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Author
Perkinson, Margaret A.

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CONCEPTUAL AND METHODOLOGICAL ISSUES IN SOCIALIZATION RESEARCH:
STUDYING SOCIALIZATION TO VOLUNTEER ROLES IN A
MULTIPURPOSE SENIOR CENTER

by

MARGARET A. PERKINSON

DISSERTATION

Submitted in partial satisfaction of the requirements for the degree of

DOCTOR OF PHILOSOPHY

in

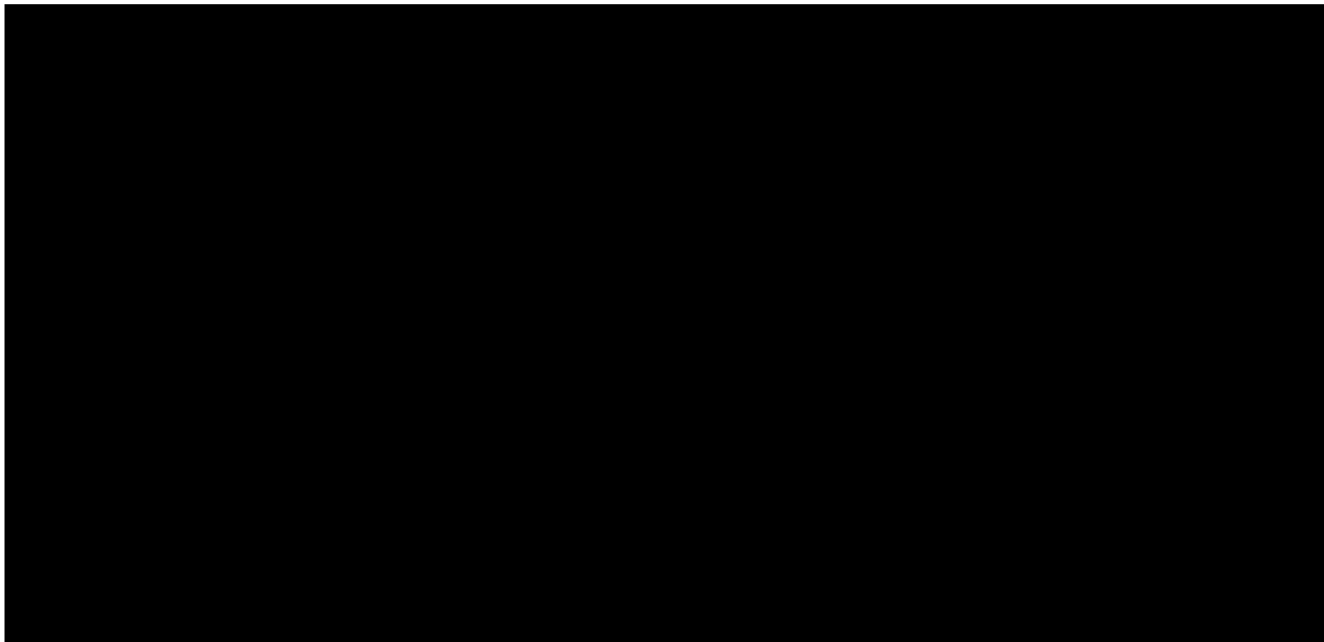HUMAN DEVELOPMENT AND AGING

in the

GRADUATE DIVISION

of the

UNIVERSITY OF CALIFORNIA

San Francisco

PREFACE

This work stems from a long-standing interest in value systems and how people come to accept or reject various notions of what is "correct", "appropriate" and "good" as defined by their reference groups. In conducting previous research on socialization to various roles and values [of incoming residents into a retirement community (Perkinson, 1980), of older adults to the role of volunteer (Perkinson, 1986), and of spouses and adult children of Alzheimer's patients to the role of caregiver (Perkinson, 1989)], I have felt repeatedly frustrated by the scarcity of models or guidelines for dealing with the many methodological problems I encountered. The present work is an attempt to describe some of these problems and to offer tentative solutions to them. By no means do I consider this to be a definitive resolution of the methodological complexities of socialization research. My hope is that it might provoke others to consider and address these problems as well, to eventually enable more meaningful and valid research in this field.

I would like to take this opportunity to express my sincere gratitude to the various people who have helped me with this work. First, I would like to acknowledge the considerable assistance I received from the members of my dissertation committee. It has been a great honor and pleasure to work with scholars of such caliber. I owe the greatest debt of gratitude to my advisor, Dr. Irving Rosow. His influence on my thinking has been considerable, as is evident by the numerous references to his works scattered throughout this dissertation. His prompt and patient reactions to earlier drafts were always insightful and to the point, and this work has been vastly improved because of his guidance. Dr. Leonard Pearlin, with his formidable editorial skills, also

provided considerable assistance in forcing me to clarify my ideas and sharpen my writing. Thanks also go to Dr. Margaret Clark, whose critical comments, editing and anthropological insights improved this work a good deal.

I would like to acknowledge the Illinois Department on Aging, which funded my research on volunteerism among the senior center participants entitled: "Promoting Independence among the Elderly: Volunteerism and the Process of Empowerment in a Multipurpose Senior Center." The ethnographic examples used to illustrate the various methodological issues in this dissertation were taken from that work.

I would also like to express my appreciation to the staff and the participants of the senior center, who so generously shared their time and their insights with me, and allowed me to observe and participate in their activities.

I would also like to thank my parents, William and Rose Perkinson, for their unending confidence in me. And finally I would like to thank my husband and colleague, David Rockemann, for sharing each day's account of data collection at the center with undiminished interest, and enduring countless hours of my "thinking out loud" with an enthusiasm which sustained me throughout this project.

Abstract

Conceptual and Methodological Issues in Socialization
Research: Studying Socialization to Volunteer Roles in a
Multipurpose Senior Center
Margaret A. Perkinson

Empirical studies of socialization have been characterized as
methodologically weak (Brim, 1966; Biddle, 1979; Clausen, 1968; Rosow,
1979; Wheeler, 1966). This dissertation identifies and attempts to resolve
some of the conceptual and methodological problems that have plagued
socialization research. It offers guidelines for deriving standards or criteria by
which an individual's possible socialization to given norms may be judged.
Data collected on socialization of older adults to volunteer roles in a
Midwestern multipurpose senior center are used as examples to illustrate
various methodological issues. Sources of data include: one year of
participant observation within the center, informal interviews with key
informants, and in-depth interviews with thirty-six center volunteers and non-
volunteers.

Guidelines for identifying social norms and for distinguishing them from
statistical norms (or modal group characteristics) are offered. The
implications of normative diversity for socialization and its measurement are
explored and illustrated with an analysis of norms regarding volunteer
eligibility. A scaling model based on a modified version of Rosow's (1965)
typology of socialization outcomes is recommended to convey the diversity of
possible normative orientations.

Socialization is presented as a multidimensional concept, entailing knowledge of and conformity to what is expected (normative content), how strongly it is expected (moral force), and when or under what conditions it is expected (context). In socialization to moral force, the individual conforms to the "boundaries of effort" deemed necessary and acceptable by the reference group and knows what, if any, flexibility is permissible in following normative dictates. Socialization to the dimension of context involves an awareness of the conditions under which a given norm is relevant and appropriate. Ethnographic examples to illustrate these dimensions are provided, and guidelines for determining moral force and contextual cues are suggested.

Socialization criteria should include standards to assess individuals in terms of their level of conformity on each of the three dimensions of socialization (conformity to normative content, moral force and context). Such an assessment would enable the researcher to make finer distinctions among individuals in terms of degree of socialization, and would allow the identification of different socialization patterns or types. The relevance of these methodological issues for the study of socialization in later life is discussed.

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SECTION ONE: BACKGROUND

Chapter 1 - Introduction

A. Objectives

The present work identifies and attempts to resolve conceptual and methodological issues crucial in conducting socialization research. It identifies various problems entailed in deriving standards or criteria by which an individual's possible socialization to given norms may be judged. Rather than ponder these problems in the abstract, the present work represents a "working through" of each issue in concrete situations, using examples from data on older adult volunteers in a multipurpose senior center to illustrate each of the issues and their possible solution.

The primary intent of this work is not to present an exhaustive ethnographic account of a particular senior center or of the volunteer role within that setting, nor is it to produce a specific instrument measuring socialization to that role. Rather, the goal of this thesis is to identify and clarify a range of issues that are methodologically significant in the development of socialization criteria in general and criteria for socialization to late life roles in particular. This is a conceptual rather than psychometric work; the focus is not on the mechanics and statistics entailed in developing and validating a specific measure of socialization. The insights thus gained in this general discussion of methodological issues could presumably be employed with other populations and other roles in analyzing socialization outcomes. I would also like to emphasize that the present concern is not with socialization mechanisms and processes per se, but with issues involved in deriving criteria by which socialization outcomes can be assessed.

B. Definitions of Concepts

The present research employs the following definitions: <u>ROLE</u>: expected behavior considered appropriate to any status position (Rosow, 1985). <u>NORM</u>: standards of desired values and activity, what is regarded as appropriate to a given role. Norms govern the specification of a role and the standards by which behavior is judged (Rosow, 1974). <u>ADULT SOCIALIZATION</u>: the process of inculcating new values and behavior appropriate to adult positions and group membership (Rosow, 1974).

C. Literature Review
1. Socialization Theory and Research

Empirical studies of socialization have been characterized as being methodologically weak (Brim, 1966; Wheeler, 1966; Sewell, 1963; Clausen, 1968; Biddle, 1979; Rosow, 1979). This weakness is linked at least in part to certain deficiencies in early socialization theory which have acted as barriers to methodological advancement. Thornton and Nardi (1975) have noted that in the early works of functionalism, socialization was considered synonymous with the acquisition of a new position in a social system. Socialization was portrayed as a one-step event in which an individual assumed a new social status and in so doing, conformed to the attendant expectations directed toward him (Linton, 1936; Sherif, 1936). The emphasis was on the ways social situations imposed rights and duties upon individuals, with those

individuals conforming somewhat automatically to that imposition. Socialization was thus seen as the mechanism by which culture was transmitted and individuals transformed into working members of society (Brim, 1966). As Jackson (1972) notes, the tendency to uncritically reify the concept of role led to a view of society as a system of external normative constraints and the individual as an actor in a socially prescribed part.

Early socialization theorists, although more moderate than Durkheim or Linton, continued to think in the same terms. Brim (1966) saw socialization as unidirectional, the process by which society changes and transforms individuals into working members of a group. He did, however, consider the effects of the individual's personality and his or her appraisal of the situation on the process of socialization, and thus at least implicitly admitted the possibility of differential socialization outcomes. Clausen (1968), while recognizing diversity among individuals, defined his major concern to be the generic patterning bought about by common socialization experiences. He did, however, admit the concept of modal patterns was problematic in light of the reality of social change. Although Inkeles (1968) noted enormous "slippage" between what is required and what is "turned out," he continued to stress an "ideal-typical" relation in which the social organization produces the kind of individual it needs, thus serving its own purposes and contributing to the adjustment of the individual.

Consideration of the issue of role conformity or socialization was greatly limited by commonly held definitions of the concept of role. The definition of role most frequently cited by early theorists was probably that proposed by Linton (1945): "Role is the sum total of the culture patterns associated with a particular status. It thus includes the attitudes, values and behavior ascribed by society to any and all persons occupying the status." Such traditional

formulations of the role concept blocked inquiry into the issue of role conformity. Built into such a definition was the assumption that there was conformity. By definition, the mere fact of occupying a given status implied that the individual held the appropriate attitudes, values and behaviors. Socialization was assumed in the definition, and was seen as automatic and non-problematic. Such a position offered little possibility of explaining variation in role acquisition and performance of the same type of role by different individuals.

In light of the above, the methodological weakness of many of the empirical studies of socialization is hardly surprising. Since socialization was a process assumed with role incumbency, the goal of most socialization research was simple description of the typical stages a socializee would undergo in adopting a given role. The degree of socialization or its absence was rarely considered an empirical issue which warranted investigation in and of itself; variation in socialization outcome was for the most part a question left unexplored.

More recent developments in socialization theory represent a departure from the earlier, simplistic notions discussed above. The proposition that behavior is shaped by norms as the result of a relatively automatic internalization of normative constraints, the "social mold" theory as labeled by Homans (1950), has been attacked by innumerable scholars (Wrong, 1961; Popitz, 1972; Sarbin and Allen, 1968; Riley, 1972; Gordon, 1966; Gross et. al., 1958; Preise and Ehrlich, 1966). One of the most frequent criticisms was that role conformity and stability had been over-emphasized, to the neglect of the study of variation and change (Komarovsky, 1973).

Sociologists were not alone in their dissatisfaction with the over-integrated view of society. Anthropologists such as Wallace (1961) and the Peltos

(1975) criticized the notion of "uniformism" - those theories based on an idea of common, shared homogeneous culture or on culture as the set of standards, rules or norms. As Wallace (1961, p.88 and p.90) noted: "...there is no reason to suppose that social organization requires a high degree of personal conformity to universalistic norms... No population within a stated cultural boundary can be assumed to be uniform with respect to any variable or pattern."

Socialization to a single normative standard could no longer be assumed as an automatic correlate to role acquisition . In theory, at least, it was recognized that diverse socialization outcomes were possible, and that one should approach the issues of role conformity and normative consensus as empirical questions rather than basic assumptions.

For the most part, socialization research did not keep up with the advances achieved in socialization theory, in spite of criticisms and suggestions made by various leaders in the field. As early as 1966 Wheeler had identified the critical flaw of most socialization studies, that socialization outcome had been left unspecified, and urged that criteria of successful and unsuccessful socialization be established. Ten years later, Van Maanen (1976) echoed a similar complaint: much of the research on socialization had focused simply on the content of what was learned with little attention to variable socialization outcomes.

Rosow (1974) underlined this point in Socialization to Old Age, defining the specification of socialization criteria as a basic conceptual problem in the field of socialization. Noting the need to operationalize such criteria, he called for the development of standards by which socialization could be judged and socialization differences distinguished among individuals and groups. "... in research, such criteria must be objectified and operationalized in order to

support an analysis, and much more systematic standards than have typically been used will be necessary in the future. This is simply an idea whose time has come" (Rosow, 1974, p. 53).

There have been few systematic studies in the field utilizing explicit standards of socialization by which individuals could be compared. The development of a criterion measure of socialization is a basic methodological prerequisite for the study of variation in role acquisition and performance. The present work is an attempt to consider the various methodological issues entailed in such an endeavor, and thus address the gap between socialization theory and socialization research discussed above.

2. Characteristics of Old Age Roles and Their Methodological Implications

The nature of socialization differs substantially, depending on the structural characteristics of the role to which one is socialized (George, 1987; Perkinson, 1982). Formal roles (those associated with major institutionalized statuses, such as soldier or doctor), involve normative expectations which are more clearly and explicitly defined. Socialization to formal roles entails "role learning," a structured process in which individuals are taught to meet pre-existing, socially shared expectations (George, 1987). The norms associated with informal roles (such as vacationer or movie-goer), in contrast, are more implicit, less clearly defined. Informal roles are generally chosen on the basis of personal preference, and are less critical to the functioning of society (George, 1987). Socialization to informal roles entails a process of "role shaping," a more fluid, negotiation process resulting in characteristic behavior patterns (George, 1987). The distinction between formal and informal roles

need not be regarded as an either/or categorization, but rather a continuum of greater or less formality, allowing for more or less negotiation.

It has been suggested that the nature of socialization in late life differs from socialization in earlier life periods due, at least in part, to differences in the nature of the roles available. Socialization in old age is characterized by a decline in formal roles and an increase in new, informal roles which tend to be more fluid and negotiated (George, 1987; Rosow, 1985). The fluid, self-directed character of late life socialization poses special challenges to the researcher. Several methodological issues are raised which, while not unique to studies of socialization in late adulthood, assume a greater salience for this period:

a. The Issue of Normative Diversity

Because normative expectations for informal roles tend to be implicit, less spelled out, there is greater probability for ambiguity in normative content. This ambiguity, combined with the negotiated nature of normative expectations for informal roles, results in a greater probability of normative diversity. Given this diversity and its concomitant increase in normative options, actors have more opportunities to shift from one set of standards or expectations to another (the "chameleon" socialization type - Rosow, 1965, see below), depending on their circumstances. This situation poses definite methodological problems for determining socialization criteria, which will be considered later in this work.

b. The Issue of Moral Force

Moral force, the relative strength of a norm (Rosow, 1974), takes on a greater significance in the situations of normative diversity just described. One must know how seriously to take one normative expectation as opposed to an alternate, what degree of flexibility is permissible in order to assess the feasibility of a "chameleon-style" shift, and whether there are acknowledged limits to compliance to a given norm or its alternates. Moral force represents an important dimension of late life socialization and should be taken into account in developing criteria for socialization to late-life norms.

c. The Issue of Context and Recognition of Contextual Cues

Given the potential for lack of consensus and the negotiated, fluid aspect of informal norms, the ability to determine when, or under what conditions, a given norm is relevant and appropriate assumes special significance. The ability to recognize and respond to the contextual cues which identify the set of normative expectations that are in play in a given interaction and the ability to manipulate such cues in order to signal a shift in norms are skills especially pertinent to socialization in late adulthood. Any adequate criterion measure should take this dimension of socialization into account.

Given the complicating factors involved in socialization to informal roles, it is no coincidence that the classics in socialization research focused on acquisition of formal roles with unitary sets of clear, well-defined norms, frequently in closed institutions (such as prisons, the military, medical schools, etc.) which lacked competing standards of behavior . The present work will address the above methodological issues which have been relatively

ignored in the literature, but are especially pertinent to the development of socialization criteria for less formal, late life roles.

D. Organization of the Dissertation

Data was collected on older volunteers who worked in a multipurpose senior center. This data was used both to illustrate the various methodological issues and to act as a catalyst in developing resolutions for these issues. Chapters 2 and 3 describe the research setting and data collection, respectively. After discussing the more general problems of role definition and boundaries (Chapter 4) and of distinguishing between social and statistical norms (Chapter 5), issues more specific to informal, late-life roles are considered. Chapter 6 deals with the issue of normative diversity, using the norms pertaining to eligibility for volunteer group membership to illustrate the methodological problems entailed. Chapter 7 is devoted to the issue of moral force, using volunteer work norms to explore this topic in general, and norms concerning senior center lunch donations to illustrate and explore the issue of diversity in moral force. Chapter 8 uses the ethnographic example of the volunteer-staff relationship to explore the problems involved in recognizing the contextual cues that signal a given norm is in effect. Chapter 9 provides summary and conclusion, and includes a table listing each of the above issues and the accompanying recommendations for dealing with them.

Chapter 2 - Description of the Setting, Its Services and Volunteer Activities

While it is not the intent of this work to provide a comprehensive ethnography of the multipurpose senior center, this chapter will provide background material on the setting, the services provided and the center's volunteer activities. (A more detailed account of the senior center and its activities may be found in Perkinson, 1986.)

The multipurpose senior center was located in a western suburb of Chicago. It had occupied its present site, a single building in the downtown area of that suburb, for the past 12 years. (Prior to that, it had been housed in the YMCA and in a local church.) Although a number of older adults drove or walked to the center, most took advantage of the inexpensive bus transportation provided both by the township and the center. Approximately 200 older adults attended the center on any given day. Slightly over half of those participated in the nutrition program, donating $1.00 or whatever they could afford for a hot lunch. On special events and holidays, attendance was usually much higher. About 2,900 elderly were registered members of the center, paying $6.00 a year to receive the monthly calendar and discounts on center-sponsored trips. Membership was not required, however, to attend the center and participate in its services and programs. Other sources of funding for the Center were: the United Way, the local Area Agency on Aging, the Illinois Department on Aging, local city governments, fund-raising events, and donations from local businesses, foundations and individuals.

A. <u>Services Offered</u>

A number of services were provided by the center. There was a clinic, run by the local university medical center for three days a week. It provided basic health care, blood pressure testing and podiatry services. Social services, such as chore-housekeeping, financial and personal counseling, job and housing information, and information and referral, were provided by the center's social workers. The center received approximately 1500 calls for assistance each month from area elderly, their family and friends and local agencies. Legal services were also provided and included legal information and counseling, a wills program and tax assistance. One elderly volunteer served as a "lay advocate" and had been trained, as he explained it, to assist his peers "through the bureaucratic mazes of paper and forms." A counselor from the township guided two self-help groups: one was specifically for women, the other was a group devoted to reminiscing.

