51	54.81	40.341	.000***
KAE	70	15.97	16.71	2.340	.131

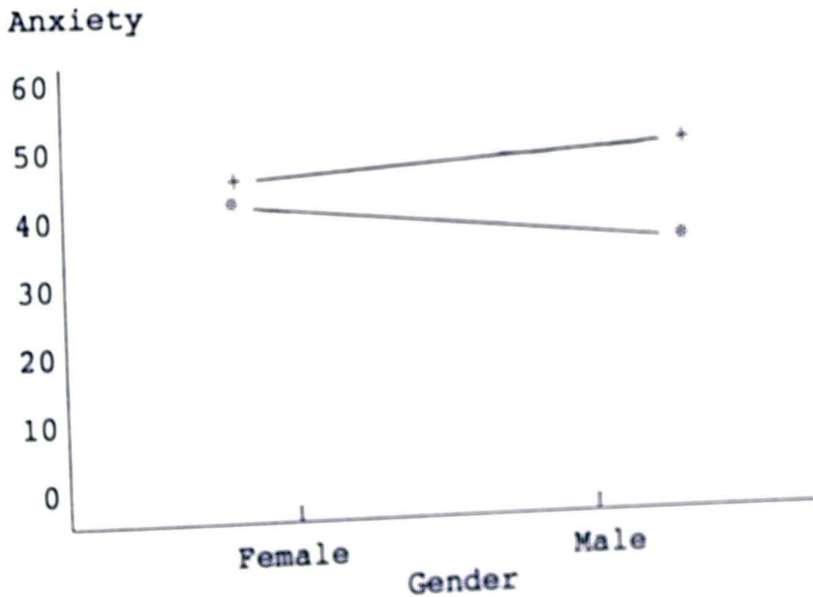
Note: Group 1 - 12 years of education or less
 Group 2 = more than 12 years of education
 * = significant at $p < 0.05$ level
 ** = significant at $p < 0.01$ level
 *** = significant at $p < 0.001$ level
 AOS 1 (Stereotypic Age Decrement)
 AOS 2 (Personal Anxiety Toward Aging)
 AOS 3 (Social Value of the Elderly)
 KAE (Knowledge of Aging and the Elderly)

However, the results (Table 1) did not reveal any significant difference between educational level and knowledge of aging (KAE). Subjects made between 12 and 21 correct responses to the KAE. That is, subjects with more

than 12 years of education were no more knowledgeable about normal aging than those with 12 years or less education ($F = 2.340, p < 0.131$).

Although not hypothesized, the results of the ANOVA also revealed a significant interaction effect of gender and years of education in personal anxiety of subjects (see Figure 1).

Figure 1. Gender, Years of Education, and Personal Anxiety Toward Aging.



--*-- 12 or less years
 --+-- More than 12 years

$F = 5.440 \quad p < .023$
 (the lower the score the more anxiety in the scale)

There was more significant difference in personal anxiety between males with different educational levels than female subjects (see Table 2). Male subjects with

more than 12 years of education had the least personal anxiety ($M = 50.45$) toward aging than males with 12 years of education or less ($M = 40.71$), $F = 5.440$, $p < .023$.

Table 2

Mean Scores for Interaction of Gender, Years of Education, and Personal Anxiety Toward Aging

	Years of Education		F	p
	Group 1 Mean	Group 2 Mean		
Females	45.28 n=25	46.25 n=20	5.440	0.023*
Males	40.71 n=14	50.45 n=11		

Note: Group 1 = 12 years of education or less
 Group 2 = more than 12 years of education
 * = significant at $p < 0.05$

CHAPTER 5

Discussion

The purpose of this study was to determine whether the educational level of persons 55 and over had an effect on attitudes toward peers, personal anxiety, perceived social value of older adults, and knowledge of aging. Results indicated that subjects with greater than 12 years of education were more positive in their attitudes toward peers, had less personal anxiety toward aging, and had a more positive attitude toward older adults as a group than those with less education. An earlier study by Kafer (1981) also confirmed that subjects with higher levels of education were more positive in their attitudes toward peers and toward older adults as a group, but a relationship between educational level and personal anxiety was not verified in his studies.

