Assessment of Attitudes Towards the Elderly Using the Senior Apperception Technique and the Aging Semantic Differential

Richard D. Yao

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Assessment of Attitudes Towards the Elderly
Using the Senior Apperception Technique

and the Aging Semantic Differential

(TITLE)

BY

Richard D. Yao

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Assessment of Attitudes Towards the Elderly

Using the Senior Apperception Technique

and the Aging Semantic Differential

Richard D. Yao

Eastern Illinois University
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Abstract

Responses to the Senior Apperception Technique, SAT, a projective technique featuring drawings of elderly people, have been little investigated. In this study a subset of SAT cards were administered to college undergraduates in a group setting and responses were scored on the dimensions of general emotional tone and outcome. The Aging Semantic Differential was also administered. Two hypotheses were generated based on the literature: 1) that males would tend to have a more negative attitude towards the elderly than do females and 2) responses to the SAT would generally have a negative emotional tone as well as negative outcomes. Neither hypotheses was supported by the analyses. Although tone scores were not more likely to be negative than positive, tone scores were significantly more negative than outcomes. The limitations of the study as well as clinical and educational implications are discussed.
Acknowledgements

I would like to thank Dr. William T. Bailey for serving as my thesis advisor. Dr. Bailey’s time, effort, and input are greatly appreciated and will not be forgotten. I would also like to thank Dr. William Kirk and Dr. Christine McCormick for serving on my thesis committee. I would like to thank Dr. Kirk for his guidance and support throughout my graduate school experience. Finally, I would like to express thanks to my family for all of their love and support throughout the years.
Assessment of Attitudes Towards the Elderly Using the Senior Apperception Technique and the Aging Semantic Differential

During this century, there has been a rapid increase in the number of elderly people (65 +) in the United States; in 1890, there were only 2.4 million people in this age group, by 2010, that number is expected to skyrocket to 39.2 million (U.S. Bureau of the Census, 1984b). As this number increases, so does concern with the problems of retirement and of providing income security, medical and long-term care to this group of people. Hence, it is important to examine attitudes towards the elderly because these attitudes directly affect the way they are treated and policies that concern the growing number of elderly in this country.

Butler (1969) coined the term "ageism", which is defined as "any prejudice or discrimination against or in favor of an age group" (p. 243). Negative ageism is present in the United States and is reflected in slang terms for the elderly such as "geezer", "old maid", "hag", and "over the hill". An example of such negative ageism is that many younger people believe that
most aged are senile and that mental illness is common, inevitable, and untreatable (Palmore, 1990). Such stereotyping can result in negative consequences for the elderly. It might, for example, lead to a lack of prevention and treatment of mental illness that is in fact treatable. The majority of elderly are without impairment and only 2% of people 65 and over are institutionalized with a primary diagnosis of a psychiatric illness (Palmore, 1990).

One of the most serious forms of discrimination against elders is in the area of employment, from hiring to promotions. Despite federal legislation against discrimination in employment because of age, 6 out of 10 employers believe older workers today are discriminated against in the employment marketplace (U.S. Senate Special Committee on Aging, 1986). Losses in general ability are not sudden but are gradual and these losses affect some people only at extreme ages. Many losses are reversible with proper treatment. Ignoring the productive working abilities of millions of older people will result in economic losses due to the declining number of youth entering the job market (Palmore, 1990).
The Senior Apperception Technique (Bellak, 1975) is an extension of the Thematic Apperception Test and is designed for use with the elderly to elicit responses which identify concerns, problems, and stereotypes common to the elderly. Although designed as an assessment technique (not test) for use with the elderly, the stimuli are amenable to usage with younger people. Limited research has shown that primarily negative stereotypes are attached to old age by younger people (Leland, 1977). The Senior Apperception Technique (SAT) is derived from a psychodynamic theoretical background and can provide data allowing an analysis of fantasy, of needs, of coping, of psychodynamic conflicts, and of styles of adapting and defenses (Stock & Kantner, 1980). There are no standard protocols for scoring and analyzing responses to the SAT. The majority of research regarding the use of apperception techniques with the elderly deals with the scoring and interpretation of the Thematic Apperception Technique (TAT).

Content and thematic analyses of responses to any projective test are subjective. There have been several studies dealing with thematic analysis on the TAT. Clark
(1944) examined certain themes elicited by the TAT in a group setting. In doing the thematic analysis on the responses to the cards of the TAT, Clark broke down the responses into five main categories: needs, effect of environment on the organism, reaction of the organism to the environment, adequacy of the principal character as shown by the general themes and dominant tones of the stories, and the ending. Each of the five divisions were further broken down into more specific categories (i.e., frustrating, helpful, and neutral). Overall, Clark was investigating whether reactions to the TAT cards were favorable or unfavorable. Clark found that some TAT cards elicited more unfavorable themes than others.

