

SOCIAL FORCES AND AGING

AN INTRODUCTION TO SOCIAL GERONTOLOGY

Eighth Edition



Robert C. Atchley

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Robert C. Atchley
Miami University



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Preface

This book provides a comprehensive introduction to social gerontology—the emerging social science dealing with human aging. The book's major strengths are:

- *Organization.* The chapters and parts of the book flow logically, from basic aspects of individual aging and adaptation, to aging in everyday life, to the effects of aging on needs and resources, to society's response to aging.
- *Flexibility.* The section organization allows various parts of the text to be recombined to suit the preferences of the instructor. For example, the sections dealing with family caregiving from Chapter 8 (Family, Friends, and Social Support) could be combined with the sections on long-term care from Chapter 14 (Health and Long-Term Care) and assigned as a block.
- *Coverage.* Major areas of theory, research, social policy, and practice are covered in significant depth. Although additional readings are always helpful, they are not necessary for readers to gain a full appreciation of the scope of social gerontology.
- *Conceptual clarity.* Sound definitions and frameworks are used to organize and analyze the literature in various areas. Terms are carefully defined, giving teachers and students a clear common vocabulary.
- *Analytical approach.* Original works are succinctly described and then analyzed and placed in context with other work.
- *Original research.* In many areas, gaps in knowledge have been filled with original research. For example, the chapters on demography and social inequality draw heavily on my own examination of census data. Chapter 9 (Employment and Retirement) relies to a large extent on my own theory and research in that area.

In other areas, the lack of theory led to the development of new theoretical approaches. For example, theories about the dynamics of self in later life, types of interpersonal bonds, the retirement process, stages of retirement, spheres of activity, the continuity theory of adaptation to aging, and the economic functions of retirement were developed to consolidate bits and pieces of research evidence and deal with gaps in existing theory. Existing theories are also modified and extended. Modernization theory, life course theory, theories about adaptation to role loss, the theory of societal disengagement, and age discrimination theory are examples of theories that I have modified and extended to improve their explanatory power and stimulate research.

- *Hot topics.* Frequent revision of the book allows timely topics such as the effect of the Republicans' Contract with America

and its agenda on provision of services to older Americans, ethical conflicts and issues related to aging, and the debate about Social Security and Medicare to be included in an up-to-date fashion.

For this new edition, the order of the chapters has been extensively reorganized in response to feedback from readers.

The material on personal adaptation to aging now follows the three chapters on physical, psychological, and social aging—basic aspects of individual aging. The material on needs and resources and health and social services has been consolidated and reorganized into three new chapters:

- Income and Housing (Chapter 13)
- Health Care and Long-Term Care (Chapter 14)
- Community Social Services (Chapter 15)

This reorganization places individual and social policy material about health and long-term care into a single chapter. The same is true for community social services. In the earlier editions, social policy concerns were covered in separate chapters, which many professors found awkward.

To acknowledge an important increase in scholarship and interest, there is an entirely new chapter:

- Religion and Spirituality (Chapter 11)

There are new sections on:

- social factors in individual development (Chapter 6)
- adapting to chronic illness (Chapter 7)
- friendship patterns among the oldest-old (Chapter 8)
- those who reject retirement (Chapter 9)
- assisted living (Chapter 14)
- nursing home ombudsman programs (Chapter 15)

- elder abuse prevention and intervention (Chapter 15)
- aging as depicted in feature films (Chapter 16)
- ethical issues in aging (Chapter 16)
- dimensions of disadvantage Chapter 17)
- political trends (Chapter 19)
- social insurance (Chapter 19)
- structural lag theory (Chapter 20)

Heavily revised chapters include:

- The Scope of Social Gerontology (Chapter 1)
- The Demography of Aging (Chapter 2)
- Psychological Aspects of Aging (Chapter 5)
- Social Aspects of Aging (Chapter 6)
- Personal Adaptation to Aging (Chapter 7)
- Aging in Contemporary American Society and Culture (Chapter 16)
- Social Inequality (Chapter 17)
- Politics and Government (Chapter 19)

For this edition, the bibliography has been restricted to works specifically referenced in the text.

I am very grateful for the long-standing acceptance this book has received. To date, over 500,000 students have been introduced to social gerontology through previous editions of *The Social Forces in Later Life* (first through third editions) and *Social Forces and Aging* (fourth through seventh editions). These have included students from a wide variety of fields—sociology, psychology, home economics, nursing, social work, health, and adult development. The book has grown gradually larger, since its original publication in 1972, and the eighth edition bears little resemblance to the first.

