2012-04-19

The Portrayal of Older People in Marketing Materials for Senior Centers

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The Portrayal of Older People in Marketing Materials

for Senior Centers

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A thesis submitted to the faculty of
Brigham Young University
In partial fulfillment of the requirements for the degree of

Master of Arts

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June 2012

ABSTRACT

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This content analysis examined 128 senior center brochures and newsletters to determine how older people (those 65 years and older) were portrayed. Findings indicated that portrayals of older people in this medium that targets older people and their caretakers exclusively were overwhelmingly positive. Older people were portrayed favorably in terms of health status, personality descriptors related to level of happiness, interaction with others, mental state, as well as body image and overall evaluation. In several other categories such as energy level and activity level they were portrayed neutrally, and not a single category was dominated by negative portrayals. In fact, any negative portrayals accounted for less than 0.1% of all portrayals for any given category.

Older females in particular, were portrayed in a more positive way than females in other analyses of media and advertising, which found them to be under represented or portrayed as unmotivated, ugly, or helpless. Females made up 64% of the overall representation compared to 36% for males, which closely resembles figures for participation at senior centers throughout the U.S. Females were also portrayed as more physically active and in better health than males. Those using a physical aid, either male or female were extremely under represented when compared to disability statistics, showing an overly positive portrayal of overall health status.

The data supports other studies that demonstrate a more positive portrayal in media specifically targeting older people, and an overall trend of improving portrayals of older people across all mediums. Positive portrayals like those exhibited in senior center brochures and newsletters can greatly improve the self-image and overall quality of life of older people as well as help to change negative stereotypes of older people held by the general population.

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CHAPTER ONE: INTRODUCTION

Beginning in 2011, millions of adults from the baby boomer generation reached their 65th birthday and became senior citizens (Ambrosius, 2010). During the next two decades this segment is expected to swell to 20% of the U.S. population, creating many interesting challenges in public policy, health care, media practices, and even in marketing and advertising (McConatha, Schnell, & McKenna, 1999; Middlecamp, & Gross, 2002; Ambrosius, 2010). The possible impact of an increasing population of older people has led many scholars to study the way the older generation is viewed by the rest of society and how they are portrayed in the media (Peterson & Karnes, 1976; Peterson, 1992; Roy & Harwood, 1997; Bramlett-Solomon & Subramanian, 1999; Kessler, Rakoczy, & Staudinger, 2004; Kimuna, Knox, & Zusman, 2005; Robinson & Anderson, 2006, Robinson, Callister, Magoffin, & Moore, 2007; Klien & Shiffman, 2009; Prieler, Kohlbacher, Hagiwara & Arima, 2011). These, among other scholars have found that in many cases the general attitude toward older people held by young and older people alike reflects deep-rooted stereotypes of the aging process. Although aging is a normal part of the human experience, it is often associated with negative stereotypes that represent an overall decline in quality of life (Schmidt & Boland, 1986; Healey & Ross, 2002; Robinson & Anderson, 2006).

These negative stereotypes are found in general attitudes toward older people but are perpetuated most often in the way older people are portrayed in the media (Peterson & Karnes, 1976; Peterson, 1992; Roy & Harwood, 1997; Bramlett-Solomon & Subramanian, 1999; Kessler, Rakoczy, & Staudinger, 2004; Kimuna, Knox, & Zusman, 2005; Robinson & Anderson, 2006; Robinson, Gustafson, & Popovich, 2008). These negative stereotypes include: negative physical characteristics (Slotterback & Saarnio, 1996), declining intellectual abilities (Robinson &

Anderson, 2006), and being a drain on society (Healey & Ross, 2002). These stereotyped portrayals are common occurrences in primetime television (Dail, 1988; Kessler, Rakoczy, & Staudinger, 2004; Roy & Harwood, 1997; Dubois, 1997; Signorielli & Bacue, 1999; Miller, Leyel, & Mazachek, 2004; Lee, Kim, & Han, 2006; Blakeborough, 2008; Lein, Zhang, & Hummert, 2009), children's television (Robinson & Anderson, 2006; Klein & Shiffman, 2009), film (Towbin, Haddock, Zimmerman, Lund, & Tanner, 2003; Lauzen & Dozier, 2005; Robinson, Callister, Magoffin, & Moore, 2007; Robinson, Callister, & Magoffin, 2009), magazine advertisements (Peterson, 1992; McConatha, Schnell, & McKenna, 1999; Bramlett-Solomon, & Subramanian, 1999; Robinson, Gustafson, & Popovich, 2009; Robinson & Callister, 2008; Miller, Miller, McKibbin, & Pettys, 1999; Zhang, Harwood, Williams, Ylänne-McEwen, Wadleigh, & Thimm, 2006; Williams, Wadleigh, & Ylanne-McEwen, 2010), and even adolescent and children's literature (Peterson, & Karnes, 1976; Apseloff, 1986; Danaoski & Robinson, In Press). Although positive characteristics of older people do appear in the media, older people are still portrayed more negatively than any other segment of the population (Roy & Harwood, 1997; Kimuna, Knox, & Zusman, 2005).

Unfortunately, negative stereotypes and media portrayals that perpetuate those stereotypes can have a very serious negative effect on the way older people are viewed by others and more importantly how they view themselves (Peterson, 1992; Robinson & Umphrey, 2006; Robinson, Gustafson, & Popovich, 2008). For example, according to Robinson and Umphrey (2006), in television portrayals "older individuals who perceived themselves as negatively stereotyped … tended to internalize and believe the images, while others who considered themselves the target of negative stereotyping reported feeling diminished in the eyes of others and experiencing lower self-esteem" (p.169). This lowered self-esteem can lead to social, psychological, and physical

problems (Roy & Harwood, 1997), along with a sense of worthlessness and hopelessness (Lauzen & Dozer, 2005). Additionally, older people may associate their identity with a particular stereotype that they feel they fit into and feel as though they must act in accordance with that stereotype (McConatha, Schnell, & McKenna, 1999; Levy, Slade, Kunkel, & Kasl, 2002).

This very issue is supported by symbolic interactionism theory (Cooley, 1902; Mead, 1934), which states that each person is a "looking glass self," putting themselves in the position of others and viewing themselves as they imagine others perceive them. The key issue is that social validation is crucial to development of self-esteem while the opposite may prove its destruction (Roy & Harwood, 1997). The most powerful effect of negative media portrayals on older people may not simply be its influence on how others view them, but that the way they perceive that others view them may actually become the view they ultimately have about themselves (Taylor-Harris & Zhan, 2011).

Many scholars wonder why the media, especially advertisers would choose to alienate such a large and potentially important segment of the population with negative portrayals and stereotypes of aging (Peterson, 1992; Miller, Leyell, & Mazachek, 2004; Zhang, et al., 2006; Robinson, Gustafson, & Popovich, 2008). There are several different opinions on this matter. Some scholars believe that because negative portrayals of older people in advertising are consistent with attitudes held by the general population, they are merely reflecting rather than establishing the real-world sentiment about older people and aging (Peterson, 1992; Miller, Miller, McKibben, & Pettys, 1999; Miller, Leyell, & Mazachek, 2004; Robinson & Anderson, 2006). Another theory is that because most advertising executives are under 50 years old, they lack empathy for the over-50 demographic, which can influence their attitudes toward how that

group should be portrayed (Carrigan & Szmigin, 1999), and finally, others believe that it is simply a business decision. Advertisers do not see the older segment of the population as important or able to create a return on investment, and therefore target the younger generation. Because most messaging is not intended for older people, they are portrayed in a way that appeals to a younger market, one that already holds negative stereotypes about older people (Peterson, 1992; Healey & Ross, 2002; Robinson, Gustafson, & Popovich, 2008). In fact, advertising that is generally intended for older consumers such as health care products, financial services, travel and leisure services, home improvement services, and others usually portrays older people in a positive light (Roy & Harwood, 1997; Williams, Wadleigh, & Ylanne-McEwen, 2010).

While it is difficult to distinguish with complete certainty who exactly advertisers are targeting, one particular form of advertising that targets older people exclusively and has yet to be analyzed for its portrayal of older people, is advertising for senior center services. Senior centers target people of retirement age and their caretakers and serve as establishments for older people that are aimed at providing them with social functions, recreation, subsidized meals and nutrition, health services, adult education, volunteer opportunities, information and referral, psychological, legal and income counseling, and help to combat isolation (Fitzpatrick, McCabe, Gitelson, & Andereck, 2005; Turner, 2004). These centers are usually overseen by both community volunteers and paid employees and are viewed by many as a perfect environment to promote successful aging activities (Aday, Kehoe, & Farney, 2006). In fact, this is where senior centers differ from nursing homes and assisted living centers; they specialize in providing entertainment and activities rather than major assistance like help with bathing, dressing, using the bathroom and administering medications (U.S. Department of Health and Human Services,

2011). According to Fitzpatrick, McCabe, Gitelson, and Andereck (2005), senior centers

continue to grow in popularity among older people because they are "recognized as conduits for

senior programming across the country" (p.25). In fact, the National Council on Aging reports

that between 1995 and 2005, senior centers in the U.S. increased from approximately 10,000 to

16,000 (Eaton & Salari, 2005). As the number of baby boomers reaching retirement increases,

surely the demand for senior centers will continue to grow with it (Kaye & Reisman, 1993;

Eaton & Salari, 2005).

An increase in demand for senior centers also requires special attention to marketing

approaches to attract the millions of baby boomers who are at a level of relatively good health

and self-sustainability and do not require hospice or private medical care (Kessler, Rakoczy, &

Staudinger, 2004; Kaye & Reisman, 1993; Fitzpatrick & McCabe, Gitelson, & Andereck, 2005).

Currently, senior centers use a wide variety of methods for marketing their services, including

television commercials, billboards, Yellow page ads, brochures and newsletters, word of mouth,

and even professional websites (Kaye & Reisman, 1993; Zaphiris & Kurniawayn, 2001).

Between each of these avenues for advertising senior centers, older people themselves view

brochures and newsletters as the most trustworthy and high-quality method of advertising these

services, even with the ease of finding information via the Internet. In fact, a 2010 American

Association of Retired Persons study reported that only 30% of adults age 50 and older are very

or extremely comfortable using the Internet, lessening the effectiveness of that medium among

the older population (AARP, 2010; Kaye & Reisman, 1993).

Because they both target older people exclusively and are a favored medium among older

people as a method of advertising senior centers, an analysis of senior center brochures will add

a new dimension to current and previous research that has analyzed the portrayal of older people

in television, film, literature, and print and television advertising. The purpose of this thesis is to

determine how older people are portrayed in senior center brochures and newsletters. Using

symbolic interactionism as a framework, this content analysis will examine the portrayal of older

people in senior center brochures and newsletters printed in 2011 and 2012 with representation

from all fifty United States and the District of Columbia.

CHAPTER TWO: REVIEW OF LITERATURE

This literature review will focus on stereotyping of older people and examine how they are viewed by society. The literature review will also examine how older people have been portrayed in the media, including their demographic, physical, and personality characteristics along with potential effects of these stereotyped images.

Stereotypes of older people

Stereotypes have been defined by many scholars as generalized perceptions about groups of people deeply rooted in cultures that cause a homogenization or generalization of the characteristics of that group (McConatha, Schnell, & McKenna, 1999; Robinson, Gustafson, & Popovich, 2008). Most often stereotypes are used to help make inferences about parts of the world with which information or direct experiences is lacking (Robinson & Anderson, 2006), and are applied frequently to race, gender, and age (Nelson, 2005; Klien & Shiffman, 2009). These inferences can evolve as more information is gathered through personal experience or viewing media portrayals of that group (Robinson, Gustafson, & Popovich, 2008). The cognitive shortcuts offered by stereotypes about any group present a problem in that they tend to be negative and lead to prejudice and discriminative behavior toward the group being stereotyped (McConatha, Schnell, & McKenna, 1999; Robinson & Anderson, 2006). While discrimination on the basis of race or gender has become progressively less accepted by society, the same treatment on the basis of age is still widely condoned (Angus & Reeve, 2006). Prejudice or discrimination on the basis of age specifically is known as ageism and is largely bread out of the attitudes held by society and portrayed in the media (McConatha, Schnell, & McKenna, 1999; Nelson, 2005; Angus & Reeve, 2006; Blakeborough, 2008). It is important to note that not all

stereotypes of older people ridicule or demean. Some age related stereotypes are overly positive and can produce a sanitized or idealized image of older people that is just as generalized and inaccurate as a negative stereotype, possibly leading to other negative effects (Miller, Leyell, & Mazachek, 2004; Blakeborough, 2008; Williams, Wadleigh & Ylanne, 2010).

Both positive and negative stereotypes of older people and aging are widely held by people of all age groups including children, adults, and even older people themselves (Hummert, Garstka, Shaner, & Strahm, 1994; Slotterback & Sarnio, 1996; Williams & Blunk, 1999; Zhang, et al., 2006; Robinson & Anderson, 2006; Robinson, Callister, Magoffin, & Moore, 2007). A 1986 study by Schmidt and Boland that was improved upon by Hummert, Garstka, Shaner, and Strahm (1994) attempted to show specific stereotypes of older people held by people of different age groups and create categories for them that could be used for generalizability in future studies. Participants in this study sorted a list of traits related to aging into different categories and uncovered seven stereotypes shared by all of the age groups participating. They include three positive stereotypes with their related characteristics: *Golden Ager* (active, adventurous, healthy, lively, health- conscious, well-traveled, productive, liberal, future oriented, sociable), *Perfect Grandparent* (intelligent, kind, loving, family-oriented, generous, happy, grateful, supportive, understanding, interesting; Several of the traits for this category were interpreted from the subject's facial expression, where a smile or laugh can indicate happiness, friendliness, sociability, and kindness), and *John Wayne Conservative* (patriotic, retired, conservative, nostalgic, old-fashioned, religious, tough, proud, wealthy), along with four negative stereotypes and their related characteristics: *Shrew/Curmudgeon* (greedy, stubborn, prejudiced, complaining, nosy, inflexible, demanding, hypochondriac), *Despondent* (lonely, neglected, sad, tired, fragile), *Severely Impaired* (senile, slow- moving, slow-thinking, poor, sexless, sick, feeble, incoherent,

inarticulate), and *Recluse* (quiet, timid, dependent, forgetful).