The nutrition program offered a hot lunch daily at the center, as well as approximately 40 home-delivered meals to homebound elderly in the area. Although the meals were served in the center, the nutrition program was run separately by a local community action agency which served meals in 21 other sites in the suburban Chicago area. Lectures and films on nutrition were provided through this program.

B. <u>Territories</u>

The multipurpose senior center was divided into a number of "territories" which existed as settings for various groups or types of activities. (See map.) All administrative offices (except the nutrition site supervisor's office, which was situated next to the kitchen) were located along the corridor to the left of the front entrance, completely isolated from the rest of the center's activities. This physical segregation reinforced the sharp distinction between staff and center participants as social groups. Center participants rarely entered this space. If they did, it was individually, never as a group, and for a specific and "official" reason - seeking help with government forms, signing up for a flu shot, registering a complaint, etc.

Many volunteer groups had their own separate spaces, smaller rooms such as the sewing room or kitchen, where they conducted their activities. These were off-limits to "outsiders" except for very brief interactions. The gift shop and reception desk area, located in the front lobby area, were also volunteer "spaces," but were more accessible to "the public". The conference room, at the end of the "administrative corridor," was used for committee meetings, some classes (such as the German study group and the News Discussion group) and for private meetings (such as tax assistance by volunteer consultants). The front lobby was used by the television viewers, especially those addicted to soap operas, and by those individuals who wanted a more quiet, secluded place to spend time. The library was used for classes provided by either the community college or by center participants. Larger groups which met on a less frequent basis (the arthritis self-help group, the class to prepare people for their driver's test, the legal information class, etc.)

FLOOR PLAN

Clinic Clinic Clinic Nutrition Site Supervisor's Office

MEN

Clinic Clinic

Annex

Kitchen

Ceramics Room

Library

Auditorium

Sewing Room

WOMEN

MEN

WOMEN

Social Worker's Office

Social Worker's Office

Social Worker's Office

Volunteer Coor. Office

Informa- tion Desk

Gift Shop

Meeting Room

Executive Director's Office

Office

Director of Social Services Office

Program Director's Office

Lounge

HARRIS AVENUE ENTRANCE

also met in the library. Individuals were occasionally found reading there, as well. The ceramics room was used for various arts and crafts activities. The Annex was used by the Golden Tones choral group, the dance or exercise classes, and the various card tournaments (all at separate time periods). The clinic, located beyond the Annex, contained a few examining rooms and offices.

The auditorium was the largest room in the building, used for the lunch program, bingo games, and large center functions such as parties, lectures, etc. Although the auditorium was open to all, it, too, had its territories. The two front tables were "officially" reserved - one for the kitchen workers and one for handicapped individuals who needed special help with their lunch. Although expressly forbidden by the nutrition program, all the other tables in the auditorium were informally reserved; each individual had his or her own seat. Any newcomer who inadvertently sat in a place already claimed was quickly informed of his/her mistake.

C. Volunteer Activities

The day-to-day activities of the center were to a large degree run by the elderly themselves. A group of approximately 360 older persons, organized by the staff volunteer coordinator, volunteered for a wide variety of tasks. Some people taught classes at the center: crocheting, French, needlepoint, china painting, Hawaiian dance, exercise, "Antiques and Fine Arts", tap dancing, the German study group, legal information and news discussion. (Other classes were also offered at the center, taught by instructors from a local community college: oil painting, German, Spanish, ballroom dancing,

creative writing, ceramics, philosophy and bridge.) Senior volunteers had organized various groups and clubs which met on a regular basis: the fishing club, golf league, stamp club, bridge tournament, pinochle group and choral group. Most of the recreational activities offered at the center were organized and run by center volunteers: bingo, the monthly birthday parties/seasonal parties, some of the guest lectures and travel slides, and most of the scheduled trips.

A number of the older women had formed sewing groups. One of these groups sewed clothing for the Red Cross and another made mastectomy prostheses and other items for the American Cancer Society. A craft group, Stitch 'n Time, made seasonal decorations for the center and for the local hospital.

Another group of volunteers, the hosts and hostesses for the center, acted as receptionists at the front desk. A newcomers' group specifically targeted individuals new to the center, giving them tours of the place, explaining the various programs and activities and introducing them to other center participants. Volunteers performed much of the clerical work at the center, answered center telephones and ran the center library. Volunteers acted as receptionists for the clinic. Volunteers also ran the center gift shop, stocked with items made by center members.

Nutrition program volunteers worked in kitchen, assembling and distributing the meals, packing lunches for the homebound, and cleaning the kitchen and dining tables after lunch. The volunteer drivers delivered the meals to approximately 40 local elderly in the home-delivered meals program. Other nutrition volunteers collected meal donations, kept a meal count for the records and rolled the silverware for future meals.

Volunteers ran a telephone reassurance program, making a daily check-up call to those elderly in the community who requested it. Others were involved in the Friendly Visitors program and would visit homebound elderly and those in nursing homes. The tutor program consisted of 15-20 older volunteers who helped children in the neighboring grade school with reading and math.

Five committees of center volunteers were involved in decision-making and administrative tasks: the Executive Board made decisions on all aspects of the agency - its philosophy, hiring of staff, etc., and acted as chief liaison between the center and the surrounding community. The Funding Committee raised a significant percentage of the budget through various projects and funding drives. Members of the Center Committee acted as trouble-shooters, identifying problems within the center and acting to remedy them. The Trips Committee organized many extended and day trips. The Nutrition Committee met to discuss the operation of the lunch program and how menus could be modified to better appeal to center diners.

While not attempting to provide a comprehensive ethnographic description of the multipurpose senior center, this chapter has offered background information on the project's setting. The data collected in this setting will be used to provide concrete examples to illustrate the various methodological and conceptual issues discussed later in this work. The next chapter describes how these data were collected and analyzed.

Chapter 3 - Data Collection and Analysis

This is a brief account of the methods employed in collecting the data which were used to illustrate the various methodological issues. In describing the data collection, this chapter will also suggest general steps one may take in identifying norms, their moral force and their eliciting cues.

A. Site Selection

Since the intent of the project was to explore methodological issues involved in determining socialization criteria, it was obviously essential to find a setting or situation in which normative expectations were shared and socialization occurred. The multipurpose senior center was chosen because it had definite, manageable limits (both in terms of territory and in time of operation), and it was a setting in which a number of older adults interacted on a regular and extended basis, making group formation and the development of shared norms more likely. This center had a good reputation within the surrounding community as one that hosted numerous activities, and one whose participants were involved and enthusiastic. Preliminary observations confirmed that the center was an appropriate site for this project.

The course of data collection lasted a year, and shifted as the research progressed from a relatively unstructured exploratory stage, to a more focused mode of observation, leading to the development of a fairly structured questionnaire regarding volunteer activities and normative expectations. This progressive strategy of research has been advocated by numerous scholars (Bohannan, 1981; Eckert, 1983; Freilich, 1969; Habenstein, 1970; Keith, 1980). This strategy may be considered a type of "sequential triangulation,"

in which a variety of procedures are employed, each benefiting from the strengths and offsetting the weaknesses of the other.

B. Stage One - Initial Field Notes And Sampling

Besides gaining entry to the research setting, the central goals of the first stage of research were: 1) "exploration" - to obtain general background information and an "overview" of the setting, and 2) sampling - to decide what to observe during Stage Two, i.e., to select a manageable and representative set of observable social episodes and settings, enabling the more detailed and intense observations of the "focused" stage of research.

1. Exploratory Phase

Initial observations of the setting proceeded in the most unstructured way possible. According to Rosenblum (1978), one should simply watch and record at this time, "...allowing behavioral patterns to emerge as figures against the background of initially amorphous activity." The goal at this stage was to identify the relevant dimensions of the setting: the territories, classes of things, persons, events, relationships, etc. This required an extensive overview of the setting. (The intensive observing came later). These observations provided a sense of "the universe" of the phenomena of the setting and allowed the development of a basic "map" of the site. Data collection at this initial stage was exploratory in nature, and entailed the recording of concrete, descriptive field notes.

Field observations were tape recorded immediately after visiting the site and later transcribed. Field notes were analyzed in the manner traditionally advocated by qualitative methodologists (Lofland, 1971; Miles and Huberman, 1984; Schatzman and Strauss, 1973).

At this stage, an attempt was made to participate in as many accessible activities as possible. A monthly calendar produced by the center provided a listing of all its formally scheduled events: various classes offered by the local community college and by the older adults themselves, volunteer group meetings, center parties, lectures, self-help groups, etc. I attended all of these activities (except a few of the community college classes) at least once during this initial stage of field work. I also participated in the informal activities which occurred regularly in the center: lunch, card-playing, watching television, visiting, etc. I observed interactions occurring within a variety of "territories" within the center: the kitchen, library, auditorium, front lobby, etc. In order to obtain an overview of the setting and obtain as much background information as possible, I also conducted extended interviews with various key informants: the nutrition site supervisor, the volunteer coordinator, the program director, the Executive Director, the psychiatric social worker and her assistant, the instructors of various classes, and various leaders among the center participants. I also circulated throughout the center, trying to interact with as many center participants as possible. I ate with different groups every day.

This background information was crucial in the later stages of research. As Cairns (1979) has suggested, decisions regarding sampling, what to record, how to analyze, etc. depend on an intimate prior knowledge of the nature of the phenomena to be explained.

2. <u>Sampling</u>

Most research settings encompass a myriad of individuals, events and interactions. How does one decide what to observe? This is the issue addressed by the second part of Stage One research: How does one determine whom to observe and then draw a manageable and representative sample of social episodes and settings to enable the intensive observations of Stage Two?

The types of events, behaviors, persons, etc. on which to focus was determined by the research problem. At this point in the project, I decided to focus on the volunteer role because there was a considerable amount of volunteer activity within the center, there were a number of different types of volunteers, and most volunteers seemed to share definite norms regarding their group activities.

I decided to focus on the members of five different types of volunteer groups: the kitchen volunteers, the front desk hosts and hostesses, the gift shop workers, the members of the sewing groups, and the committee members. Members of these groups met on a fairly regular basis, and seemed to have fairly definite group norms (as opposed to some of the other volunteers, such as the instructors of different classes, who did not interact regularly or seem to have a sense of group identity). For a more extensive discussion of issues involved in identifying role incumbents, see Chapter Four.

C. Stage Two - Focused Inquiry

The central goals of Stage Two, "focused inquiry," were to: observe the sampled volunteer groups and record what transpired. The data were then analyzed in order to identify the normative expectations governing behaviors and relationships.

This stage entailed a shift from the collection of general background information and the selection of the sample to a more detailed, focused collection of data on role behavior and normative expectations. In the focused inquiry stage, I became more selective in my observations. Rather than attending every possible event and group function as I had in the past, I now concentrated my attention on the sampled groups and social episodes within those groups. While continuing to maintain contact with other center participants, at this point I spent most of my time with the volunteer groups mentioned above, observing their activities and interactions, and participating in some volunteer work myself.

1. The Observation Phase

Following the recommendations of Pelto (1970), the field notes were written on as low a level of abstraction as possible, with any inferences regarding situations clearly demarcated. The observations did not represent norms per se, which represent a higher level of abstraction, but the evidence in terms of concrete actions, statements and surrounding conditions from which normative standards would be inferred. Any evidence pertinent to the

methodological issues of consensus, moral force and eliciting cues were also recorded.

A data sheet (see Appendix A) was developed as an aide in focusing observations and in coding the field notes. This sheet served as a guide to assure that relevant aspects of the interactions (i.e., those pertaining to the methodological issues) were observed and recorded, such as: the context, cues directing the course of the observed interaction, evidence of disagreements or lack of consensus, evidence of positive or negative sanctions, evidence indicating the strength of actors' feelings regarding the appropriateness of the actions taking place, etc. A separate sheet was filled out for most of the interactions observed among members of the sampled volunteer groups.

Information obtained through participant observation and informal interviews was supplemented by data on participants' views or perceptions, obtained through a more structured in-depth interview. Although this interview was primarily developed for another project which I conducted (a study of promotion of independence and empowerment among older adults through volunteerism, funded by the Illinois Department of Aging), a number of the questions were pertinent to the present study. (Copies of the interviews - one for volunteers, a shorter one for non-volunteers - are included in Appendix B and C.)

These interviews provided information on a random sample of center volunteers on their background characteristics, the nature and extent of their volunteer work, their attitudes toward and perceptions of their volunteer experiences and of volunteerism in general at the site. The second, shorter interview was developed for a smaller group of non-volunteers to determine

their level of involvement in the center, their background characteristics, and their attitudes toward volunteering.

The sample of those formally interviewed consisted of 36 senior center participants: 30 volunteers and 6 non-volunteers. The volunteers were randomly selected from a master list of 340 center volunteers compiled by the volunteer coordinator. Members of certain volunteer groups were eliminated: the Golden Tones choral group and the "taggers" (fund raisers), because of their irregular contact with the center and their infrequent participation in the volunteer role. The non-volunteers were randomly selected from the daily sign-in sheets at the center reception desk.

2. Data Analysis

Once the observations were recorded, the normative standards underlying behavior were derived from the data. This was achieved by: 1) identifying the behaviors that were considered appropriate by the group for a given type of interaction or event, and 2) inferring the criteria and range of acceptability underlying these behaviors, thus generating the norms governing the episode.

To determine appropriate behavior, the observations for each social episode were reviewed, noting the different types of behaviors enacted and paying special attention to the reactions, if any, to them both on the part of participants and observers. Which behaviors provoked negative sanctions, which provoked rewards? The presence of any sanctions would indicate that the behaviors in question were guided by social norms, and were not simply common or frequent responses to a given set of circumstances (i.e., statistical norms).

In order to further discriminate between social and statistical norms, it was necessary to determine the motivations underlying observed behaviors. Why did actors behave in a certain way - because there was pressure from members of their reference group to do so, or because it was merely convenient? Were individuals taking group expectations into account when they enacted the behaviors under consideration? To determine underlying motivations, observations of reactions to behaviors were supplemented with direct questioning of those involved to confirm the reasons for their actions, the relative value of various behaviors, and any possible behavioral alternatives. (For a further discussion on distinguishing between behaviors influenced by social norms and those reflecting statistical norms, see Chapter Five.)

Once the behaviors which were commonly regarded as appropriate conduct were identified and the conditions under which they occurred were determined, the second phase of analysis could begin. This second phase entailed a higher order of abstraction, in which the criteria underlying these behaviors (i.e., the standards defining acceptability or norms) were inferred. Normative expectations and their degree of consensus, their relative strength and their eliciting cues were identified for various interactions, events and role relations. This was accomplished by reviewing the data sets describing behaviors that elicited clear reactions of approval or disapproval by observers, and asking the following questions:

a. On Assessing Normative Consensus

What aspects of the actor's behavior were eliciting positive (or negative) sanctions from fellow participants in this social episode? What criteria were they using to evaluate behavior - what were the norms defining appropriate

conduct for this interaction/relationship/activity? Were these standards for behavior shared by most participants? If not, what were the alternate expectations? How many individuals adhered to these alternate norms? Did this represent the existence of a coherent sub-group(s) with their own distinct set of norms, or merely idiosyncratic deviations? Whose norms could be considered representative of the setting - did any one group predominate? Did normative conflicts occur among members of different sub-groups? If so, how were these resolved? Did any individuals seem to shift in their adherence to different sets of norms? Under what conditions did this occur?

b. On Determining Moral Force

How strong were actors' expectations for given types of behaviors - were these behaviors preferred, demanded, tolerated, condemned, etc.? How "strong" were the sanctions associated with given types of behavior - were there different degrees of sanctions? (For example, the sanction of ridicule in reaction to the transgression of a given norm may imply a lower moral force for that norm than would the sanction of rage.) Which activities were most closely monitored? (This may imply higher moral force of the norms underlying such activities.) Was there a consensus concerning the relative strength of a given norm? If not, was this due to the conflicting interpretations of members of an alternate sub-group(s) or to individual deviations? Was there a hierarchy of norms? Which norms were most important; under what conditions? Did everyone adhere to this hierarchy? Who deviated? Were there alternate normative hierarchies?

c. On Recognizing Contextual Cues

What were the cues which communicated the social identities of the actors in a given interaction? Was there evidence of lack of agreement regarding the significance of such cues? What cues initiated given types of behaviors or interactions? How did actors know when a given set of norms were in force - what cues "activated" those norms, what cues "deactivated" them? (Look for clues in the physical setting, identity of actors, aspects of interaction - body language, inflection, etc.) If a shift in types of behavior (and accompanying normative expectations) occurred during an interaction (for example, from a serious to a joking exchange), what cues signified or indicated to the actors involved that such a shift had occurred? Did the actors manipulate cues to achieve such a shift? Were there any conditions in which such shifts were unacceptable? What happened when one (or more) participants in an interaction did not acknowledge such a shift? What was the relative strength of a given cue? Did other cues cancel it out? Was there a consensus regarding contextual cues - did everyone recognize these cues? Did any sub-group use different cues?

In order to check the norms, their degree of consensus, their moral force and the contextual cues derived from the above analysis, informal interviews were conducted with key informants to see whether they concurred with the results. Any discrepancies were checked by consulting other key informants and by rechecking field notes. (See also Chapter Five, "How to identify social norms" for further discussion.)

This chapter has described the methods employed in collecting and analyzing the data to be used later in this work to illustrate the various issues in socialization research. In describing the data collection and analysis, this

chapter has also suggested general steps to take in identifying norms, their moral force and their eliciting cues and in assessing normative consensus.

Note that the ultimate purpose of this analysis is to illustrate how to identify what an actor needs to know and how an actor should behave to merit social approval from his or her reference group - to illustrate how to determine the standards necessary to assess an individual's success or failure as a role incumbent. The focus or goal throughout this work is simply to illustrate how to specify socialization criteria. As has been stressed before, descriptions or explanations of socialization processes and mechanisms are beyond the scope of this thesis. With this in mind, let us proceed to a discussion of the various conceptual and methodological issues pertinent to deriving socialization criteria.

SECTION TWO: CONCEPTUAL AND METHODOLOGICAL
ISSUES IN DERIVING SOCIALIZATION CRITERIA

Chapter 4 - Role Definition and Boundaries: Identifying Role Incumbents

In attempting to determine the criteria for socialization to a given role, one

must first determine the boundaries and identifying elements of that role. In

the case of the volunteer role, one would ask: Who is considered a volunteer

and who is not; what behaviors represent volunteer activity and what values

are requisite for this role? This is essentially an issue of sampling, and should

be addressed in the latter half of Stage One in the research strategy. (See

Chapter Three.) Once we have determined who is a volunteer, we can focus

our observations and extended interviews on these individuals (Stage Two) in

order to identify volunteer norms.

The simplest and most obvious strategy in identifying role incumbents (in

this case, center volunteers) would be to enlist the assistance of an authority or

key informant. In the present case, the staff member who was employed as

the center's volunteer coordinator had developed a list of volunteers, and was

willing to share it. Individuals on this list were also formally recognized by

the center for their work as volunteers by being invited to special functions

throughout the year (the volunteer dinner, etc.) and receiving a volunteer

certificate at the annual Christmas party.

Although this would seem the most obvious and straightforward way to

acquire a list of center volunteers, there were some problems with this

strategy. The volunteer coordinator defined a center volunteer as one who

participated in one or more of the groups or activities which she (or other staff

members) coordinated. Although this included a wide array of individuals

involved to different degrees in a diversity of volunteer activities, it excluded some individuals who were involved in more self-initiated tasks. For example, members of the Golden Tones, a choral group directed by a center employee, were included in the volunteer coordinator's list because they would perform at center parties on holidays and special occasions. They also performed outside the center (at local nursing homes, churches, etc.) and, in doing so, acted as representatives of the center. However, members of the Hawaiian dance group, a smaller group of older adults organized by an older center participant, also performed for the center and outside groups, but were not included in the volunteer list.

