



ANNUAL REPORT AGE CENTER OF NEW ENGLAND INCORPORATED

**FOR THE STUDY AND DEVELOPMENT
OF EXTENDED INDEPENDENCE
IN PEOPLE OF ADVANCING YEARS**

160 Commonwealth Avenue, Hotel Vendome, Boston 16, Massachusetts

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DOE/HQ

February 11, 1958

To the Members of the Corporation and the Trustees:

This first published Annual Report covers the three-year period from the opening of the Age Center of New England on January 25, 1955, through December 31, 1957.

It is our intention to retrace the steps which led to the establishment of the Center, the community and national need which made these steps necessary and the broad concepts from which the present Center has developed.

This brief historical review of the Center's beginnings and its rapid acceptance and growth during the past three years will, we trust, serve as a guide against which can be measured the soundness of the challenging developments which lie immediately ahead.

Respectfully submitted,

PAUL L. DAVIS, *Chairman*

RICHARD P. BARNARD

HUGH CABOT

CHARLES P. HOWARD

ROBERT T. MONROE

Executive Committee

of the Board



LIVING LONGER FOR WHAT?

The volunteer, by providing the criteria for study, takes the first step toward answering this question.

ATMOSPHERE OF INQUIRY

- It is scarcely surprising that the Age Center of New England should have come into being in a geographical area which has been consistently noted for its pioneer spirit in the realm of ideas. In New England one finds not the unplanned adventure towards something new, but rather a conservatism which resists change until it is demonstrable that change is necessary and then acts. Thus, in considering the dramatically increasing number of older people within the society, no casual decision was made that "something must be done". Rather, the question was posed: "What can be done which will at once serve the older segment of the present population and lead to new knowledge about older people in all the generations to come?"

This challenging atmosphere of inquiry laid the foundations for an entirely new approach to what is popularly called the "aging problem" and led to the foundation of the Age Center of New England.

There was, of course, immediate agreement among community and industrial leaders, medical men and social scientists that the somewhat startling statistics issued about the growing number of people remaining alive until they were very old posed a new problem. Indeed, the realistic-minded assumed responsibility for the increased longevity. There was no doubt that improved health, community and working conditions were the very cause of the problem which now confronted the nation. Yet once it had been granted that people were living longer, it was inevitable that the next question be posed, namely: "Living longer for what?"

QUESTIONS ARE POSED

"Living longer for what?" is a deceptively simple question. Obviously, it could not be answered by the random experiences of a few older people whose individual solutions or lack of solutions could be determined. Indeed, first one needed to ask about the composition of the total group of older people. Who were they? What were they like? What had their lives been? How healthy were they? How independent had they been financially during their more active years and now? How were they handling the experience of aging?

It was in the Spring of 1954 that a group of medical men and social scientists first turned to the published literature for answers to some of these questions. In the medical, social and economic areas, there were answers of a sort to be found. Not unexpectedly, these answers dealt with the ill and the dependent portion of the aging population, with people who had been institutionalized for medical or financial reasons. Statistics showed that of the fourteen million people over sixty-five then alive, the seriously ill and indigent represented no more than twenty-five per cent of the total number of aging. What, then, of the impressively larger seventy-five per cent? Obviously, answers based on generalizations about all older people from the findings on a small and unfortunate group could not be valid. Yet there was strong evidence that faulty generalizations were being made.

There seemed to be two observable tendencies in the common view of older people. On the one hand, they were viewed to be in a process of inevitable deterioration and, hence, in need of subsidized help. On the other hand, there was denial of any problem and they were simply viewed as being finished with the active business of living and deserving of a long vacation. Implicit in both views was the impression that older people were at the end of their period of useful participation as members of the community.

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THREE CONDITIONS TO MEET

It is arguable that common view is correct or incorrect unless there is knowledge available to support a position. Since knowledge about aging, except in terms of illness or impoverishment, was startlingly lacking in the Spring of 1954, the immediate problem, if this situation were to be corrected, was threefold.