Each age group developed an additional negative stereotype not shared by the other groups. The Young adults developed the additional negative stereotype titled: *Vulnerable* (afraid, victimized, bored, sedentary), the Middle-aged adults developed the stereotype of *Self-centered* (inflexible, stubborn, humorless, jealous, miserly, greedy, nosy, selfish) and older adults yielded the stereotype of *Elitist* (demanding, prejudiced, wary, snobbish, naïve). Overall, the researchers found that the attitudes toward older people held by all age groups is mostly negative, but that as the age of the participant increased, the more positive overall view they held of older people. This is supported by older adult's more complex view of aging, differing from younger adults in the belief that the aging process varies for each individual and not everyone follows the negative stereotypical route perpetuating by society (Hummert, Gatska, Shaner, & Strahm, 1994).

In recent years, other researchers have added to the list of stereotypes listed in the previous study. In a study of advertising images in UK magazines (which will be discussed in more detail in the media portrayals section) Williams, Wadley, and Yllane-McEwin (2010) used their analysis to add several stereotypes that coincide with an aging baby boomer generation and attempted to expand the range of contexts and lifestyles older people are currently limited to. The new stereotypes were mostly positive with one negative and are as follows: *Happy and affluent, Mentor, Active*, and *Frail and vulnerable*. The *Happy and Affluent* category was described as content and enjoying life because of their ability to buy back their youth. The *Mentor* stereotype was described as being an authority figure and often having leadership in their employment. The *Active* older people stereotype is described as fit and active physically, as well as having a witty and playful personality. Although the researchers view these as positive stereotypes, they recognize that in some cases they are idealized, and may actually fit only a

small percentage of older people. The researchers also included a negative stereotype that is widely accepted by society at large. They label it as the *Frail and vulnerable* older person, with the description of bed-ridden, sickly, and waiting to die. While definitely not idealized like the other stereotypes they uncovered, the researchers also recognize this stereotype as very unrealistic for the majority of older people.

Similar to the previous studies, Slotterback and Sarnio (1996) conducted a study testing solely the attitudes that younger adults have of older people by allowing them to sort through different traits and assign specific attributes to older people. Their study supported the findings of Hummert, Gatska, Shaner and Strahm (1994) in that younger adults had widely held negative stereotypes about older people including the belief that older people experienced deteriorating intellectual abilities, were unattractive, unhappy, and that they declined significantly in their physical abilities. The researchers attribute these attitudes to American culture and the common appearance of these stereotypes in subtle jokes. Additionally, "limited opportunities for interaction between generations, along with our society's emphasis on youthfulness, may create and perpetuate negative stereotypes about the elderly" (Middlecamp & Gross, 2002, p.272).

Robinson and Anderson (2006) and Anderson, Harwood, and Hummert (2005) add to these findings by showing that the most widely accepted age stereotypes held by children and younger adults are most commonly related to physical characteristics of older people. These researchers found that these younger groups described older people as ugly, overweight, toothless, slow moving, less healthy, wrinkled, lonely, and using a physical aid such as a cane, wheelchair, glasses, or hearing aid. The researchers emphasize that some of these traits are not intentionally negative, but are meant to be simple, neutral descriptors of older people and the natural process of aging. These include having gray hair, baldness, glasses, and wrinkles. Neutral descriptors in

these studies are however, in the minority compared to other negative descriptors of older people.

Other recent studies support the previous literature and show an overall negative public perception of older people and even add stereotypes not previously seen. Some of these include the perception of older people as incompetent, fragile, complaining, socially unskilled, overly self-disclosive, dominating (Zhang, et al., 2006), institutionalized, senile, very poor or very wealthy, constipated or incontinent (Robinson & Anderson, 2006), rigid, depressed, lonely, isolated (Robinson, Gustafson, & Popovich, 2008), physically and psychologically inept (Williams & Blunk, 1999), dangerous drivers, having little interest in sex (Bramlett-Solomon & Subramanian, 1999; Kimuna, Knox, & Zusman, 2005), nagging, irritable, cranky, weak, verbose, ugly, miserable, (Williams, Wadleigh & Ylanne-McEwin, 2010), grumpy, behind the times, forgetful and stupid, mean (Healey & Ross, 2002), useless, financially distressed (Blakeborough, 2008), disabled, and ready to die (McConatha, Schnell, & McKenna, 1999). This long list of negative stereotypes from the last decade leave little doubt concerning Roy and Harwood's (1997) assertion that stereotypes about older people are more negative than those held for any particular race or gender.

Not all stereotypes of older people are negative however. Other studies show that in some instances older people are stereotyped in a positive way, even by younger age groups. Some of the findings from the past two decades include studies showing older people being described as kind, supportive, and wise (Zhang, et al., 2006), experienced, beautiful, gentle, and fun (Waskel, Dubes, & Reviere, 1997). Although these studies show that positive stereotypes of older people do exist, Miller, Miller, McKibben, & Pettys (1999) found overtime an "increasing percentage of negative stereotypes and a decreasing percentage of positive stereotypes" (p.333). Overall

findings indicate that generally, most Americans have a negative view of older people and aging (Robinson, Callister, Magoffin, & Moore, 2007).

An explanation for this negative view may be found in part of the definition of stereotyping mentioned earlier in the literature. Stereotyping is usually a result of lacking information or direct experience with an object (Robinson & Anderson, 2006), and as multi-generation households and the significance of family relationships have diminished in U.S. culture, younger generations have less contact with older people than in generations past (Phillipson, Bernard, Phillips, & Ogg, 1998). This lack of contact and direct experience with older people inevitably leads to stereotypes usually based on physical analysis alone, which only perpetuates widely held, negative views of older people. As real relationships with older people are developed and the ability to communicate with older adults increases, judgments of older people by all age groups may actually shift from superficial stereotypes to judgments based at an interindividual level (Anderson, Harwood & Hummert 2005).

Levy, Slade, Kunkel, and Kasl (2002) offer an additional explanation to the widely held, negative view of older people and aging in their study of the relationship between longevity and perceptions of aging. According to the researchers, age stereotypes are developed several decades before reaching old age and younger generations are likely to automatically accept those stereotypes' validity without question when they encounter them. Having already internalized them at a young age, the result is that by the time they reach old age they accept these learned stereotypes for themselves and apply them to their own aging process when any of them become personally relevant. Simply put, learned stereotypes about older people and aging are internalized and learned at a young age, become personally relevant as a person reaches old age, and are perpetuated with each generation. Eventually, a large portion of society holds the same

stereotyped views on aging and it becomes a part of the culture. In the following section the literature on media portrayals of older people will be discussed along with potential effects of stereotyping older people and the aging process.

Media Portrayals of Older People

Although extremely under represented in comparison to U.S. Census population statistics, older people are still portrayed frequently in several different forms of media (Miller, Miller, McKibbin, & Pettys, 1999; Kessler, Rakoczy, & Staudinger, 2004; Roy & Harwood, 1997; Zhang et al, 2006) including television (Robinson & Anderson, 2006; Dail, 1988; Vasil & Wass, 1993; Dubois, 1997; Lee, Kim & Han, 2006; Blakeborough, 2008; Klien & Shiffman, 2009; Lien, Zhang & Hummert, 2009), film (Lauzen & Dozier, 2005; Robinson, Callister, Magoffin, & Moore, 2007), literature (Peterson & Karnes, 1976; Apseloff, 1986), magazines (Peterson, 1992; McConatha, Schnell, & Mckenna, 1999; Bramlett-Solomon & Subramanian, 1999; Robinson, Gustafson, & Popovich, 2008; Lusk, 1999; Carrigan & Szmigin, 1999; Williams, Wadleigh, & Ylanne-McEwen, 2010), and advertising that uses those mediums to target their audience (Miller, Miller, McKibbin, & Pettys 1999; Kessler, Rakoczy, & Staudinger, 2004; Roy & Harwood, 1997; Zhang et al., 2006; Robinson & Anderson, 2006; Vasil & Wass, 1993; Robinson & Callister, 2008; Carrigan & Szmigin, 1999; Peterson, 1992; McConatha, Schnell, & Mckenna, 1999; Bramlett-Solomon & Subramanian, 1999; Williams, Wadleigh, & Ylanne-McEwen, 2010; Prieler, Kohlbacher, Hagiwara & Arima, 2011). Many of these studies have shown that media portrayals along each medium are aligned with stereotypes held by the general public toward older people, including those related to demographics and physical and personality traits (Peterson, 1992; Roy & Harwood, 1997; Lauzen & Dozier, 2005; Robinson, Gustafson, & Popovich, 2008).

Firstly, television portrayals of older people are frequent across several different types of programming ranging from children's cartoons to primetime television, and in most cases reflect the widely accepted negative stereotypes of the general public toward older people (Peterson, 1992; Robinson & Anderson, 2006; Kessler, Rakoczy, & Staudinger, 2004; Healy & Ross, 2002). Nearly all of the literature on older people's primetime television portrayals seems to agree that older people are grossly under represented in relation to actual population numbers, but overall results differ from decade to decade (Dail, 1988; Kessler, Rakoczy, & Staudinger, 2004; Vasil & Wass, 1993; Dubois, 1997; Lee, Kim & Han, 2006; Blakeborough, 2008; Klien & Shiffman, 2009; Zhang & Hummert, 2009). Studies from over two decades ago for example, show a fairly positive view of older people and the aging process. Dail's (1988) content analysis of primetime television showed that older people, although excluded from society in many cases, were portrayed as happily growing old with the difficulties of the aging process being minimized. Similarly, research by Dubois (1997) showed a trend toward television programming that denied the aging process of characters in order to reassure the public about aging. The authors posit that these portrayals are the result of economics and that although older people in their samples were portrayed as being excluded from society, they are not excluded as consumers, thus resulting in semi-positive portrayals.

Vasil and Wass' (1993) study of television portrayals of older people comes from the same era as the previous studies but differs in its findings. Although it also showed an under representation of older characters in its sample, especially women, it did not show a softening of negative stereotypes, nor a message of a happy aging process. Rather, it showed that the majority of older people were portrayed with negative mental and personality characteristics such as being silly, unsuccessful, sexually neutral, eccentric, and lacking common sense. The

difference in the results of this study and the previous two may be the result of the sample used. While Dail (1998) and Dubois (1997) used samples exclusively from prime time U.S. television, Vasil and Wass (1993) included samples from daytime television and even children's programming that included soap operas and cartoons. This is only one possible explanation as to why these results differ from the other two television portrayal studies.

A study by Kessler, Rakoczy and Staudinger (2004) nearly a decade later content analyzed prime time television shows and mirrored the results of Vasil and Wass' (1993) study finding extreme under representation in proportion to the actual population percentage for older people, along with overall negative characteristics. Older people were shown as passive, victims, ill, and dying. Their study also pointed out some differences between portrayals of older men and older women, mostly in their traditional life roles. While both genders were portrayed as overly wealthy and involved in social causes, older women were no longer shown as housewives or grandmothers, but as unskilled workingwomen who's role was to support those around them. Older men maintained the typical gender role of being the provider.

In a cross-cultural comparison of prime time television portrayals of older people in the United States and Taiwan, Lien, Zhang, and Hummert (2009) found similar evidence of under representation as well as general marginalization and negative stereotyping across both cultures. The researchers did, however, find that television portrayals of older people in Taiwan were far more positive than U.S. portrayals. Although negatively stereotyped in some instances, older people in Taiwanese television were shown as being associated with a higher social status, having worthwhile life experiences, and able to exert control over their relationships. Even older women were portrayed in a more positive light, being represented as often as their older male counterparts.

Other forms of television that are often just as popular and influential as prime time television have also been analyzed for their portrayal of older people including cartoons and children's television programming. Findings for these types of television programming are similar to the analyses of primetime television portrayals but display some differences as well. Robinson and Anderson (2006) found that in children's animated television programs older people were generally portrayed in a positive way, but similar to other media portrayals they were shown often undeveloped, partial people that were not important to the story line surrounding them. In a few select cases they were even portrayed with negative physical characteristics such as being ugly, overweight, toothless, slow moving, and using a physical aids like hearing aides, canes, and wheelchairs. The researchers recognized other unflattering traits that they did not perceive as being overtly negative, but as realistic, normal parts of the aging process. These included: gray hair, baldness, use of glasses, wrinkles, and using a cane or physical aid.

More recent studies analyzing cartoons also presented mixed findings. Blakeborough (2008) performed a case study analysis of the portrayal of older people in the animated sitcom *The Simpsons*, which is immensely popular among several different age groups. The findings were interesting because while on the surface the show appears to portray older people with a mocking, disrespectful tone (In one episode a main character tells his aged father that old people are useless), its use of ironic parody provides a criticism of society's view of older people and aging and calls for a reevaluation. While the show portrays older characters as frail, weak, lonely and burdensome, it also poses the question, "Why have we looked at the elderly as frail, as helpless, as lonely, and as a burden?" (p.65). In the case of the main character Homer's rude and ignorant comment to his own aged father, it proves more to point out the error in his thinking

than to add to the heap of negative portrayals found in other television programs. *The Simpsons* is unique in that it calls for a critique of established stereotypes of older people and opens the door for their possible subversion.