Interviews with various individuals who considered themselves to be volunteers and observations of center activities indicated there were differing definitions of volunteer and the essential criteria of that role. According to some, a volunteer was "one who makes a contribution without compensation." If one used this definition, some center workers would be excluded. For example, the kitchen volunteers received a free lunch on the day they worked. Although many would have continued to work without this incentive, undoubtedly there were others for whom kitchen work was simply a way to receive a free meal. Should these individuals be considered volunteers? Should motivations be taken into account (in addition to behaviors) in determining who is a volunteer? If so, how strong must the desire to help or make a contribution be, since the majority of the volunteers interviewed admitted their primary reason for volunteering was to help themselves, because volunteer work enabled them to "put life in order" or "keep busy." (This did not preclude more altruistic motives, however, since most of these individuals did express a desire to help others as well.)

The issue of helping or making a contribution was a central component of most of the definitions of the volunteer role given by those interviewed. When asked what makes a volunteer, typical replies were: "They're always looking to see if help is needed - a helper," "...a person who helps other people," "...a person who devotes time to advancing the progress of the center," "...doing something to help somebody else," "...doing something for someone else, for a good cause," "someone who spends their time helping people, teaching people, just being there for people to talk to, plus it helps the center." Clearly, activity conducted within the center must have some element of altruism, of making a contribution to the well-being of another individual or to the center as a whole, in order to qualify as volunteer work.

Another important element in defining the volunteer role mentioned in a number of interviews was the temporal aspect, the length and frequency of involvement. Occasional participation in helping behavior was not enough to qualify an individual as a center volunteer. One must be: "...giving of yourself and your time, doing it every week, not just once in a while when the mood strikes you." Incorporating this temporal element into our definition would again alter our list of volunteers. For example, the "taggers" were people who participated once a year in a fund-raising drive for the center. (They would give a badge or "tag" to those from whom they had successfully elicited a donation, thence the title "tagger".) These workers would be eliminated, even though they had been included in the volunteer coordinator's list.

To what extent should self-identification as a volunteer be taken into account? At least one individual given the label "volunteer" by the volunteer coordinator did not identify with that role. The leader of the German study group was surprised to find himself on the list. He claimed he took the

position simply for his own benefit, rather than to help others: "It was perfectly selfish in my view - it helps me to be more outgoing, which I need." Other individuals engaged in activities which may be considered "self-initiated volunteer work" - not part of a structured volunteer program, but still contributing to the welfare of the center and its people through activities they started on their own. For example, there were those who conducted the center bingo game, the women who would bring coffee to those "on duty" in their volunteer tasks, or those who simply looked for ways to be of help, especially to the center's handicapped individuals. These individuals were not included in the volunteer coordinator's list, and were not formally recognized by the center for their contributions (i.e., they were not invited to the annual volunteer dinner, they did not receive volunteer certificates, etc.).

Although there was a general consensus within the center in identifying who was a volunteer and who was not, as has been indicated, the boundaries were blurred. Depending on one's definition, certain marginal figures may or may not be included. For the purposes of this project, to know whom to observe and interview in order to identify norms regarding volunteering, a combination of criteria was employed.

The list provided by the volunteer coordinator was used as a starting point. In spite of its limitations, this list did include the members of all the major groups of volunteers. Certain groups were eliminated: the Golden Tones and the "taggers," because of their irregular contact with the center and their infrequent participation in the volunteer role. Because their involvement was so limited, they might not have been as knowledgeable of general volunteer norms.

A case could be made to include certain groups of individuals not on the list. The craftspersons who made the items sold in the center gift shop were

not listed as volunteers, even though the center benefited from their work, retaining 25% of the proceeds from each item. However, most people did not regard craftspersons as volunteers, nor did these individuals, when interviewed, list their contributions to the gift shop as volunteer work. Since members of the craftsperson group as a whole were acting primarily out of self-interest - to make money for themselves - they did not qualify as volunteers, even though the center did benefit from their work. (In fact, a number of craftspersons complained about the 25% cut the center took.) If the majority of a volunteer group worked for the benefit of other individuals or the center as a whole, then its members were considered volunteers (provided they fulfilled the temporal requirement). Using this criterion, those scattered individuals who engaged in volunteer activities without the motivation to contribute or help were included as volunteers, such as the German study group leader or those kitchen workers out for a free lunch. These individuals fit the "chameleon" category of socialization (Rosow, 1965), and represented one of several possible socialization types which would presumably be differentiated in subsequent analyses.

A case could also be made to include the "self-initiated volunteers" mentioned above. These individuals engaged in helping behaviors, acted out of motives other than self-interest, and many regarded themselves as volunteers. Although they would have been an interesting addition to this study, they were not included. Their volunteer activity was largely idiosyncratic, and not a result of socialization to a set of norms shared by a formalized volunteer group.

For the purposes of the present study, then, volunteer activity was defined as structured, communally organized and recognized helping behavior engaged in on a regular and fairly extended basis by a group of center

participants, the majority of whom were motivated at least to some degree by altruistic goals.

This chapter has described the first step in deriving socialization criteria for a given role. One must determine role boundaries and the essential elements of that role by identifying what constitutes role behavior and who is a role incumbent. This is essentially a sampling issue, since one is determining what persons and activities are to be observed. This is not as straightforward a task as it might initially seem, as has been illustrated with the present example. This chapter has outlined the steps taken to identify center volunteers: consulting key informants and self-identified volunteers for their criteria, and observing who was and was not formally recognized within the setting (through awards, invitations to volunteer functions, etc.) as a volunteer. The logic and implications for accepting or rejecting various criteria were also discussed. Although the specifics of this case pertain only to the center volunteer role, the general procedure used to determine role boundaries and incumbents should be applicable to other roles and other settings as well.

Once role incumbents and role behavior have been identified, the next step in determining socialization criteria is to identify the shared expectations or norms underlying those behaviors. The following chapter offers guidelines for identifying social norms and for distinguishing them from "statistical norms".

Chapter 5 - Distinguishing between Social and Statistical Norms: Using Activity Norms as an Example

As Rosow (1974) has noted, a potential problem in socialization research is the equating of statistical and social norms. Statistical norms refer simply to modal characteristics of a group - behaviors or qualities that occur frequently among group members. These behaviors or qualities represent common reactions to conditions frequently experienced by individuals in the group. Individuals typically engage in these behaviors or display these qualities either because it is convenient to do so or it is difficult to do otherwise, not because it is expected of them. There are no shared agreements among group members that these behaviors or qualities are good, or that they should occur. As Rosow (1974, p.39) noted: "(Statistical norms)...summarize the statistical properties of a group in terms of frequencies, rates, distributions, and profiles on given factors.....statistical norms establish the central tendencies of a population on selected attributes." As such, they are descriptive rather than evaluative in nature; simple behavioral regularities, representing what is, rather than what should be. Rosow cites the example of widowhood, the "statistical fate" of most older women though clearly neither valued nor sought, as an example of a group characteristic reflecting a statistical rather than social norm.

Social norms, on the other hand, represent standards of desired values and activity, what is defined as appropriate and correct by a given reference group. They are shared expectations or understandings of what one should or should not do, and are thus evaluative rather than descriptive in nature.

As Rosow points out, statistical and social norms are often confused. Such confusion "makes the meaningful analysis of socialization impossible" (Rosow, 1974, p.40). One must keep the distinction between social and

statistical norms clearly in mind, and recognize that behaviors or characteristics that are common among group members are not necessarily valued or seen as appropriate by the group. Participation in behaviors frequently exhibited by others does not automatically imply socialization. As a critical first step in socialization research, one should determine whether the behaviors one's informants are exhibiting are guided by normative expectations or are simply common reactions, neither positively nor negatively evaluated by group members, to similarly experienced conditions. The present section will explore this issue by examining activity norms within the senior center: whether these represent social or statistical norms, and what evidence is necessary to make that distinction.

The first section of this chapter consists of ethnographic material illustrating different activity patterns displayed by two groups within the senior center. One group's activity level would seem to reflect the existence of social norms, while the activity level of the other group would appear to reflect a statistical norm. The ethnographic material in this chapter, while interesting in itself, is presented primarily to illustrate how social and statistical norms differ and to illustrate the types of evidence necessary to distinguish between the two. The second section of this chapter provides a general set of guidelines on how to identify social norms.

A. Patterns of Activity among Center Participants

How active should an older adult in the multipurpose senior center be? How should center participants spend time: In which center activities should

they engage, and to what extent? In how many activities should they participate? Should they limit their activities in any way?

There were definite patterns of participation and activity level within the center. Were these patterns a result of adherence to group expectations regarding the above questions, or were they a result of other, non-normative causes?

First, let us examine the activity patterns themselves. The staff and "seniors" alike made a distinction between two major groups within the center based on levels of activity. There were those who were highly involved in various center activities, predominantly volunteers, but also those in classes or special interest groups. The nutrition site supervisor referred to these individuals as the "center participants". Then there were those with much lower activity levels, who would come to the center daily to sit and wait for lunch, then sit and wait for the bus to take them home. Staff would refer to these people as the "regulars" or the "nutrition site participants" (since they represented the majority of those who bought their lunches at the center through the Older American's Title III C1 program. However, not all people who participated in the nutrition program were part of this group - some volunteers bought their lunches at the center because it was more convenient to do so.) Center participants had their own label for this group: the "do-nothings".

According to the nutrition site supervisor, there were about 60-100 of these "regulars", most were between 65-75 years old and most lived alone. She felt they came to the center simply because they were lonely and wanted to be with other people. According to the center's psychiatric social worker, these people were less educated and had fewer "inner resources". A number suffered from physical and/or mental handicaps; some were ex-alcoholics.

She claimed their faithful attendance reflected life-long work patterns that had required leaving home every day. Lacking any other activities or commitments, they had become compulsive in their attendance at the center.

Heavy dependence on the center's services and shelter forced a number of people to attend on a regular basis. Some of these "regulars" lived at the local Y, which had no kitchen facilities. They came to the senior center for the lunch program, which provided the cheapest meal in town. Others arrived as early at 7:45 a.m. daily, to take advantage of the center's heat in the winter and air-conditioning in the summer.

The volunteer coordinator's comments also provide insight into the conditions of these people: "the 'regulars' come to eat and talk and see what they can get...A definite group comes for lunch every day, and they really don't have the energy to do much more than that." She felt that these people were "in the stage just before day care." Clearly, the attendance of many of these people at the center and their behavior while there were influenced by very strong external conditions and internal limitations.

Even the newcomers to the center soon noticed the differences between the "do-nothings"and the more active volunteers. An unwillingness to associate or be identified with the "do-nothings" was one factor which prompted a number of new center members to join volunteer groups. As one newcomer who had just started working in the center's kitchen said: "I used to get depressed when I first came here, because some would just sit here all day long and wait for that lunch, so I do other things." To the volunteers, "do-nothings" provided examples of negative role models, of how not to act, and thus may be regarded as a "negative reference group."

According to the nutrition site supervisor, the volunteers were better able to cope with their situations. They had more interests and, in contrast to the "do-

nothings," were involved in many more activities. In her words: "They know they need to be active."

Volunteers took a dim view of the "do-nothings," especially of those who were perceived as capable of volunteering, but unwilling to do so. When asked to cite the differences between volunteers and non-volunteers, most volunteers had rather negative comments, comments that clearly reflected volunteers' shared definitions of appropriate activity level:

"Those people just sit there and don't do anything; they're a bunch of goofs."

"Volunteers seem to be more caring types. Others like to come and sit. I don't see any point in just sitting, more could and should participate, even if they only clean their own spots. They should show they appreciate what they get."

"Some are lazy, they don't want to do anything."

"Volunteers don't find fault with everything. They don't have time, they're too busy."

"They (non-volunteers) don't care to do anything, they'd rather sit back and watch someone else work and reap the profits."

"Time must be awfully heavy on them just sitting, some come just to get out of the house."

"They're not interested, a lot are independent, they don't want to be bothered, just want to play cards or reminisce among themselves. They just want to come and chat, they don't want responsibility."

"The volunteers are more outgoing. The 'do-nothings' are always somewhat resentful and are jealous of those who are active - that's human nature."

"The non-volunteers just sit around, drink coffee all morning, do nothing."

Although the above comments were typical of most volunteers' responses, a few felt more sympathetic toward non-volunteers and recognized their physical limitations: "The non-volunteers are really handicapped and can't do things. They have health problems."

As was noted above, the negative, almost hostile, feelings of the volunteers toward the "do-nothings" were linked to the volunteers' commonly held views regarding appropriate activity level. Most felt very strongly that a good center volunteer should remain as active and involved as possible. When asked: "What makes a good volunteer?", volunteers' responses tended to reflect these underlying values:

"They have enthusiasms for the work, they volunteer because they want to and they enjoy it."

"A good volunteer is there when you need them."

"A good volunteer doesn't mind doing the work."

"Do the work as if you are going to get paid for it."

"A good volunteer is interested in helping other people."

"Being a good listener, congenial and friendly."

"Being willing to help."

Conversely, when asked: "What characterizes a bad volunteer?", many referred to low levels of activity and involvement:

"They disappear when the work is to be done."

"They say, 'I don't want to do it, why not get somebody else!"

"One that doesn't do their work."

"... shows a lack of interest in others."

"Someone who doesn't come all the time. That kind doesn't last long as a volunteer, they simply drop out."

"They have a lackadaisical attitude, ... laziness."

Those most admired as model volunteers were people who were highly active and involved such as May, who volunteered as a member of the Stitch 'n Time group, the tutoring program, the Travel Committee, the Nutrition Committee, the kitchen workers, the front desk hostesses, and the "taggers", and who also worked part-time as a saleswoman; or Milly, who was so crippled with arthritis she could barely walk, yet served as the leader of Stitch 'n Time and was a member of the Center Committee. Physical handicaps generally elicited support from fellow volunteers. Although they were recognized limits to certain types of activity, obvious physical disabilities elicited more sympathy than sanction. Nevertheless, even disabled volunteers were supposed to remain mentally and socially active.

Many volunteers considered activity to be therapeutic. It was the shared and approved method for coping with isolation, depression and devaluation. As one volunteer said: "When you are older you sometimes feel, although it is not true, that you are not needed and you have nothing to do. It is good to get out." Many expressed a feeling of obligation, that they should attend the center regularly and participate in its activities. According to one recent widower who was involved in the tutoring program, worked as a host at the reception desk, and also took art classes: "It's important to keep busy and not stay at home."

There were strong negative reactions among center volunteers to those who dealt with depression by withdrawing and staying at home. One widowed kitchen worker who occasionally "indulged in self-pity" and stayed at home was severely criticized by her friends: "I have it just as hard," claimed another widow who lived alone, "but I still come to the center."

Such withdrawal was viewed as the first step to inactivity and "letting yourself slip". One sewing volunteer berated herself because she would

sometimes delay her decision to go to the center (those who came by the center's bus had to make reservations the day before) until it was too late. "That's how you start to run down," she commented.

Clearly, there were shared expectations among the volunteers regarding activity level: one should keep busy, one should not withdraw or keep to one's self, one should not "let yourself slip", one should be involved with people, one should not be depressing to be around - "don't just sit and stare." Maintaining a relatively high level of activity and social involvement was an integral component of volunteers' shared definition of "successful" volunteering. To be isolated, inactive and uninvolved represented failure to members of this group.

For a variety of reasons, the "do-nothings" did not maintain the "appropriate" (as defined by the volunteer group) activity level. As such, they were a stigmatized group, and most volunteers went to great pains to avoid association and identification with them by avoiding the "markers" of "do-nothing" identity. The two groups had different "territories" within the center. The "do-nothings" occupied the large central room (the auditorium) in which lunch was served and the larger center functions (bingo, monthly parties, etc.) were held. As was mentioned, "do-nothings" typically spent the day sitting at their tables, waiting either for lunch or the bus. The volunteers' territories consisted of smaller rooms surrounding the auditorium. (See the map of the center, Chapter Two.) Many volunteers avoided the auditorium altogether, even though it represented the largest amount of space in the center. Many volunteers also avoided the lunch program (which, as mentioned above, was identified with the "do-nothings"), either bringing their own lunches, going out to eat or eating the nutrition program's lunch in their respective volunteer rooms. Those volunteers who did eat in the auditorium were careful to sit

only with other volunteers. Although the center maintained a policy of "no reserved seats" in the auditorium, everyone had their own designated spot. Anyone who sat in the "wrong" seat (usually a newcomer) was certain to elicit hard feelings, if not outright confrontation.

Seating arrangements within the auditorium served to maintain group boundaries within the center. Interaction patterns among tablemates provide examples of the influence of context as a cue to prompt certain types of behavior (in this case, exaggerated behavioral expressions of activity norms on the part of the volunteers. For further discussion of contextual cues, see Chapter Eight.) Since anyone eating lunch in the auditorium might be mistaken as one of the "do-nothings", volunteers in this situation made an effort to appear even more lively and active than usual. This was especially true of the older volunteers (those in their 80's). These individuals would often compare their table to the others, taking pride in their "differences", making comments such as : "We're the only ones laughing", or "We have more interesting conversations than those other tables."

Volunteers also tended to avoid any activities or groups initiated by the staff primarily for the "do-nothings". The psychiatric social worker had organized two groups, "Women's Talk" and "Reminiscing", to encourage participants' verbal expression and interaction. During the field work period only one volunteer was observed in either of these groups, and she eventually dropped out. Most volunteers referred to these groups in a condescending manner, and seemed insulted when asked whether they were members.

Because this research focused primarily on volunteers, fewer non-volunteers were interviewed in depth. (Also, a number of non-volunteers were incapable of responding to interview questions.) Those who were interviewed did not seem to reciprocate the volunteers' resentment or hostility.

A number expressed admiration toward the volunteers, and characterized volunteers as being "more friendly" and "more outgoing." While for some, notions of optimal aging reflected a scaling down of expectations and an acceptance of their situations, "...realizing that you have grown old and accept it" and "...when you get up in the morning and get dressed and go out, that makes you feel good," others still wanted to remain as active as their limited capacities allowed.

The non-volunteers certainly did not exult in their idleness. Their inactivity resulted from an inability to engage in various activities due to physical and/or mental limitations, rather than from a desire for or positive valuation of relaxation and a "laid-back" life-style. Rather than deriding the "busyness" of the volunteers and mocking them as a foolish bunch of "eager beavers," the non-volunteers seemed to envy them instead. Many of the "do-nothings" seemed to wish to imitate the volunteers in what they perceived as a more interesting and rewarding life-style. A number of non-volunteers expressed a desire to participate in volunteer activities, but felt they were neither "good" enough nor capable of the work. The absence of any encouragement from the volunteer coordinator reinforced these feelings. Most said they did not volunteer because they were too sick to do so.

In comparing activity levels of these two groups, it would appear that the "do-nothings'" behavior represented statistical norms, while the volunteers' behavior reflected social norms. Most "do-nothings," those who would come daily to the center and just sit, seemed to be incapable of doing anything more. Their activity level reflected the limitations of their declining physical and mental health. As such, low activity level represented a statistically frequent aspect of behavior, resulting from commonly experienced afflictions and incapacities.

One could question whether the "do-nothings" represented a cohesive reference group at all, since their various limitations severely impeded social interaction and communication. They did not seem to have developed commonly shared values or expectations of appropriate behavior in general. On the basis of the interviews with non-volunteers, one could conclude they did not hold a common standard or set of norms that inactivity was "good" and that they "should" sit and do nothing, since so many expressed an admiration for the volunteers, due at least in part to the volunteers' high activity levels. The non-volunteers could not legitimately be considered a deviant group with their own distinct set of social norms. Instead, they represented an amorphous collection of individuals who shared similar characteristics and traits, and reacted to their conditions in similar manners.

On the other hand, the volunteers' activity level and their reactions to the activity level of the "do-nothings" would seem to reflect social norms. Volunteers shared the view that high levels of activity were "good," that one should remain active, and they were clear in their disapproval of those who did not adhere to their standards.

B. How to Identify Social Norms

As discussed above, a social norm is a standard for appropriate values or behavior, what one should do, as defined by a given reference group. This norm is shared by the members of the group, who may or may not be capable of articulating it without considerable thought and prodding. In order to avoid influencing or biasing informants' responses when attempting to identify social norms, one should begin the initial stages of inquiry with open-ended

questions regarding factors involved in general adjustment to the role being considered. In the present case, informants were asked questions regarding good and bad adjustments to volunteering within the center. From their responses, it was clear that level of activity was an important component in defining one's "success" as a volunteer, and that there were strong feelings, widely shared, that volunteers should maintain a certain activity level.

