Activities Adjusting Attitudes: The Relationship between Lifestyle and Aging Attitudes

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Introduction

Negative attitudes about old age in general are pervasive (Hummert, 2011; Kim & Stockdale, 2005)
- In general, negative stereotypes about old age become self-relevant once individuals identify as old (Luykx, 2009).
- Negative attitudes pose serious risks, e.g., increased rate of heart attack, worse memory performance, reduced longevity (Luykx et al., 2002)

Knowledge about social groups and active engagement help break stereotypes promote healthier lives
- Increased knowledge and awareness about a social group may reduce reliance on the stereotypes and encourage more realistic beliefs (Hess, 2004)
- Engaged lifestyles are cognitively stimulating or physically active may promote healthier aging (Hertzig et al., 2008)

Purpose of the Present Research: Test whether engaged lifestyles and positive intergenerational contact relate to more positive and less negative aging attitudes (about aging in general and self-perceptions of one’s own aging)

Methods

Study Design
Correlational and quasi-experimental between groups comparison (discussion group, no discussion group)

Participants (N = 60)
Other Lifelong Learning Institute (OLLI) members aged 50+ from San Joaquin County area; $15 gift card

Procedures
Baseline Survey Packet: Answer questions about background, health, aging attitudes, and activities; online or paper; 30 min.

Intergenerational Experiences
- In-person assessment, Small groups 1-4 participants; complete surveys and memory test; both paper and computer; 60 min.

Lifestyle Activities
- Lifelong Learning Participation: Report of duration of membership, typical time spent weekly on OLLI activities, and checklist of participation in specific activities, e.g., Lectures, Lunch and Learn events.
- Activities Questionnaire Social Score (Activities Questionnaire): Rating of frequency of participation in specific social activities, e.g., I visit relatives, friends, or neighbors and I attend organized social events, on a scale from 0 = never to 8 = daily; Sum score of 22 responses (range: 0-176) (Hope & Hertzig, 2015)

Self-Perceptions of Aging
- Objective age: How old a person feels (in years). Mean score from 5 items expressed as a proportion of one’s chronological age (Maslowe et al., 1972; Strickland-Hughes et al., 2016)
- Aging Satisfaction (Attitudes Towards Own Aging): Individuals’ satisfaction with their own age. Sum of responses to 5 items on a 5-point scale (range: 5-25), Higher Score indicates greater satisfaction (Luscher, 1975)
- Things keep getting worse as I get older.
- Awareness of Age-Related Change (AARC): Subjective aging experiences and extent aware of gains and losses related to different domains (e.g., health and physical functioning); 50 items rated on a 5-point scale (Kellas, 2015)

General Aging Attitudes
- Implicit Age Attitudes (Traits of Older Adults): What percentage of older adults do you think age - 2 (Dollah et al., 2011)
  - 15 positive traits, e.g., generous, healthy, wise
  - 15 negative traits, e.g., lonely, poor, senile

Expected Results

RQ1: Intergenerational Contact and Attitudes
- Positive correlation expected between quality x frequency interaction with younger adults and positive aging attitudes
- Positive correlation expected between positive aging attitudes and duration and frequency of participation in OLLI activities
- Similar pattern expected for self-perceptions and general attitudes

RQ2: Activities and Attitudes
- Positive correlation expected between positive aging attitudes and engagement in social activities and positive aging attitudes
- Similar pattern expected for self-perceptions and general attitudes

Discussion

Current status: IRB approval received April 23, 2018; on-going recruitment of participants
- “Old age” special group because everyone transitions into the group; attitudes from early life become relevant for the self

Importance of increased positive and decreased negative aging attitudes: bi-directional relationship between attitudes and behavior
- Positive self-beliefs and self-limiting behaviors
- Late life consequences of negative attitudes, e.g., increased rate of heart disease and stroke; poorer memory; reduced longevity

Implications for interventions and programming design for senior centers and lifelong learning groups
- Self-selection of participants into discussion group (possible confounds); convenience sample of OLLI members relatively healthy and educated (external validity); correlational, not causal, relationships
- Future directions: Design and test social intergenerational intervention to enhance aging attitudes held by younger and older adults

Presented at the Pacific Undergraduate Research and Creativity Conference (April, 2018)
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