Apart from under representation, Klein and Shiffman's (2009) analysis of popular mid-twentieth century cartoons found nearly all positive portrayals, which is yet to be found in other television portrayal studies. Much of the reason for such drastically different results when compared to other studies is the time period of the chosen sample. The researchers chose cartoons from several decades ranging from the 1930's to the 1960's when multi-generation families was more prevalent in American culture and respect for authority and older people was much more of an established norm. The researchers found that older people were portrayed as "good guys," had above-average intelligence, and did not differ from their younger counterparts in level of physical attractiveness or pro-social and anti-social acts committed. Television portrayals of older people in both primetime television and television programming intended for children follow a trend of under representation, but differ in their overall depiction of older people. Some studies showed older people portrayed entirely negative, some positive, and some with mixed results.

Film is another popular medium that has been analyzed for its portrayals of older people. Similar to television, portrayals of older people in film were mostly positive, but still exhibited several negative stereotypes of older people (Lauzen & Dozier, 2005; Robinson, Callister, Magoffin, & Moore, 2007; Robinson, Callister, & Magoffin, 2009; & Towbin, et al., 2003). Similar to other media analyses of portrayals of older people, Lauzen and Dozier (2005) found that older people were severely under represented in proportion to real world population statistics. Their findings also displayed a stark difference between portrayals of older men and

women. While older men were shown in leadership roles and positions of power, older women were shown as unmotivated and without goals, a gender double standard that has been seen in other studies as well (Furnham & Mak, 1999; Prieler, Kohlbacher, Hagiwara, & Arima, 2011).

Robinson, Callister, and Magoffin (2009) specifically analyzed popular teen films covering a span of three decades and found that older people were underrepresented and portrayed with negative personality traits such as grumpy, mean, stern, and senile. Race of older characters was analyzed as well and their findings indicated that Caucasians were extremely over represented, while minorities were under represented. Older people were however, portrayed with a few positive personality traits related to their level of happiness and interaction with others, often portrayed as happy, friendly, loving and caring. Their findings also showed very few cases of physical impairments and a majority of older people portrayed as healthy and active. Their study also used Hummert, Garstka, Shaner, and Strahm's (1994) scale to make an overall evaluation of older characters. Half were portrayed in a positive way, nearly a third were portrayed negatively, and the remainder neutrally.

Other scholars have studied Disney films targeted to children. Towbin, Haddock, Zimmerman, Lund, and Tanner (2003) in their analysis of animated Disney films found that older characters and other minorities were often portrayed negatively. In several of the films they were portrayed as forgetful and stupid, crotchety, grumpy, mean, and short tempered. Three of the films analyzed did have positive portrayals however. *The Lion King, Pocahontas,* and *Mulan* each had an older character providing guidance to a younger character. The study is limited by its small sample size of only 26 films and could perhaps yield more comprehensive results from the addition of more than a dozen animated films released since 2003.

Robinson, Callister, Magoffin, and Moore (2007) also analyzed animated Disney films for

their portrayal of older people and found much more positive portrayals than the previous study, but also reported some instances of negative stereotypes. Their findings showed that the majority of older people were portrayed with positive characteristics, being shown as friendly, loving and caring, intelligent, wise, happy, and content but included a few instances where older characters were given negative characteristics related to their level of happiness, mental state and energy level, and they were portrayed as grumpy, evil, sinister, helpless, senile or crazy, and as the object of ridicule. The majority of animated characters in the sample however, were also given positive physical characteristics with only a small percentage manifesting the negative physical attributes of missing teeth, a hunched back, sagging breasts, and a crackling voice. This study, along with the previous analysis of Disney animated films is one of the few studies in the literature to address race representation of characters. Demographically, 83% of older characters were portrayed as Caucasian, leaving only 17% minority characters, half of which were portrayed as Asian. The researchers indicated that these numbers do not accurately reflect statistics for real world race demographics. Although the overall literature on portrayals of older people in film is rather limited, it does show a mostly positive portrayal of older people with only a few select cases of negative portrayals.

Literature for children and adolescents has also been analyzed for portrayals of older people. Similar to the findings in children's animated television shows, Peterson and Karne's (1976) analysis of adolescent literature found that older characters were under developed and usually did not have an important role within the storyline. Further, the researchers found that older characters were often portrayed as senile, crippled, ill, bearing the physical signs of old age, and were not always grandparents. A balanced portrayal however, that accurately reflected real world population statistics was offered in areas of employment, financial status, and

intelligence. Some were portrayed as retired and spending most of their time at home while others were employed, some were rich and some were poor, some were intelligent and some were ignorant, and some were treated well by other characters while others were treated with scorn.

A decade later, Appseloff (1986) conducted a similar analysis of children's literature for the portrayal of older people and found that the most common portrayal was that of a strong grandparent. While other studies indicated a trend toward secondary or background character portrayals, this study showed older people in major grandparent roles with more character complexity than previous portrayals, especially older women. In fact, the researcher showed an emerging stereotype of the strong grandmother in the absence of a grandfather figure. This seems to contradict the majority of other studies that under represent and stereotype older characters, women in particular. One negative characteristic found in this study however, was that an older person's strength often came at the expense of younger characters, often ruling them with a domineering personality. Overall, the portrayals were positive and unique when compared to other studies along the same medium. An even more recent analysis of adolescent literature shows an even more positive portrayal of older people. Dellman-Jenkins and Yang (1998) found that a large majority of the literature in their sample portrayed older characters as healthy, clean, friendly, happy, good, caring and not lonely, which is a stark contrast to Peterson and Karne's (1976) study from more than two decades earlier. The trend in children's and adolescent literature seems to indicate an improvement in portrayals over time with select few portrayals that were negative.

Finally, many scholars have analyzed portrayals of older people in advertising in several different mediums, mostly television commercials and magazine print ads. Roy and Harwood

(1997) analyzed television commercial advertising for portrayals of older people and found that they were mostly positive, portraying older people as healthy, active, lucid, and strong. Portrayals were most positive in commercials advertising products that appeared to be targeted to older people, such as financial services and retail chains. Similar to most other analyses in the literature however, the findings indicated that older people were still largely under represented. Additionally, this study analyzed not only the older character's traits but also whom the character was pictured with. The researchers found that older people were rarely pictured with children or alone, perhaps as a result of the type of product they were advertising. They also found proportional representation according to product type and product targeting. Older people were represented frequently in commercials for retail chains and financial services and under represented in commercials for automobiles and travel services that were aimed at reaching a broader audience.

Miller, Leyel, and Mazacheck (2004) conducted a longitudinal study of television commercials in the U.S. from 1950 to 1990 and found an overall positive portrayal of older people. Negative or demeaning stereotypes were employed by specific advertisers and occurred in only a few select cases. The majority of portrayals placed older people in Hummert, Garstka, Shaner, and Strahm's (1994) categories of *Perfect Grandparent, Adventurous Golden Ager*, and *Productive Golden Ager*, giving them an overall positive image. In contrast to many of the other studies mentioned, older women were also portrayed positively. They were commonly portrayed as both nurturing and productive and in a variety of roles beyond the usual homemaker role. The researchers argue that their findings dispel the notion that advertisers are socially irresponsible with their use of negative stereotypes, and are perhaps undeserving of the criticism they receive.

A more recent cross-cultural analysis by Lee, Kim, and Han (2006) compare television

commercials in the United States and South Korea for their portrayal of older people and yielded similar results to the analysis of prime time television shows by Lien, Zhang, and Hummert (2009) mentioned previously. The analysis shows under representation of older people in both South Korean and U.S. commercials, but similar to television programming in Taiwan, South Korean commercials showed older people in a much more positive light than the U.S. sample it was compared against. In South Korean commercials, older people were portrayed as vital, independent, generous, and actively pursuing goals. The authors of both cross-cultural studies attribute the differences in the Asian and U.S. samples to major differences in the roles of older people in Taiwanese and South Korean cultures, where older people are recognized as authority figures and generally more respected for their life experience.

Prieler, Kohlbacher, Hagiwara, and Arima (2011) conducted the most recent analysis of television commercial advertising and used Japanese television commercials as their sample. The results of their study followed the trends of previous studies that used samples from Asian countries; indicating that older people were shown in a fairly positive light but were under represented, especially older women. In this study however, older women were shown only half as often as older men, and despite more positive portrayals related to their age, both older men and women in the study were subject to stereotypes of sexism. Older men were primarily shown in the workplace while older women were most often shown in the home, a depiction that the researchers argue does not reflect the current reality in Japan. These particular findings support other research by Furnham and Mak (1999) that argues that ageism and sexism often go hand in hand.

The research on portrayals of older people in magazine advertisements is even more extensive. Peterson (1992) content analyzed print advertisements in fifteen magazines that at the

time had the highest readership among adult age groups. She found that older people were under represented in all the magazines, but when they were represented, their portrayal was more positive in ads targeted to older people than in those targeted to younger people. These findings support Dubois' (1997) analysis of primetime television that showed that older people were frequently excluded from major societal roles, but almost never as consumers. During the same year McConatha, Schnell, and McKenna (1999) content analyzed *Time* and *Newsweek* magazines over a one-year period and found similar under representation of older people, women in particular. Their findings showed a more negative overall portrayal of older people than the previous study and in the select few cases where they were represented; they were portrayed as uninformed, naïve, and helpless. Older women in particular were portrayed as passive and dependent.

Bramlett-Solomon and Subramanian's (1999) content analysis of *Ebony* and *Life* magazine advertisements covering a seven-year period yielded similar results. Under representation continued as an overall trend and older people were typically only portrayed in print ads for products targeted to them specifically, such as dentures, insurance plans, laxatives, or ambulatory aids. These findings supported both the studies by Peterson (1992) and Dubois (1997), which recognized the buying power of the older market but still excluded them from important societal roles in their portrayals. Similar results were yielded from a sample of magazines expected to have a large proportion of images of older people. In his analysis of popular nursing magazines that contain a large majority of images of hospital patients, Lusk (1999) found that although older people made up 40% of all hospital stays, they were still greatly under represented in these magazines. The researcher worries that these portrayals may give the nurse readership a skewed perception of who their patients are and could lead to a decrease in the quality of care for many

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older patients.

Carrigan and Szmigin (1999) content analyzed age specific magazine advertisements in the UK and compared their findings to those in the U.S. and determined that older people are under represented in mainstream magazines but are represented proportionally in magazines with 50+ readerships. These magazines also presented a more balanced gender representation, even showing less of a bias toward the common negative physical characteristics of women's aging mentioned in the study by Robinson, Callister, Magoffin, and Moore (2007) of wrinkles, sagging breasts, and a hunched back. There is however, one reoccurring theme in ads found in magazines for both mainstream and 50+ readership categories that could be viewed by some as negative. Older people were very often portrayed with a physical impairment or overcoming a physical disability with the help of the product being advertised. The researchers acknowledge the inherent difficulty in advertising a product meant to help the impaired without actually showing the impairment in the ad, and as a result, they leave the valence of these portrayals open to interpretation.

During the last decade, analyses of magazine advertisements have shown a more positive portrayal of older people. Robinson and Callister (2008) in their study of the body image and mental health portrayals of older people in popular magazines found far more positive portrayals than the previous studies and even representation proportional to U.S. Census statistics, which is unique to this study alone. Their sample, comprised of eight national, general-interest magazines with the highest older adult readership in the U.S. showed that the majority of older people were portrayed either with an average body weight or as overweight, along with being physically active, vibrant, healthy, and content, proving to be one of the most positive analyses in the entire body of literature.

Finally, Williams, Wadleigh and Ylanne-McEwin (2010), who were mentioned in the previous section, provided the most recent analysis of magazine advertisements for the portrayal of older people. Their purpose was to use a representative sample of U.K. magazine advertisements featuring older characters to develop additional stereotype categories from the perspective of the consumer and add them to the categories of *Perfect Grandparent, John Wayne Conservative, etc.* found in the often cited study by Hummert, Garstka, Shaner, and Strahm (1994). With the help of real consumers acting as judges over the selected ads, the researchers employed a series of sorting tasks in laboratory sessions, multidimensional scaling, and hierarchical cluster analyses to reveal four clearly defined groups representing new categories which they labeled: *Happy and Affluent, Mentor, Active,* and *Frail and Vulnerable.* The researchers noted that these new categories could help fill the gaps where there were still appearances of advertising images that limited the lifestyle and identity potential of its older characters, and that they provided a more comprehensive way to identify older people.

Overall, analyses of advertising and other media portrayals point toward a gradual increase in positive portrayals of older people, yet there is a pervading trend of under representation and select cases of negative portrayals.

Effects of Positive and Negative Stereotypes and Media Portrayals on older people

As many of the previous studies mentioned in the body of literature have demonstrated, stereotypes of older people not only exist on a wide scale, but they are very often perpetuated by the media (Hummert, Garstka, Shaner, & Strahm, 1994; Slotterback & Sarnio, 1996; Williams & Blunk, 1999; McConatha, et al., 1999; Zhang, et al., 2006; Robinson & Anderson, 2006; Robinson, Callister, Magoffin, and Moore, 2007; Miller, Miller, McKibbin, & Pettys, 1999; Kessler, Rakoczy, & Staudinger, 2004; Roy & Harwood, 1997, Lauzen & Dozier, 2005; Vasil &

Wass, 1993; Peterson, 1992; Bramlett-Solomon & Subramanian, 1999; Robinson, Gustafson, & Popovich, 2008). Older people have been shown to be heavy media consumers, particularly of television, and are subject to the effects of both positive and negative media portrayals (Roy and Harwood, 1997). Both stereotypes held by the general public along with stereotypes of older people found in media portrayals can have serious effects on the psychological and even physical well being of older people (Robinson & Umphrey, 2006; Peterson, 1992; Levy, Slade, Kunkel, & Kasl, 2002; Zhang, et al., 2006; McConatha, Schnell, & McKenna, 1999; Slotterback & Sarnio, 1996; Roy & Harwood, 1997; Miller, Leyel, & Mazachek, 2004).