Another method for identifying general social norms is to identify role models within the group, those individuals most admired because they personify the most important group values. Often groups bestow special recognition to role models by giving them special honors or awards. In this case, the center recognized all volunteers by holding an annual dinner party for them and presenting them with certificates at the end of the year. Extraordinary volunteers were recognized as "Volunteer of the Month" in a special ceremony. A mural on the ceramics room wall painted by center participants represented scenes of major center activities, and included pictures of the "legendary volunteers" engaged in their volunteer tasks. This offered a graphic statement of "Who Was Who" in terms of center role models. Interview questions such as "Whom do you most admire at the center? Why?" or "Who at the center do you feel is an especially good volunteer? Why?" were also useful in identifying role models.

The open-ended, adjustment questions and identification of role models are general approaches most appropriate when one is in the initial, descriptive stages of one's attempt to discover and describe significant standards of behavior for a given group. Once the investigator has developed an hypothesis regarding the nature of specific social norms relevant to a given domain, questions may be more directly stated. In the present example, more

direct questions about the social norms defining appropriate activity levels would include: "Should a person become involved in volunteer activities, or should one come to the center to rest and relax? Why?" "If you were introducing a new person to the center, how would you encourage him/her to spend his/her time?" "Here is a list of things people do at the center. Which do you think are good ways to spend one's time? Rank the activities in terms of how one should spend time at the center. Activities: playing cards with friends, sewing with the sewing groups, resting in the auditorium waiting for lunch, etc." One could also give vignettes of individuals illustrating high and low levels of activity and ask the informant to evaluate the main characters and give their reasons behind their evaluations (a la Kohlberg).

As was mentioned above, in some instances informants are unable or unwilling to articulate group norms. Observation of behavior within the setting is an essential complement to informant interviews in identifying social norms. In attempting to identify social norms, one should pay particular attention to individuals' reactions to various behaviors for evidence of positive or negative sanctions. Examples of negative sanctions one should look for would include: criticizing, showing annoyance or disapproval, ridiculing, ignoring or avoiding, gossiping, ostracizing from the group, correcting a transgressor and telling him how he should behave, withholding reinforcement, body language cues (frowning, etc.). Positive sanctions an investigator should note would include: expressions of admiration, encouragement, special recognition, positive body language cues (smiling, etc.), rewards, etc. All of the above were observed at various times in the center as reactions by volunteers to various activity levels. The evaluative nature of volunteers' reactions to specific types of behaviors (in this case,

different levels of activity) indicated the existence of <u>social</u> norms regarding this domain.

Non-volunteers were less intensively observed. Although sanctioning behaviors were exhibited by non-volunteers, they were not reactions to activity levels. (Shows of annoyance, anger, gossip, etc. by non-volunteers toward others usually resulted when one person received more of a coveted item such as food, privileges, etc. than another.) The absence of positive rewards for low levels of activity and of negative sanctions for high activity and involvement would indicate that the predominant pattern of low activity and lack of involvement among the non-volunteers was not the result of and did not reflect shared social norms. The absence of sanctions within a group regarding a given domain indicates an indifference toward that domain characteristic of the situation in which statistical norms prevail.

In addition to observing positive or negative sanctions, the investigator should be alert to actors' interpretations of and commentaries on their own behaviors and those of others. Various comments on actions by observers and self-reflection by participants convey the inner meanings and significance of those actions. Besides alerting the investigator to the importance of what, to an outsider, may seem trivial or irrelevant, such comments enable one to discriminate between social and statistical norms.

Other sources of information useful in identifying social norms include: direct comments from informants (solicited or not) verbalizing group customs - "this is how it is done" type of statements. It is useful for the investigator to assume a novice or student identity within the setting to encourage these kinds of comments. Attention should be paid to formalized instructions and rules, since they represent the codification of group norms. Many settings display sayings or mottos on signs in visible places reflecting group norms. The

center displayed various plaques and posters with such sayings, in addition to the "Thought of the Day" card posted in the front section of the kitchen.

Certain general types of people are especially useful informants in aiding the attempt to identify social norms. Those individuals who "monitor" their environment, who are alert and interested in what's going on, who are somewhat "gossipy" and who like to "keep tabs" on other people, are rich sources of information in general. Those individuals who are especially concerned with what is "proper", who are sticklers for the rules, are often especially adept at articulating group norms. It is useful to observe the actions of and reactions to the "norm-breaker", that individual who has a reputation within the group of ignoring or breaking the rules. The "norm-breaker's" behavior is generally highly monitored by group members, and will provoke explicit expressions of social norms - i.e., what the transgressor should have done instead.

Group meetings provide another context that may be especially revealing in regard to social norms. Meetings (such as the monthly meetings for volunteer hosts and hostesses) provide a forum for defining group norms and making them clear for new members. Meetings also provide settings for negotiating and re-defining group norms, usually in reaction to specific events or changes in circumstances. The group discussion which ensues often reveals the nature and logic of expectations underlying group norms. Intensity of debate can be a good indicator of the "moral force" of the norm under discussion.

Another context or set of contexts especially revealing in regard to social norms are those associated with the introduction of a new member into the group. In the "introductory tour" of the setting (in this case, conducted by a volunteer member of the Welcoming Group), various activities and behaviors were pointed out and applauded as examples of how one should act.

Orientations or instructions conducted by an "official" (by the nutrition site supervisor for kitchen volunteers, for example) provide explicit statements of expectations, values and definitions of appropriate behavior. It is useful to interview newcomers for their perceptions of the setting, how they feel they have had to change in their outlook or behavior and how this setting/group/role differs from more familiar ones of the past - what is characteristic and/or unusual about this new group or position. While "old-timers" may be more "experienced" in a group and its activities, group expectations and customs may have become so routine and rote as to be taken for granted and unconscious, thus less accessible for verbalization. A novice may be more aware of group norms simply because they are new and different. (This is not to deny the value of "old-timers" as informants, however.)

This chapter has addressed the next and most basic step in deriving socialization criteria: identifying the social norms underlying role behavior. In analyzing behaviors of role incumbents, it is essential to determine whether these behaviors are guided by normative expectations (social norms) or are simply common reactions to a given situation, condition or environment, reactions that are neither positively nor negatively evaluated by the group (statistical norms). An ethnographic analysis of activity patterns within the senior center was presented to illustrate this distinction. An examination of the activity patterns of two distinct center groups revealed that the high activity levels of the center volunteers reflected the existence of social norms (i.e., activity was highly valued by the volunteers; volunteers should be active), while the low activity levels of the "do-nothings" reflected the physical and/or mental inabilities of these individuals to engage in center functions. There

was no value attached to being idle or non-involved for the "do-nothings"; their low activity level resulted from commonly experienced afflictions and incapacities (reflecting a statistical norm).

Discussion of this ethnographic material illustrated how social and statistical norms differ and the kinds of evidence and analysis necessary to distinguish between the two. A set of guidelines for identifying social norms was then offered.

Simply identifying social norms is not sufficient for determining socialization criteria, however. In many cases the situation is complicated by the existence of multiple or even conflicting normative expectations. The following chapter examines the methodological implications of such normative diversity.

Chapter 6 - Deriving Socialization Criteria when Normative Diversity Prevails: Using Volunteer Eligibility Norms as an Example

Issues involved in measuring socialization in a situation in which normative expectations are divergent and, in some cases, conflicting will be illustrated in this section by examining norms regarding volunteer eligibility (i.e., who should be allowed to be a member of the volunteer group). Although there was a set of formal norms set forth by the center administration as general policy toward volunteer membership, the various volunteer groups differed in their receptivity to new members and in the criteria used to evaluate or assess individual eligibility. Some of these group norms ran counter to the formal, center-wide standards. This example will be used to illustrate the methodological issue of normative diversity: how to measure socialization in a situation in which there are divergent sets of expectations.

A. Determining the Extent and Nature of Consensus

The following ethnographic examples illustrate the extent of agreement on normative expectations regarding eligibility to the volunteer role within the multipurpose senior center. The focus is on intra-group diversity regarding eligibility norms and on group differences in these norms both within and between different organizational levels of the center. The methodological implications of this diversity will be considered later in this chapter.

We will first consider patterns of consensus within groups only for the administrative staff, considered as a group, and for each individual volunteer

group. This will entail briefly summarizing the internal agreement and disagreement for each group and illustrating this with ethnographic descriptions. Next, we will take each set of shared norms and compare these with the shared norms of the other groups. Is there agreement between groups (Table One - A) or disagreement (B)? If there is disagreement, what is not shared, and by which groups? The next step would be to take the elements of internal disagreement for a given group and assess other groups' reactions: Is there agreement with one side (or some degree of partial agreement?) (C), or is there total disagreement regarding the issue, (D)?

Table One - Patterns of Normative Consensus
BETWEEN GROUPS

	+	-
WITHIN GROUPS +	A	B
-	C	D

1. The Formal Norms of Center Policy as Formulated by the Administration: Ideal vs. Real

The official center policy dictated by the center administration represented the formal, ideal norms of the center toward volunteers and standards for eligibility to the volunteer role. These were general standards pertaining to all: volunteer positions should be open to all, a volunteer should be capable of performing his/her volunteer task, volunteers should be able to work with others, an individual should work where his/her talents would be best put to use. These norms were elicited from the director of the nutrition program and the volunteer director, and validated as center policy in interviews with the staff and volunteer key informants.

Although the Executive Director assumed there was general agreement within the administrative ranks regarding these eligibility norms, this was not, in fact, the case. Although theoretically open to all, a volunteer also had to be "capable" of the task, and there was some disagreement in determining the standards for "capable" performance. This difference in standards stemmed from differences among staff members in philosophies toward the volunteer program and its ultimate goals. According to the Executive Director, the volunteer program existed for the benefit of the participants - to provide meaningful activity to replace former work roles, and thus to bolster individuals' self-images and self-esteem. In his view, the goal of the volunteer program was: "...to help the retired person, not to help the agency...to give them (the volunteers) a sense of value, worth, achievement... We would want to help the volunteers, rather than take advantage of them." As long as a volunteer was sufficiently healthy to accomplish the required tasks and did no harm to himself or others, his performance was deemed

adequate by the Executive Director. According to this point of view, the volunteer program should target those who could benefit the most from it. Those most eligible for volunteer positions should be the socially isolated, inactive individuals suffering from low self-concept and low self-esteem.

On the other hand, the volunteer coordinator felt the volunteer program existed "for the benefit of the center." In her eyes, "capable" performance entailed doing the tasks well, so that the center would function at an optimal level. The volunteer program should thus target those who could do the best job and bring greatest benefit to the center, providing unpaid help to an agency limited in resources and increasingly strapped for funds. The volunteer coordinator would "weed out" the physically handicapped or those with "negative personalities" by exhibiting subtle forms of discouragement or simply not approaching them to be volunteers. In her view, volunteering: "... is not supposed to be a therapeutic program." She claimed that the volunteer program could not always use older persons referred to the center by physicians, social workers or counselors. When recruiting new volunteers, the volunteer coordinator was more likely to consider the newcomers, individuals taking classes (members of the ballroom dance class were seen as especially desirable) and those who participated in the trips program -- "the young, the healthy and the outgoing." The "old-timers" of the center who were not already involved in volunteer work were rarely, if ever, invited to join the volunteer program.

For most volunteer positions (except committee membership) people could volunteer on their own initiative, and a few did so. Even these people usually had to "gain admittance" through the volunteer coordinator. In most cases, they could not simply approach the members of a volunteer group and request admission (except for the sewing groups, which were relatively autonomous

of the volunteer coordinator). Most, however, interpreted the absence of a solicitation from the volunteer coordinator as a subtle message not to apply. A number of non-volunteers interviewed expressed a desire to participate in the program, but claimed they were waiting to be asked. The fact that they were not invited was sufficient evidence to them that they were not competent or "good enough" to be volunteers. In spite of the official policy, volunteer positions were clearly not open to all who desired to participate.

Most members of the various volunteer groups would at least pay lip service to the "official" eligibility norms of the Executive Director, even though they might not always abide by them. (Examples of sub-groups that did not accept universal eligibility were: the committees, whose exclusivity was seen as legitimate, and the sewing groups and the anti-Black kitchen volunteers, whose exclusivity was not viewed as acceptable by staff or most center members. See below for more details.)

Volunteers were more likely to accept the volunteer coordinator's definition of eligibility in practice. The Executive Director admitted that sometimes an individual who "needed to volunteer" was rejected by other volunteers. According to the Executive Director, in such cases the staff would intercede and try to persuade the recalcitrant volunteers to be more accepting.

2. Volunteer Group Differences and Informal Norms

Each volunteer group within the center had its own additional membership norms. Some of these were elaborations or group-specific interpretations of the formal norm: "A volunteer should be capable of performing the task entailed." As such, these added to the complexity of the situation, but did not

represent any contradiction or lack of consensus with official policy. However, some groups had additional criteria for membership which were not based on ability, and were in clear defiance of the dictum that volunteer roles be open to all. These do represent a lack of agreement among norms. Below is a discussion of the divergence from formal center norms regarding volunteer eligibility and the extent of normative diversity within each volunteer group. The implications of this lack of consensus for socialization and its measurement will be discussed in the final section of this chapter.

a. Eligibility Norms of the Sewing Groups

Members of the sewing groups were the most defiant of the volunteer groups regarding the formal (ideal) policy that center activities be open to all. They were a very homogeneous and close-knit group, and shared definite norms regarding how many and what type of individual could be allowed into their midst. They were criticized by staff and center participants alike as being too exclusive and discriminating against prospective entrants who didn't "fit their mold." A number of women in the center had been denied entry into this group, and were somewhat bitter about it. Berniece, a "bag lady", complained that: "if they don't like you, they won't have anything to do with you." The assistant leader of the Reach for Recovery group admitted: "We have to be careful not to take too many people. We know who we can ask to replace...(anyone who might leave the group)."

Members of the sewing groups were in agreement that, in addition to being "the right type of person" in terms of economic status, appearance and demeanor, a prospective member should have a minimum level of competence (i.e., have the manual dexterity and visual acuity necessary to sew), although no great expertise was required.

Disagreement among members arose over the eligibility of men for membership in the group, with some women adamantly against it, some seemingly indifferent and some (including the lone male member) endorsing it. Although this was a group specific norm, outsiders also viewed the sewers as a "women's group" and tended to ridicule male members. The few men attempting to join the sewing groups were subjected to various negative sanctions. John M., whose wife taught the center's weekly tap dance class,was one such example. Rather than spend the morning of his wife's class in the auditorium with the "do-nothings," he decided to join one of the few activities available at that time period - the Reach for Recovery sewing group. He eventually quit the group to avoid the gossip and ridicule directed toward him from the other men in the center. (He then joined the tap dance class, which by that time had attracted a few other men from the center and, for whatever reasons, had not been labeled a women's group.)

Another male sewer, Louie, the husband of one of the sewing group members, showed no sign of leaving. This upset a number of the sewers, who felt compelled to censor their conversations in his presence. Several women complained that he should sit out in the auditorium, but that they could not throw him out because of the center's rules. Louie, on the other hand, seemed quite comfortable with the situation, and jokingly referred to the sewing group as "my harem." He had joined the group because his wife had, not for any interest in sewing or in the group itself. As such, he was something of a deviant.

Once a person became a member of the sewing group, there were no direct mechanisms for removing her/him if she/he proved undesirable by group standards. If indirect criticisms did not prod the person to leave, there was nothing to do but grumble and accept it. In these situations, dissatisfied

volunteers would sometimes cite the official center eligibility norms to explain why the offender was tolerated.

b. Eligibility Norms of the Nutrition Program

The volunteer coordinator had little influence on the selection of volunteers who worked in the kitchen, delivered meals to homebound elderly or served on the Nutrition Committee. Since the lunch program was provided and administered by a community action agency outside the center, another staff member, the nutrition site supervisor hired by this agency, selected and supervised these volunteers.

Volunteers who worked in the kitchen agreed that a prospective member should be "physically able" to do the work entailed (lifting heavy trays of food, etc.). A person was not allowed to work in the kitchen if they needed assistive devices (canes, walkers, etc.). (However, less physically demanding tasks were available, such as rolling silverware.) Some criteria for assessing adequacy of physical ability (i.e., equating size with strength) were occasionally questioned by would-be volunteers who were turned away on this account.

A minimum level of personal cleanliness was also required to qualify for kitchen work, and some individuals were turned away because they were too sloppy. This was an issue stressed by the nutrition site supervisor, who was attempting to obey federal guidelines, but paid little heed by those already accepted as kitchen volunteers. Very few washed their hands before working or wore the required hair nets and plastic gloves while handling food. Wearing hair nets was actually discouraged among volunteers, since they were regarded as unattractive.

Another important criterion for membership eligibility was the ability to work well with others and to work under stress. The kitchen was a fairly small room, forcing volunteers to work closely together. The kitchen volunteers also worked under rather strict time deadlines. Approximately 100 senior center lunches had to be served daily in assembly line fashion, as the center participants filed by in a span of about 15-20 minutes. Adding to the stress, complaints about the food or serving sizes were often directed toward the kitchen volunteers, who felt somewhat harassed. Also, all 40 of the lunches for the Home-Delivered Meal program had to be packed and ready for delivery by 10:00 a.m.

A number of individuals disqualified themselves from kitchen volunteer work after realizing that they could not cope with its fast pace and pressure. Some people remained in the position, but would occasionally lash out at fellow volunteers in frustration over their situations. This was tolerated for awhile, but if it continued the offender was pressured by fellow volunteers and the nutrition site supervisor to work less frequently or quit altogether. Volunteers were in general consensus regarding this point, viewing the ability to work well with others under stress as an important quality enabling one to perform this particular kind of volunteer work.

Kitchen work was one of the least glamorous volunteer tasks, and people in the center sometimes referred to it as "blue collar work." Even the nutrition site supervisor admitted that the more outgoing and personable volunteers should work at one of the other, "more public" jobs (i.e., as host/hostess at the front desk or as center telephone receptionists). She had recently advised a very outgoing woman who had requested to work in the kitchen to inquire about a hostess position instead. While admitting the nutrition program was losing a potentially good volunteer, the supervisor did not want this woman to

"waste her talents" back in the kitchen. Although not denied entrance into the volunteer group, it would seem that certain types of persons were more welcome in some groups than in others. This was in accordance with the formal center norm that people should volunteer where their talents could be best put to use.

As mentioned above, there was some disagreement on another criterion for volunteer group membership. A small minority of nutrition volunteers felt that Blacks should not be allowed to work in the kitchen. The use of race as a criterion for membership was in definite defiance of the official norm of the center that volunteer activities be open to all. The nutrition site supervisor took a vigorous stance against the sub-group advocating racial criteria, vehemently criticizing them for their views. Those who felt most strongly about denying Blacks the opportunity to volunteer eventually left the nutrition group themselves as more Blacks (three or four) gained entry. The remaining members of the dissident group became less vocal about their views, but continued to maintain them. They existed as a deviant sub-group within the larger group of nutrition volunteers, and their views represented an example of intra-group diversity regarding membership norms.

Although there was a surplus of volunteers for kitchen work, the Home-Delivered Meal program was in desperate need of help. Approximately 40 meals had to be delivered daily to households scattered throughout the township. Volunteers worked in pairs, the driver and the "runner" (the person who delivered the meal to the door). Usually two pairs worked on any given day, each pair delivering about 20 meals. This required spending a considerable amount of time away from the center. Most of the people who volunteered at the center, however, did so because they wanted to be involved in its activities, to meet people and be part of the group - to be a part of "the

action" at the center. It was not surprising that so few people were willing to volunteer for the Home-Delivered Meals program. On some days, the nutrition site supervisor had to deliver the meals herself, or ask her son to deliver them. Because it was so difficult to recruit meal deliverers, the nutrition site supervisor sometimes enlisted persons who were not altogether competent for the task. For example, one new volunteer was so flustered and confused on her first day on the job that she walked up the wrong side of the bannister when delivering a meal. One driver, a woman who had a reputation throughout the center as being a "scatterbrain," had a series of accidents while delivering meals: one involved running into a "runner," another driving her car into a house. The necessity of finding anyone to work in this program forced a leniency or disregard of the formal center norms concerning membership eligibility (i.e., that an individual should be capable of performing the assigned task), and represents an example of a clash between the formal, ideal center norm and the real.

c. Eligibility Norms of the Hosts and Hostesses

The position of host or hostess at the front desk was one of the most coveted volunteer roles in the center. It offered the opportunity to meet many people, to keep abreast of center news and events and to act as a representative of the center to newcomers. The front desk was positioned to allow a clear view of the front lobby, the staff offices and the auditorium, so one could observe practically everything happening in the center.