Katz (1990b) reported that individuals with less anxiety held positive views of older adults. She also reported a significant correlation between gender and personal anxiety. Women had more positive attitudes toward their own aging. It was interesting, though unexpected, that results from the present study indicated that there were larger differences between males with different educational levels than females in personal anxiety toward

aging. Males exceeding 12 years of education had the least personal anxiety toward aging, while males with lower education had the greatest personal anxiety. This difference in gender and educational level demonstrates that other variables need to be considered when assessing attitudes.

There was no significant difference on the Knowledge of Aging and the Elderly Questionnaire test between the two groups. The reason for the two groups to have comparable knowledge on aging and different attitudes toward peers, personal anxiety, and overall value of older adults is not readily apparent. Perhaps knowledge of aging and attitudes are not related. Some individuals may still be clinging to stereotypical beliefs even in the face of opposing evidence. Miller's (1982) point of view about the difficulty of changing negative attitudes toward aging may be warranted.

One cannot assume that knowledge of aging will encourage positive attitudes. What other variables could be affecting attitudes toward aging in the two educational levels besides knowledge of aging? Why did older males with less education have the greatest personal anxiety toward aging? Does socioeconomic status determine the anxiety level between males and contribute to attitudes toward older adults?

It appears that simply providing the facts about aging is not sufficient to change negative attitudes. Katz (1990b) points to the need for gerontologists to confront the fears and concerns that individuals and society might have about growing older. Hopefully, future research will determine what factor or factors contribute to the differences shown in this study.

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APPENDIX A

DEPARTMENT OF PSYCHOLOGY
AUSTIN PEAY STATE UNIVERSITY
INFORMED CONSENT STATEMENT

The purpose of this investigation is to obtain information concerning attitudes and knowledge of aging. Your responses are confidential. At no time will you be identified, nor will anyone other than the investigators have access to your responses. The demographic information collected will be used only for purposes of analysis. Your participation is completely voluntary, and you are free to terminate your participation at any time.

Thank you for your cooperation.

I agree to participate in the present study being conducted under the supervision of a faculty member of the Department of Psychology at Austin Peay State University. The investigator has offered to answer any further inquiries as I may have regarding the procedures. I understand that I am free to terminate my participation at any time and to have all data obtained from me withdrawn from the study and destroyed.

Name (Please Print)

Signature

Date

APPENDIX B

Cover Letter

Thanks so much for taking the time to complete this survey. I am currently working on completion of my master thesis at Austin Peay State University. Your responses to these questions are a very important part of my research. The purpose of the study is to obtain information about the attitudes and knowledge of older adults toward the aging process. Data will be recorded anonymously. Please try to complete all the items.

Sincerely,

Vickie Smith
Graduate Student

If you would like to be informed of the results of the survey, please provide the information below. Separate this sheet from the survey form and return it to the author when you have completed the survey.

Name _____

Address _____

APPENDIX C

Before beginning, please complete the questions below.
This information is for research purposes only and is
confidential. It is not for the identification of
individuals.

Age: _____

Circle the appropriate answer:

Sex: Male Female

Years of formal education completed:

0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16+

APPENDIX D

On the following pages, you will find a number of statements expressing opinions with which you may or may not agree. Following each statement are five spaces labeled as follows:

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

You are to indicate the degree to which you agree or disagree with each statement by checking the appropriate space. Avoid choosing the uncertain response where possible.

Please consider each statement carefully, but do not spend too much time on any one statement. Do not skip any item, even if it seems like it doesn't apply to you. There are no right or wrong answers--the only correct responses are those that are true for you.

1. After retirement one should not have much influence in public policy making.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

2. Most people I know feel that the elderly deserve a great deal of admiration.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

3. I don't think some of my friends can hear quite as well as they used to.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

4. The elderly have a wealth of knowledge and experience that is not sufficiently utilized.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

5. Community organizations would function more smoothly if older persons were included on their governing boards.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

6. My friends are just as interested in sex as they ever were.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

7. It's best to forget that we're getting older every day.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

8. Youthful enthusiasm and fresh ideas should count for more in today's world than the outdated notions of the older generation.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

9. So many people I know grow less content as the years go by.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

10. The older I get the more I worry about money matters.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

11. I always dreaded the day I would look in the mirror and see gray hairs.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

12. My friends never look as good as they used to anymore.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

13. My friends aren't nearly as changeable as when they were younger

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

14. The older my friends get the less respect they have for the privacy of others.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

15. I have become more content with the years.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
--------------------------	------------------------	------------------	---------------------------	-----------------------------