First, would apparently healthy, self-motivated, active older people cooperate in a study which dealt with their life experiences?

Second, would good scientists be interested in setting up such a study under the same rigorous standards which apply to all areas of scientific investigation?

Third, were there individuals or groups in the community and country willing to support such a vitally necessary project?

By the time the Age Center of New England opened on January 25, 1955, all three of these questions had been answered affirmatively to a degree which warranted its establishment. Yet it is worth noting here that those early beginnings were no more than an indication of the direction in which the Center would move towards national significance and recognition.

THE FIRST IMPETUS GIVEN

The industrial community gave the first necessary impetus to the Center's opening. Through its working force, business is in touch with perhaps the largest number of older people. Pre- and post-retired employees had long been a concern of management. Business and industrial leaders were, therefore, interested in the establishment of a Center which could at the same time perform two needed functions by building a new body of knowledge about aging and by giving service to older workers both directly and through company personnel officers. The early financial support provided by far-sighted management is in large measure responsible for the existence of the Age Center of New England. The continuing interest of an increasing number of companies has been instrumental in keeping scientific research well related to its ultimate practical application.

A relatively small number of dedicated individuals who made substantial contributions of time and money during the Age Center's beginning years are equally responsible for the Center's existence.

Indeed, without the faith which lay back of the first corporate and individual gifts, the Center would not today be solidly on its way to a break-through to new frontiers of knowledge.

When the Age Center opened, the community's interest and support were clearly evident.



MEMBERS ARE THE KEY

The Age Center is often asked today, by scientists and visitors from all over the country, how it "gets" its members. Perhaps in the very word, member, lies one of the important answers. From the very start and despite the scientific nature of the organization, the Center viewed the older people who would cooperate in the research not as "subjects" to be studied but rather as members who would in the true sense be associates in the research.

Illustrative of this point of view is the leaflet which was published shortly after the Center's opening and which is still being used to introduce the interested older person to the Center. "You are the Authority", the leaflet says to the older man or woman considering membership; "No matter what kind of a person you think you are, whether you consider yourself important or unimportant, if you have lived fifty years or more, you are the authority and can contribute experience of real value and pioneer towards new knowledge."

The two conditions of membership are that the member be active enough to come in to the Center to participate in the research and that he declare his interest by paying annual membership dues of two to four dollars.

No degree of scientific skill and no amount of money could take the place of the Age Center members since it is from them that all new knowledge must come. For who, one might well ask, can know about the process of aging except the very people who have the first-hand experience?



Harvard researchers study data on age.

Medical specialists make a strong contribution.

The Age Center, in addition to finding answers for tomorrow, strives to serve the older generation of today.



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WHO THEY ARE

Members now number over 600 and have answered with a resounding affirmative the question which was posed three years ago as to whether healthy, self-motivated active older people would cooperate in the search for new knowledge. They come from every socio-economic background, they differ widely in personality and beliefs but they share the common desire to help put together workable solutions to the heretofore unanswerable query: Living Longer for What?

From the start, members have joined at the rate of two hundred each year and this trend continues unabated today. They have come to the Center because they have read of it in the local or national press, because their physicians have suggested it, because the personnel office of their present or former place of employment has told them about it, because they have heard of the Center at church, at a club meeting or through conversation with friends or relatives. The common denominator for them all seems to be more than a casual interest in finding out if there is anything in the story which is abroad about older people being valuable, not a common community attitude.

Members continue in the Center's program for a variety of reasons. Many find help for themselves in solving problems. For others, the experience is highly challenging and richly rewarding intellectually or emotionally. Others gain their chief satisfaction from the contribution which they are making to research.

During the entire period, there have been only seventeen deaths, a number impressively and curiously lower than would be predicted from the actuarial figures. Those members who have died have left behind them vital data about themselves which assures them a certain immortality in the study of aging and for which the Age Center is in their debt.