According to the volunteer coordinator and hosts and hostesses interviewed, hosts and hostesses were expected to be outgoing, personable, cheerful - able to "deal with the public," because they were in such visible positions. They also had to be mentally alert and informed of center

functions, so that they could respond to any inquiries or at least direct people to the appropriate sources of information. As one hostess explained: "You have to know your way around before you can show other people around." Because they were such an integral part of one's first impression of the center, they should not have dour or depressing dispositions. The volunteer coordinator cited the case of one hostess who had "tricked" her - the woman had made a good first impression as a sociable and charming individual, but over time proved to be quite moody and unpredictable. The volunteer coordinator eventually reassigned her to a different, less visible volunteer task.

The volunteer coordinator determined eligibility for the host/hostess role based on the criteria cited above. She was rather selective in her choices, since she regarded the hosts and hostesses as more important than most in helping to run the center. Clearly, not everyone who wanted this position was awarded it, and only a certain type of person who fit the qualifications as defined by the volunteer coordinator was approached for the job. This represented another case of selective recruitment and the contrast between real and ideal norms within the center.

Since hosting was probably the most desired volunteer position in the center, few wanted to relinquish the role. There were no mechanisms for role exit (such as the time limits on terms for most committee positions), and usually no compelling incident to force exit (as with kitchen work, when one was no longer physically able to perform the required tasks). This occasionally resulted in the awkward situation in which a person strongly attached to the host/hostess role would "grow old in the job," yet be unwilling to relinquish it. While not causing physical harm to self or others, the failing

volunteer would project a less than optimal image and occasionally provide incorrect information in response to the queries of visitors.

When this situation developed, the volunteer coordinator would resolve it by gradually cutting back the individual's volunteer hours and pairing that person with another, especially vital host/hostess. The role was gradually reduced to a token position, similar to the "tenuous, nominal" one described by Rosow, (1985), a status empty of function.

d. Eligibility Norms of the Gift Shop Workers

Working in the gift shop was perhaps the least popular volunteer role in the center (although a few women did enjoy it). Situated in a distant corner of the front lobby, the gift shop was isolated from people and the major activities occurring within the center. Business was slow, and volunteers revealed they were lucky if they made one sale during an entire morning. The volunteer coordinator admitted it was difficult to keep gift shop volunteers; other center volunteers described the gift shop as "too slow" for their liking.

To be a gift shop worker, one should be "able to run the business part of it," to count change and record sales transactions. The volunteer coordinator noted that they were "very loose" regarding this requirement, and that the center took care of the losses if a gift shop worker erred in a transaction.

Because it was so difficult to attract and keep gift shop volunteers, the volunteer coordinator was rather lenient in accepting people with less than adequate business and sales skills: "If someone really wants to work in the gift shop, I let them." She would sometimes schedule volunteer pairs to work together (usually one person worked alone) - one "very sweet and cute" with another person "more aware of how to deal with money."

There was some intra-group variation among the gift shop volunteers regarding perceptions of the duties entailed in their role and the skills required. Some felt gift shop workers should also act as informal counselors, providing social support, since a few center participants would occasionally come to the privacy of the shop to "unburden their souls." Those volunteers who viewed the gift shop worker as a counselor felt the ability to be a supportive and sympathetic listener should be included in the criteria determining membership eligibility.

Recruitment of gift shop volunteers was similar in some respects to that of meal deliverers for the Home-Delivered Meals program. Since neither were highly desirable positions, there were few applicants, and the volunteer coordinator was forced to accept individuals who, although willing, were not always entirely able to perform the required tasks adequately.

e. Eligibility Norms of Committee Members

As was mentioned above, the committees were considered extremely important in running the center. Membership was thus open to the select few hand-picked by the Executive Director (or the nutrition site supervisor for appointments to the Nutrition Committee). Even though this selectivity and exclusiveness was contrary to the general center norm of universal eligibility, it was seen as appropriate by committee members and non-members alike, since committee work was perceived as requiring extraordinary talents and experience. Committee members were the center's decision-makers, involved in aspects of administration and planning. They were expected to be leaders and to represent the concerns of center participants.

Committee members were considered an elite group, and were sometimes called the "white collar volunteers." Men dominated this group, and a number of women expressed a strong desire not to be on a committee. As one woman commented: "I wouldn't want that. When you're up at the top, that's when you have the problems. I wouldn't want to hear the complaints. I hear them now, but they're not against me."

Different committees had slightly different criteria for membership eligibility. According to the Executive Director, members of the Funding Committee: "...should be good businessmen, have had professional careers, and backgrounds in using funds. They should have contacts with corporations and in the community." Since there was no limit on length of tenure (other committees did have specified terms of office) and little turnover, it was quite difficult to become a member of this group.

Criteria for members of the Executive Committee were similar to those of the Funding Committee, but with greater emphasis on current contacts in the community. To be eligible for the Nutrition Committee, one was required to participate in the center's nutrition program, which entailed eating lunch at the center at least three times a week. The nutrition site supervisor was somewhat lax in upholding this requirement, and usually accepted anyone with a strong desire to be on the committee. Members of the Center Committee were the leaders or representatives from most of the major center groups: the sewing groups, kitchen workers, news discussion group, etc. Members of the Trips Committee had to have an interest in and knowledge of travel.

B. The Implications of Normative Diversity for Socialization and its Measurement

Given the diversity of norms, the choice of a scaling model to be used in developing a measure of socialization becomes problematic. Simply choosing one of the normative standards regarding eligibility to the volunteer role and then determining whether individuals are socialized to that standard or not would result in the lumping together in the non-socialized category of individuals of disparate socialization levels and types, and would fail to convey the diversity that exists. Those lacking a value commitment to norm A may have a strong value commitment to norm B or C. On the other hand, those not socialized to norm A may have a relatively low value commitment to any group norms and may negotiate their participation within a group primarily on the basis of self-interest.

In situations of normative diversity, differences in socialization represent differences in kind as well as degree. In this case, instead of arraying individuals on one continuum indicating degree of allegiance to one specific normative standard, a more appropriate scaling model would separate individuals into socialization categories or types which identify their normative orientations.

Value commitment and behavioral conformity may vary independently, so it is also useful to distinguish between the two. Rosow (1965) accomplished this with his four category typology of socialization outcomes: 1) the "Socialized" has both expected value and behavior; 2) the "Dilettante" is committed to the values, but is lacking in role performance; 3) the "Chameleon," although not committed to the values, meets behavioral expectations and 4) the "Unsocialized" has neither the beliefs nor adequate role performance.

Although presumably constructed for situations in which a normative consensus exists, this typology can provide the basis for the scaling model to be used in situations of normative diversity as well. In delineating socialization types, one would make sub-categories for the Socialized and the Dilettante (Socialized A, Socialized B, Socialized C, etc. Dilettante A, Dilettante B, etc.) signifying individuals who have a strong value commitment, but to different value standards (in this case, different sets of norms regarding volunteer eligibility).

The Chameleon also represents a somewhat modified category in this situation. In a situation of normative consensus, in which there is a single normative standard, the Chameleon will meet the behavioral expectations, even though he is not committed to the values. But, as Rosow (1965, p. 37) noted in regard to Chameleons: "those with low (value) commitment negotiate their participation on the basis of self-interest (or in extreme cases, coercion)." Thus, when there are several normative options within a setting the Chameleon will probably fluctuate among the various behavioral alternatives, acting in the manner which is most advantageous. The Chameleon will pick and choose among possible ways to act, depending on the context in which he finds himself. (This lends added importance to the issue of context in socialization and the ability to recognize contextual cues, to be discussed in Chapter Eight.)

Rosow (1965) has predicted that Chameleon types should increase with pluralistic values, so one would expect to find a high percentage in the present situation. In situations with high normative diversity, Chameleons might be at an advantage. They would have the flexibility to manipulate different normative standards to their greatest opportunity, rather than being locked in to one set of options. One could predict that,within the multipurpose center,

the volunteer sub-group with the lowest normative consensus would have the greatest proportion of Chameleon types.

However, there may be limits to the extent of normative manipulation possible or acceptable. In normative areas of high moral force there may be less flexibility in allowing different behavioral options (or at least allowing a given individual to freely shift among behavioral options). Normative issues characterized by high moral force and lack of consensus may be the source of serious conflicts (for example, the issue of Blacks volunteering in the kitchen). In this case, the individual who is not committed to the values of the most powerful actors must either leave or slip in to the classic Chameleon type as originally described by Rosow. (Further issues surrounding the dimension of moral force will be discussed in Chapter Seven.)

There are certain conditions where one might expect to find a higher incidence of the Dilettante socialization type. Groups or positions which were less popular had greater difficulty finding volunteers. They were sometimes forced to admit individuals who, while highly committed to the values, could not adequately perform the expected tasks (for example: the gift shop workers who could not make change, or the inept drivers and "runners" for the Home-Delivered Meals program).

On the other hand, one might also expect to find Dilettante types in groups or positions which were very popular, but had no mechanisms for role exit. These groups may have individuals who are highly committed to the group and its values, but over the years have lost their ability to perform their tasks in an adequate fashion (for example: the aging front desk hostesses described above). Since there was no limit on length of role occupancy (in contrast to the situation with the committees, whose members had limited terms of office) or precipitating factors to prompt role exit (as with kitchen volunteers, who

risked injuring themselves or others if they were too weak to lift the food trays, etc.), it was difficult to remove a hostess who had "grown old on the job." As was mentioned above, in such cases the role was gradually reduced to a token position ("tenuous, nominal," Rosow, 1985), with the volunteer assigned fewer hours to work or working with a more competent partner who would perform most of the tasks.

In this chapter the implications of normative diversity for socialization and its measurement were explored, using center volunteer eligibility norms as an ethnographic example. At issue here was the choice of scaling models. In situations of normative consensus or when one's research purpose is to determine socialization to one specific set of norms, one would either separate subjects into one of two categories (socialized or not) or array them along a continuum, indicating degree of allegiance to the normative standard of interest. However, as was noted above, in situations of normative diversity, differences in socialization represent differences in kind as well as degree. The appropriate scaling model in this case would separate individuals into socialization categories or types which would identify their normative orientation. Rosow's (1965) four-category typology of socialization outcomes was modified to provide the basis for such a scaling model.

Socialization implies more than simple adherence to normative content, however. An actor must also know how seriously he or she should take a give norm. The following chapter explores the issue of moral force and its implications for deriving socialization criteria.

Chapter 7 - The Methodological Issue of Moral Force: Using Volunteer Work Norms as an Example

Not all norms are "created equal." Some are stronger than others, of greater importance to the members of a reference group. The relative strength of a norm, its moral force (Rosow, 1974), is reflected in the expectations defining the appropriate level of conformity or commitment to that norm. It is the degree of seriousness or earnestness with which one is expected to take a normative expectation. Adherence to a given norm may be demanded, preferred, allowed, etc. Behavioral options available to an actor will vary, depending on the moral force of a norm. When the moral force of a norm is low, there is greater flexibility or "looseness" in the system, and alternate forms of behavior may be more readily tolerated. (This is typically the case for norms associated with late life roles.) This flexibility may result in greater normative diversity and an increase in the "Chameleon" type of socialization described above. When the moral force of a norm is high, expectations are more stringent, and there is a greater demand for conformity. In this situation, certain behaviors or attitudes are required, and there is less leeway for alternative forms, less tolerance of diversity or deviation.

To achieve socialization, an actor must recognize the level of conformity deemed appropriate by the reference group for each normative expectation. If he or she deviates too greatly from it, sanctions will be incurred. A person who overconforms to a given norm may be considered a fanatic or zealot, while one who underconforms could be regarded as lazy, indifferent or arrogant.

Moral force may be seen as representing a second dimension of a norm, separate from substantive content. Complete socialization in terms of value

commitment entails knowledge and acceptance of the appropriate level of conformity or strength of commitment to a given norm in addition to knowledge and acceptance of the content of that norm. Besides conforming to a given normative expectation, one must therefore know how seriously to take that expectation, what degree of flexibility is permissible in following its dictates, and whether there are acknowledged limits to compliance. As we shall see in the following examples, socialization to the content of a norm and to its moral force may vary independently. Also, one who takes a given normative expectation very seriously may not necessarily be "better" socialized to group norms if that seriousness exceeds acceptable bounds as defined by the reference group.

A. The Ethnographic Example: Volunteer Work Norms

The following description of the norms surrounding work among center volunteers is presented to illustrate the concept of moral force and its relevance to socialization. At first glance, one may be tempted to dismiss volunteer work norms as irrelevant to the present concern. One might view these norms as carry-overs or continuations of expectations from earlier work roles, reflecting the more general cultural values of the Protestant work ethic, and thus not requiring further socialization on the part of the volunteer. However, despite their similarity to such general norms, the content and moral force of these expectations toward work were given new expression within the contexts and limits of the older volunteer role. Previous adherents to the Protestant work ethic still had to learn the manner in which the specific applications of the work ethic were modified and expressed within the senior

center and the volunteer role: How much time should an individual devote to volunteer work? What were the norms regarding attendance, reliability and punctuality for one's assignment? How much socializing should be allowed during volunteer time? What was the expected level of intensity - the appropriate pace of work and amount of output? What were the norms concerning quality of output or task performance? There seemed to be a general consensus among volunteers in their answers to these questions regarding work norms. Although a high level of commitment was expected, there were limits to the amount of work effort and commitment a volunteer should demonstrate.

1. Time Involvement

The amount of time committed to volunteer work varied widely among center participants, ranging from one to twenty-eight hours per week among those volunteers interviewed. The mean number of volunteer hours per week was eight. Most volunteers (60%) held two or more positions in the center, 10% held five or more volunteer jobs.

Regardless of the number of hours one worked, each volunteer was expected to be committed to the task, and to faithfully carry it out. People who volunteered in the kitchen, gift shop or front desk were each given individual work schedules specifying the time and day they were expected to work. Members of committees and sewing groups were expected to attend their respective group meetings (once a month for committees, once or twice a week for sewing groups). Volunteers were required to record the number of hours they worked. (This was for the center's records, to provide

documentation of volunteer contributions when applying to the government for in-kind funds.) Most of the center volunteers belonged to the Retired Senior Volunteer Program (RSVP), which also required records of attendance. Those exceeding a certain number of volunteer hours were rewarded with honorary medals and pins at the annual RSVP banquet. The Volunteer of the Month award was also based in part on amount of time spent volunteering.

In the eyes of both staff and center participants, volunteers were expected to take their work very seriously; regular attendance was a minimum requirement. The volunteer coordinator stated the center's policy: "...sometimes a person might want to volunteer, but they want to do it on their own terms and their times. Volunteering has to be perceived as a commitment and not just a side thing. They have to really be there. Certainly, if something else came up that was really a big deal, I would encourage them to miss their one day of volunteering, but otherwise I am looking for someone who is willing to make a commitment." A number of volunteers spoke of rearranging social activities and vacation plans to accommodate their volunteer schedules. Those who missed their assigned day were expected to notify the center and give a legitimate excuse. Volunteers were also expected to work overtime when extra effort was needed, such as filling in for an absent volunteer or staying later to clean up after especially large center events.

2. Punctuality and Reliability

Most individual volunteer tasks started at a specific time, and workers were expected to arrive punctually. Frequent tardiness was punished by chastisement and, in some cases, loss of some volunteer responsibilities.

(For example, one chronically late member of the Golden Tones choral group was "demoted" and not allowed to use the cymbals in their performances.)

Among kitchen volunteers, Ralph was touted as a model worker by staff and fellow volunteers alike because he arrived early in order to organize the kitchen and lunch items. However, starting early would be seen as inappropriate and unwelcome for other types of volunteers. One new sewing volunteer was severely criticized by the veteran sewers because, in her haste to start working, she had asked a staff member to unlock the sewing room 45 minutes before the scheduled time. This was resented by the leader and co-leader of the group, who felt that opening the sewing room was their responsibility (and privilege). They felt no one (especially a new person who was relatively unknown and unproven) should be left in the sewing room unattended, because the temptation to steal sewing materials would be too great. (A number of sewing items had recently been missing.)

Arriving early for work would also be negatively sanctioned for both the gift shop workers and hosts/hostesses, since they would be perceived as encroaching on the time period of the preceding volunteer(s). Coming to work early would also be unnecessary and unappreciated for committee members, since there would be nothing for them to do during that extra time.

3. Pace of Work and Amount of "Output"

Most volunteer groups had a certain amount of work which had to be accomplished within a given time period. Volunteers took their quotas and deadlines very seriously. Kitchen volunteers were determined to have all the home-delivered meals prepared in time for the 10:00 a.m. delivery. While

assembling these lunches there were no side comments or "chatting". People worked at a fast pace and were annoyed with any volunteer who omitted an item or put an extra one into one of the lunch containers, both because of the risk that a meal recipient would receive an "unbalanced" lunch and because such as error slowed things down. The pace was just as fast and intense when assembling lunches for nutrition site participants. Each day approximately 100 people (over twice that number on special occasions such as seasonal holidays or monthly birthday parties) filed by the kitchen serving window with their trays within the span of 15-20 minutes. Kitchen volunteers would place food items on the trays in assembly line fashion. Again, volunteers were expected to work quickly and efficiently, and were severely criticized if they held up the line for any reason. (New volunteers were instructed by "veterans" to "stay calm" and not be flustered by this situation.)

Sewing volunteers were also very intense in their work. Their products (mastectomy prostheses, incontinence pads, items of clothing and table decorations) were picked up on a regular basis by representatives from the Red Cross, the American Cancer Society and the local hospital. Volunteers took great pride in maintaining their quotas and in the various plaques and awards they received for doing so. If they fell behind, volunteers would work "overtime", skipping such favorite activities as bingo or nutrition lectures or taking shorter lunch breaks, in order to maintain their goals. Sewing volunteers rarely took breaks. There was a certain amount of competition among group members, and a certain amount of verbal pressure from the group leader and her assistant to work harder and faster. (In fact, they were sometimes chastised by non-sewers for making me work so hard!) Since most of the sewers worked around a rather small table, they were easy

to monitor. One 90 year old woman was the subject of much gossip and criticism because she continually chose the "easy" sewing jobs. Another volunteer was criticized for chatting, reading magazines or working on her own sewing projects. The assistant leader claimed that: "she shouldn't be in the group..."

The pace of work was generally less predictable and less intense for other types of volunteers, although this varied, depending on the time of year. Members of the Funding Committee, for example, spent the entire month of May "tagging", standing on street corners soliciting donations for the center. The usual slow-pace of sales for the gift shop workers intensified during the Christmas season. Extra demands were placed on front desk hosts and hostesses when special functions such as the Christmas party or the annual Health Fair occurred, attracting large numbers of people who were new to the center and who required some orientation.

4. Limits on Socializing

While on the job, volunteers were expected to be involved in the work at hand and not "play around." They were expected to forego any other center activities taking place during their designated work hours, and were not allowed to "circulate" through the center. Certainly, some types of volunteer work included socializing as part of the task (for example, the tasks of the front desk hosts and hostesses and the gift shop workers), but there were limits even for these workers - for example, one should not leave the gift shop or front desk unattended to visit someone, or chat with a friend while ignoring a person who was seeking help. Even though Lillian, a member of the

Welcoming Committee (a three member group that helped acclimate newcomers), was chosen for her job because of her friendly and outgoing nature, she was still strongly criticized when she visited with friends while "on duty". One of the more extreme examples of sanctions for excessive socializing was the case of the volunteer bingo caller who lost his job altogether because he constantly made side remarks and jokes during the game. As his successor, a large, stern woman who would not tolerate comments or conversations during bingo, either from players or non-players, explained: "We weren't there to hear him chat, we were there to play bingo. We're real serious about this."

The head of the sewing group made it clear that: "...if you come in (to the sewing room), you are supposed to work." She made this statement on a number of occasions. Outsiders would frequently come to visit, and were tolerated for only a short period of time before being given subtle and not so subtle cues to leave. Even members of the group were chastised if their conversations proved distracting, especially during peak work periods.