I appreciate the many compliments and thank-yous I have received from both students and professors, and at the same time I accept the responsibility and challenge of working hard to see that *Social Forces and Aging* remains contemporary, and that it grows with the field of social gerontology. I am aided in this task by reviews commissioned by the publisher, but I also need your help. As you read, if you see errors or gaps in coverage, or if you think of topics that should be included or see an article that would be a particularly good research example, write to me. I cannot promise that I will agree with your point, but I want to know about it.

For the eighth edition, I was helped enormously in writing the new chapter on religion and spirituality by incisive and supportive reviews from Susan McFadden, Jeff Levin, and Gene Thomas. I also benefited from being part of the Omega Institute's Conscious Aging programs over the past three years. Finally, thanks to Rick Moody and Tom Cole for encouraging me to take on this difficult topic.

Reviewers for the eighth edition were Charlotte Dunham, Texas Tech University; Mary R. Holley, Montclair State University; Janet Hope, College of St. Benedict; David E. Redburn, Furman University; and Robbyn Wacker, University of N. Colorado.

Many colleagues have enriched, refined, and supported my intellectual and personal growth, including Bob Antonio, Bobby Applebaum, Sheila Atchley, Dick Campbell, Gloria Cavanaugh, Tom Cole, Steve Cutler, Ram Dass, Dave Ekerdt, Carroll Estes, Linda George, Lisa Groger, Joe Hendricks, Regula Herzog, Martha Holstein, Marty Jendrek, Bob Kastenbaum, Suzanne Kunkel, Powell Lawton, Jeff Levin, Chuck Longino, George Maddox, Pam Mayberry, Susan McFadden, Kathy McGrew, Hazel Markus, Vic Marshall,

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I owe special thanks to Dave Lewis, whose enthusiastic devotion to social justice, humanism, and social science attracted me to sociology and demography. Fred Cottrell served as my mentor for thirteen years. Wise and unselfish, Fred taught me that knowledge is most valuable when cast in a form that can be used to better people's lives. Millie Seltzer was a fountainhead of creativity and good humor, and it was my extraordinary good fortune to have her for a work partner and best friend for nearly thirty years. She exemplified the power of unwavering support. Sheila Atchley continues to teach me the value of having an equal partner with whom to experience all of life. Melissa Atchley is my connection to many new ways of looking at the world. Chris Atchley exemplifies hope and positive energy. Chris and Tara Miller radiate the power of love and basic human kindness. And through Carl Adlon and Nisargadatta Maharaj I learned who is creating and using all this knowledge. I have been truly blessed by all of these people.

I owe a tremendous debt to the staff of the Scripps Gerontology Center. Cheryl Johnson helped with many of the tables and figures in this book. Lisa Haston fended off the phone callers so I could concentrate on getting the book completed. Thelma Carmack, who has been with this book longer than anyone besides me, did her usual wonderful job with the bibliography. Their dedication, competence, and good humor are contagious. Finally, I would like to thank the many generations of students at Miami University for continuing to challenge me to grow and improve my understanding.

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Part 1



Setting the Stage

This book is an introduction to *social gerontology*, the discipline devoted to the study of the nonphysical aspects of human aging. As you will see, social gerontology covers a wide range of topics. Most of the book deals with up-to-date, factual information and current perspectives on aging. Part 1, consisting of three chapters, provides a context for this material.

Chapter 1 describes the *scope* of social gerontology: the general subjects included in social gerontology, how aging and the older population are defined, and some of the broad issues involved in the study of aging. Chapter 2 presents the *demography* of aging. It covers how aging becomes widespread in a population and how population aging is measured. It then considers the growth of the older population in the United States as well as its size, composition, geographic distribution, mobility, and life expectancy. Chapter 3 is a *historical overview* of aging in the United States, from colonial times to the present. Because aging today is often contrasted with aging in earlier times, it is important that such comparisons be based on fact rather than myths about “the good old days.” A knowledge of history also helps us better understand how contemporary society works. Together, these three chapters provide the background needed for the study of present-day social gerontology.

