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Geronomie and Social Policy

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Geranomie and Social Policy for the Aged[1]

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Does qualitative sociology have anything positive to offer those who seek personally and professionally adequate resolutions of the troubles and social problems of old age? Or should those practitioners of social geriatrics content themselves with increasingly sophisticated mathematical formulations of what is wrong and evaluation studies indicating that very little social interaction works? Another way of asking the same, or at least very similar questions is whether post-positivist, post-critical, post-radical, post-post industrial . . . (Did I miss anyone?) sociology has anything to offer those for whom post-adulthood has become problematical: old people with inadequate incomes, health problems, poor housing, deficient diets and the like; as well as their adult children, neighbors and friends and the employed caretakers who must deal with so many of them.

Applied social scientists have often viewed answers to such questions as essentially a matter of unfolding enlightenment: We have only to discover the laws of social behavior and the solutions to social problems will be self-evident. Now that the non-positivists appear to be gaining the upper hand generally in the ongoing debate over the nature of sociology, it is appropriate to ask if non-positivist alternatives to the above questions can also be expected. In other words, in light of the major realignments occurring within sociology, it can be asked how such changes have affected sociological interest in social policy.

Such questions are, of course, enormously broad and complex even if one's concerns are limited to a specific field such as gerontology. In this instance, one place to begin searching for tentative answers is in recent published contributions to the literature of social gerontology, a hybrid discipline that grew in part out of its origins in sociology. Beginning with the founding of the Gerontological Society in 1945, the personal troubles and challenges of older people have seldom been fare from the central concerns of those who study the social behavior of the aged. Consequently, it is reasonable to speculate that if any startling new insights are made into the social problems of old age, they will soon find their way into the published literature on the subject. Since a search of this nature among all the suggestions of social problems facing older people would, in itself, be an enormous task, let us concentrate on one distinct social problem reflected in recent literature: the problem which might be termed *geranomie* (a portmanteau term offered with only the slightest apologies to Durkheim). Repeated observations have suggested that a considerable proportion of old people in the United States become, concomitantly with getting old, social isolated, abandoned and anomic, cut off from involvement, participation and meaningful social contract. Theirs is, in other words,

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an explicably and definitively social problem in all senses of the term. Gerontologists have even coined a term (and a theory of the same name) for this phenomenon: *disengagement* (Cumming and Henry, 1961).

The purpose of this review essay is to examine a sampling of recent books published in social gerontology with regard to: 1) formulations of this problem of geranomie; and 2) general solutions to these problems. In one of the earliest formulations of geranomie, the late Ernest W. Burgess attributed this condition to *rolelessness* and associated it with a mixed bag of conditions including widowhood, loss of adult children from the home, retirement, and a range of other familiar circumstances (Burgess, 1960). By this term, Burgess did not point to a complete absence of social roles in the life of older persons, but rather social roles substantially or completely lacking in meaning to others. Social gerontologists since Burgess' time have placed great emphasis upon the importance of social roles in dealing with the conditions and circumstances of old age.

In a subsequent formulation for the Social Science Research Council that became known as the activity theory of aging, another sociologist, Ruth Cavan (1949) associated elimination of rolelessness and the creation of social roles for older persons with social action, or activity, and first linked the resolution of geranomie with the measure of *life satisfaction* in a condition termed *successful aging*. Formal statement of the activity theory of aging is usually attributed more recently to a publication more than a decade later by the psychologist, Robert Havighurst (1961).

Regardless of disciplinary disputes over original authorship, this emphasis on roles and social activity subsequently resulted in strong tendencies in existing public policy to emphasize role-making as a central concern – through paid employment, senior activity centers, senior housing, adult day care and assorted other policy venues. Beginning in the mid 1960s, public support for "senior activity centers" offering recreational services and intended to generate "leisure time roles" was a major emphasis of public policy through the aptly named "aging network".

Other public social initiatives have been a good deal more diversified and complex. For example, the Social Security program, including retirement income as well as Medicare and Medicaid is often characterized as "socialist" by its critics, but it can be traced directly to the "arch conservative" German prime minister Bismarck. It is not clear, however, that the underlying social conceptions of activity-theory based programs have become any more clear or unambiguous.