Kitchen volunteers were also admonished not to socialize with others while on the job. They were not allowed to eat with the rest of the nutrition site participants, since that would cut into their work time. They ate lunch as a group earlier in the day, after they had assembled lunches for the Home-Delivered Meals program. A special table closest to the kitchen was reserved for the nutrition volunteers; no one else was allowed to sit there, regardless of time of day. Any nutrition volunteer who wandered away from the kitchen during work hours was severely chastised.

Although they joked and chatted a great deal before and after meetings, committee members focused their attention on the issues at hand during the meeting period. Members listened attentively, there were no side

conversations, few side comments, and superfluous topics were not tolerated. Meetings took place in the conference room, which was quite isolated from other center activities. Outside visitors were allowed only with permission and good reason.

5. Limits on the Work Norms

Volunteer work was not as stern and joyless an endeavor as one might assume from the above description. Although interaction with non-volunteers was somewhat limited, volunteers conversed freely with each other except during "peak" work periods. As long as their conversations did not interfere with the work in progress, socializing among volunteers was acceptable and, to some degree, expected. Volunteering was not supposed to be a matter of relentless work, and those who did not participate in conversations because of inabilities to communicate (i.e., the non-English speakers) would occasionally apologize for seeming aloof.

A few volunteers did not socialize because they were so completely immersed in their work. These people were derided by the other volunteers as "workaholics", and were viewed as somewhat deviant in the seriousness with which they approached their tasks. They provide examples of individuals who, while upholding the content of work norms, deviated from the expected level of moral force for those norms by being overly serious about their tasks.

Martha, a nutrition volunteer, felt especially qualified to work in the kitchen, since she had been employed for years in the company cafeteria of a large local electric plant. The nutrition site supervisor admitted that Martha was "very knowledgeable" about running a meal program, and that the other

nutrition volunteers respected her and listened to her suggestions. Martha worked in the kitchen five days a week, and was a model volunteer until her husband died. At that time, according to the nutrition site supervisor, she became "bossy and obnoxious, because she was so lonely and frustrated." Martha tried to escape her problems through her work, becoming obsessed with her volunteer responsibilities. According to the nutrition site supervisor, Martha "took it (the job) as too much of a responsibility." When other volunteers did not meet her standards of perfection, Martha would become angry and accuse them of sloppy work. One volunteer quit the program because of Martha's overbearing style. The nutrition site supervisor decided Martha needed to "ease up", and reduced the number of days Martha was assigned to work. Her new schedule consisted of working one day a week, and also on special events (Christmas, etc.) when they needed extra help. The nutrition site supervisor noted Martha had "loosened up a lot" and was now even participating in some of the center's trips. "Martha is happier now, " she commented, "she is not so pressured. She was taking the pressure and frustration home with her." (Even after her "recovery," Martha seemed to be excessively serious about her work. I observed her once storming into the nutrition site supervisor's office in a rage, simply because some people were, in her opinion, taking too many packets of sugar for their coffee. She wanted to immediately initiate a "sugar policy" - two sugar packets maximum per person - to protect the nutrition program from such freeloaders.)

Anne represented another example of a volunteer who complied with the substance of the work norms, but was fanatically deviant in the seriousness with which she regarded her responsibilities. Anne was an exceptional seamstress, and volunteered in all three of the center's sewing groups. She was determined to sew as many items as possible, and would spend most of

her volunteer time hunched behind the sewing machine, apart and somewhat oblivious to the other volunteers. Another perfectionist, she was easily upset if any detail of her work was amiss. During her brief stint as leader of one of the sewing groups, she was almost in tears when the volunteer time sheets were incorrectly filled out. (She lasted one week as the group's leader, then quit because she was so overwhelmed. However, she did continue working as a regular member in that group.)

Milly, the leader of Stitch 'n Time of which Anne was a member, criticized Anne, calling her a "...workaholic, a fanatic. She works all the time." Other volunteers agreed with this assessment. Clearly there were limits to the seriousness with which one was supposed to take one's work commitments.

An example in which the appropriate moral force of work norms was openly debated occurred during one of the monthly meetings of the front desk hosts and hostesses. Hosts/hostesses were supposed to help any one coming to the center, especially new people, by answering their questions, directing them to appropriate staff, etc. An argument erupted during the meeting over how much assistance should be expected of them. One hostess had complained of her frustration in trying to locate one staff member for some new member. Unaware that the staff person had left for lunch, the hostess had searched throughout the center, even in the bathrooms. The volunteer was suggesting a new policy - that staff notify hosts/hostesses when they leave the center, but was instead criticized by a number of other volunteers for being too compulsive about her work. (Most of the volunteers admitted that they felt searching the bathrooms was carrying the job to an extreme.) This developed into quite a heated debate, with the first hostess finally turning to the volunteer coordinator and offering to resign if the coordinator felt it necessary. In assessing the discussion after the meeting, most volunteers felt

sorry that this woman had been criticized in a public forum, but agreed she had been overzealous in her responsibility as a hostess.

Another hostess was also criticized in the gossip network for putting too much effort into her work. In her attempts to be friendly to those entering the center, some felt she was overly effusive: "She comes on too strong." As one hostess noted: "A lot of these people come in, and they are very down, and they feel down, and they just don't want to be hit with this little sunshine thing." She represents yet another example of an overzealous volunteer.

One of the more controversial examples of a volunteer who took her work too seriously was Ella, a widow in her 90's, who was seriously ill and almost blind. This woman was devoted to the center, and was determined to make some kind of contribution to it. She decided she would volunteer as a "tagger" (one who collected donations for the center during Tag Month, the major fund-raising project organized by the Funding Committee). She felt this was the only kind of volunteer work she could do, and indeed, her connections in the community and her extensive experience as a fund-raiser in the past made her an excellent "tagger". She worked for six days, collecting over $800, far more than any other volunteer, and thus insured that the taggers would exceed their projected goal. When she became too weak to stand on the streets soliciting donations, she continued to help by calling Nick, the chairperson of the funding drive, to give him advice. Members of the center were stunned and deeply saddened when she died a few days later. She was eulogized at meetings of the Executive Committee, the Funding Committee and the Nutrition Committee (for whom she also tagged, collecting an additional $250). A few months later, at the Annual Meeting of the center in which all volunteers are recognized, she was given a special posthumous

award, and Nick spoke at length and with great emotion of her contributions to the center.

While most regarded Ella as a model volunteer, some people felt that she should not have been allowed to volunteer. Given her age and physical condition, they claimed her participation in the fund-raising drive probably hastened her death. Nick justified his asking Ella to volunteer, claiming: "I couldn't not ask Ella, because she would be completely crushed if she weren't asked... If you took that away from her, she would just shrivel up and give up on things." While this again raises the issue of membership eligibility (and the lack of consensus regarding it), it also raises the questions: How far should a volunteer carry the work ethic? What, if any, limits should be placed on a person's work effort, especially if that individual has a physical or mental handicap? How much should be expected of volunteers, disabled or not?

There seemed to be a general consensus regarding the moral force of work norms for volunteers. One should take one's work very seriously, although not to such an extent that one would somehow inflict harm or annoyance on one's self or others. Ralph's extra work effort was admired because it represented a contribution to the smooth running of the kitchen, and he did not seem to suffer from it. In contrast, Martha's extra work effort was condemned because it eventually proved disruptive, causing irritation, anxiety and ill-feelings for herself and for the other kitchen volunteers.

B. Moral Force as an Independent Factor in Socialization

Moral force represents an independent aspect or dimension of a norm, separate from substantive content. Complete socialization entails conformity

to both. One who is socialized to the moral force of a given norm knows how seriously to regard its dictates - the "boundaries of effort" deemed necessary and acceptable by the reference group - and what, if any, flexibility is allowable in maintaining that level of effort.

Failure to conform to the defined moral force of a given norm represents inadequate or incomplete socialization, just as surely as if one were to disregard normative content. Those who underconform would be perceived as indifferent, arrogant or lazy. Those who overconform would be considered zealots or fanatics. Both instances have been illustrated in the above description of volunteer work norms. Volunteers who overconformed to work norms were derided as workaholics. Because of the intensity of their commitment to work norms, they made excessive demands of themselves and of their fellow volunteers. This resulted in a number of negative consequences: conflict among volunteers, anxiety, loss of health (and even of life), and eventual role exit. Inadequate socialization to moral force in this case proved to be just as deleterious to the social system as inadequate socialization to the substantive content of that norm.

On the other hand, those volunteers who underconformed, who were simply going through the motions expected of them, without approaching their tasks with appropriate zest or seriousness, would also be considered inadequately socialized to group expectations. Underconformers, such as the member of the sewing group who invariably opted for the easiest assignments or the sewing volunteer who read magazines and worked on her own projects instead of contributing to the work at hand, were also derided among volunteers.

It would seem that, in the case of center volunteers, there were relatively few individuals who could be accused of underconforming. Although it is

beyond the scope of the present work, one may speculate what variables might influence the frequencies of different levels of conformity. In this case, perhaps fear of identification with the unsavory traits attributed to the volunteers' negative reference group, the "do-nothings," would motivate individuals to approach volunteer tasks more earnestly. Also, groups that are entered into freely may have lower frequencies of underconforming members. It has been suggested that individuals in the early stage of role acquisition tend to overconform to normative expectations in their eagerness to "prove" themselves in their new role (Thornton and Nardi, 1975). [This is similar to the "Assistant Professor Syndrome," in which a fledgling academic assigns unreasonably long reading lists or overzealously attacks students during oral exams in an attempt to display and "prove" his or her competence (Clark, 1988).] Deriving socialization criteria in order to differentiate subjects in terms of conformity to expectations regarding moral force is an obvious prerequisite for research addressing these kinds of questions.

C. How to Determine the Moral Force of a Norm

Chapter Five suggested various strategies to identify social norms or normative content. The present methodological problem requires identifying how seriously actors should take these normative injunctions - what are the "boundaries of effort" an actor should expend in attempting to conform?

What kinds of data are useful in identifying degrees of moral force? Certainly the nature or "intensity" of a sanction associated with particular behaviors would indicate the level of conformity expected. If relatively mild negative sanctions, such as ridicule or bemused head-shaking are elicited in

reaction to deviations from normative expectations, one might conclude that the moral force of those expectations is comparatively weak. However, if more severe penalties, such as violent anger or expulsion from the group, are incurred, a rather strong moral force or expectation for conformity is indicated.

Activities which are most closely monitored by group members may also reflect underlying norms or expectations with high moral force. For example, kitchen workers were supposed to remain in the kitchen during the peak work periods (when they were supposed to be boxing the meals for the homebound and serving the lunches at noon). A volunteer's presence or absence during these periods was closely monitored by the other workers, and anyone who had wandered off during these times was strongly criticized and given reproachful looks for the rest of the day. In contrast, kitchen workers were also supposed to wear hair nets while serving and wash their hands prior to serving. No one noticed whether these demands were met, and no one criticized a volunteer for not conforming to these expectations. (As was noted earlier, very few people washed their hands or wore hair nets.) The norms regarding hand-washing and hair nets would seem to have a lower moral force than those norms pertaining to involvement during peak work periods.

In attempting to determine the moral force of a norm one might also interview key informants, asking them Likert-scale questions: "How strongly do you feel about _____? (strongly approve, mildly approve, neutral, mildly disapprove, strongly disapprove) "Do you feel that a person should do _____?" (strongly approve, etc.) One might also present vignettes of actors who displayed different levels of conformity to a given norm. The informant would be asked to evaluate or rank these characters.

It should be noted that situations characterized by "weak norms," in which actors, while in general agreement regarding a given expectation, feel largely indifferent to it (for example, the kitchen workers with regard to the "hair net norm"), should be distinguished from true normative diversity, in which there is real disagreement and possibly conflict. The first is a situation characterized by normative consensus but low moral force, the second, by lack of consensus regarding normative content. As was noted in chapter six, separate scaling models are in order for each situation. In a situation of true normative diversity, differences in socialization represent differences in kind as well as degree, and individuals should be distinguished according to their respective normative orientations. In a situation of normative consensus (weak though it may be), individuals may be simply separated into one of two categories (socialized or not) or arrayed along a continuum indicating degree of allegiance to the norm in question.

Also, deviation from a "weak" norm may not represent as great a lack of socialization as deviation from a norm with strong moral force. In developing socialization criteria, one might want to introduce a system of differential weighting to reflect these differences.

D. The Methodological Issue of Low Consensus on Moral Force

In the discussion of work norms, we considered a situation in which there was relatively high consensus regarding moral force. Those few individuals who overconformed or underconformed to volunteer work norms were commonly considered deviants by their fellow group members and received

appropriate negative sanctions. In the present section, we will consider a situation in which consensus on moral force is lacking.

1. The Ethnographic Example: Obligations to Support Center Programs and the Lunch Donations

There were many different ways to lend support to the various center programs: paying the optional membership dues, contributing money or materials to the center or its sub-groups, volunteering, promoting or praising the center and its functions, etc. In some cases, there was a lack of agreement among center participants regarding how much support, if any, was appropriate. Volunteers felt strongly that participants had an obligation to support the center: "They do so much for us, it's only right to give something back in return." Many non-volunteers, however, felt that they were under no such obligation, and that they should try to get as much from the center as they could. One example illustrating this divergence involved evaluations of the lunches served in the nutrition program. Many felt they should be positive in filling out the evaluation cards which accompanied the lunch, to show gratitude and support to the nutrition program and staff. Others felt one should not be too positive, regardless of the quality of the lunch. They argued that if the agency providing the meals knew people liked the lunches, they might slacken their efforts to please and reduce the quality or quantity of food served. Diners would occasionally engage in rather animated fights after lunch over how to fill out their cards.

Such disagreements represent diversity of normative content, what is expected or defined as appropriate behavior. The following example

represents consensus in normative content, but diversity in moral force: people agreed about what should be done, but disagreed about its importance.

According to the Older American's Act, meals provided through Title III-C must be made available to all older adults, regardless of their ability to contribute. Meal providers may request donations, and suggest an appropriate amount, but they cannot turn anyone away for not contributing. The community action agency providing the center's lunches complied with this provision, posting a sign at the entrance to the kitchen which stated the actual cost of the meal ($4.65) and the suggested donation ($1.00).

Two nutrition volunteers collected the lunch donations. One accepted the money and signed new people into the program. (Information was kept on each nutrition site participant for government records, as required by the Older American's Act.) The other volunteer gave the prospective diner a lunch token (a numbered poker chip) and recorded the diner's name and number. (When it was time to pick up one's lunch tray from the kitchen, numbers were called in blocks of twenty to prevent stampedes. The diner would turn in the lunch token upon receiving the lunch.)

According to the Older American's Act, the amount of the donation should be confidential, and individuals were supposed to be given contribution envelopes to insure that privacy. Although the nutrition site supervisor attempted to promote this policy, the nutrition volunteers eventually rejected it. They claimed that such a procedure encouraged "cheating," and that a considerable number of diners slipped tea bags instead of dollars into their envelopes. Once the envelopes were discontinued, those who did donate a dollar made a very visible display of their contribution.

The lunch served by the program was quite substantial, and practically everyone realized that at $1.00 it was a bargain. While most donated the

suggested $1.00, five or six individuals regularly contributed a mere 25 cents. A few tried to sneak by altogether, covering their donation with their hat and slipping bottle caps, tokens, etc. into the box. Donations were closely observed by the volunteer money collectors. Those who habitually paid less than the "requested" dollar were well-known throughout the center, the subject of much gossip among kitchen workers, and publicly ridiculed and denounced as "chiselers" at every Nutrition Committee meeting. (On the other hand, the few who donated well over the requested dollar were repeatedly commended during these meetings.) Nutrition volunteers felt very strongly that everyone <u>must</u> pay the expected amount. Volunteers in charge of lunch donations openly confronted those who attempted to sneak off without paying, calling their names loudly and demanding some sort of contribution. A considerable proportion of the Nutrition Committee's meeting was regularly spent addressing this issue. Volunteers asked the nutrition site supervisor to take action against the offenders. In their view, every diner was required to pay the expected dollar contribution.

The nutrition site supervisor, on the other hand, tried to uphold the more lenient formal norm stated in the Older American's Act, reminding the volunteers: "...According to the rules, we are not allowed to force people to donate." Although she certainly agreed that a donation <u>should</u> be paid, she felt less strongly than the volunteers about this, and recognized that a few nutrition site participants could not afford to make a daily dollar donation. At one Nutrition Committee meeting she announced: "We're not going to pressure people to pay more or push people away (from the lunch program)." Although she disagreed with the nutrition volunteers in their insistence on compulsory dollar donations, she understood why they felt so strongly. As she explained: "A number of these people have been volunteers in the

program from the beginning. They've watched it grow - they feel it's their program. They take it as a personal insult if people don't donate."

Center participants who were not involved as volunteers in the nutrition program felt less strongly about the donation issue. They agreed that diners should contribute something for such a substantial meal. They were also aware that "cheating" took place. Although they felt such cheating was wrong, their reactions to the infamous "chiselers" were considerably milder, ranging from mild criticism to amused acceptance.

2. The Implications of Diversity in Moral Force for Socialization

This is a case in which there was general consensus regarding normative content (except for the few deviant "chiselers," everyone felt one should make a donation for the lunch served at the nutrition site), but considerable diversity regarding the moral force of this norm. What are the implications of this diversity for determining socialization criteria?

In contrast to the earlier example of volunteer work norms, there seemed to be little, if any, negative sanctions against those who overconformed to the lunch donation norm. (Recall that those who strongly overconformed to the volunteer work ethic were strongly criticized, and in extreme cases, were excluded from their group.) Although the nutrition site supervisor requested that the nutrition volunteers show greater tolerance toward the offenders, she certainly did not criticize or punish those volunteers for feeling so strongly. While strongly critical of "chiselers" who disregarded the content of the norm by not donating, nutrition volunteers did not seem to be critical of those who

did not share their degree of indignation (i.e., who held different expectations regarding the moral force of the lunch donation norm). Volunteers undoubtedly felt that the site supervisor was taking a stance required of her by law. They also felt the lunch donation issue was not as strong a concern for those paying center participants who were not nutrition volunteers, since those individuals were not responsible for the nutrition program. Likewise, center participants (at least, those who did not "cheat") did not criticize the nutrition volunteers for their obsession with donations, because those volunteers were considered responsible for the lunch program.

Divergence from expectations regarding moral force did not, in this situation, predominantly exist in the form of idiosyncratic deviations of given individuals (as it had with work norms). Instead, different sub-groups maintained their own distinct standards regarding moral force, while at the same time tolerating different sub-group's standards.

We thus find consensus within sub-groups (i.e., the group of nutrition volunteers, the staff, and the group of nutrition site participants who were not nutrition volunteers) and lack of consensus among groups (See below, Table Two - B).

Table Two: Patterns of Consensus Regarding Moral Force

Between Groups

		+	-
Within Groups	+	A	B
	-	C	D

Although there seemed to be a general tolerance of inter-group differences,

intra-group deviation would undoubtedly have elicited negative sanctions. (Such deviation was not observed during the field work.)

In this chapter, the multidimensional nature of normative expectations was suggested. Moral force, or the relative strength of a norm, was presented as an independent aspect of norms, separate from normative content. The ethnographic account of volunteer work norms was used as an example to illustrate moral force. Diversity in terms of levels of moral force is possible, as was demonstrated in the example of the lunch donation norms. The knowledge and acceptance of the appropriate level of moral force is necessary for complete socialization, and should be taken into account when specifying socialization criteria. There is yet a third dimension of norms to consider in deriving socialization criteria - the contextual aspect - which will be taken up in the following chapter.

Chapter 8 - The Methodological Issue of Cue Recognition: Recognizing the Conditions under which a Norm is Appropriate

The behaviors, interactions, and relationships of a given individual are guided by a variety of norms or expectations. Different roles performed by the same individual may call for different types of behaviors or attitudes. (A parent who is also a student, for example, must conform to very different sets of expectations.) A given role relationship may have different facets, calling for different types of interactions at different times. The individual must decide which among these various standards of behavior is most appropriate in a given situation. An important aspect of socialization is the ability to recognize the conditions under which a given norm is the most appropriate standard for behavior and the conditions in which a shift to other normative standards is preferred. Those conditions are communicated to actors by various socially defined cues which exist in a variety of forms: as aspects of the physical setting, the social identities of actors, certain aspects of interaction (such as body language, tones of voice, direct verbal communication, etc.). The ability to correctly perceive and respond to these cues, to recognize the circumstances under which given expectations are appropriate and when they are not, is an important aspect of socialization and somewhat separate from knowledge of the substantive content of a norm. In other words, it is not enough to know what is expected of one, one should also know when or under what conditions those actions, attitudes, etc. are expected. Failure to correctly respond to the contextual cues eliciting a given norm represents inadequate or incomplete socialization, just as surely as if one were to disregard normative content or moral force.