16. The older my friend get the less interest they seem to have in interacting with others.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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17. The elderly are one of our great undeveloped natural resources.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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18. Old people usually interfere with their adult children's child rearing practices.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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19. More and more people I know are becoming observers rather than participants.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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20. I dread the day when I can no longer get around on my own.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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21. People my age seem to worry unnecessarily about their health.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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22. The older I become the more I worry about my health.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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23. People my age can learn new things easily.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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24. I see the years creeping up on my friends.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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25. Older people are more or less a burden for the young.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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26. I am sure I will always have plenty of friends to talk to.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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27. Most older people seem to need a lot of extra sleep to have enough energy for everyday chores.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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28. Society would benefit if the elderly had more say in government.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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29. My friends make sure they get plenty of exercise.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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30. I never think about dying.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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31. It's sad to say, but my friends just can't turn out the work like they used to.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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32. Most elderly prefer to live in senior citizen apartment buildings.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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33. I fear that when I'm older all my friends will be gone.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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34. The thought of outliving my spouse frightens me.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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35. Financial dependence on my children in old age is one of my greatest fears.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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36. I would prefer to always live in an area where people my age predominate.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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37. The social status of my friends and people my age is decreasing.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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38. People I know seem to sit around the house a lot more than they use to.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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39. Based on the people I know, you can't teach an old dog new tricks.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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40. I know I'll enjoy sexual relations no matter how old I am.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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41. The older I become, the more anxious I am about the future.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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42. The elderly shouldn't be expected to do more for society after they retire.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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43. Neighborhoods where the elderly predominate often become run down.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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44. You can keep the joys of grandparenthood, I'd rather be young.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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45. I would always want to live in a neighborhood where there was a variety of age groups.

<u>Strongly</u> agree	<u>Mildly</u> agree	<u>Uncertain</u>	<u>Mildly</u> disagree	<u>Strongly</u> disagree
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APPENDIX E

On the following pages, you will find a number of statements. Do not skip any item. If you think the statement is true, circle the (T). If you think the statement is false, circle (F).

- (T) (F) 1. There are more old widowed women than old widowed men in the United States.
- (T) (F) 2. Lung diseases are the number one cause of death among the elderly.
- (T) (F) 3. Of the elderly who live in the community, a majority of them live with one of their children.
- (T) (F) 4. Retirement is not a very difficult experience for almost all old people.
- (T) (F) 5. Among young adults, you find a great many personality types, but there are relatively few personality types among old people.
- (T) (F) 6. The prevalence of vision and hearing impairments increases greatly with age.
- (T) (F) 7. An older person with a failing memory tends to forget long past events more so than recent ones.
- (T) (F) 8. Old individuals who are depressed and passive tend to live longer than those who are grouchy and easily upset.
- (T) (F) 9. Older adults tend to have fewer years of formal education than young adults.
- (T) (F) 10. Old people are more likely than young adults to have a low socioeconomic status.
- (T) (F) 11. Mental abilities decline steadily after age 20.
- (T) (F) 12. There is a large decrease with age in the speed at which nerves in the body conduct impulses.

- (T) (F) 13. Older persons are more likely than younger ones to experience problems with sleeping.
- (T) (F) 14. Old people, especially old men, have a lower suicide rate than young people.
- (T) (F) 15. Old people are less alike than are young people.
- (T) (F) 16. Due to the effects of aging and illness, there is an irreplaceable decline in the number of brain cells with age.
- (T) (F) 17. Old people generally have slower reaction times (i.e., take longer to respond to a stimulus) than younger people.
- (T) (F) 18. For those receiving it, Social Security by itself provides an adequate income for most older people.
- (T) (F) 19. Over 10 per cent of all aged persons live in long-term health care institutions (i.e., nursing homes, homes for the aged, mental hospitals, etc.).
- (T) (F) 20. People do not get more religious as they age.
- (T) (F) 21. Older workers are less efficient and have more on-the-job accidents than younger workers.
- (T) (F) 22. Modern medical science has substantially increased both the average number of years a person is likely to live, as well as the maximum upper age limit of a human life.
- (T) (F) 23. Old people pay very little for health care since Medicare covers almost all their medical expenses.
- (T) (F) 24. Studies indicate that with increasing adult age there is a decline in sexual interest and activity.
- (T) (F) 25. One of the leading causes for admission to state mental hospitals is mental disorders associated with old age.