The bodies of literature related to stereotype and media portrayals, along with recent studies in psychology give ample evidence that stereotypes have a serious negative effect on the psychological well-being and self esteem of older people. Portraying older people in a negative light not only reinforces society's notions that older people are inconsequential or lead unenviable lifestyles, but also may actually reinforce negative self-images they already have of themselves, leading to self-fulfilling prophecies (Levy, Slade, Kunkel, & Kasl, 2002; Miller, Leyel, & Mazachek 2004). The result can be an emotional chain reaction that causes them to feel neglected and deprecated (Peterson, 1992, McConatha, Schnell, & McKenna, 1999; Miller, Leyel, & Mazachek, 2004), and lowers their self-esteem (Roy & Harwood, 1997; Robinson & Umphrey, 2008). They may also experience feelings of social worthlessness and hopelessness (Lauzen & Dozier, 2005); lack of control of their own lives (Slotterback & Sarnio, 1996), and even lose the will to live (Maier & Smith, 1999).

Additionally, negative portrayals and stereotypes can influence the way older people participate in social life (Kessler, Rakoczy, & Staudinger, 2004), often causing them to feel vulnerable, insecure, misunderstood, exploited and powerless (Robinson, Gustafson, &

Popovich, 2008). Negative portrayals may also affect the way they are treated by younger age groups and can aggravate ageism (Miller, Miller, McKibbin, & Pettys, 1999). When older people see younger adults adopting the negative stereotypes portrayed in the media and perpetuated by society their own self-image may be damaged as they encounter the reality of how they are viewed by others (Slotterback & Sarnio, 1996). Not only is their own self-image damaged, but the quality of relationships and level of communication with younger adults may also decline (Roy & Harwood, 1997; & Miller, Miller, McKibbin, & Pettys, 1999). Most tragic of all, the negative social consequences of stereotypes and ageism can in some cases lead older people to suicide (Yur`yev, Leppik, Tooding, Sisask, Wu, & Varnik, 2010).

Although one study in the effects literature has shown that positive portrayals can be just as harmful as negative portrayals to older people because they may lead to inaccurate expectations that cannot be met (Zhang, et al., 2006), the majority of studies show that positive portrayals can greatly improve self-image, physical well-being, and mental functioning of older people (Mutran, & Reitzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Levy, 1996; Anderson, Harwood, & Hummert, 2005; Levy, Slade, Kunkel, & Kasl, 2002). Levy, Slade, Kunkel, and Kasl (2002) tested the connection between survival and positive self-image using 660 community-based volunteers over the age of 50. They found that even subliminal activations of positive aging stereotypes were linked to improved memory performance, motor function, memory self-efficacy, and overall views on aging. The most motivating portrayals for older people are those showing an actual older character portrayed as successful, competent, or healthy (Kessler, Rakoczy, & Staudinger, 2004). Positive self-image derived from these types of positive portrayals can also have a significant effect on older viewer's ability to walk (Robinson & Umphrey, 2006), and even help to activate their

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psychological potential (Kessler, Rakoczy, & Staudinger, 2004). On a multi-generational level, Anderson, Harwood, and Hummert (2005) found that positive portrayals influenced the improvement of grandparent, grandchild relationships.

Other findings from the study by Levy, Slade, Kunkel and Kasl (2002) are similar to the findings other studies by Kessler, Rakoczy and Staudinger, (2004), Anderson, Harwood and Hummert (2005), and Robinson and Umphrey, (2006). The researchers found that internalized stereotypes lead to self-perceptions, which lead to self-esteem. While most other longevity studies focus on negative factors such as disease, cognitive decline, and injury, this study examined the effect of positive factors including beneficial beliefs had on longevity. After controlling for several extraneous variables, they found that negative self-perceptions could diminish life expectancy while positive self-perceptions could prolong it. They further explained, "Positive stereotypes of aging primes tilted the will-to-live balance toward the perceived benefits of life, whereas the negative stereotypes tilted the balance toward the perceived hardships of life," (p.266) thus affecting the overall will to live. These findings, along with the findings of the other studies mentioned in the literature review supported the notion that media portrayals of older people have an effect on their self-image and self-esteem.

Theory

All of the previous studies mentioned are supported by the theory of symbolic interactionism, which explains that the self is partly a product of societal beliefs conveyed through social interaction (Cooley, 1902; Mead, 1932; Levy, Slade, Kunkel, & Kasl, 2002). Taylor-Harris and Zhan (2011) added that symbolic interactionism deals primarily with the social meaning people associate with their world and that people continually interpret their world to find new meaning. In other words, self-concept is determined by both the view people have of

themselves and the view that they perceive others have of them (Cooley, 1902; Mead, 1934; Roy & Harwood, 1997). Unfortunately, society sets the roles and standards for performance that individuals are required to live up to, not the individual. The result is that effort, action, motivation, and high involvement toward the fulfillment of these roles and standards on the part of the individual often increases the influence that the views of others have on the individual and their self-image (Gecas & Schwalbe, 1983).

The view that people perceive others have of them and the desire to meet their standards is largely influenced by media portrayals, older people not excluded (Levy, Slade, Kunkel, & Kasl, 2002; Mutran & Reitzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Levy, 1996; Anderson, Harwood, & Hummert, 2005; Peterson, 1992, McConatha, Schnell, & McKenna, 1999; Miller, Leyell, & Mazachek, 2004; Slotterback & Sarnio, 1996; Roy & Harwood, 1997; Robinson & Umphrey, 2008; Lauzen & Dozier, 2005). Depending on the valence of the portrayal, the media can both encourage the development and maintenance of an older person's positive self-image or reinforce generally held, negative stereotypes that destroy self-image (Bramlett-Solomon & Subramanian, 1999; Robinson, Gustafson, & Popovich, 2008). For example, an older person with a positive self-image may view the negative stereotypes held by the general public, including other older people, along with negative media portrayals and over time start to believe those stereotypes and act in accordance with them (McConatha, Schnell, & McKenna, 1999; Levy, Slade, Kunkel, & Kasl, 2002). In essence, the views of others combined with their now damaged self-image make up their new self-image (Taylor-Harris, Zhan, 2011).

This theory applies to positive stereotypes and media portrayals as well. Positive media portrayals can break existing societal views of older people and the aging process, reinforce an

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older person's existing positive self-image, and repair self-image that has been damaged (Levy, Slade, Kunkel, & Kasl, 2002). Unfortunately, as the previous research indicates, most advertising is not targeted to older people, but rather to younger audiences. Advertisers seek to reflect what they feel are the views their audiences, and the portrayals of older people are often negative (Healey & Ross, 2002; Robinson, Gustafson, & Popovich, 2008), frequently absent (McConatha, Schnell & McKenna, 1992), portrayed with negative physical and personality characteristics, and delegated to specific products where they are portrayed as marginalized endorsers (Miller, Leyel, and Mazacheck (2004).

Given the theoretical foundation that media portrayals and more specifically, advertising portrayals may serve as a source that older people look to in order to determine how others perceive them, it is important to study advertising that is specifically targeted to older people to see how it may effect their self-image. Other scholars have studied magazine print advertising and television commercial advertising targeted to older people, but the products advertised are not exclusively used by older people, rather they are simply more popular among older consumers than younger consumers (Peterson, 1992; Roy & Harwood, 1997; Zhang, et al., 2006; Robinson, Gustafson, & Popovich, 2008). One particular service that is specifically targeted to older people and their caretakers are senior center services. Senior centers typically use brochures and newsletters as a form of advertising their facilities, social functions and recreation, meals, health and nutrition services, adult education, and other services (Kaye & Reisman, 1993; Fitzpatrick, McCabe, Gitelson, & Andereck, 2005). The decision to attend a senior center is an involved decision that requires thought and deliberation on the part of the candidate. They must consider cost, location, and services provided in order to be sure that they choose the right senior center for them. Because the decision requires involvement, effort, and action on the part of the

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candidate along with being motivated by self-interest to choose the senior center that best meets their needs, brochures and newsletters used for the purpose of gathering information about senior centers will have a much greater effect on their self-image than a medium with which they are not as highly involved (Gecas & Schwalbe, 1983).

Currently there is no research that analyzes the portrayal of older people in Senior Center brochures and newsletters. If portrayals in advertising targeting younger audiences and cross-generational audiences form part of the process by which older people form their self-image, it is extremely important to analyze advertising for a service with which they are highly involved, and that is directed entirely to older people and those who help them make important life decisions to see if those portrayals aid in empowering seniors or in destroying their self-image. The following research questions will guide this study:

RQ_1: How accurately represented are older people in terms of gender and race when compared to population figures in senior center brochures and newsletters?

RQ_2: What facial expressions do older people employ and what personality traits do they possess in senior center brochures and newsletters?

RQ_3: What physical characteristics do older people possess, including activity level, health status, body image, and use of a physical aid in senior center brochures and newsletters?

RQ_4: What type of photograph were older people depicted in and with whom were they pictured in senior center brochures and newsletters?

RQ_5: Were there significant differences in how older men and older women were portrayed in senior center brochures and newsletters?

RQ$_6$: Was there any relationship between the type of photograph the subject was pictured in and the portrayal of their health status and activity level in senior center brochures and newsletters?

RQ$_7$: Is the overall portrayal of older people positive, negative, or neutral in senior center brochures and newsletters?

CHAPTER THREE: METHODOLOGY

Sample Selection

A content analysis of 129 pieces of senior center marketing materials made up of 47 brochures and 81 newsletters with representation from all 50 United States and the District of Columbia (See appendix A) was conducted to gain a comprehensive view of how older people are portrayed in advertising targeting them specifically, with which they are highly involved. Some of the brochures were gathered by contacting centers from lists provided by senior center accreditation organizations, the NISC (The National Institute of Senior Centers) located in Washington, D.C., and ALFA (Assisted Living Federation of America) in Virginia. Others were also gathered through an Internet search of senior centers by state. Where several of the senior centers do not use official brochures for information and advertising, they did provide a recent newsletter, which is their source of information for potential residents. Only brochures and newsletters that contained images of older people were selected for this study.

A coding sheet was devised using information from similar content analysis studies on the portrayal of older people (Robinson, Callister, & Magoffin, 2009; Bishop & Krause, 1984; Gantz, Gartenberg, & Rainbow, 1980; Peterson, 1992; Robinson, 1998; Robinson & Anderson, 2006; Swayne & Greco, 1987; Robinson & Callister, 2007) (See Appendix B). The coders were trained on how to identify an older person based on the presence of one or more of the following characteristics: (1) extensive gray hair, (2) wrinkles of the skin, (3) extensive loss of hair or baldness, (4) use of an aid such as a cane or wheelchair, (5) the parent of a son or daughter who is middle-aged or older, and (6) evidence of grandchildren or great-grandchildren, or (7) they were clearly a resident of the senior center (Robinson, Callister, & Magoffin, 2009; Bishop & Krause, 1984; Gantz, Gartenberg, & Rainbow, 1980; Peterson, 1992; Robinson & Anderson,

2006; Swayne & Greco, 1987). An older person was coded only if their face was shown and they could be identified both by age and gender.

Once an older person was identified, the coders recorded the type of photo (*Candid or Staged*) the older person was pictured in. Although other studies on the portrayal of older people have not analyzed the type of photograph subjects were pictured in, the current sample uses a heavy mix of candid and staged photographs, which may yield significant differences when crossed with other variables in the study. Candid photos were defined as amateur, taken with a handheld camera, not posed, and depicting actual Senior Center residents in their day-to-day activities. Staged photos were defined as high quality, professional photos taken with a professional camera and lighting, using actors or models, and posed. Next, the coders recorded if the older person was pictured alone, or if they were pictured with another person (*with a Spouse, Other Residents, a Child or Children, Younger Adults, or a Caretaker*). Next, each older person was coded for gender (*Male or Female*) and race (*Caucasian, African American, Hispanic, Asian, Mixed race, Other, or Indeterminate*).

The older people were then coded for their level of activity (*Very Active, Active, or Inactive*), and their health status (*Good, having Minor Limitations, and Poor health*). Very active was defined as being involved in rigorous activity such as exercise, dancing or sports, active was defined as doing any kind of activity that required some effort such as painting, playing card or billiards, or singing, and inactive was defined as anything that did not require much physical effort, included activities like sitting, standing, talking, or eating. Good health was defined as having no visible limitations and appearing healthy, minor limitations included the use of a physical aid such as a cane, walker, wheelchair, or hearing aid, and poor health included the use of oxygen, being bed-ridden, or under constant care.

Other variables counted were the older people's physical characteristics such as facial expression (*Smiling, Laughing, or Expressionless*), hearing aides and physical aides (*Cane, Walker, Wheelchair, or Oxygen*), and body image (*Very thin, Thin, Average, Overweight, and Obese*) was coded using Thompson and Gray's (1995) Contour Drawing Rating Scale. The scale provides a range of images (from "very thin" to "obese") making it easy for coders to match with the images in the senior center brochures. Next, each older person was coded for personality characteristics (*Happy/content, Angry/Grumpy/Stern, Sad, or Neutral*), interactions with others (*Friendly, Loving/Caring, or Neither*), mental state (*Senile/Crazy, Eccentric, or Lucid*), and level of energy (*Helpless, Ordinary, Energetic/Vibrant, or Other*). Level of happiness was very much determined by facial expression with happy/content being defined by a smile or laughing, angry/grumpy/stern with a scowl or angry expression, sad with a frown, worried expression or appearance of tears, and neutral being correlated with a lack of expression.