A. The Ethnographic Example: Recognizing Cues Associated with the Staff-Volunteer Relation

Many role relationships involve multiple ways or styles of interaction. Different facets of the relation, involving different sets of expectations, are evoked on different occasions. Interactions within such relationships involve shifting among these aspects or facets of a given role or even from one role to another. In any given interaction, it is essential to recognize the cues which indicate which facet is in force; it is extremely inappropriate to act in one mode when the other actor is in another (to "laugh at the serious parts"). The staff-volunteer relation presents an example of a complex role relationship entailing contextual shifts from one mode of interaction to another. Sensitivity to the various cues signalling which set of norms were "activated" was essential to successfully maintain this role relationship.

The staff consisted of the Executive Director, nutrition site supervisor, volunteer coordinator, program director, social services director, a counselor and four social workers. They considered themselves and were perceived by center participants as the "professionals," the officials of the center and, as such, members of a socially distinct and separate group. Staff and center participants were even physically segregated from each other, each having their own separate territories. (See Chapter Two.) The social workers spent a good deal of their time outside the center altogether, working in the larger community, mostly with homebound elderly. Except for the Christmas party, staff members did not participate in the center's social activities. Attending the classes, playing bingo, participating in the trips, even eating lunch with "the seniors" (their term for the center participants), was considered inappropriate

and somewhat beneath them. The few social activities for staff members (such as retirement parties) were not open to center participants, even though these functions were held within the center.

Staff were perceived by center participants as busy professionals. They were the ultimate authorities of the center, the ones who made the major decisions and set the official rules. Center participants were expected to limit the amount of informal interaction with staff, and certainly not take up too much of their time. On the other hand, staff were not supposed to be distant or aloof. The center was supposed to be "a friendly place". While staff were supposed to be professional, they were also expected to be warm and approachable, persons with whom one could joke on occasion and to whom one could turn to confide any serious problems.

One aspect of the staff-volunteer (or staff-center participant) relation, then, was the ability to distinguish when it was appropriate to interact with a staff member as a professional or official, when to approach him/her as a confidant or friend, and when not to approach him/her at all. One had to know and be able to perceive the cues which signalled which set of norms governing interaction style was appropriate at any given encounter.

The physical setting in which the staff-volunteer interaction took place was an important contextual cue, signaling which norms governing interaction were appropriate. Occasionally the Executive Director, the program director, the volunteer coordinator or the nutrition site supervisor would enter center participants' territory, "touring" the auditorium and front lobby to observe center activities. In this context, interactions with center participants tended to be brief but friendly, with a good deal of joking on both sides. The Executive Director would often take this opportunity to thank exceptional volunteers for

their contributions to the center. (This recognition was usually received with a great deal of excitement and pleasure.)

Encounters between staff and center participants which took place within staff offices were obviously less public, and tended to be more formal and serious. These interactions were invariably initiated by the center participant, who typically had a problem or request to make. Any interactions of a more informal, social nature initiated by center participants within staff territories were usually limited to staff who were relatively low in the center hierarchy. (Only one volunteer - Leonard, the president of the Executive Board - ever dropped in to the Executive Director's office merely to "chat". Although his visits were tolerated, they were not encouraged, and it was widely known at least among the staff that the Executive Director resented these intrusions.) Even those center participants with more specific and serious reasons to approach the Executive Director's office knew they had a very limited amount of time to make their request. Once he decided a person had had a sufficient opportunity to plead his/her case, the Executive Director would send some not-so-subtle cues that the time was up: He would rise from his desk, walk to his office door and, in extreme cases, leave. On the other hand, the nutrition site supervisor was a person much lower in the staff hierarchy, and was thus identified as more "approachable." Center participants entered her office more frequently, even for informal social chats (though even these encounters were relatively brief). Center participants were also more likely to ask her for favors or special requests.

Staff members were not to be approached when they were occupied with their work. (Some of the cues indicating this "work state" were: the staff person was conferring with another staff member or with some outside "dignitary"; the staff person's desk was extremely cluttered, and he/she

appeared immersed in paper work; the staff person's door was closed.) If the person appeared to be on a break, it was considered more acceptable to approach him/her. One interesting case of misinterpreted cues involved Harry, the program director, whose office faced the reception desk, and whose behaviors were, therefore, very visible. Harry was perceived to be on a perpetual break, since he was observed snacking throughout the day. (Harry skipped lunch in order to leave work an hour early.) This represented a "green light" to center participants, who thus felt free to enter his office without an "official" reason. (Harry was also relatively low in the staff hierarchy.) Beleaguered by this continual attention, Harry finally was forced to ask the volunteer coordinator to announce to the hosts and hostesses at their monthly meeting that, in spite of his snacking, he was actually working and did not always have time to stop and chat with them.

Another, more extreme example of misperceived cues involved a case of misinterpretation of social identity on the part of a volunteer. This woman had previously been employed as a staff member in the center. Upon her retirement, she continued to frequent the center, eventually becoming a volunteer. She retained her interest in the staff and their gossip, spending long periods of time in her former colleagues' offices catching up on "the news," and interacting socially as if she were still a staff member. This was seen as highly inappropriate by the real staff members, who often complained that she wasted too much of their time. (However, the staff members did not find it inappropriate or wasteful to spend time exchanging gossip among themselves, either during their weekly staff meetings or during frequent informal office visits throughout the day.)

In any social exchange, the social identity of the actors involved is one of the most important cues signalling which set of norms is in force. One must

be able to correctly identify the social identities of the role participants (including one's own social identity) in order to correctly "read" a situation. Since this woman persistently clung to her former identity as a staff member, she consistently "misread" other contextual cues, and behaved according to norms which were perceived by other staff members as inappropriate to her new status.

Sensitivity to contextual cues and the ability to manipulate these cues may be especially relevant in socialization to informal norms (and thus to socialization to late life norms, as discussed in Chapter One), given the lack of consensus and the negotiated, fluid aspect typical of such norms. An actor may try to manipulate or control an interaction by defining a context (and presenting the appropriate contextual cues) in a way that is most advantageous to him/her. (However, for this to work, the social definition of that context must be accepted by the other actors.) For example, at the annual Pancake Breakfast, one kitchen volunteer approached a high-ranking visiting administrator and suggested that the administrator increase the amount of cheese distributed to center participants in the Surplus Food Program. When the administrator indicated he was not willing or able to do so, the volunteer immediately redefined the context of the interaction. Smiling broadly, he said he was only joking, transforming the context and social definition of the interaction from that of a serious request to a humorous teasing, in an attempt to "save face" and not appear ungrateful or arrogant in the eyes of a powerful staff member. If that administrator had appeared more receptive to the request, it is doubtful that the volunteer would have shifted into the humorous mode. (This seemed to be a fairly common strategy among center participants in their interactions with more powerful figures - they would "test" a staff member to see how much they could get in terms of privileges, extra food,

etc. When it was evident they had gone too far with what was perceived by the staff member as an unreasonable or outrageous request, they would quickly retreat, insisting they had only been joking.)

There are varying degrees of flexibility in defining or redefining the normative context in any given interaction depending on the moral force of the norms involved and the nature of the relationships among actors. (Actors who relate to each other in a variety of different roles have more choices in defining the context of their interactions.) Except for the most ritualistic, superficial or stereotypic types of interactions, there is usually some degree of flexibility in the actors' definition of normative context. The ability to agree upon a common definition of the interaction context, to "get on the same wave length" with another, is a prerequisite for establishing which normative expectations will prevail during that interaction. When there is disagreement over the definition of the context of interaction serious misunderstandings may result, and actors may hold conflicting expectations regarding what should occur (as was the case with the volunteer who still considered herself part of the staff, described above). If this lack of agreement is due to an inability to correctly interpret contextual cues, the problem lies in an inadequate socialization of one or more of the actors. If the lack of agreement is due to an unwillingness to accept certain cues and the type of context that they imply, the problem is more a struggle of power than a socialization issue.

One would expect different socialization "types" to vary in their ability and willingness to recognize and manipulate context cues. The "zealots," who overconform to a given norm by taking it too seriously, may be so blinded by their obsession that they are oblivious to cues (or too inflexible and/or unwilling to recognize them) for other types of interaction or role enactment. (For example, the workaholic sewing volunteer ignored the cues indicating

"break time", when volunteers interact in a more friendly and relaxed manner.) On the other hand, one might expect the Chameleon type discussed earlier to be most adept in perceiving and manipulating contextual cues to their own advantage. Of course, tests of such hypotheses are beyond the scope of the present work.

B. How to Identify Contextual Cues

As has been noted throughout this section, one aspect of socialization is the ability to correctly discern contextual cues - to identify those indicators signaling situations in which a given norm is relevant and appropriate, and then to respond accordingly. Our socialization criteria should thus include some standard to assess how capable an individual is in recognizing and responding to such cues.

To identify contextual cues one would rely on data from both the intensive observations and the interviews with key informants. In the observations one would note any cues or signals communicating social identities (special attire, special titles, etc.), cues initiating a social episode (the manner in which actors greet each other, actors' general demeanor, physical spacing of actors, body language, facial expressions, etc.), cues indicating a shift in normative context (body language, change in degree of animation or volume of conversation, etc.), cues indicating the end of an episode (diminishing eye contact, body language, etc.), any other socially defined cues provided by the physical or social environment in which the interaction takes place.

One might elicit cues from key informants by asking such questions as: "How would you know whether a person is a _____(volunteer, staff

member, visitor to the center, etc.)?" or "How would you know when it is all right to stop by a staff member's office just to chat?", etc. One might want to verify cues identified through observations by asking such questions as: "If a person did this (the cue), how would you respond?"

One could also present key informants with vignettes of characters who react inappropriately to various contextual cues. One could then ask the informant to evaluate the characters' behaviors and to explain why they did so.

In this chapter we have considered a third dimension of norms critical for socialization, that of context. Complete socialization implies an ability to recognize the conditions or contexts under which a given norm is most appropriate, i.e., <u>when</u> a norm is expected. Criteria for socialization should thus include some standard to assess how capable subjects are in recognizing and responding to relevant contexts and contextual cues. Suggestions for identifying contextual cues were offered.

The final chapter offers a table summarizing the methodological issues discussed in this work and the suggestions offered for dealing with them. It concludes with a brief discussion of the multi-dimensional nature of socialization and, by necessity, of socialization criteria. The relevance of this discussion to the study of socialization to late life norms is also considered.

Chapter 9 - Summary and Conclusion

A number of conceptual and methodological problems involved in specifying socialization criteria have been identified and addressed. The following table provides a summary of each issue and the recommendations suggested for dealing with them.

A. Summary Table

1. How to define role boundaries

Problem:

- Who is considered to be a role incumbent?
- What criteria qualify and identify an individual as a role incumbent?
- This is basically a sampling issue - how does one know whom to observe and interview when collecting the data on which the socialization criteria will be based?

Recommendations:

- Ask key informants to identify role incumbents.
- Note which individuals are formally recognized by the group as role incumbents (through awards, inclusion in special functions specifically for role incumbents, etc.).
- Use self-identification (who identifies him or herself as a role incumbent) as a criterion.
- Interview individuals who consider themselves role incumbents for their views on the essential criteria of the role.

2. How to distinguish between social and statistical norms

Problem:

- How does one differentiate social norms (standards of desired values and activity, what should be) from statistical norms (modal group characteristics, simple behavioral regularities)?

- How does one identify social norms?

Recommendations:

- Start with open-ended interview questions about adjustment and performance within the role - "What makes a good center participant?" "What makes a good volunteer?"

- Identify role models and the characteristics that make them so admired.

- Note who receives special recognition by the group and why.

- Once you have developed hypotheses regarding the nature of specific social norms based on the above, develop more direct questions (for examples, see Chapter Three).

- Supplement the interview data with observations of behavior, noting behaviors which provoke either positive or negative sanctions.

- Be alert to commentaries on behavior by observers or self-reflections by actors, verbalizing what one should or should not do in a particular situation.

- Certain social "types" are especially useful informants in helping to identify social norms: the "gossips," the extremely proper individuals who are "sticklers for the rules," the "norm-breakers."

- Interview newcomers - how do they feel they had to change in their outlook or behavior to conform to group expectations, how does this new role or group differ from more familiar ones of the past.

- Note how newcomers are introduced to the group - what information they are given regarding how they should act, what is expected of them, etc.

- Note formalized rules and instructions, representing codifications of social norms.

3. How to derive socialization criteria under conditions of normative diversity

Problem:

- How does one derive socialization criteria in a situation in which there are divergent sets of expectations?

- What scaling model is appropriate in developing a measure of socialization when normative diversity exists?

Recommendations:

- Determine the nature and extent of consensus:

    -Determine whether there are any sub-groups with different norms.

    -Determine the extent of intra-group diversity.

    -Determine the extent of inter-group diversity.

- If there is a lack of consensus concerning normative expectations, with various sub-groups having their own distinct norms, differences in socialization would represent differences in kind as well as degree. In this case, the appropriate scaling model would separate individuals into socialization categories or types which identify their normative orientations.

- A modified version of Rosow's (1965) four category typology of socialization outcomes (the "Socialized," the "Dilettante," the "Chameleon," and the "Unsocialized") is appropriate in this situation.

One would make sub-categories for the "Socialized" and "Dilettante" ("Socialized A," "Socialized B," "Socialized C," etc., "Dilettante A," "Dilettante B," etc.) signifying individuals who have a strong value commitment, but to different value standards. Also, in situations of normative diversity, a modified "Chameleon" type could fluctuate among the various behavioral alternatives, rather than adhere to one behavioral standard as suggested in the original typology.

4. How to determine the moral force or relative strength of a norm

Problem:

- How does one determine the reference group's expectations defining the appropriate level of conformity to a norm - how seriously should one take a given normative injunction? What are the "boundaries of effort" deemed necessary and acceptable by the group, and what, if any, flexibility is permissible in following normative dictates?

Recommendation:

- To determine the "strength" of a norm, note the "intensity" of the sanctions (mild, moderate, severe) associated with deviations from that norm.
- Note how closely group members monitor behaviors reflecting the norm. Activities that are most closely monitored may reflect underlying norms with high moral force.
- Interview key informants, asking questions such as: "How strongly do you feel about _____?" (strongly approve, mildly approve,

neutral, mildly disapprove, strongly disapprove), "Do you feel that a person should _____?" (strongly approve, etc.).

- Present vignettes to key informants of individuals who display different levels of conformity to a given norm. Ask the informants to evaluate the actors' behaviors and to explain why they did so.

5. How to determine moral force in situations with low consensus

Problem:

- How does one deal with diversity in expectations regarding the moral force of a norm?

Recommendations:

- As with the situation of diversity of normative content, determine the nature and extent of consensus.

- Identify any sub-groups with different expectations regarding moral force.

- Determine the extent of intra-group diversity.

- Determine the extent of inter-group diversity.

- Determine the various ranges of acceptability associated with each sub-group. Members of a given sub-group who do not conform to the range of conformity associated with their group would be pronounced deviant. One would want to indicate whether such deviants over- or underconformed.

6. How to recognize the contextual cues that signal a norm is in force

Problem:

- How does one determine when, or under what conditions, a given norm is relevant and appropriate (and when it is not) and the conditions under which a shift to other normative standards is preferred?

- How does one identify the socially defined cues which signal a given norm is in force?

Recommendations:

- While conducting field observations, note any signals communicating social identities (special attire, special title, etc.), cues initiating a social episode (the manner in which actors greet each other, actors' general demeanor, physical spacing of actors, body language, facial expressions, etc.), cues indicating a shift in normative context (shifting of physical spacing, body language, change in degree of animation or volume of conversation, etc.), cues indicating the end of an episode (diminishing eye contact, body language, etc.), any other socially defined cues provided by the physical or social environment in which the interaction takes place.

- Ask key informants questions to elicit cues concerning social identities, etc. such as: "How would you know whether a person is a _____ (volunteer, staff member, visitor to the center, etc.)?" "How would you know when not to bother a staff member, ...when it is all right to stop by a staff member's office just to chat, etc.?"

- Verify cues identified through observations by asking such questions as: "If a person did this (the cue), how would you respond?"

- Present vignettes to key informants of individuals reacting inappropriately to various contextual cues. Ask the informant to evaluate the characters' behaviors and to explain why they did so.

B. Normative Complexity - The Multidimensionality of Socialization Criteria

The discussion of conceptual and methodological issues involved in specifying socialization criteria has revealed that there is more to socialization than simple conformity to the content of a norm. Socialization is much more complex, involving a number of different aspects or factors. We have noted examples of individuals who, although they conformed to a norm in terms of its content, either over- or under- conformed to it (ignoring expectations regarding moral force) or were insensitive to the cues indicating when that norm was appropriate and relevant. In those cases, those individuals were negatively sanctioned by the members of their reference group. Their behaviors and attitudes were seen as inappropriate. In order to be considered fully socialized to the norms of a group, an individual must: know and conform to what is expected (normative content), know how strongly it is expected (moral force), and know when or under what conditions it is expected (recognition of contextual cues). These three aspects would seem to represent three distinct dimensions of socialization.

In developing socialization criteria, it may be useful to think of socialization as a multidimensional concept. Assessing individuals in terms of their level of conformity on each of the three dimensions would enable the researcher to make finer distinctions among individuals and to discern

different socialization patterns or types. For example, the person who is negatively sanctioned by the group because he or she is a "fanatic" or overconforms and does not meet the group standards for conformity to moral force represents a different socialization problem or type than the person who is also negatively sanctioned, but because he is insensitive (or oblivious) to contextual cues. Lumping these different deviant types together into one "unsocialized" category would mask dimension-specific patterns. One would be unable to identify possible antecedents or correlates of conformity to or of deviation from the standards for these different dimensions. Unless one was able to assess individuals in terms of the standards or socialization criteria derived for each dimension, one would be unable to pursue the types of possible research questions and analyses that have been suggested throughout this work.

The conceptual and methodological issues discussed in this work would seem to have special relevance for socialization in later adulthood. As was noted earlier, socialization in old age is characterized by a decline in formal roles and an increase in emergent, informal roles which tend to be more implicit and negotiated, less clearly defined (George, 1987; Rosow, 1985). Because the norms associated with such roles tend to be less spelled out, there is a greater probability for ambiguity in normative content, resulting in a greater potential for normative diversity. Such diversity offers an increase in normative options and affords greater opportunity to shift from one set of standards or expectations to another (perhaps making the "Chameleon" socialization type more significant, or at least more prevalent than would be the case in situations with more clearly defined formal norms with higher levels of consensus).

Moral force, the relative strength of a norm, takes on greater significance in such situations of normative diversity. In order to assess the feasibility of a "Chameleon - style" shift, one must know how seriously to take one normative expectation as opposed to another and what degree of flexibility is permissible.

The ability to determine when, or under what conditions, a given norm is relevant and appropriate is also an especially significant dimension of socialization to the informal norms of late life, which would seem to be less universal and more context specific. The ability to recognize and respond to the contextual cues which identify the set of norms that are in play in a given interaction and the ability to manipulate such cues in order to signal a shift in norms are skills especially relevant in normative situations marked by lack of consensus. Given the nature of socialization in later life - that it is characterized by an increase in emergent, informal roles with norms that tend to be implicit and ambiguous, lacking in consensus, fluid and negotiated, and context-specific - it would seem that the ability to distinguish older subjects in terms of the three dimensions of socialization discussed above would be particularly relevant and an essential first step in achieving a greater understanding of socialization patterns and processes among older adults.

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Appendix A

Data Sheet

Identification number and episode label

<u>Context</u>:
    -Physical location:
    -Time:
    -Occasion (reason for interaction):

<u>Actors</u>:
    -Number:
    -Identity : Names
    -Identity: Present roles or social identities of each actor vis-a-vis
              the other(s)
              Cues communicating social identities
    -Who enters and who leaves the episode as it happens. Why?