Whatever its immediate income-related benefits and short-term advantages, it does not appear that role-making through employment, programs such as Green Thumb, point toward a general solution to the problem of geranamie, however, if for no other reason than the seeming absurdity (and instability) of an entire subculture of old people interacting with one another solely because they are paid to do so! Yet, other approaches to the problem are not clearly apparent in the gerontological social policy literature at present.

It is of immediate interest that Zena Smith Blau (Old Age in a Changing Society, New Viewpoints, 1974) begins at a point not far from the view outlined above. She notes in the preface:

> Until now, the study of old age has produced a
> large body of facts. To be sure, such work is
> necessary and useful in shaping public policy
> designed to help the old. . .But what is largely
> missing in this work is an interpretation of the
> facts infused with sociological imagination and
> human compassion.

The underlying policy-related image of "interpretationless facts" which this and other statements by Blau convey is overridden by her clear call for much-needed imagination and interpretation as part of the social gerontological enterprise. Unfortunately, Blau's is apparently not the particular sociological imagination to supply such interpretations – at least not in this volume. Even when it was first published the book was seriously dated, particularly for a work proposing to offer grounded interpretations. The preponderance of citations are from the 1950s when social gerontology was yet in its infancy. (It should be noted that there are those who would suggest that the field as a whole has yet to pass into its scientific adolescence!)

These observations aside, Blau is certainly correct in identifying meaningful social participation as the critical *social* problem of old age. However, her treatment of this problem is, at best, diversionary from a social policy perspective. The central thrust of her book is the explication of *role exit* as a social process for movement from engagement in the younger years to what we can think of as disengagement and rolelessness. (Note that the underlying image of exit is a physical metaphor.) Role exiting, she indicates, occurs in four ways: 1 by acts of nature; 2) voluntary action; 3) involuntary action; and 4) expulsions. It is not immediately clear that expulsions are all that distinct from other involuntary acts. Setting aside such immediately apparent typological issues, let us examine briefly the general significance of role exit for social policy and social action.

First, as handled by Blau, the concept appears generically related to a number of other role concepts which have received prior attention by social gerontologists. Such conceptions appear to suffer from several standard problems. First, they are typically vague and unspecific about *who* is losing *what roles* and what the nature or consequences of such role loss may be. This is, one suspects, largely due to insufficient attention to the related problems of meaning. Considered from her perspective does a widow actually in some sense "lose" the role of wife, due to the natural act of the death of her spouse, and does such a loss include the loss of meaningfulness (including memories) about what wifeliness means? Or, is the nature of wiving profoundly and irrevocably *altered* by the death of the spouse without any role loss as such? Isn't this a situation in which some new meanings are also gained by adding them to prior role understandings and certain

frustrations and disappointments are created through the inability to act upon prior meanings? In what sense, in other words, is the central ifea of role loss relevant here?

Secondly, such role conceptions of the problem of geranomie, including Blau's, suffer by obscuring the question of the genesis of role behavior. This very question has, of course, preoccupied many role theorists. However, social practitioners including social gerontologists, clinical sociologists, and social workers appear to have remained largely oblivious to the subtleties of interpretation involved, and employ a bewildering variety of eclectic interpretations of role performance. It is perhaps inevitable, therefore, that paid employment seems to be the only "crescive" role which these same social practitioners are able to consistently and reliably generate on a large scale basis. Other approaches to planned social behavior may appear out of reach, but creating *work roles* would seem to be relatively straightforward matters of job definition and description, hiring, supervision and the like.

This gets us to the critical question for social policy of role-making as a social technique (Zweig & Morris, 1966). It would appear at first glance that each of us can make for ourselves roles which are already socially defined, and if we are sufficiently skillful even fashion for our reference others relatively new roles (witness the self-conscious revival of craftsmanship occurring in the United States). For role theory to be useful in social policy, however, it will be necessary that procedures for successfully reallocating existing roles, and for creation of new roles outside primary group contexts will be necessary. In under-estimating the focus of meanings in role loss, it would appear that social gerontologists have been altogether too optimistic in their assessments of the significance of role-making as a means of solving the problem of geranomie. Is it realistic to assume, for example, that meaningful social lives can be intentionally refashioned by social practitioners for widowed women who have become social isolates following the death of a spouse and have never "re-entered" society? Supporters of role theory approaches will immediately point to Foster Grandparents and similar programs as examples However, unless we are prepared to endorse widespread public employment for all isolates, such a general solution does not appear to hold up.