1 ■ The Scope of Social Gerontology

The process of **AGING*** has been around as long as life itself. Provided, of course, that illness or violence does not end life before its genetically programmed span, all living organisms pass through three broad stages from conception to death: maturation, maturity, and aging. And even though the *average* length of human life in most societies did not extend into “old age” until the twentieth century, there have been old people on earth for thousands of years.

Although biology forms the primary basis of aging, the *significance* of aging is largely social. Physical changes associated with aging, such as declining eyesight or graying hair, have little significance except as they relate to what is expected of people. For example, declining eyesight is only a problem if it (1) cannot be corrected and (2) interferes with a person’s ability to function normally. And gray hair is significant only because it is used conceptually to assign people to a particular social category. Thus, we need to consider not only what aging does to us but what we do with aging.

Aging also influences how a society or group is itself viewed. We speak of an “aging society” when the average age of its members is increasing. “The graying of America” is not about individuals who are aging but about the United States as a whole.

Aging affects everyone because nearly everyone has the potential to grow old and all the groups in which we live have older members. But although aging has always been a part of human life, the systematic study of aging, especially its social aspects, is relatively recent. For example, the Gerontological Society of America—an organization of researchers, practitioners, and educators interested in aging—was not founded until 1945. The behavioral and social sciences section was not established until 1956, and social gerontology as a concept was not developed until the late 1950s (Tibbitts 1960, 3). However, since 1960, research on aging has expanded so rapidly that in 1990 there were research and education on social aspects of aging at more than 1,300 colleges and universities in the United States alone.

What Is Gerontology?

Gerontology is the use of reason to understand aging. The term was first used to refer to the scientific study of aging, but contemporary usage also includes the study of aging using methods from various other disciplines, such as humanities, social policy, and human services. For us to understand and cope with aging, knowledge from a variety of sources is needed. Thus, gerontology includes the results of research on aging from all academic disciplines and fields of

*All boldfaced terms are defined in the Glossary.

professional practice. Biologists study the effect of age on the body's immunity to disease. Physicians search for effective ways to treat disease in older people whose immunity has been reduced. Psychologists study changes in bodily coordination with age. Occupational therapists search for ways to retrain older people whose coordination is impaired. Economists study income requirements of middle-aged and older people. Retirement counselors gather information about how to stretch retirement income. Sociologists study how aging affects social roles. Recreation workers develop ways to help older people get involved in new roles. The list goes on. Almost every area of study or practice that deals with people or their needs has a branch that is devoted to aging. And all these branches of all these fields come together under the label of *gerontology*.

There are four interrelated aspects to the study of aging: physical, psychological, social psychological, and social.

- The study of *physical aging* examines the causes and consequences of the body's declining capacity to renew itself; the physical effects of bodily aging; and the means for preventing, treating, or compensating for illness or disability caused by or related to physical aging.
- The study of *psychological aging* focuses on sensory processes, perception, coordination, mental capacity, human development, personality, and coping ability as they are affected by aging.
- *Social psychological aging* focuses on the interaction of the individual with his or her environment and includes such topics as attitudes, values, beliefs, social roles, self-image, and adjustment to aging.
- *Social aging* refers to the nature of the society in which individual aging occurs, the influence that society has on its aging individuals, and the impact aging individuals

have on their society. Social aging also includes interactions among society's various social institutions, such as the economy or health care, as they apply to the needs of an older population. *Society* as used here is not a single thing. The word refers to the shared ideas and common actions of the residents of a nation, and it includes messages in the mass media, common beliefs, typical ways that people solve problems, laws and regulations, administrative procedures, ideologies, and a host of other factors. Society does *not* act as a unit but as a loose structure of individuals, each with a slightly different view of beauty, truth, and goodness. Resist the trap of thinking of society as a single entity capable of single-minded action.

Social Gerontology

All four aspects of aging are so interrelated in everyday life that it is often difficult to distinguish one from another. Yet subdividing gerontology is useful for the systematic study of aging. **Social gerontology** is the subfield of gerontology that deals primarily with the *nonphysical* side of aging. Physical aging interests social gerontologists only as it influences the ways individuals and societies adapt to one another. Yet, because physical aging is at the root of all aspects of aging, social gerontologists need to understand as much as they can about it.

What Is Human Aging?

Aging is a broad concept that includes *physical changes* in our bodies over adult life, *psychological changes* in our minds and mental capacities, *social psychological changes* in what we think and believe, and *social changes* in how we are viewed, what we can expect, and what is expected of us.