OKLAHOMA DELEGATE TRAITS: 1981 WHITE HOUSE CONFERENCE ON AGING

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BACKGROUND

After the 1981 White House Conference on Aging, a participant summed up her thoughts borrowing from Peggy Lee's song, "Is that all there is ...?" (Krogh 1981) Part of the answer to her question predates the Fall of 1981, and is anchored in the preparation stage at the state level. Prior to the national conference, each state was asked to provide viable input through a state conference, with national delegates from that body later representing their constituency in the national forum.

In early Spring of 1981 each of the 10 state districts in Oklahoma were asked to choose delegates for a State White House Conference on Aging. From this aggregate of 485, and during district caucuses at the state meeting, 72 potential national delegates were chosen. This panel was forwarded to the Governor's White House Conference on Aging Committee which selected the final 26 to represent the State at the National White House Conference on Aging in Washington, D.C.

With increasing emphasis on participatory democracy and the growing influence accruing to the politicized elderly, the elected and appointed advocates occupy key roles as agents of future change for the elderly. This research compares some of the selection and representative aspects of such a process.

An important question emerges: Does the process select the best qualified representatives for the national conference? This was measured by several instruments to tap those most knowledgeable about aging, measured on the Palmore (1977) *Facts on Aging Quiz*, and their degree of purpose, measured by the Crumbaugh (1964) *Purpose in Life Scale*, and their degree of anomie, measured by the Srole (1956) *Anomie Scale*.

THEORY

This research indirectly addresses some theories of aging (Atchley 1980). The *activity theory* perhaps has received the most support, both in terms of empirical research and public policy. Rooted in symbolic interaction theory in sociology, this approach ties successful aging to high levels of activity. Predicated on the notion of the social origin and development of self within a nexus of social interaction, this approach implicitly presumes the continuity of middle-age cultural orientations, including attitudinal and role continuity. This theory owes much of its present prominence to the increased involvement of elderly persons in the political process.

Disengagement theory is anchored in the functional motif in sociological theory. Accepting as axiomatic the detrimental nature of aging, it applies one definition of aging as a process of increased vulnerability and decreased viability. This approach assumes the inevitable and reciprocal withdrawal of society from aging individuals, and aging individuals from society. In theory, one may disengage without subsequent loss of morale. Although increasingly questioned on grounds of a conservative ideological bias, the physiological realities of aging, such as a decline in the homeostatic mechanism that maintains a static or constant state in the internal environment of the organism beg for some rapprochement of this old conservative theory with social reality. Social gerontologists offer a compromise position in the term *differential disengagement* to identify the partial function of disengagement theory (Streib, Schneider 1971). Older cohorts may disengage from the work role and concurrently increase the engagement level in less demanding roles (Bynum, Cooper, Acuff 1978).

Other theory orientations derived from or related to these theories are identified as *role theory, subculture theory, age stratification theory*, and *reference group theory. Role theory* addresses life transitions and the anticipatory socialization involves preparation for the next age category. Typically, society does prepare its members for all but the last stage of life. *Subculture theory* is based on some shared notion of common identity and common plight. Despite the obviously heterogeneous nature of some 25 million older persons in the United States, many believe that their similarities are strong enough to be molded into a viable political voice for social change which is advantageous to the aging.

Age stratification theory views the similarities and differences of age cohorts as being anchored in the shared historical, social, economic, and political experiences that tend to be imprinted, and to form a constellation of ideas, beliefs, values, and attitudes that are observable in common overt behavior. *Reference group theory* looks for behavioral norms and standards in reference relations, in those groups to which the actor aspires in a membership or symbolic identification.

PROBLEM STATEMENT

As eclectic research, this study makes no direct test of aging theories. Evaluation of the differences and similarities between the national and the state delegate groups involved in the sociopolitical process suggests some orientation from these theory perspectives. The two panels of the sample are *activity oriented* by virtue of involvement. Their participation grounds this axiomatic observation. The elements of the *disengagement model* also typify many of the respondents in the present research. For example, many are formally retired, but selectively maintain median levels of engagement, called *differential engagement*, with attendant high morale. Role theory is evident in the obvious transfer of previous skills to present positions. For many, a prior repertoire prepared them for leadership positions in aging circles. Clearly, and perhaps unconsciously, the respondents in this study are *advocates*, and thus are involved in the evolution of an *aging subculture*. As the data are presented, and with similarities more pronounced than differences, it appears that this population of respondents gives some confirmation to the tenets of *age stratification theory*. Finally, the prestige associated with selection to the national panel heightened the saliency of the *reference group theory*.

Prior to the state conference, and during the final selection of the 26 national delegates, the State Director of Aging shared a concern with the Governor's White House Conference on Aging Committee. Specifically, he questioned how representative the national delegates would be of the state conference of delegates. Did the process of selection assure fair representation of the State's concerns at the national level of decision making? Later, the authors met with the State Director of Aging and designed this study to investigate some of the characteristics of the two pools of delegates, to determine the equity of the selection process for delegates.