The policy-oriented sociologist, in other words, will not find in *Old Age In Changing Society* much practical guidance regarding the general solution to the problem of geranomie. While the book strives for interpretation of the findings of gerontology as noted above, such interpretation will be of little interest to the policy oriented. Theoretical and conceptual essays such as Blau's are but one aspect of qualitative sociology. What of other approaches and styles? What do these have to offer? Another place to look is among other recent book-length research monographs.

The upsurge of publications in social gerontology during the 1970s on the crucial social policy question of institutional care of older people should be especially encouraging. Sylvia Sherwood and a group of collaborators have assembled a

voluminous collect of data, for example, under the title of *Long-term Care: A Handbook for Researchers, Planners and Providers.* It is clearly the researchers – and the quantitatively oriented who come out ahead in this work, however. As is typical of such works, there are numerous small & non-random (insufficient) samples cited and a good bit of generalizing to – and beyond – the evidence of the data, but this volume is hardly unique in that regard.

Jabor Gubrium's *Living and Dying in Murray Manor* (St. Martin's Press, 1975) is the first book-length field study of an institution for the aged. It was followed a few months later by publication of Sheldon Tobin and Morton Lieberman, *Last Home for the Aged (*Jossey-Bass, 1976). Juxtaposition of the two raises some interesting (and disturbing) questions for those interested in the viability of long-term care institutions as a key feature of geriatric social policy. Neither volume connects directly with the issue of geranomie which is our principal focus in this essay, although for the careful reader there is considerable detail connected to this question. Gubrium enters not at all into the policy issues involved in such care, but straightforwardly reports on life in a nursing home in Wisconsin, while Tobin and Lieberman rather deliberately position themselves as defenders of nursing home care. However, Gubrium's portrait of life in the "home" that he studied adds significant qualitative detail to the picture of nursing homes as non-sustaining social environments not conducive to successful aging.

More distressing is the portrait pained by Charles Stannard in *Old Folks and Dirty Work: The Social Conditions for Patient Abuse in a Nursing Home* (reprinted in Cary S. Kart and Barbara Manard, *Aging in America: Readings in Social Gerontology* (Alfred Publishing Co, 1976). Stannard's view is that patient abuse arises from the practices of employing marginal persons (drifters, ex-mental patients, ex-convicts, and others) as aides and leaving them alone and unsupervised with patients who can be highly frustrating. Three things are important to note here: First, the frequent geranomie of such patients – their rolelessness and disengagement from family and friends, are undoubtedly important factors in such abuse. Secondly, leaving any low level, unskilled employees insufficiently trained and unsupervised is a prescription for trouble. Finally, there is the additional element of the unique challenges and frustrations presented by nursing home residents who may be physically challenged, mentally impaired or both.

One of the most curious aspects of recent work on the institutional question, not only in aging but also in related settings is the apparent correlation of findings and research methods. Those who employ qualitative, less structured, methods are generally more inclined to find negative, even morally reprehensible data than those (including Tobin and Lieberman) who rely on standard questionnaires and survey techniques. This is only partly related to the long tradition in qualitative sociology of studies of social deviants and socially marginal persons (c.f., Liebow, 1967; Rosenhan, 1973; Wallace, 1971; Whyte, 1943). This is suggestive that the kind of methodological "triangulation" endorsed by Norman Denzin (1970) and others may be a necessary corrective of utmost importance.

It is apparent from the present literature, however, that anything approaching a general solution to the problem of geranomie in institutions has yet to emerge. Much work remains to be done on this question, as well as on the related questions of geranomie among the old living independently in the community.

My own candidate for the most significant recent contribution to the question is historian David H. Fischer's *Old Age in America* (1978). Fischer carefully and convincingly dissects the modernization myth that the current state of old people is a direct consequence of the urban and industrial revolutions of recent centuries. substituting instead a much richer (in both historical and sociological meaning) model of the transitions from the colonial age to the present.

There is not, at present any convincing treatment of the problem of geranomie to be found in the literature of social gerontology either among theoretical works or research monographs. Until such work is published, we can expect social policy on the question to continue to have the kind of ad hoc, extemporaneous quality it presently possesses.

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