Interaction with others took into account the expression and physical contact they had with others. Friendly was manifest by a positive expression shared with another person combined with a hand placed on the shoulder or knee of another person and Loving/caring was manifest by a positive expression combined with a hug, hand holding or a kiss. Mental state took facial expression, activity level and clothing into account. Senile/Crazy was manifest by a person's incoherent expression and lifeless activity level. Eccentric was shown through a weird or over-the-top facial expression, unusual activity, or flamboyant, odd clothing. Energy level was a combination result of both activity level and health status. Helpless was a person that was both inactive and in poor health, ordinary was any of the three activity levels with either good health or minor limitations, and energetic/vibrant was active or very active combined with good health and a positive expression, and the Other category included anything not belonging to the other

categories.

Finally, each older person was coded for the setting in which the image of the older person was photographed and overall evaluation of the subject. The setting (*Outside, Inside, Bedroom, Exercise room, Cafeteria, Game/Activity room, or Other*) was defined by the characteristics surrounding the person. If the picture was taken outdoors with foliage and natural sunlight present then the setting was coded as outside, inside indicated an indoor setting that did not provide enough detail to determine where the picture was taken (usually in close up shots of residents), bedrooms were manifested by the appearance of beds, dressers, and personal belongings, exercise rooms contained exercise equipment, mats, and older people exercising, cafeterias contained tables and chairs, plates and utensils, food, and older people eating, game/activity rooms contained tables and chairs, couches, stages, television sets, pool tables, art materials, and microphones, and other was any setting that did not fit into any of the previous categories. Other studies analyzing the portrayal of older people have not accounted for the setting of characters. In this particular study, the setting may partially determine other important characteristics of the subject including health status and activity level.

The overall evaluation (*Positive, Neutral, or Negative*) of each older person accounted for all previous categories. Because the sample was made up of photographic representation, which did not provide enough context to place each subject in Hummert, Gartska, Shaner, and Strahm's (1994) categories, the current study did not determine overall evaluation of subjects using their scale like Robinson, Callister, and Magoffin (2009). The current study simply weighed positive, neutral and negative characteristics and added them up to determine overall portrayal. A positive overall evaluation indicated good health status or with minor limitations, positive facial expression, and positive personality descriptors. A neutral overall evaluation was usually

determined by a neutral expression, neutral level of happiness, and nothing that indicated poor health or negative personality characteristics. Negative overall evaluations were marked by poor health, negative personality characteristics, obese, or bed-ridden.

Two coders were trained on proper coding techniques for 4 hours using images from network television programs and magazine advertisements. The two independent coders each coded 14 brochures, which constituted just over 10% of the sample. Any disagreements between the coders were discussed and resolved. The researcher used Cohen's Kappa intercoder reliability formula to calculate agreement on each variable and yielded the following agreements above the required .6 level for reliability (Landis & Koch, 1977): type of photograph (91% agreement), who they were pictured with (87% agreement), race (80% agreement), activity level (81% agreement), health status (100% agreement), facial expression (63% agreement), use of a hearing aide (93% agreement), use of a physical aid (100% agreement), level of happiness (72% agreement), interaction with others (74% agreement), mental state (94% agreement), energy level (78% agreement), body image (72% agreement), setting (73% agreement), and overall evaluation (69% agreement). Once intercoder reliability was established for each variable, one of the coders collected data for the remaining 115 brochures.

CHAPTER FOUR: RESULTS

RQ$_1$ asked how accurately represented older people were in terms of gender and race when compared to population figures. From the 129 brochures and newsletters a total of 1,083 older people were coded. Of these, 35.6% (n=385) were male and 64.4% (n=697) were female. This represents a slight deviation from 2012 U.S. Census figures which indicate that as recently as 2010 the 65 years and older population in the U.S. was 38.6 million. Of that, men made up 16.8 million or 43% and women 21.8 million or 57% percent of the 65 years and older population (U.S. Census Bureau, 2012a). Findings indicate an under representation of men and an over representation of women, a stark contrast to the other studies mentioned in the review of literature (See Table 1).

Table 1
Gender Representation of Subjects

Gender	Number of Subjects	Percentage of Representation
Male	385	36.60%
Female	697	64.40%
Total	**1082**	**100%**

Findings related to race representation within the sample are mostly aligned with U.S. Census statistics for racial groups among the 65 and older population with a few deviations (See Table 1.2). According to the 2012 U.S. Census Bureau report for Resident Population by Race, Hispanic Origin, and Age, as recently as 2009 Caucasians represented 86.7% of the 65 years and older population, African Americans 8.6%, Hispanics 6.9%, Asians 3.4%, Mixed races 0.7% and Other ethnicities 0.6%. (Most current U.S. Census reports report data from previous years rather than the current year) African Americans were slightly over represented in the sample while Hispanics were severely under represented, a surprising finding considering figures showing

them as the fastest growing segment of the U.S. population (U.S Census Bureau, 2012b; U.S. Department of Health and Human Services, 2010). Caucasian, Asian, Mixed race, and other racial groups were represented very accurately when compared to the most recent U.S. Census population by race and age statistics report (U.S. Census Bureau, 2012b) (See Table 1.2).

Table 1.2

Race Representation of Subjects

Race	Number of Subjects	Percentage of Representation
White	898	83%
African American	148	13.70%
Asian	29	2.70%
Hispanic	3	0.30%
Mixed Race	2	0.20%
Other Ethnicity	2	0.20%
Total	**1082**	**100%**

RQ$_2$ asked about the older people's facial expressions and what personality traits they possessed. Results of both expression and personality traits were overwhelmingly positive. Of all 1,083 subjects analyzed 88.3% (n=955) were shown smiling or laughing and the remaining 11.7% (n=127) were expressionless (See figure 1). Subject's facial expressions were taken into account when determining personality characteristics as well. Analysis of personality traits related to level of happiness revealed that 90.8% (n=982) of subjects were portrayed as happy/content, 9.1% (n=99) were portrayed as neutral, and only 1 subject 0.1% (n=1) was portrayed as angry/grumpy/stern (See Figure 1.2). Personality traits related to interaction with

others showed that 52.2% (n=619) were portrayed as friendly, 8.6% (n=93) were loving/caring, and 34.2% (n=370) as neither friendly nor loving/caring (See figure 1.3). The 14.5% (n=157) that were pictured alone represented nearly half of those portrayed as neither friendly nor loving/caring.
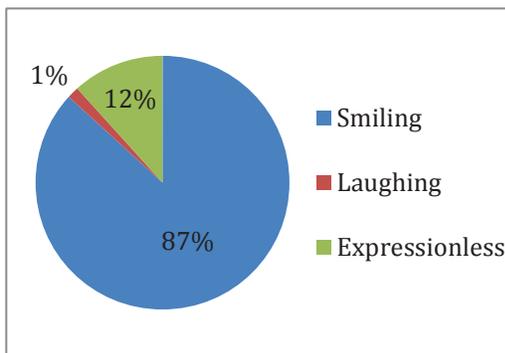
Figure 1
Facial Expression of Subjects

Figure 1.2
Subject's Level of Happiness

Figure 1.3
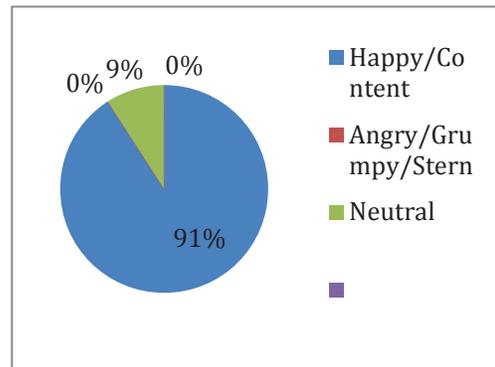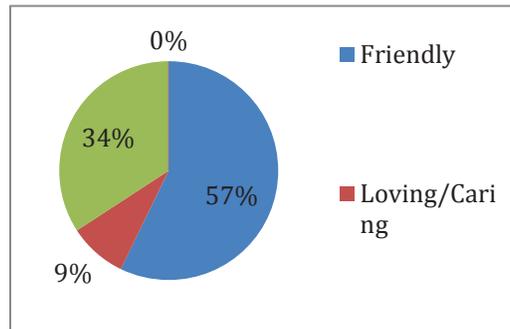**Subject's Interaction with Others**

Analysis of personality traits related to mental state showed an overwhelming absence of senile/crazy or eccentric portrayals. Out of the entire sample, 99.6% (n=1078) were portrayed as lucid, 0.3% (n=3) were portrayed as senile/crazy, and 0.1% (n=1) were shown as being eccentric. Finally, personality traits related to energy level revealed a very neutral portrayal as 93.7%

(n=1014) were portrayed as ordinary, 6.3% (n=68) as energetic/vibrant, and 0% (n=0) as helpless.

RQ3 asked what type of photograph the older people were depicted in and with whom were they pictured. Of the 1083 photographed images in the sample, a large majority, 71.5% (n=774) were candid photographs while 28.5% (n=308) were staged photograph (See Table 2). The majority of older people were picture with older adults 70.9% (n=767) and only 14.5% (n=157) were pictured alone. The older people were pictured most often with other residents 56.9% (n=616) followed by their spouse their spouse 14% (n=151), younger adults 10.4% (n=113), and with a caretaker 2.2% (n=24), and a child 1.9% (n=21) (See figure 2).

Table 2
Type of Photograph Subject was pictured in

Type of photograph	Number of photographs	Percentage
Candid	774	71.50%
Staged	308	28.50%
Total	**1082**	**100%**

Figure 2
Who Subjects were pictured with
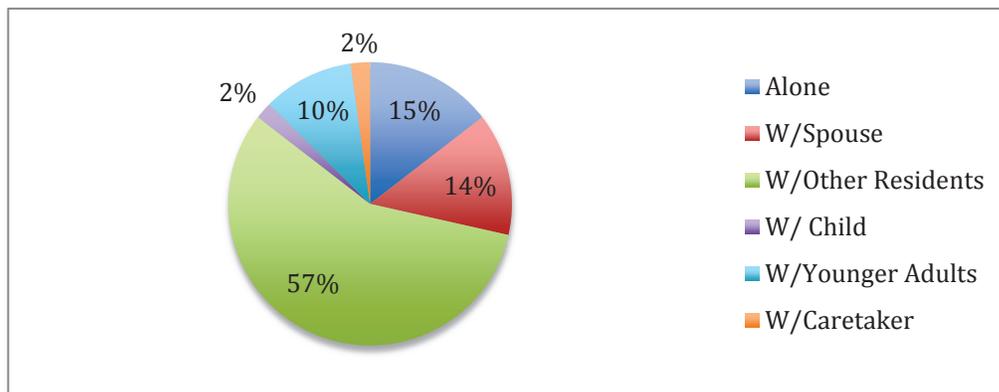
The physical characteristics older people possessed, including activity level, health status, body image, and use of a physical aid was addressed in RQ$_4$. Overall, the older people were portrayed in a positive manner with only a few individuals shown in poor health, overweight or using a physical aid. In terms of activity level 70.2% (n=760) were shown as inactive, 23.1% (n=250) as active, and 6.7% (n=72) as very active (See figure 3). These numbers were expected because the operational definitions required a certain level of activity to be considered within each category and the majority of the individuals were pictured in activities not requiring much physical effort like sitting, standing, talking, or eating. "Active" participants were those involved in any kind of activity that required a light amount of physical effort such as painting, playing card or billiards, or singing. Representation for activities in the "active" category was diverse and represented a wide variety of activities (See figure 3.1).