All of the members, with a very few exceptions, have given a great many hours each year to the research tasks which they undertake with the Center staff. The large majority of them have found this contribution to research to be at the same time a method of self-discovery and a way of finding new paths to travel, new areas of interest and usefulness. The reasons for this will become more apparent when the Center's systems and techniques are discussed in another section of this report.

A broad exchange of knowledge is the core of the Age Center's research program.



SOUND LEADERSHIP ESTABLISHED

The other requirement for the establishment of the Age Center, namely the interest of respected scientists in sound gerontological research, was assured within the first months of the Center's existence. This interest initially was implemented through the formation of two advisory committees, the Research Advisory Committee and the Health Advisory Committee, on which social and medical scientists of the highest distinction have served through the three years. All of the Center's research program has been developed under the

scrutiny of this distinguished group. One of their number resigned his post as a faculty member in the Departments of Social Relations and General Education at Harvard University to become the Center's Executive Director. Another, a noted geriatrician, became Director of the Center's Health Division.

Implicit in the conditions which led to the Center's establishment and growth is the service which has been rendered by the Board of Trustees. Comprising from the outset fifteen civic and community leaders, the Board has guided the general policies of the Center from the days of its tentative beginnings, through its early struggles and, again, through this current year which has seen the Center's greatest expansion and growth. It is the Trustees who have helped to keep that fine balance between research and service needs and thus to formalize the unique nature of the Age Center of New England.

DEVISING A NEW SYSTEM

The devising and validating of an original, sensitive system which would give service to older people while it gathered reliable research data about them became the first formal task of the Center. Techniques were not adopted until they had been tested through a sufficient number of staff-member interviews. No research instrument used heretofore with other age groups was incorporated into the system until it was found to be entirely appropriate for Age Center members.

Broadly stated, the Age Center system is built on the belief that, from the vantage point of later years, an individual's life is best examined and understood if it is discussed in well-defined segments. This has reduced materially the tendency of people, perhaps particularly older people, to generalize superficially about their life experience and to draw faulty conclusions about themselves which are inadequate in helping them meet current situations.

This is of particular importance in the last third of life, since it is during these years that people tend to feel the rejection and isolation which accompany, in some measure, a loss or decrease in their family, work and friendship relationships. Increased understanding of their own attitudes and values often help members to replace lost relationships and work status with new associations and meaningful activity.



There has been encouraging evidence of the fact that when an individual discovers, in the course of reviewing with a Center staff member the various aspects of his life, the consistency with which he has behaved in a certain manner, he often sees for the first time why it is that "most people" seem to be treating him in a certain way. He recognizes his own responsibility in the matter and is consequently given a basis for making changes in his own behaviour, if change seems desirable to him.



Hugh Cabot (right), one of the founders and executive director of the Center, chats with trustee Laurence O. Pratt.



About 200 members serve on Age Center committees.



Through the Center, college students are taught social research in the field of aging.

SERVICE IS VITAL

Indeed, in the particular structure which has been built as a setting for the Age Center's research, service has become an inseparable and vital part of the program. Not only can the member derive help through research interviews in understanding and improving his attitudes, relationships and activity, but also the member has access to one of the consultants on the Age Center staff. This consultant makes no research demands of the member, but rather, talks with him about any area of his life which is of particular interest or concern to him at the particular moment. In the truest sense, the consultant is the member's "friend", eager to listen and to be useful in terms of helping the member integrate his experience either inside or outside the Center.

Committed as the Age Center is to sustaining and increasing the independence and self-reliance of its members, advice in its usual meaning is never offered. Rather, the consultant listens carefully to what the member says about troublesome or puzzling aspects of his life and assists him in making of them an intelligible and acceptable part of his total life experience. Consulting sessions take two forms; the first in the area of social integration and the second in health integration. Further, the consultants make use of the Center's constantly growing body of experience and research findings in all their dealings with members.

STUDENT TRAINING FORMALIZED

During the past two years, the Age Center has become the medium through which college graduate and undergraduate students are being taught social research in the field of aging.