<u>The Social Episode</u>:
    -Cues initiating the episode
    -Description of what transpired: Actions and statements
    -Did any disagreements occur?
        -Among which individuals?
        -What were the conditions leading to the disagreement?
        -How was the disagreement handled:
            -What was the resolution or outcome?
            -How was it reached (through an intermediary, etc.)?
            -What were the reactions of the actors involved? Of observers?
    -Were any sanctions, positive or negative, given during the episode?
        -What were the punishments/rewards?
        -What were the conditions leading to this sanction?
        -Which actors were involved?
        -What were the reactions of the actors involved? Of observers?
    -How confident were the actors regarding the appropriateness of their
        behaviors?
            -Did anyone seem confused about what they should do?
            -Did anyone help them: direct them or give them cues as to what they
                should do?

-How strongly does each actor seem to feel regarding the
   appropriateness of the actions (their own and those of the other actors)
   that occurred during the episode?

	Forbidden		Neutral		Demanded
Action 1:	1	2	3	4	5
Action 2:					
etc.					

-What is the emotional tenor of the episode (friendly, angry, etc.)?
      -Is it the same for all the actors involved?
-What was the cue indicating the end of the episode?
-What were the reactions (if any) of others/observers not involved in
   the episode?

Were there any later comments on or references to the episode by either
participating actors or observers? (reasons for their actions, possible
alternatives, comments on the moral value of their behavior, etc.)

Appendix B

VOLUNTEER INTERVIEW

1. How long have you been coming to the Center? How often do you come?

2. What kind of volunteer work do you do at the Center? List all the different jobs you do as a volunteer and the days and times you work.

   2a. Do you have a leadership role?

   2b. Are you a member of a committee?

3. What is your total volunteer time per week?

4. How long have you been volunteering at the Center?

5. Had you ever volunteered any place else before?

6. Think back to when you first volunteered here. What were your reasons for volunteering? What events, if any, prompted you to volunteer?

7. Have your reasons for volunteering been fulfilled?

8. Have your reasons for volunteering changed over time?

9. Did any of the staff approach you about volunteering, or did you approach them? Describe how you felt - surprised, honored, expected it, put upon, etc.?

10. Did you volunteer for a specific activity, or just wanted to volunteer "in general"? Did you choose your volunteer activity, or were you assigned? If chose - why that activity and not something else?

11. Did you consider volunteering any place else besides the Center? Why did you choose this place?

12. Were any of your friends already volunteering before you started? Did that influence your decision to volunteer? Did you know many of the other volunteers?

13. Did you have any training when you started here? Was it helpful? Is there anything you wish (ed) someone had told you?

14. What was it like when you first volunteered? Did volunteering at the Center seem very different from the work you did before (both occupational and volunteer)? In what ways? Any similarities? Any surprises?

15. Here is a list of activities that take place in the Center. In which ones do you participate?

- CLASSES - COLLEGE OF DU PAGE

- CLASSES - TAUGHT BY SENIORS (ANTIQUES AND FINE ARTS, CROCHET, TAP DANCING, EXERCISE CLASS, ETC.)

- CARD GROUPS

- CLINIC

- TRIPS

- WOMAN TALK

- GOLF LEAGUE

- GOLDEN TONES

- BINGO

- SPECIAL LECTURES

- REMINISCING

- BIRTHDAY PARTIES AND SPECIAL PARTIES

- SURPLUS FOOD PROGRAM

- LEGAL COUNSELING

- SOCIAL SERVICES

- BUS

Were you involved in any Center activities before you started to volunteer?

15a. (If uses the bus) Would you be able to come to the Center if bus service was not available? Was there any time you would have liked to come to the Center, but couldn't because of lack of transportation?

16. What would you say are the major benefits you get from volunteering? Have they changed over time? Is this what you expected/wanted?

17. Have you increased the number of volunteer activities and/or the amount of time you spend volunteering? Why?

18. Have you done any volunteer work in the Center in the past in which you are not now involved? Why did you quit? Would you consider returning - under what conditions?

19. Have you made any new, good friends through your volunteer work at the Center?

20. Have you ever considered discontinuing your volunteer work at the Center? Why? (If yes) What keeps you here?

21. Is your volunteer work something you look forward to doing?

22. What is your definition of a volunteer?

23. In what ways has your volunteer work been rewarded/recognized?

Do you get free lunches?

Do you attend recognition dinners and lunches for volunteers?

Have you ever been named volunteer of the month?

Would you want financial reimbursement for volunteering?

Do you belong to RSVP?

Is there anything else you would like to receive: more parties, etc.?

24. Would you like to have more responsibility in your volunteer work-deciding what to do and how to do it? Would you like to be a member of one of the committees or boards?

25. Would you prefer volunteering on a committee/being involved in planning and decision-making or providing actual services?

26. Are there any drawbacks to volunteering - things you don't like?

27. Do you attend any of the staff's meetings (for host/hostess, gift shop, telephone worker) on a regular basis?

28. How do you view volunteering? As

   - Work
   - Leisure
   - Escape
   - A way to "put life in order"
   - Anything else

29. How important is your volunteer work to you?

   Very important   Somewhat important   Not very important

   On a scale from 1-10, with 10 being very important, how would you rate it in importance to you?

30. How important is the Center to you?

   Very important   Somewhat important   Not very important

   On a scale from 1-10, with 10 being very important, how would you rate it in importance to you?

31. Do you feel you are helping to run the Center by doing your volunteer work? Do you feel you have an influence on what happens in the Center? Would you like to have more influence/a greater say?

32. If something else came up, would you skip your day to volunteer? What is a legitimate excuse for skipping? Have you ever skipped?

33. Volunteering means different things to different people. What does it mean to you? How does it fit in your life? - just a side thing, a central role....

34. Are some volunteer tasks more popular than others? Which ones? Why?

35. What are the least popular volunteer tasks?

36. How satisfied are you with your volunteer work?

Very satisfied   Fairly satisfied   A little dissat.   Very dissat.

36a. Do you think being a volunteer has changed you in any way? How so?

37. What aspect(s) of your volunteer work do you like the most or find especially satisfying?

38. Is there any aspect of your volunteer work that you don't particularly like? Why?

39. If you could change anything about your work here, what would you change?

40. Do you donate goods to the Center - gifts for bingo, material for the sewing groups, etc.?

41. Do you have a membership in the Center?

42. Do you eat the lunch served here? Do you generally sit with the same people?

43. Do most of your close friends go to the Center or not?
Do your Center friends also volunteer?

44. In your opinion, how do volunteers differ from non-volunteers?

45. Are nutrition volunteers very different from center volunteers?

46. Do you think certain types of people gravitate toward certain types of volunteer activities? Who does what?

47. How important are the volunteers to the Center?

48. Could the Center run without volunteers?

49. Is the Center run by the volunteers or the staff?

50. How does the staff treat volunteers - as equals, etc.?

51. Do you think the volunteers in general feel content with the Center and the volunteer program?

52. How do the other members of the Center treat the volunteers - look up to them, same as everybody else...?

53. In your opinion, who at the Center is an especially good volunteer?

What makes a good volunteer?

What characterizes a bad volunteer?

54. Is there any other volunteer work in the Center you would like to be doing? Why aren't you doing it? / What is keeping you from doing it?

GENERAL BACKGROUND

55. In what year were you born?

56. What is your marital status?

57. How long have you lived in the area? In your present home? Have you moved since you were 60 - from where to where?

58. How many other people live with you?

59. Do you have any children? Any relatives who live within 50 miles? How often do you see them?

60. What was your occupation? Does it have any relation to your volunteer work?

61. Are you working for pay now?

62. How many years did you go to school?

63. Do you belong to any other organizations beside the Center? Any especially for older people?

64. Generally speaking, how would you describe your health at this time? Is it

    Excellent   Good   Fair   Poor

65. Is there any physical condition, illness or health problem that bothers you now?

66. Which of these things are you still healthy enough to do without help?

    -- Heavy work around the house, like shoveling snow or washing walls without help?
    -- Work at a full time job? (for men)
    -- Do the ordinary work around the house yourself? (for women)
    -- Walk half a mile/8 ordinary blocks?
    -- Go to a movie, to church, or a meeting, or to visit friends?
    -- Walk up and down stairs to the second floor?

67. Which of these statements fits you best?

    a) I cannot work (keep house) at all now because of my health.
    b) I have to limit some of the work or other things that I do.
    c) I am not limited in any of my activities.

68. Taking all things together, how would you say things are these days - Would you say you are

    Very happy   Pretty happy   Not too happy

69. Some people adjust particularly well to growing old. Who at the Center has made a good adjustment to aging? What constitutes a good adjustment to aging? What would you consider a poor adjustment to aging?

70. If you could change anything about volunteering or the volunteer program in the Center, what would you change?

Bradburn Scale

Date _____

Taking all things together, how would you say things are these days - would you say you are very happy, pretty happy, or not too happy?

Not too ___   Pretty ___   Very ___   Don't know ___

I am going to show you a card which describes some of the ways people feel at different times and you tell me whether you felt like that during the past week. **(HAND RESPONDENT THE CARD)**

How about the first: During the past week did you ever feel _____? **(REPEAT FOR EACH ITEM BELOW)**

Feelings	NO	ONCE	SEVERAL TIMES	OFTEN
A. On top of the world				
B. Very lonely or remote from other people				
C. Angry at something that usually wouldn't bother you				
D. That you couldn't do something because you just couldn't get going				
E. Particularly excited or interested in something				
F. Depressed or very unhappy				
G. Pleased about having accomplished something				
H. Bored				
I. Proud because someone complimented you on something you had done				
J. So restless you couldn't sit still long or lie comfortably in bed				

If "Yes" ask: How often did you feel that way?

Feelings	NO	ONCE	SEVERAL TIMES	OFTEN

If "Yes" ask: How often did you feel that way?

Feelings	NO	ONCE	SEVERAL TIMES	OFTEN
K. That you had more things to do than you could get done; that you just felt overwhelmed with all the things you have to think about or do later				
L. Vaguely uneasy about something without knowing why				

Appendix C

NON-VOLUNTEER INTERVIEW

1. How long have you been coming to the Center? How often do you come?

2. Are you doing any volunteer work at the Center? Have you ever volunteered at the Center? When?

    2a. If you volunteered in the past, what were your reasons for volunteering? What events, if any, prompted you to volunteer?

    Were your reasons for volunteering fulfilled?

    What was it like when you first volunteered? Did volunteering at the Center seem very different from the work you did before (both occupational and volunteer)? In what ways Any similarities? Any surprises?

3. Have you ever volunteered any place else in the past?

4. Has any of the staff ever approached you about volunteering? Describe how you felt - surprised, honored, expected it, put upon, etc.?

5. Have you ever considered volunteering any place else besides the Center?

6. Do any of your friends volunteer at the Center? Do you know many of the other volunteers?

7. Here is a list of activities that take place in the Center. In which ones do you participate?

- Classes - College of DuPage

- Classes - Taught by Seniors (Antiques and Fine Arts, Crochet, Tap Dancing, Exercise Class, etc.)

- Card Groups

- Clinic

- Trips

- Woman Talk

- Golf League

- Golden Tones

- Bingo

- Special Lectures

- Reminiscing

- Birthday Parties and Special Parties

- Surplus Food Program

- Legal Counseling

- Social Services

- Bus

7a. (If uses the bus) Would you be able to come to
     the Center if bus service was not available?
     Was there any time you would have liked to come
     to the Center, but couldn't because of lack of
     transportation?

8. What would you say are the major benefits you get from coming to
    the Center? Have they changed over time? Is this what you
    expected/wanted?

9. Have you made any new, **good** friends at the Center?

10. Would you want to do any volunteer work at the Center now?

What would you want to do?

Why aren't you doing that now?

If someone asked you to do some volunteer work, would you?

Do you think you will volunteer in the future? Under what conditions?

11. What is your definition of a volunteer?

12. What rewards, if any, would prompt you to volunteer?

   -Getting free lunches?

   -Recognition dinners and lunches for volunteers?

   -Being named volunteer of the month?

   -Getting financial reimbursement for volunteering?

   -Is there anything else you would like to receive: more
     parties, etc.?

   -Would you like to have more responsibility in the Center -
     deciding what to do and how to do it? Would you like to
     be a member of one of the committees or boards?

13. What are the drawbacks to volunteering - things you don't like?

14. How important is the Center to you?

   Very important   Somewhat important   Not very important

   On a scale from 1-10, with 10 being very important, how would
   you rate it in importance to you?

15. Do you feel you are helping to run the Center? Do you feel you have
    an influence on what happens in the Center? Would you like to
    have more influence/a greater say?

16. Are some volunteer tasks more popular than others? Which ones?
    Why?

17. What are the least popular volunteer tasks?

18. Do you think coming to the Center has changed you in any way? How so?

19. What about the Center do you like the most or find especially satisfying?

20. Is there any aspect of the Center that you don't particularly like? Why?

21. If you could change anything about the Center, what would you change?

22. Do you donate goods to the Center - gifts for bingo, material for the sewing groups, etc.?

23. Do you have a membership in the Center?

24. Do you eat the lunch served here? Do you generally sit with the same people?

25. Do most of your close friends go to the Center or not? Do your Center friends also volunteer?

26. In your opinion, how do volunteers differ from non-volunteers?

27. Do you think certain types of people gravitate toward certain types of volunteer activities?

28. How important are the volunteers to the Center?

29. Could the Center run without volunteers?

30. Is the Center run by the volunteers or the staff?

31. How does the staff treat volunteers - as equals, etc.?

32. How do the other members of the Center treat the volunteers - look up to them, same as everybody else...?

33. In your opinion, who at the Center is an especially good volunteer?

What makes a good volunteer?

What characterizes a bad volunteer?

GENERAL BACKGROUND

34. In what year were you born?

35. What is your martial status?

36. How long have you lived in the area? In your present home? Have you moved since you were 60 - from where to where?

37. How many other people live with you?

38. Do you have any children? Any relatives who live within 50 miles? How often do you see them?

39. What was your occupation?

40. Are you working for pay now?

41. How many years did you go to school?

42. Do you belong to any other organizations beside the Center? Any especially for older people?

43. Generally speaking, how would you describe your health at this time? Is it

Excellent   Good   Fair   Poor

44. Is there any physical condition, illness or health problem that bothers you now?

45. Which of these things are you still healthy enough to do without help?

   -- Heavy work around the house, like shoveling snow or washing walls without help?

-- Work at a full time job? (for men)

-- Do the ordinary work around the house yourself? (for women)

-- Walk half a mile/8 ordinary blocks?

-- Go to a movie, to church, or a meeting, or to visit friends?

-- Walk up and down stairs to the second floor?

46. Which of these statements fits you best?

   a) I cannot work (keep house) at all now because of my health.

   b) I have to limit some of the work or other things that I do.

   c) I am not limited in any of my activities.

47. Taking all things together, how would you say things are these days -
    Would you say are

   Very Happy   **Pretty Happy**   **Not Too Happy**

48. Some people adjust particularly well to growing old. Who at the
    Center has made a good adjustment to aging? What constitutes a good
    adjustment to aging? What would you consider a poor adjustment to
    aging?

PLEASE NOTE:

Copyrighted materials in this document have
not been filmed at the request of the author.
They are available for consultation, however,
in the author's university library.

These consist of pages:

143-144,   Bradburn Scale

U·M·I

Bradburn Scale

Date _____

Taking all things together, how would you say things are these days - would you say you are very happy, pretty happy, or not too happy?

Not too ___   Pretty ___   Very ___   Don't know ___

I am going to show you a card which describes some of the ways people feel at different times and you tell me whether you felt like that during the past week. **(HAND RESPONDENT THE CARD)**

How about the first: During the past week did you ever feel _____?   **(REPEAT FOR EACH ITEM BELOW)**

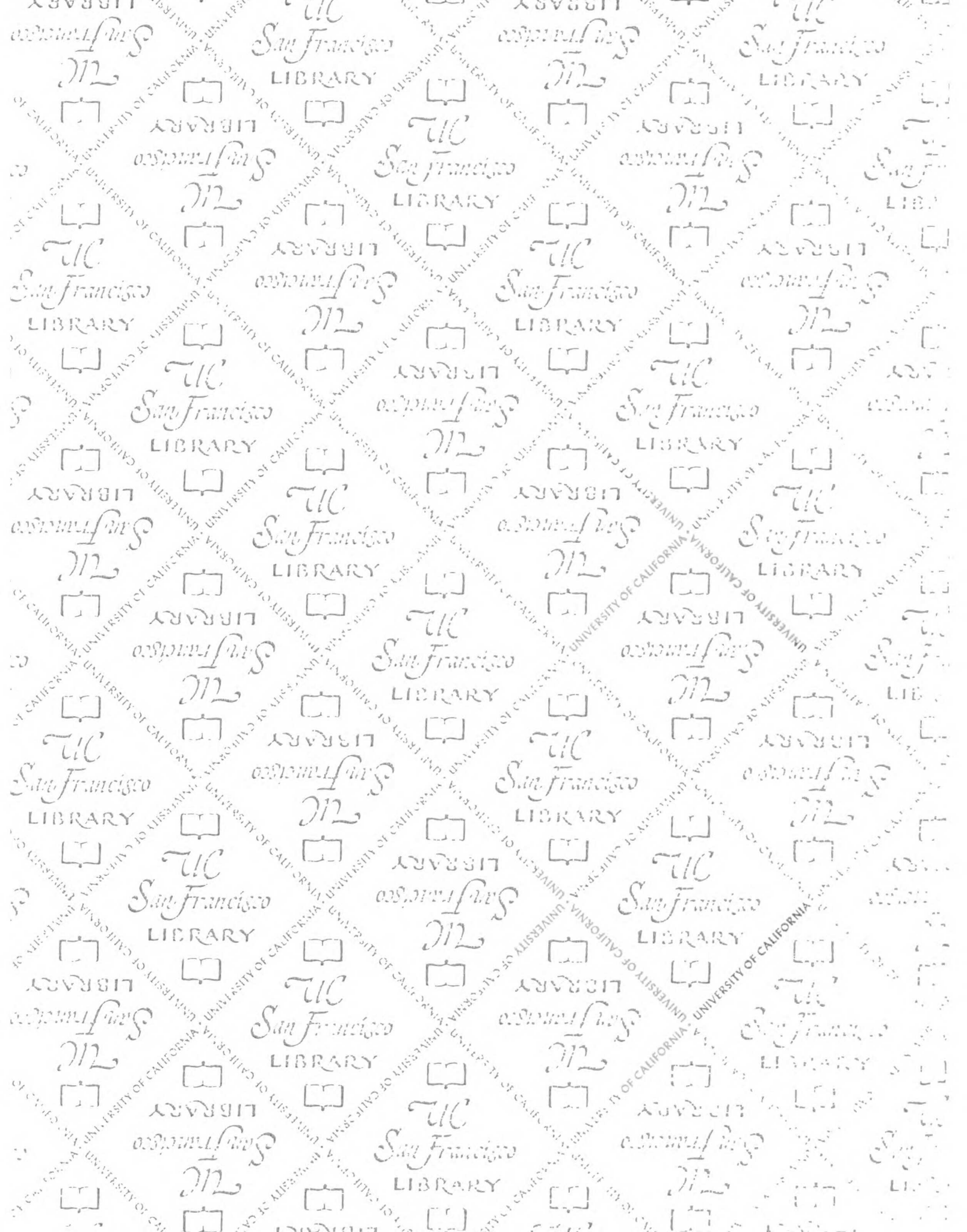| Feelings		If "Yes" ask: How often did you feel that way?		
	NO	ONCE	SEVERAL TIMES	OFTEN
A. On top of the world				
B. Very lonely or remote from other people				
C. Angry at something that usually wouldn't bother you				
D. That you couldn't do something because you just couldn't get going				
E. Particularly excited or interested in something				
F. Depressed or very unhappy				
G. Pleased about having accomplished something				
H. Bored				
I. Proud because someone complimented you on something you had done				
J. So restless you couldn't sit still long or lie comfortably in bed				

Feelings	NO	ONCE	SEVERAL TIMES	OFTEN
			If "Yes" ask: How often did you feel that way?	
K. That you had more things to do than you could get done; that you just felt overwhelmed with all the things you have to think about or do later				
L. Vaguely uneasy about something without knowing why				