Figure 3
Activity Level of Subjects
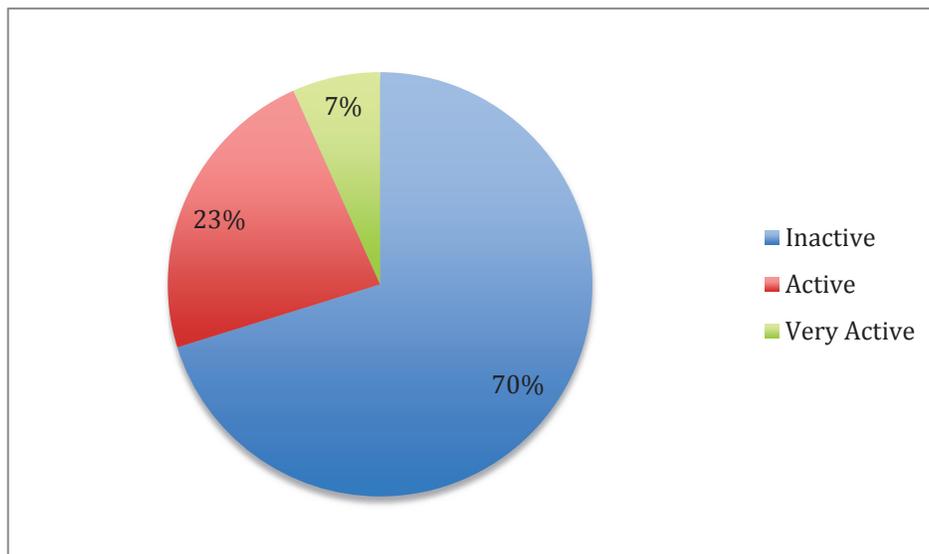
Figure 3.1
Representation of Activities in Active Category
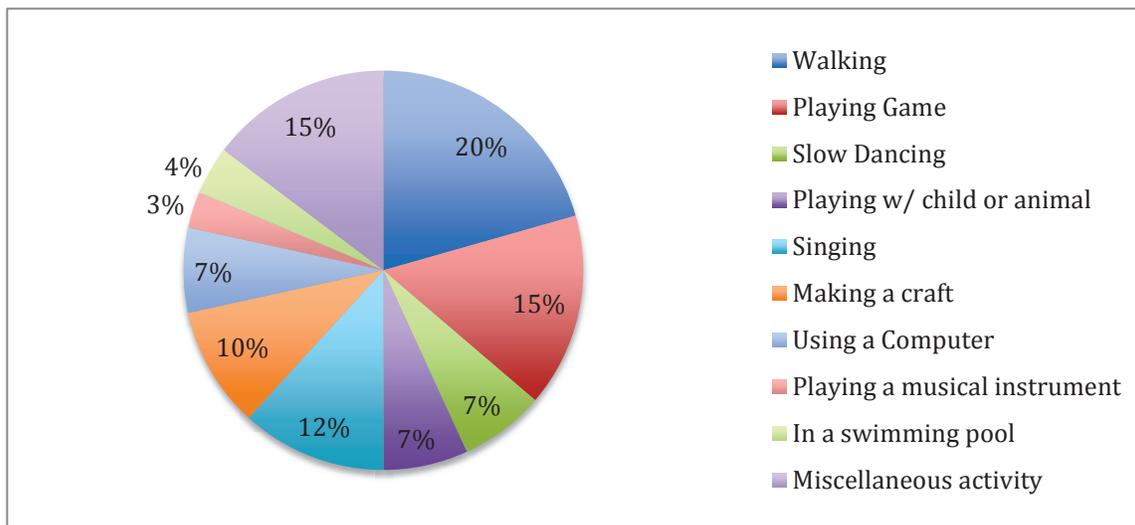
The "very active category" included only those participating in rigorous activity like exercise, dancing or sports and also included a diverse range of other physically demanding activities (See figure 3.2). Figures for the "very active category" also demonstrate an under representation of activity level when compared to a 2002 Center for Disease Control study on activity and aging. The report showed that 66-72% of those 65 to 74 years old and 56-65% of those 75 years and older participate in some form of leisure-time physical activity. The representation of rigorous activity level however, closely resembles the data provided by the CDC report, showing that 13% of those 65 to 74 years old participate in vigorous physical activity for 20 minutes 3 times a week and 6% of those 75 and older reported the same activity (Center for Disease Control, 2002).

Figure 3.2

Representation of Activities in Very Active Category
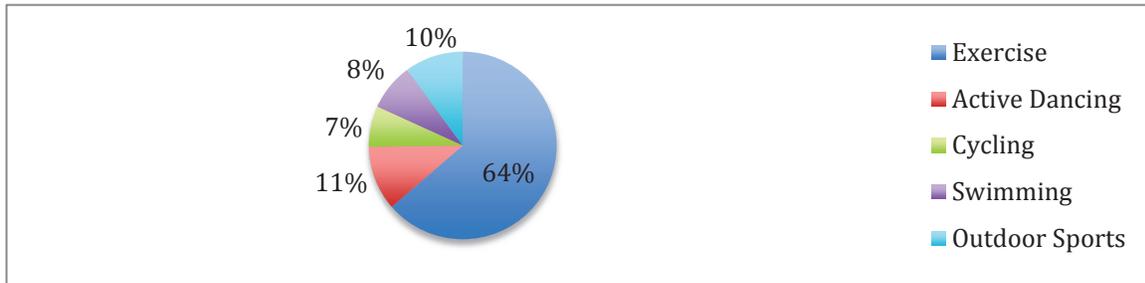
The overall health status of the sample proved to be overwhelmingly positive (See Table 3). The few cases of minor limitations and poor health portrayals were based on the subject's use of a physical aid and type of assistance they were receiving. Those using a hearing aide made up 1.6% (n=17) and those using a physical aid like a cane, a walker, a wheelchair, or a motorized scooter were only 2.1% (n=23) of the sample. These findings differ from both the 2010 Activity Limitations Report of the U.S Department of Health and Human Services and Disability statistics report written by O'Neill, Summer, & Shirley (1999) for the National Academy on an Aging Society. The HSS report showed that as recent as 2009, 37% of persons 65 years and older suffered from a physical limitation while the data from this study indicated that only 3.2% (n=35) had a physical limitation of any kind (U.S. Department of Health and Human Services, 2010; O'Neill, Summer, & Shirley, 1999).

Table 3

Health Status of Subjects

Health Status	Number of Subjects	Percentage
Good Health	1047	96.80%
Minor Limitations	34	3.10%
Poor Health	1	0.10%
Total	**1082**	**100%**

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The latter report focused on specific physical limitations and showed that 43% or 9.5 million Americans with hearing loss are 65 years or older, and two thirds of those 70 and older suffer from hearing loss. It is undetermined however, how many in that segment actually using a hearing aide (O'Neill, Summer, & Shirley, 1999). This comes as no surprise as most hearing loss is ignored and a small minority of those with hearing loss actually use a hearing aide (Rabin, 2011). When compared to a Disability Statistics Center report from 1997 the data also indicates an extreme under representation of older people using physical aids. Even though the data representing the use of several different types of physical aides was combined into one figure, it still arrives nowhere near reaching the percentages reported by the DSC, which showed that 10.2% of those 65 and older use a cane, 4.6% use walkers, and 3% use wheelchairs and scooters (Disability Statistics Center, 1997).

The single, rare instance of a poor health portrayed in the data showed the older subject in a hospital bed, connected to an oxygen tank, wearing a hospital gown, and being cared for by a nurse. Body image portrayals were also very positive with 91.2% (n=987) of the sample portrayed as average, 2.4% (n=26) portrayed as thin, and 6.4% (n=69) portrayed as overweight. There were no subjects portrayed as very thin or obese. The data showed a skewed representation of older person's body image compared to a 2002 CDC report on aging and health that showed that of all Americans 65 years and older, only 42% are at a healthy weight, 40% are overweight, and 18% are obese. It is assumed that thin body images are included in the healthy weight category of the CDC report (Centers for Disease Control, 2002).

An analysis of RQ$_4$, which asked about differences in the portrayal of older men and women revealed significance in gender as it relates to other variables such as type of photo they were pictured in, whom they were pictured with, race, activity level, health status, and the setting

of the portrayal. Females were significantly more likely to be pictured in a candid photo (X^2 = 9.94, df = 1, p < .05), pictured with other residents (X^2 = 38.16, df = 5, p < .01), portrayed as African American (X^2 = 17.75, df = 5, p < .01), active or very active (X^2 = 14.83, df = 2, p < .01), in good health (X^2 = 4.59, df = 1, p < .05), and pictured outdoors, in an exercise room or game/activity room (X^2 = 26.12, df = 6, p < .01) than males (See Table 4). When compared to the population by race figures from the 2012 U.S. Census report, the data shows an under representation of African American males 23% (n=34) and over representation of African American females 77% (n=114) (U.S. Census Bureau, 2012b). This is based on the assumption that male and female populations of those 65 and older are uniform across all races.

The significant differences found in the data between gender and activity level also present a contrast to a 2002 report by the Department of Health and Human Services. Data from this study showed 70% (n=757) portrayed as inactive while the remaining 30% (n=325) of the sample, which represents active or very active, are 66% (n=212) female and 34% (n=110) male. The HSS report indicates that men are more active than older women although exact percentages are provided only for those 75 years and older with 46% of men participating in some form of physical activity to only 34% of women (U.S. Department of Health and Human Services, 2002). The over representation of female activity level may also explain why females were also much more likely to be pictured outdoors, in an exercise room, or a game/activity room than males. Subjects pictured outdoors were 19% (n=206) of the sample, 68% (n=140) of which were female, and 32% (n=66) were male. Those pictured in the exercise room were 4% (n= 46) of the sample, 87% (n=40) of which were female and 13% (n=6) of which male. Finally, of the 12% (n=128) of the sample pictured in a game/activity room, 73% (n=93) were female and 27% (n=35) were male.

The data also indicated that females were portrayed in significantly better health than males (X^2 = 4.59, *df* = 1, p < .05). Almost all females 98% (n=663) were portrayed in good health and only 2% (n=17) were portrayed with minor limitations or poor health, compared to 95% (n=349) of males portrayed in good health and 5% (n=18) portrayed with minor limitations. This is significant because females are 63% (n=680) of the total sample, outnumbering males 37% (n=367) nearly 2:1, yet males (n=18) outnumber females (n=17) in the number of older people portrayed with minor limitations or poor health. These figures also run in contrast to a 2010 U.S. Department of Health and Human Services report on elderly health and health care, which assessed only 41.6% of persons 65 years and older as having excellent or very good health, with little difference between males and females (U.S Department of Health and Human Services, 2010). The assumption then is that 58% of those 65 years and older do have some kind of health issue, a far cry from the 3.2% noted by this study which showed health limitations for only 2% (n=16) of females and 5% (n=18) of males.

Table 4
Differences between Male and Female Subjects

| Variables with Significant differences	Males	Females
Percent of all Pictured in Candid photograph	33%	67%
Percent of all African American	23%	77%
Percent of all Active or Very Active	34%	66%
Percent of all w/ Good Health Status	35%	65%
Percent of all Pictured outdoors	32%	68%
Percent of all pictured in exercise room	13%	87%
Percent of all pictured in game/activity room	27%	73%

RQ5 asked if there were significant differences between the type of photograph the subject was pictured in and the portrayal of their health status and activity level. The data indicated a significant difference on both counts, as those pictured in a candid photograph were more likely to be portrayed in good health ($X^2 = 7.29$, $df = 2$, $p < .05$) than those pictured in a staged photograph, and those pictured in a staged photograph were more likely to be portrayed as active or very active ($X^2 = 72.23$, $df = 2$, $p < .01$) than those pictured in a candid photograph (See Table 5). The findings appear contradictory, as one would expect activity level to determine health status. The coding measurement however, did not require a subject to be engaged in physical activity to be considered in good health; rather, good health was measured by the absence of limitations and indications of poor health. Of those pictured in a candid photograph 96% (n=744) were shown in good health while 4% (n=30) had minor limitations. Of those pictured in a staged photograph 98% (n=303) were shown in good health while 2% (n=5) were shown with minor limitations or poor health. Of those pictured in a candid photograph, 23% (n=176) were portrayed as active or very active while 77% (n=598) were portrayed as inactive. Those pictured in a staged photograph had almost identical levels of physical activity with a much smaller proportion of the overall sample, showing 47% (n=146) portrayed as active or very active while only 53% (n=162) portrayed as inactive.

Table 5

Relationship between type of photograph and health status and activity level

Type of photograph	% Good Health Status	% Minor Limitations	Total	% Active or Very Active	% Inactive	Total
Candid	96%	4%	100%	23%	77%	100%
Staged	98%	2.00%	100%	47%	53%	100%

Finally, RQ7 asked whether the overall portrayal of older people was positive, negative, or

neutral. This measure took several other variables into account such as health status, facial

expression, use of a physical aide, personality description related to level of happiness,

interaction with others, mental state, and energy level. Body image portrayal was also included

in the measure. After taking into account the measurements from other determining variables,

the data showed a very positive overall portrayal (See figure 4). The results did not indicate any

difference between overall portrayal and gender.

Figure 4
Overall Evaluation of Subjects
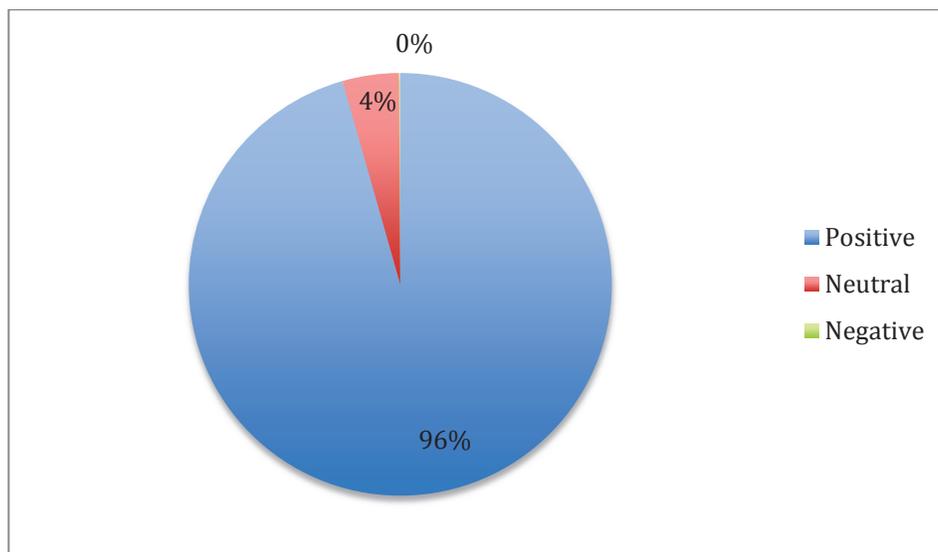
CHAPTER FIVE: DISCUSSION

The media play an important role in the development of an older person's self-image (Kessler, Rakoczy, & Staudinger, 2004; Anderson, Harwood, & Hummert 2005; Robinson & Umphrey, 2006). In fact, symbolic interactionism theory teaches that their self-image is made up of not only what they think about themselves, but by the view they think others have of them (Taylor-Harris and Zhan, 2011; Levy, Slade, Kunkel, & Kasl, 2002). Being heavy media users, especially of television, older people learn how others view them largely through media portrayals (Levy, Slade, Kunkel, & Kasl, 2002). Unfortunately, as the literature review has demonstrated, media portrayals of older people, although improving over time, still regularly exhibit negative stereotypes which show older people that others view them negatively (Levy, Slade, Kunkel, & Kasl, 2002; Mutran & Rietzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Levy, 1996; Anderson, Harwood, & Hummert, 2005; Peterson, 1992, McConatha, Schnell, & McKenna, 1999; Miller, Leyell, & Mazachek, 2004; Slotterback & Sarnio, 1996; Roy & Harwood, 1997; Robinson & Umphrey, 2008; Lauzen & Dozier, 2005).