Thirty-five students enrolled in the Social Research Course at Simmons College have been assigned to the Center for training in lieu of their class work. They have been given training in interviewing, in the administration of research instruments and in concept formation.

Similarly, the Psychological Clinic of the Social Relations Department of Harvard University has assigned twenty-one graduate students throughout the Fall term of 1957 for training in the psychological testing of older people.

The assignment of these students for credit work at the Center speaks not only to the quality of the organization but also to the fact that young and developing minds are for the first time considering in detail the nature of people as they grow older.

MEMBERS GET TOGETHER

A further adjunct to the service nature of the Age Center was the creation, two years ago, of the Member Activity Division. This Division, not contemplated in the Center's initial planning, came into being at the request of members who had shared the common experience of taking part in the program of individual interviews and wished to undertake together, with the new knowledge they had gained, committee activity which would have community value.

Approximately one-third of the membership is now taking part in this group development. Committee work is under the supervision of a members' advisory committee, which reviews all suggestions for work to be undertaken and sets suitable policies.

Members' committees which are now active include the Archives Committee, which compiles historical data about the environment in which the members were raised; the Business Consultants which can make available to small business the experience of retired executives on a consulting basis; the Community Organization Committee, which educates local communities about the work of the Age Center; the Editorial Board, which reviews and suggests content for the Center News; the Emergency Fund Committee, which screens the needs of members in temporary difficulty due to illness or sudden loss of job; the Hobby Committee, which makes arrangements for members' participation in community hobby shows and annually places on sale in a downtown department store products made by members; the Hospitality Committee, which arranges special member events throughout the year; the Job Consultants' Committee, which studies the job field for older workers and counsels fellow members on how to seek employment; the Members' Room Committee, which plans and arranges exhibits of members' work at the Center; the Speakers' Committee, which fills speaking engagements individually or with a panel of speakers before club, civic, church and community groups and on radio and television; and the Volunteer Committee, which supplies the Center and the community with occasional volunteer workers.

RESEARCH STANDARDS SET

Research is a word which has become so much a part of the language system of the contemporary culture that it is being used in a variety of meanings.

In view of this, it seems appropriate to clarify the Age Center's philosophy of research. The Center's program of scientific inquiry involves the basic premise that research is most meaningful when it is designed not only to acquire descriptive facts, but also to search for basic interrelationships, general principles, and explanatory concepts.

This principle has been established with the full acceptance of the fact that research findings can be no better than the methods used to collect and interpret them. Consequently Age Center scientists continually devote attention to improving research methodology. Major consideration is given to criteria and procedures for identifying and selecting appropriate samples from our total membership; to choosing, constructing, and evaluating interview and testing procedures; to selecting and devising sound techniques for the analysis and interpretation of results. Such tasks as these have incalculable significance in terms of the ultimate contributions of the Age Center.

It would be well to note here some of the decisions which were established by the Research Committees before the research program got under way. It was decided that the proposed research must promise to add significantly to the present knowledge in the field of aging. Next, it must extend into the area of aging the existing knowledge in a particular scientific discipline. Further, the studies must be mutually helpful to each other in dispelling the current fragmentation of knowledge in the field of aging.

It was believed that favorable conditions for fruitful research over an extended period of time were buttressed by the Center's operational methods and systems with its members. It had been established that the use of validated research instruments and specially prepared interview questionnaires by well-trained staff members constituted a sound baseline foundation for all further research. Members were being helped to a greater understanding of their own lives and stimulated to an interest in other people like them through such structured interviews in the areas of health, vocation, avocation, education, recreation, housing, finance and family. Both factual and attitudinal material evoked the member's interest and cooperation and provided researchers with detailed knowledge of the historical and psychological background and present status of the members.

GROUND WELL CULTIVATED

The ground was well cultivated, then, for special research projects which would expand the Center's initial research in terms of both breadth and depth.