METHOD

Data were collected from respondents from the national and state delegates on marital status, race, sex, age, education, birthplace, perceived health, self-rated knowledge of aging, and degree of religiosity, and the Palmore *Aging Facts Quiz*(1977), the Crumbaugh *Life Purpose* questionnaire (1964) and the Srole *Anomie* (1956) questionnaire.

The target population consisted of 457 persons chosen as delegates from the 10 economic development districts in Oklahoma for the Oklahoma White House Conference on Aging. Of the 457 chosen as delegates, 74 were selected as nominees to be delegates to the National White House Conference on Aging in 1981. They were selected by the Governor's Advisory Committee, which from this pool of 74, further selected the final 26 delegates who actually attended the White House Conference on Aging in the Fall of 1981. The State paid travel expenses for 13 of this delegation, and 13 paid their expenses privately. For this study, the *sample population* and the *target population* are the same.

A questionnaire was mailed to each of the 455 delegates, excluding two who were familiar with the research project. The original list erroneously reported 458 names, because there was one duplicate listing. The returning questionnaires were monitored for missing data and identification numbers. Due to restrictions of time and funding, only one mailing was completed. Usable questionnaires were obtained from 227 of the original state delegate pool of 383 for a 59 percent return rate, and 42 of the 72 original national delegation nominees, for a 58 percent return rate.

RESULTS

Demographic characteristics of the two samples are shown in Table 1, where the criterion t-statistic value at the .05 level of confidence is 1.65 for a combined 267 degrees of freedom. There are significant positive differences between the national and state delegation groups for *level of education, size of town of birth, self-rated knowledge of*

TABLE 1: MEAN SCORE COMPARISON, NATIONAL VS STATE DELEGATES

(Criterion: $t_{.05,227} = 1.65$)

Variables	Range	Delegates: National	State	t
Marital, married	0-1	0.76	0.69	1.18
Race, white	0-1	0.79	0.78	0.15
Gender, male	0-1	0.52	0.62	-1.12
Age	26-99	60.83	63.32	-1.06
Education	0-20	16.00	14.44	**2.45**
Birthplace	1-5	2.79	3.36	**2.42**
Health	1-5	4.29	4.24	0.37
Knowledge	1-5	4.40	4.07	**2.95**
Religiosity	1-5	3.05	3.58	**-2.63**
Life Purpose	1-7	6.24	6.17	0.78
Anomie	1-7	3.39	3.46	-0.36
Semantic differential	1-7	4.84	4.91	-0.36
Aging Facts, Right	1-24	12.74	11.22	**2.62**
Aging Facts, Wrong	1-24	7.81	8.26	-0.85
Don't know	1-24	3.45	4.52	**-2.30**

aging, and correct responses on the *Aging Facts Quiz.* Thus, the national delegation appears to have been better qualified in terms of these criteria, to participate in the National White House Conference on Aging. The only significant negative difference was in self-rated religiosity, which is not obviously related to socioeconomic and sociopolitical factors in aging. We omit interpretation of the *Don't Know* response rate on the *Aging Facts Quiz.*

The samples were almost representative in racial makeup, with 78 percent white, 11 percent black, 9 percent native American, and the 2 percent Hispanic or other. More than 70 percent were married, and 20 percent were widowed, and 8 percent were divorced, separated, or single. In rating health, 95 percent perceived their health as average or better. In knowledge about the elderly, 38 percent claimed to be very knowledgable; 40 percent claimed good knowledge; and 22 percent claimed relatively poor or no knowledge about the elderly. In religiosity, 21 percent claimed the highest level; 25 percent claimed to be very religious; 41 percent claimed a moderate level; 10 percent were *not very* religious; and 3 percent claimed *none.*

Table 2 presents comparisons only of non-zero (significant) pairs of correlations among the 15 variables for the national and state delegate groups. Of the 105 paired correlation coefficients, only 10 pairs met the .05 correlation significance criterion, with the minimum, r = .30 for the 42 national delegates (bold print), and the minimum r = .13 for the 227 state delegates (regular print). In Table 2, the paired correlation coefficients are shown below the diagonal, and their z-transformations are shown in mirror image above the diagonal. Assuming equal variances, differences between the z-transforms of the correlation coefficients can be evaluated by the estimate of the standard deviation of the difference, a familiar operation in statistical tests with two groups. Calculating the correlation between two variables uses 3 degrees of freedom: one for the variance of each variable, plus one for their covariance. This requires subtracting 3 from each sample n when measuring the z-score difference with the estimated standard deviation of the difference. The standard deviation of the difference is estimated by the square root of the pooled reciprocals (1/x) of the degrees of freedom remaining in the two groups. The formula and calculation are as follows:

$$(1)\ s_{z1\text{-}z2} = \left[(n_1 - 3)^{-1} + (n_2 - 3)^{-1} \right]^{.5}$$

$$= (39^{-1} + 197^{-1})^{.5} = .175$$

The correlation coefficient, ranging from +1.00 to −1.00 must be transformed to a z-score of the same sign, ranging between +4.00 and −4.00, using the following formula for a correlation coefficient, r = .6:

$$(2)\ z_r = .5 \log \left[(1 + r) / (1 - r) \right]$$

$$= .5 \log (1.6 / .4) = .69$$

The z-score for the difference between two correlation coefficients is determined from their z-transforms as follows, where:

$r_1 = .61$; $r_2 = .22$

$$(3)\ z_{z1\text{-}z2} = (z_1 - z_2) / s_{z1\text{-}z2}$$

$$= (.71 - .22) / .175 = 2.80$$

TABLE 2: COMPARISON OF NON-ZERO CORRELATIONS FOR NATIONAL & STATE DELEGATES

(National, n = 42; $r_{.05,42}$ = .30; State, n = 227, $r_{.05,227}$ = .13)

(Correlations below diagonal; z-transforms above; decimals omitted; national r, z, bold type)

Variable		1	2	3	4	5	6	7	8	9	10	11
Marital, married	1			**-32**								
				-35								
Race, white	2								**-32**		**-40**	
									-13		-18	
Gender, male	3	**-31**										
		-34										
Age	4									**-38**		
										-21		
Education	5						**31**				**-45**	
							22				-37	
Birthplace	6					**61**						
						22						
Health	7								**32**			
									-16			
Anomie	8		**-31**					**31**				
			-13					-16				
Age Facts Right	9				**-36**						**-85**	**-50**
					-21						-50	-74
Age Facts Wrong	10		**-38**			**-42**				**-69**		**-45**
			-18			-35				-46		-32
Don't know	11									**-46**	**-31**	
										-63	-42	
		1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**

z-score and error probability, p, for correlation differences:

r_1, r_2	3-1	8-2	10-2	9-4	6-5	10-5	8-7	10-9	11-9	11-10
z_{r1-r2}	0.17	-1.08	-1.26	-0.97	2.80	-0.46	2.74	-2.00	1.37	0.74
Probability, p	.43	.14	.10	.17	.01	.68	.01	.01	.09	.23

from the standard table for the cumulative normal distribution. This accounts for .998 of the distribution, leaving an error probability, p, of 1.000 - .998, and p = .002. This calculation identifies a significant difference between the two correlations coefficients, .61 and .21 for the given sample size.

The lower part of Table 2 gives z-scores and the probability, p-value for each of the 10 paired significant correlations. It should be noted that an n of 40 represents a lower limit for use of z transformations, and we recognize that the Pearson product-moment correlation, r, is not well suited to ordered categories of ordinal scale variables, where variance may be constrained by skewed distributions.

DISCUSSION

Being mindful of these limitations, we note that only 3 of the 10 significant paired correlations differ from each other enough for a significant difference. The main conclusion is that the two groups of national and state delegates are not measurably different, overall, in the 105 paired correlations of the 15 variables, and that the variables are mainly uncorrelated among themselves, since most of the correlations differ from zero only within chance due to sampling variation. This simplifies the task of analysis.

The 3 significant differences in correlation values shown on Table 2 are those between: 1) birth place and education

(Row 6, Column 5); 2) anomie and perceived health (Row 8, Column 7); and 3) Aging Facts: Right and Wrong (Row 10, Column 9). The national delegation has a much higher correlation between size of town of birth and level of education than that of the state delegation. The suggestion is that those born and reared in larger towns have more incentive and opportunity for education. This effect is hardly measurable for the state delegation where the R^2 or predictive power of the correlation (.22 X .22) is .05, compared to .37 for the national delegate group.

The significant difference in correlations for perceived health and anomie scores arises mainly from the fact that the correlation is positive for the national delegates and negative for the state delegates. Both correlation values are close to the significance criterion of $\pm$.30 for the national group and $\pm$.13 for the state group. For the national delegate group the R^2 is .09, while it is inconsiderable as a predictor at R^2 = .026 for the state delegate group. However, it appears that there is a real difference, and that the members of the national delegate group who perceived better personal health also were more dissatisfied with social and personal conditions. The correlation of the state delegate group is in the expected direction, but is so weak as to cast doubt on the logic of the relation.

The significant difference in the expected *negative* correlation between right and wrong answers on the Aging Facts Questionnaire is not readily explained. That the correlation is significant and negative in both cases indicates the probable consistency and real discrimination between the right and wrong answers. If there were zero correlations between these variables in either group, it would suggest random and meaningless answers due to poor questions or disoriented respondents. That this expected negative correlation is measurably higher for the national delegation,

with R^2 = .48, compared to R^2 = .21

for the state delegation suggests that the smaller national delegation was more homogeneous in background, and more consistent in response patterns to this test of awareness about the conditions of the elderly.

The original question of an equitable selection process of national delegates from the larger state pool of delegates can be answered in part. Although the two groups appear to be essentially equal on the majority of variables, several findings indicate some real differences. National delegates had more education, claimed to know more about the elderly, and were less negative about the elderly than the state delegates. Overall, the selection process appeared to select those persons who were best qualified to represent the State at the national level.

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