Stereotypes have proved to have serious effects on the psychological and even physical well-being of older people, either positive or negative, depending on the valence of the stereotype (Levy, Slade, Kunkel, & Kasl, 2002; Miller, Leyell, & Mazachek, 2004; Robinson & Umphrey, 2006; Peterson, 1992; Zhang, et al., 2006; McConatha, Schnell, & McKenna, 1999; Slotterback & Sarnio, 1996; Roy & Harwood, 1997). The current study content analyzed senior center brochures, a form of advertising exclusively targeting older people and their caretakers. The results were overwhelmingly positive, portraying older people as happy, healthy, active, and friendly. In a few cases the data even showed portrayals that were overly positive, perhaps embellished beyond real world statistics.

Because the entire sample of images analyzed was older people, overall representation was not tested, rather representation in terms of gender and race. The current study found that unlike past studies that show an underrepresentation of older women (Vasil & Wass, 1993; Kessler, Rakoczy & Staudinger, 2004; Lauzen & Dozier, 2005; Prieler, Kohlbacher, Hagiwara & Arima, 2011; McKenna, 1992), that women actually appeared more than men, (64.4% to 35.6%), something that has not been seen in the media. Although exaggerated to a degree, these numbers also more closely resembled U.S. census figures of the 65 years and older population than the other studies in the body of literature. The Census figures showed representation of 43% male and 57% female, slightly less than the numbers in the study (U.S. Census Bureau, 2012a). A 2007 Pennsylvania Department of Aging report showed that for that state in particular, males accounted for only 25% of their daily attendance at senior centers, a figure that seems to be supported by the data.

The only study in the body of literature that comes close to the gender representation in this study was Lien, Zhang, and Hummert's (2009) analysis of Taiwanese primetime television, which showed equal representation for older men and women, but not greater representation for women than men like the current study. It is likely that the more accurate if not slightly more exaggerated female representation in senior center brochures is that apart from the fact that women outnumber men in the general and older populations (U.S. Census Bureau, 2012b), senior centers actually attract a disproportionate number of women to men (Kaye & Reisman, 1993). If inaccurate or negative representation like Lauzen and Dozier's (2005) study which showed older women portrayed as unmotivated and without goals can cause older women to internalize those portrayals and adopt those behaviors (McConatha, Schnell, & McKenna, 1999; Levy, Slade, Kunkel, & Kasl, 2002; Roy & Harwood, 1997), then certainly more accurate and

positive representation of older women like that found in the current study can have the same influence, but in a positive, motivating direction (Kessler, Rakoczy, & Staudinger, 2004; Levy, 1996; Anderson, Harwood, & Hummert, 2005).

Few studies analyzing the portrayal of older people tested for race representation among the older population. Robinson, Callister, Magoffin, and Moore (2007) analyzed Disney cartoons for the portrayal of older people and found that of all older characters, 83% were Caucasian, leaving only 17% minority characters, half of which were Asian. The findings of this study are more representative yet do not align with U.S. Census statistics for those of races other than Caucasian and Asian, which make up 86.7% and 3.4% respectively of the U.S. population for those 65 years and older (U.S. Census Bureau, 2012b). The sample actually over represented the African American population with 13.7% of the sample compared to the 8.6% they currently occupy and the Hispanic and Mixed-race populations were extremely under represented, combining for less than 0.5% of the sample. Hispanics actually make up 6.9% and persons of mixed-race make up 0.7% of the 65 and older population (U.S. Census Bureau, 2012b).

Ironically, the Hispanic population grew by 43% in the U.S. during the last decade (National Council of La Raza, 2012). Perhaps one explanation offered by the Population Resource Center for the disparity between the immense growth of the Hispanic population with almost no representation in senior center brochures and newsletters is that for many older Hispanics there is a language barrier, fewer financial resources, and inability to retire that keep them from participating in senior centers and their activities (Population Resource Center, 2005). Another possible explanation may be that multi-generational households are commonplace in Hispanic culture and separating older people from their children and grandchildren along with senior center participation are foreign concepts. The under representation of Hispanics may

cause them to feel marginalized, particularly among their older peers and perhaps discourage them from participating in senior centers or it may have no effect at all if they have never even considered a senior center. The over representation of African Americans in the brochures may be due to the fact that several of the selected brochures represented demographic areas that are made up of predominately African American populations such as certain areas of Queens, NY where 19.1% (U.S. Census Bureau, 2011a) of the population is African American, and Atlanta, Georgia where 54% of the population is African American (U.S. Census Bureau, 2011b).

The results of this study related to the facial expressions and personality characteristics exhibited by subjects in senior center brochures show an almost entirely positive representation, starkly in contrast with many of the other media studies. While previous studies such as Robinson, Callister, and Magoffin (2009) and Towbin, Haddock, Zimmerman, Lund, and Tanner (2003) showed several instances where older people were portrayed with negative facial expressions and personality characteristics such as mean, grumpy, or stern, the current study revealed that in senior center brochures and newsletters, the vast majority were shown laughing or smiling, happy or content, friendly, or loving and caring. Positive portrayals like these may serve as a role model for older people that inspires them to pursue happiness in their relationships with others, possibly in a senior center environment (Kessler, Rakoczy, & Staudinger, 2004).

In relation to the portrayal of mental state, this study found an almost complete absence of senile and crazy or eccentric portrayals. In fact, 99.6% were portrayed as lucid, without any mental malady. These findings show a change in direction from other studies by Vasil and Wass (1993), Robinson, Callister, and Magoffin (2009), and Robinson, Callister, Magoffin, and Moore (2007), which showed several instances of characters portrayed as either senile or crazy. Traits

related to energy level portrayals revealed similar positive results with every subject being portrayed as either ordinary or energetic/vibrant. Not a single subject was portrayed as helpless, which contrasts with other media studies (Rakoczy and Staudinger, 2004; McConatha, Schnell, & McKenna, 1992; Carrigan & Szmigin, 1999), whose findings revealed several portrayals of older people as dying and ill, helpless, and impaired. The contrast of the results of these studies to the current study reveals a very positive change in the way older people's personality traits are portrayed. Positive personality portrayals can help dispel societal notions that older people are grumpy, senile and helpless and project the idea that older people are friendly, intelligent, and productive (Levy, Slade, Kunkel, & Kasl, 2002; Dellman-Jenkins & Yang, 1998; Klein & Shiffman, 2009; Miller, Leyel, & Mazacheck, 2004). As they perceive that other's views about them are improving, these positive portrayals may also begin to improve the way they view themselves and increase their overall mental functioning and interaction with others (Mutran & Rietzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Anderson, Harwood, & Hummert, 2005).

The current study also analyzed the type of photograph older people were pictured in and with whom they were pictured. Although no other studies to date analyze the portrayal of older people according to the type of photograph they are pictured in, Roy and Harwood's (1997) study analyzed whom older people were pictured with, revealing that they were rarely pictured alone or with children. This study corroborates those findings with only a small portion pictured alone and the majority surrounded by people, primarily other residents of the senior center. The majority of older people are pictured in candid photographs of real senior center participants rather than staged photographs where it is unknown whether the individual actually participates in the senior center. Candid images of older people surrounded by other residents send the

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message that senior centers are great places to make friends, socialize, participate in real activities, and live an enviable lifestyle (Levy, Slade, Kunkel, & Kasl, 2002). Images of older people with children in particular may help improve the grandparent/grandchild relationship, helping to close the gaps between generations caused by stereotyping and negative media representations (Anderson, Harwood, & Hummert, 2005; Levy, Slade, Kunkel, & Kasl, 2002).

Perhaps some of the most interesting findings of the study with the greatest potential to positively effect older people were the current study's portrayal of activity level, health status, body image, and use of a physical aid. Similar to other studies like Dellman-Jenkins and Yang (1998), Roy and Harwood (1997), Miller, Leyel, and Mazacheck (2004), Robinson, Callister, and Magoffin (2009) and Robinson and Callister (2008), this study shows older people in senior center brochures and newsletters portrayed as active in many instances, overall very healthy, with an healthy body image, and rarely using a physical aide. This presents a positive image to older people about their body's capabilities and potential even as they advanced age. It sends a message to older people that quality of life does not have to deteriorate with age, but that they can still live fulfilling lives by participating in activities that help keep them physically and mentally healthy, and that it is possible to retain physical beauty and its accompanying effects on self-image (Klein & Shiffman, 2009; Levy, Slade, Kunkel, & Kasl, 2002; Robinson & Umphrey, 2006).

Although this study shows a wide variety of activities that older people participate in ranging from mildly active to very active, the data shows that they are actually under represented in terms of leisure activity level when compared to CDC reports. The results for "very active" subjects were however, closer to the CDC statistics for older adults that participated in rigorous physical activity (Centers for Disease Control, 2010). The under representation can partially be

explained by the sample itself, which is comprised of photographs depicting a single instance in the subject's day rather than a comprehensive view of all the subject's daily activities. Perhaps the latter approach would yield results more closely aligned with the CDC data. In a qualitative analysis of marketing effectiveness of senior center advertising materials, Kaye and Reisman (1993) found that the majority of older people interviewed preferred to see the image of an older person demonstrating physical or mental vitality from playing basketball and cycling to reading a book. Even though the data in this study shows an under representation of overall leisure activity level, it does portray a wide variety of activities both leisurely and rigorous that seniors are participating in, which could serve as a motivating force to achieve a higher level of physical activity and a healthier life style (Levy, Slade, Kunkel, & Kasl, 2002; Kessler, Rakoczy & Staudinger, 2004). Ultimately, positive portrayals of health and activity levels in senior center brochures and newsletters may serve their designed purpose and attract older people to attend senior centers.

Health portrayals of older people in this study were overwhelmingly positive, supporting the findings of healthy portrayals in studies by Robinson, Callister, and Magoffin (2009), Dellman-Jenkins and Yang (1998), Roy and Harwood (1997), and Robinson and Callister (2007). They are a contrast to the portrayals of older people in very poor health, dying, ill, and overweight, impaired, and using a physical aide found in studies by Kessler, Rakoczy and Staudinger (2004), McConatha, Schnell, and McKenna (1992), Robinson and Anderson (2006) and Carrigan and Szmigin (1999). The under representation of older people using a physical aid and over representation of a healthy body weight may have both positive and negative effects. In some cases these idealized images could potentially help improve self-image and serve as motivation to strive for a physical ideal, and in other cases lead to unrealistic expectations about

their physical health that cannot be met (Levy, Slade, Kunkel, & Kasl, 2002; Kessler, Rakoczy, & Staudinger, 2004; Zhang, et al., 2006). Still, the overall benefits of positive health portrayals outweigh any negative consequences because they have the ability to not only change negative societal stereotypes of older people from impaired and helpless (McConatha, Schnell, & McKenna, 1992; Carrigan & Szmigin, 1999; Levy, Slade, Kunkel, & Kasl, 2002) to healthy, active and competent (Kessler, Rakoczy, & Staudinger, 2004; Robinson & Callister, 2008; Dellman-Jenkins & Yang, 1998), but they can also provide motivational models that help improve self-image and help produce a tangible change to their physical and mental well-being (Kessler, Rakoczy, & Staudinger, 2004; Levy, Slade, Kunkel, & Kasl, 2002). In some cases it may improve an older person's ability to walk (Robinson & Umphrey, 2006), and even increase an older person's will to live (Levy, Slade, Kunkel, & Kasl, 2002).

A few differences between the portrayal of males and females have already been discussed, yet the data reveals several significant differences between the portrayal of males and females as it relates to the type of photo they were pictured in, whom they were pictured with, race, activity level, health status, and the setting of the portrayal. A few of these differences can be explained by the fact that several of the variables listed actually determined the outcome of the variables that followed them. For example, if a subject was pictured in a game/activity room, exercise room, or outdoors, they were very often participating in a leisure or physical activity, portrayed in good health, and pictured with others participating. In essence, one variable leads to another in a type of domino effect. These results represent a marked difference from studies by Vasil and Wass (1993), Kessler, Rakoczy and Staudinger (2004), Lauzen and Dozier (2005), Prieler, Kohlbacher, Hagiwara, and Arima (2011) and McConatha, Schnell, and McKenna (1999), which showed a complete under representation of women, and in one particular case, portrayed older

women as unmotivated and without goals (Lauzen & Dozier, 2005). In contrast, the current study revealed a complete domination of female representation in each of these categories, which may possibly be explained by the overall gender representation, which portrayed females outnumbering males almost (2:1). This created a situation where the overall chance of females being portrayed with these characteristics was much more likely than it was for male subjects.

Race representation was proportional across both genders except for African Americans, which has no easy explanation. African American females outnumbered African American males nearly (3:1) and the claim of under representation is based on the assumption that gender representation for older people is uniform across all races. The only clear explanation is that senior centers draw more women than men overall (Kaye & Reisman, 1993), perhaps to an even greater extent in communities made up of predominantly African American populations. The under representation of African American males and over representation of African American females can serve as a double edged sword, marginalizing males while empowering females (Levy, Slade, Kunkel, & Kasl, 2002). It appears that in both cases, whether they be large differences in general representation, health status, activity level, being pictured with others in an active setting or even differences in the representation of a particular race, unequal representation between the genders improves the self-image of one group while damaging the self-image of the other. In the case of this study, perhaps a rare finding, older females are represented more than males and thus, may be associated with all the physical and social benefits of positive representation. Perhaps an unintended result of differing representation between genders may be a steady influx of women and a decline in men's attendance at senior centers.