The current year of 1957 has seen the impressive beginnings of this expansion and points the direction for the years to come.

It is noteworthy that the first two years of the Age Center's operations laid the groundwork so well that the field of aging, until recently a stepchild of science, attracted the working interest of a large number of first-rate scientists from the leading universities and teaching hospitals in the New England area.

These scientists saw in the Age Center a rich field of investigation, rich both in terms of valuable new findings and of eventual application to other areas of science. Significant, also, is the fact that the large proportion of these scientists are young men well launched in their respective disciplines and in a position to choose any age group on which to concentrate their particular research abilities.

NATIONAL INSTITUTES OF HEALTH APPROVE PROJECTS

It was the combination of all these factors, no doubt, which led to the serious consideration and consequent approval given to the first series of research proposals made by the Age Center to the National Institutes of Health of the Public Health Service of the U. S. Department of Health, Education and Welfare in Washington, D.C.

For those who are not familiar with the National Institutes of Health, it might be well to summarize here the system under which research grants are made. The Study Groups and Councils which consider all applications for research grants comprise the leading scientists in the country whose duty it is to administer for the best public interest the funds voted to research by the Congress of the United States. Three times a year, these scientists leave their teaching and research posts in the country's universities and university-affiliated hospitals to meet in Washington for the sole purpose of selecting from among the thousands of research proposals made to the National Health Institutes. Only after careful scrutiny and discussion, and often only after a site visit is made, do the Study Groups recommend research projects to the Institute Councils for further study and approval or rejection. With approval, the Institutes grant funds for the support of the specific research and additional amounts toward the administrative costs to the sponsoring organization. The grants are made for a variable term of years and may be extended or expanded if the Institutes consider it valuable to do so.

During the current year of 1957, the Age Center's third year of existence, approval of a National Institute of Health grant was given to the following research projects which are now under way as an integral part of the Center's work:

Title of Project: *Correlates of Anxiety in Older Persons*
Length of Project: Three Years
Professional Personnel: Project Director, Hugh Cabot, M.B.A. Executive Director of the Age Center of New England, Inc.
Principal Investigator, Philip E. Slater, Ph.D., Consultant, Division of Research Processing and Analysis, Age Center of New England, Inc.; Instructor in Sociology & General Education, Harvard University.

Summary of Proposed Work:

Two major attributes of older persons in this society make them appropriate for the study of anxiety reactions in the face of stress. First, there are several common crises (e.g. retirement, widowhood, separation from children, loss of friends through death) which confront the older person. Second, the individuals who attempt to handle these crises do so in the context of a relatively fixed personality structure, thereby providing the possibility of a baseline in which considerable confidence may be placed.

The study will investigate first the extent to which each of the many crises tend to produce anxiety in the older population. The level of anxiety created, as well as the particular form of its expression, will be assessed. The second goal of the study will be to determine the correlates of anxiety in later life, by relating these reactions to the past behavior and history of the individuals. The techniques of the structured interview, the psychological test (objective and projective), and the self-administered questionnaire will be

employed. Finally, construction of a predictive index will be attempted in order to provide an indication of the particular crises which will disturb a particular individual. Data from replicated cross-sectional studies will provide hypotheses which can be tested by longitudinal studies.

Title of Project: *The Nutrition of Apparently Normal Aging Persons*
Length of Project: **Two Years**
Professional Personnel: Project Director, Hugh Cabot, M.B.A., Executive Director of the Age Center of New England, Inc.
Principal Investigator, Charles S. Davidson, M.D., Associate Professor of Medicine, Harvard Medical School; Associate Director, II & IV (Harvard) Medical Services, Boston City Hospital.

Summary of Proposed Work:

The study proposes to investigate the nutritional status, present food intake, previous food habits and other matters relating to nutrition of four hundred apparently healthy aging members of The Age Center of New England, Inc. The Study is designed to provide ultimately answers to the following questions:

- 1) What is the ideal food intake of the aging?
- 2) What is the ideal nutritional status of the aging?
- 3) How can these be achieved and does their achievement alter or improve other aspects of the aging process?