There have been several other studies dealing with a thematic analysis on the TAT. Guttman (1975) developed a scoring system which examined different methods of attempting to master one's environment. Rosen and Neugarten (1964) measured four TAT-like pictures thought to measure components of the elderly's energy and connectedness to the environment. They broke responses down into: introducing additional characters to the story, including conflict to the
story, characterization of figures having an active level of energy, and intensity of affect. Peck and Berkowitz (1964) combined interview and TAT data to make judgments about seven dimensions which ranged from cathctic flexibility to sexual integration. Shukin and Neugarten (1964) scored the TAT responses of 103 respondents for three variables: concern with causality, future versus past orientation, and optimism.

Eron (1951) attempted to design a "normative, statistical approach" (p. 55) to scoring the TAT. The contents of stories were rated for emotional tone (very sad to very happy) and outcome (complete failure to complete success); themes were rated using a check list of more than 100 themes classified as interpersonal, intrapersonal, and impersonal; disequilibrium (tension) and equilibrium. These ratings are then compared with norms established with adult males. Eron developed a general rating scale for emotional tone of the stories, which ranged from a score of -2 (complete failure), to +2 (justifiably high aspiration). He developed a similar scale for the outcomes, which ranged from -2 (complete failure, submission to fate) to +2 (great success,
discovery, and/or happiness). He also developed a key for the
themes of disequilibrium, equilibrium, and level of
interpretation. Finally, Eron developed a key for the
comparison with the norms, in which he assigned a 0 for a
response characteristic of a story indicated by more than 5%
of the standardization population, or a check mark for a
response characteristic of a story indicated by less than 5% of
the standardization population. This is an example of how to
score the TAT using standardization norms.

Thematic test analysis with the elderly is widely used in
personality description and psychological assessment. There
has been some research concerning performances of
cognitively impaired individuals on thematic tasks when
compared with other diagnostic groups. Johnson (1994),
compared performances on the TAT by a group of hospitalized
patients diagnosed with dementia of the Alzheimer's type with
a group of nondemented psychiatric patients. The TAT
protocols were scored for the following variables: total
number of words across cards, mean number of words across
cards, number of times the picture was described, loss of
instructional set, and the number of times a card was refused or the individual could not come up with a story. Johnson found that individuals with Alzheimer's Disease have difficulties with the narrative task required by the TAT compared to nondemented psychiatric inpatients; these difficulties may be due to the declining ability to generate, organize, and sequence verbal ideas. Johnson also states that these findings may alert a clinician to the possibility of some cognitive decline; but more research needs to be done in this area.

Garrone (1990) used the TAT to examine the possible role of object relations development in the etiology of late-onset paranoid psychosis in older women. Object relations are interpersonal relationships that shape an individual's current interactions with people, both in reality and fantasy. Hence, people tend to search for relationships that match the patterns established by their earlier experiences. Three groups of 17 women were subjects, including: paraphrenic inpatients, depressed outpatients, and normal controls. Object relations were assessed using the Rorschach and the TAT. Garrone
hypothesized that the three groups would differ in various aspects of object relations. Statistical analysis did not support the hypothesized differences; however, examination of the Rorschach protocols indicated that the normal sample showed a greater capacity for expression of aggressive themes in their projective themes, while the paraphrenic group had very few aggressive themes. This may suggest that the capacity to express aggressive imagery in fantasy is in some way related to a lesser degree of psychopathology in older women.

The issue of loneliness in old age was examined by Levin (1992) who investigated the relationships among loneliness, social interaction, and ego functioning using the TAT in a group of older widowed women aged 60 and over. It was hypothesized that widows who report either very low or very high levels of loneliness would have more passive coping styles than those widows who report an average amount of loneliness. It was also hypothesized that widows with active coping abilities and social interaction are capable of alleviating feelings of loneliness. Coping ability and object
relations were assessed by the TAT. Although the statistical analysis did not support these hypotheses, the researcher did find some interesting trends. A qualitative analysis of the data showed that there were some major differences between women who reported the highest levels of loneliness, those who reported the lowest, and those who reported the average amount. Levin also discussed parental identification in early age in relation to loneliness in widowhood. Levin hypothesized that early identification with the father may help a woman defend against feelings of loneliness in old age.