The current study also showed a significant difference between the type of photograph a subject was pictured in and health status and activity level. The findings showed that those

pictured in a candid photograph were more likely to be portrayed in good health than those pictured in a staged photograph, while those pictured in a staged photograph were more likely to be pictured as active or very active, indicating that activity level did not necessarily determine health status or vice versa. Candid photographs outnumbered staged photographs nearly (3:1) which creates better odds for those pictured in a candid photograph of being portrayed both in good health and active, yet, those pictured in a staged photograph are portrayed as more active than those in candid photographs. According to Kaye and Reisman (1993), older people prefer glossy, elegant, eye appealing images in marketing materials targeting them, so according to the data of the current study, while appealing to the aesthetic preferences of older people, senior centers in this sample sacrificed health status portrayals for portrayals of active or very active older people and vice versa. This assertion is based on the assumption that a replicated study would yield the same representation for both candid and staged photographs. With either type of photograph, the results are either a healthy portrayal or an active portrayal, both of which are positive, and carry with them the related positive effects on an older person's self-image.

Finally, the findings of this study showed an overwhelmingly positive overall portrayal of older people, differing from the findings of Robinson, Callister, and Magoffin (2009), which showed less than half of all older people with an overall positive portrayal. Differences in results are most likely the result of different mediums being analyzed. Robinson, Callister, and Magoffin (2009) analyzed teen films while the current study analyzed senior center brochures and newsletters, and each study used a different method of measuring the overall portrayal. Robinson, Callister, and Magoffin (2009) used an evaluation of stereotypes created by Hummert, Gartska, Shaner, and Strahm (1994), while the current study simply weighed positive and negative characteristics found throughout the entire evaluation. Regardless of method for

determining the overall evaluation, a strong majority of overall positive portrayals like those found in senior center brochures and newsletters presents a strong, overall positive influence on both societal views about older people and aging (Levy, Slade, Kunkel, & Kasl, 2002), and on older people themselves (Mutran & Rietzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Anderson, Harwood, & Hummert, 2005). Perhaps an even more immediate effect of positive overall portrayals of older people in senior center brochures and newsletters is that it gives an older person the desire to emulate the portrayals that resulted in the overall positive portrayal (Kessler, Rakoczy, & Staudinger, 2004). It may also help develop a sense of security and trust in the senior center itself.

CHAPTER SIX: CONCLUSIONS

The findings of this content analysis should prove useful not only to advertisers and those who develop marketing materials for senior centers, but general media practitioners as well. The overwhelmingly positive portrayal of older people, especially women in these brochures, can perhaps represent a new age of not only improved portrayals of older people, but portrayals that serve as tools of empowerment, improvement of self-image, and change in public perception and negative stereotyping (Levy, Slade, Kunkel, & Kasl, 2002; Mutran & Rietzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Anderson, Harwood, & Hummert, 2005). Senior Center brochures and newsletters not only attract a growing market to a popular service, they send a powerful message that older people are not inconsequential, that they live fulfilling lives (Levy, Slade, Kunkel, & Kasl, 2002), and that even in the last stage of a person's life, they can have happiness, friendship, health, hobbies and interests, and a positive view of his or themselves.

In the past, media practitioners and advertisers in particular portrayed older people in a positive way only if older people made up a large portion of their target audience and they had to appeal to them because of economics (Peterson, 1992). The findings of this study indicate that in advertising targeting older people and their caretakers exclusively, they are portrayed in a more positive light than in any other medium, a marketing practice which has created a thriving service that boasts more than 10 million participants in the U.S. alone (Aday, 2003). Advertisers and media practitioners would do well to learn from the success of senior centers and recognize the growth and buying power of the older segment of the population (McConatha, Schnell, & McKenna, 1999; Middlecamp, & Gross, 2002; Ambrosius, 2010). Further, if advertisers and media practitioners stopped treating their portrayals of older people solely as a business decision

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aimed at maximizing profit by appealing to younger consumers and viewers at the expense of older consumers and viewers (Peterson, 1992; Healey & Ross, 2002; Robinson, Gustafson, & Popovich, 2008), they may actually experience an increase in sales numbers, greater brand loyalty, and a higher number of viewers (Johnson-Hillery, Kang, & Tuan, 1997; Lu & Seock, 2008). A byproduct, and by far the most important result of adopting this strategy would be that older people would see that others viewed them positively, and the self-image and quality of life for many older people would improve (Mutran & Reitzes, 1984; Robinson & Umphrey, 2006; Kessler, Rakoczy, & Staudinger, 2004; Anderson, Harwood, & Hummert, 2005; Levy, Slade, Kasl, & Kunkel, 2002). The potential to change public perception and improve the lives of older people through positive media portrayals makes it imperative that media practitioners and advertisers follow the example set by those who create marketing materials for senior centers.

Possible limitations to this study are that it is the first of its kind in that no other studies have specifically analyzed senior center brochures for their portrayal of older people, and consistent with research in any other field, the argument needs replication to become more credible (Schafer, 2001). Another limitation is that the findings only represent portrayals from 2011 and 2012, only showing the current portrayal of older people in this medium, which is subject to change. Although a difficult task to collect a strong sample of senior center brochures and newsletters from years and decades past, the current study would be strengthened by a longitudinal study of portrayals in the same medium to see if they follow they follow the trend of improving media portrayals of older people over time (Williams, Wadley, & Ylanne-McEwan, 2010). The study uses a mixed sample of both brochures and newsletters and should be replicated using isolated samples to compare the findings. Future research should also compare the findings of studies using a sample of brochures or newsletters that represent all accredited

senior centers, a sample using all random selections gathered from senior center websites, and another mixed sample, similar to what the current study uses. This would serve as a good measure of consistency and if the results are similar, it would allow researchers to make more broad generalizations about the portrayal of older people in senior center brochures and newsletters.

The current study is also limited by the fact that it used a single photographic image of each subject to make several assumptions and categorizations, many of which could be considered subjective. Future research would benefit from qualitative research within the walls of actual senior centers that tracks all the variables tested in the current study in a real life setting and compares them to the data of the current study. This type of research would help reveal inaccuracies in some of the extreme discrepancies in representation found in the data. If future research holds true that older males are extremely under represented in senior center brochures and newsletters, other studies should test the effect that this under representation has on male attendance at and usage of senior centers, as well as on their overall self-image.

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Brochure & Newsletter Representation by State (B-Brochure; N-Newsletter)

1. Alabama- Brookdale Place (B), Greenbriar (B), Archibald Center (N)
2. Alaska- Kenai Senior Center (N), Senior Citizens of Kodiak (B)
3. Arizona- Beattitudes Campus Foundation (B), Red Mountain Active Adult Center (N)
4. Arkansas- Benton County Senior Activity Center (N), North Little Rock Senior Citizens Center (N)
5. California- Cedar Creek Senior Living (B), Oakmont Active Retirement Living (B), Oakmont Gardens (B), The Arbors (B)
6. Colorado- Aurora Center for Active Adults (B), Bessie's Hope (N), City of Louisville Senior Center (B), Colorado Springs Senior Center (N)
7. Connecticut- Rose City Senior Center (B), Town of Enfield Senior Center (B), Wallingford Senior Center (B)
8. Delaware- Senior Citizen's Inc. of Delaware County (N), Newark Senior Center (N),
9. Florida- The Volen Center (B), Hillsborough County Aging Services (B), Senior Friendship Centers (B), Leon County Senior Outreach Program (N)
10. Georgia- Hancock County Agency on Aging (N), Senior Citizen Services (N)
11. Hawaii- The Plaza (N), Lanakila Senior Center (N), Holiday Retirement (B)
12. Idaho- Touchmark at Meadowlake Village (B), Senior Connection (B)
13. Illinois- Levy Senior Center (N), Arlington Heights Senior Living Center (N), Belmont Village of Glenview (N)
14. Indiana- Primerose (B), Indianapolis Senior Center (B), CICOA (N)
15. Iowa- Valley View Village (B), Iowa Jewish Senior Life Center (N)
16. Kansas- Brookdale Senior Living (B), City of Derby Senior Services (B)
17. Kentucky- St. Andrew's Journey (N), Liberty Ride Senior Living Community (N)
18. Louisiana- Lake Sherwood Village (N), West Ouachita Senior Center (B)
19. Maine- Thornton Oaks Retirement Community (B), Parker Ridge (B)
20. Maryland- Morningside house of friendship (N), Pasadena Senior Activity Center (N), Shangri-La Assisted Living and Retirement Community (B)
21. Massachusetts- Duxbury Senior Center (N)
22. Michigan- Age Well Services (N), Auburn Hills Senior Citizens Services (N), East Lansing Community Center (N), Heart of Senior Citizen Services (N)
23. Minnesota- The Gillespie Center (N), Rochester Senior Center (N)
24. Mississippi- Brookdale Living (N)
25. Missouri- Lutheran Senior Services (N), Vesper Hall (N)
26. Montana- Highgate Senior Living (B), The Rainbow Senior Living (N)
27. Nebraska- Elkridge Village (N), Eastern Nebraska Office on Aging (B)
28. Nevada- Carson Valley Senior Living (N)
29. New Hampshire- The Birches at Concord (B)
30. New Jersey- Kip Center (B)
31. New Mexico- Cottonbloom (B), Alamo Senior Center (N), Los Alamos Senior and Retired Organization (N)

32. New York- Sandel Senior Center (N), Jamaica Service Program For Older Adults, Inc. (N)
33. North Carolina- Tryon Estates (B), Nash County Senior Center (B), Fayetteville Senior Center (N)
34. North Dakota- Burleigh County Senior Adults Program (N), Edgewood Vista (N), Grand Forks Senior Center (N)
35. Ohio- J.F.K. Senior Center (N), Maumee Senior Center (N), Wood County Committee on Aging (N)
36. Oklahoma- Senior Care Services (B), Broken Arrow Senior Activity Center (N)
37. Oregon- Hollywood Senior Center (N), Lake Oswego Adult Community Center (N)
38. Pennsylvania- Center in the Park (N), Upper Darby Senior Center (N), Surrey Services for Seniors (N), Marconi Older Adult Program (N), Senior Adult Activities Center of Montgomery County (B), Wayne Senior Center (B), Journey's Way (B)
39. Rhode Island- Cranston Department of Senior Services (B), Leon A. Mathieu Senior Center (N)
40. South Carolina- Capital Senior Center (N), Senior Resources (B), Lexington County Recreation and Aging Commission (N)
41. South Dakota- Canyon Lake Senior Center (N), Touchmark)
42. Tennessee- Fifty Forward (B), Maury County Senior Citizens (N), Kingsport Senior Center (N), Frank R. Strang Senior Center (N)
43. Texas- Stoneybrook (B), Sheltering Arms Senior Services (N), Plano Senior Center, (N)
44. Utah- Cache Valley Senior Citizen Center (N), Mountain Ridge (B), St. George Senior Center (N)
45. Vermont- Benchmark Living (B), The Thompsen (N),
46. Virginia- The Center for Aging (N), Charlottesville Senior Center (B)
47. Washington- Elderwise (N), Garden Court (N)
48. West Virginia- Mineral County Aging and Family Services (N), Kanawha Valley Senior Services (N)
49. Wisconsin- North/Eastside Senior Coalition (N), Interfaith Older Adult Programs (N), Middleton Senior Center (B), Stroughton Area Senior Center (N)
50. Wyoming- Rendezvous Point (N), Sheridan Senior Center (N)
51. District of Colombia- The Washington Home & Community Hospices (N), Knollwood (N)

APPENDIX B

Older Characters in Senior Center Brochures

Senior Center _____   **State** _____

Photo   Candid _____   Staged _____

Gender of older person: ـ____ M   ـ____ F

How Pictured: _____ Alone   _____ With   □ Spouse   □ Other Residents

□ Child   □ Younger Adults   □ Caretaker

Race of older person:

____ W   ____ B   ____ H   ____ A   ____   Mixed ____   Other _____
____   Indeterminate

Level of activity shown:

____ Very active _____   ____ Active _____

____ Inactive _____

Health Status: ____ Good   ____ Minor Limitations   ____ Poor

Physical Description:

____ Gray/White hair   ____ Dark hair   ____ Indeterminate

____ Bald/balding   ____ Full hair   ____ Indeterminate

____ Smiling   ____ Laughing   ____ Expressionless

____ Facial hair beard/mustache ____ Gray/White   ____ Neat ____ Unkempt

____ Glasses   ____ Hearing aide

____ Use of a physical aid _____   ____ Hunched over

____ Sunday Dress Clothes   ____ Everyday Clothes   ____ Sleeping Clothes

____ Exercise Clothes   ____ Other _____

Role: ____ Resident   ____ Patient

Personality Description:

____ Happy/Content   or ____ Angry/Grumpy/Stern   or ____ Sad

 or ___ Neutral

____ Friendly   or   ____ Loving/Caring (physical contact)

____ Senile/Crazy or   ____ Eccentric

____ Helpless   or   ____ Ordinary   or _____ Energetic/Vibrant

____ Other _____

<u>Body Image of the older character</u>:

____ Very thin   ____ Thin   ____ Average   ____ Overweight   ____ Obese

<u>Setting</u>

____ Outside _____   ____ Inside _____   ____

Bedroom

____ Exercise Room   ____ Cafeteria   ____ Game/Activity Room

____ Other _____

<u>Overall evaluation of older character</u>:

____ Positive   ____ Neutral   ____ Negative