The methods used will include interviews at regular intervals on present food habits, including twenty-four hour food intake. These data will be analyzed for individual nutrients. Modern anthropometric measurements will be used to determine nutritional status.

The data will also be correlated with other data obtained in psychological, sociological and related physiological fields at The Age Center of New England.

Title of Project: *Prejudice and Older People*
Length of Project: **Two Years**
Professional Personnel: Project Director, Hugh Cabot, M.B.A., Executive Director of The Age Center of New England, Inc.
Principal Investigator, Nathan Kogan, Ph.D., Research Coordinator, The Age Center of New England, Inc.; Research Associate in the Laboratory of Social Relations, Harvard University.
Consultant, Gordon W. Allport, Ph.D., Professor of Psychology, Harvard University and Consultants from Research Committee, Age Center of New England.

Summary of Proposed Work:

The three basic aims of the proposed project are (1) an examination of attitudes toward older people held by various groups in society, (2) the assessment of older people's attitudes toward themselves as a distinct age group in the social system, and (3) the study of situational, socio-cultural, and personality factors associated with attitudes toward the aging.

The basic methodology involves the formulation of an instrument for measuring attitudes toward older people. In arriving at such an instrument, the present research (1) will employ interviews designed to elicit spontaneously some of the opinions currently held about older people, and (2) will examine the various existing scales and questionnaires to determine which, if any, of the items in these instruments are appropriate for our problem.

The final attitude battery will be administered to a sample of apparently healthy older persons at The Age Center of New England, Inc., and to other groups varying in age and socio-economic status. Wherever feasible, the number of cases in each age and socio-economic category will not fall below 200. Norms will be obtained for the various groups.

The present investigation will attempt to go beyond a simple survey of attitudes toward older people to a more comprehensive understanding of the place of such attitudes in an individual's psychic makeup.

Title of Project: *A Thematic Analysis of Later Life*
Length of Project: Two Years
Professional Personnel: Project Director, Hugh Cabot, M.B.A., Executive Director of The Age Center of New England, Inc.
 Principal Investigator, Francis W. Marley, A.M., Clinical Psychologist, The Age Center of New England, Inc.
 Consultant, Henry A. Murray, M.D., Professor of Clinical Psychology and Member of the Board of Syndics of the Harvard University Press, Harvard University.

Summary of Proposed Work:

A significant body of knowledge gradually is being accumulated concerning the psychology of aging. Much of this knowledge represents information obtained from older people through the use of questionnaires and check-lists which encourage relatively objective and matter-of-fact responses to standard printed questions. To date, however, there has been very little systematic investigation of the subjective, more emotionally vigorous, kinds of psychological response patterns in later life. Certain researchers have recognized the potential value of such reactions as keys to basic psychological facts about aging, but they have been oriented primarily toward the study of emotionally disturbed, rather than healthy, older persons. It is the intent of the project to move toward filling these important gaps in our knowledge.

Preliminary work with Age Center members, coupled with earlier research on younger people, has shown that a particularly fruitful approach to the study of subjective psychological reactions is the scientific analysis of *imagination*. Fortunately there are in existence well-established and appropriate techniques for obtaining, in verbal form, the required kind of imaginative productions; similarly, there are available for adaptation to present needs standard techniques for translating imaginative productions into quantifiable, interpretable research data.

Because the data-gathering procedures appear to be intrinsically interesting and of such a nature as to encourage participating members to respond freely and with a minimum of self-consciousness, it is very likely that it will be possible to obtain information which will reflect significant ways in which older people experience the process of aging. Having obtained such data, attention will be devoted to a search for general themes or trends which seem to typify reactions to life in the later years. For this purpose, interest will center upon categories of analysis such as characteristic motivational states, nature of interactions with the environment, and psychological processes utilized in adjusting to aging.