Another important issue when dealing with the elderly is the longevity and survival in old age. Lutz (1988) examined the potential commonalities of women aged 80 and over in life history and current adaptation, which may be associated with survival in a stable, nonclinical population. Subjects were 30 caucasian women, 15 living in the community and 15 in nursing homes. The subjects were administered the sentence completion inventory, the Rosenberg Self-Esteem Scale, and the TAT. The TAT protocols were dominated by "active mastery" responses, which is compatible with how the women
still viewed themselves in the role of caretakers; the role of caretaker was a commonality for both groups of women. Both groups maintained high levels of self-esteem, were inner-directed, and able to use their environment to help create a feeling of uniqueness.

Although the TAT is more widely used, the SAT can also be helpful in assessing personality. There have been few studies investigating the themes elicited by the SAT. Foote and Kahn (1979) examined the discriminative effectiveness of the SAT with impaired and non-impaired elderly persons. The study involved 54 individuals living in two separate nursing homes; half were diagnosed as psychologically impaired by a psychiatrist; the other half had not been diagnosed as impaired, either by a psychiatrist or on the basis of previous mental hospitalization. In evaluating responses, Foote and Kahn used three scoring categories similar to Henry (1965) in analyzing each story; these were: mood, interpersonal relationships, and impairment. Each of the three dimensions was broken down into six to nine subcategories, which were rated on a scale from 0 to 5, or 0 to 10, depending on the
category; the total score of the subcategories was the score for each of the dimensions. Further, the sum of the three dimensions was also calculated. The results of this research indicate that the SAT is an effective and useful screening test for emotional and cognitive impairment in the elderly.

Stock and Kantner (1980) examined themes elicited by the SAT in institutionalized older adults. The SAT was administered to 40 older adults of both sexes ranging in age from 61 to 97 years to investigate themes elicited by the SAT. Some of the dominant themes elicited by the SAT were: dominance, financial concerns, dependency, nurturance, physical limitations, affiliation, need for achievement, and loneliness. Stock found that themes dealing with affiliation and physical limitations along with themes of dependency were the most predominant themes elicited from an institutionalized older adult sample.

Bellak (1975) described four unreported pilot studies by students, two of which used young adult participants. Altobello (as cited in Bellak, 1975) used the SAT to examine the hypothesis that "elderly people convey more experience of
despair, death, and a feeling of struggling than a control group of students" (p. 286). With the elderly subjects, Altobello used three TAT and 20 SAT cards, some of which have been modified or dropped from the present series. The younger subjects were given the same set of SAT cards but not the TAT cards. Each story was examined with regards to kinds of activity, degree of inter-personal involvement, themes of despair, outcome, and word count. Each category was also examined with regards to age and sex differences. The hypothesis that elderly people would tend to respond with images of despair and death was not supported. Most of the responses to the SAT dealt with a desire for connectedness and activity in the elderly. Altobello concluded that the responses indicate that aging need not be viewed as a depressing and lonely part of life. Overall students did not differ significantly from the elderly. The only notable differences were between the two sexes; however, Altobello did not specifically examine gender differences within age groups.

Garland (as cited in Bellak, 1975) used the SAT to examine the degree and kinds of dependency that may
accompany old age. It was hypothesized that "there would be a significant increase in overall dependency among the aged" (p. 288). Garland administered 10 SAT stimulus cards to two groups of 15 white women. One group ranged in age from 65 to 81, the other from 20 to 25 years. Responses were categorized into different themes of dependency. There were no significant differences between the two age groups on dependency themes. An interesting finding was that younger participants more frequently mentioned themes of rejection and the kind of rejection in their responses was more general than that of older women.

In India, Rajagopalan and Jaiprakasin (1990) also examined intergenerational attitudes using the SAT. They administered the SAT to groups of "younger" (36 to 40 years) and "older" (56 to 70 years) adults. They used an adaptation of Neugarten and Guttmann's (1958) procedures to score responses. Scoring involved first differentiating each figure in the story as an old man, old woman, young man, and young woman. The descriptions of old man were broken down into four categories: authoritative-dominant, altruistic authority,
formal authority, and passive cerebral. Descriptions of old woman were scored as dependent, submissive-nurturant, controlled by old man, limited by children, good mother, and hostile-self assertive. The researchers did a quantitative analysis of the results as well as a frequency distribution of each descriptive category for the different age figures. They concluded that young adults view older figures as "benign, benevolent, and nurturant" (p. 18). This is an interesting finding, as this description of older figures was not stereotypically negative in nature.

Schroth (1978) investigated sex and generational differences in SAT projections using the scoring technique derived by Eron and colleagues (1951). He used a 5-point rating scale for emotional tone of the stories; the scores ranged from very sad (+1) to very happy (+5), with the category of +3 representing the neutral point between positive and negative feelings. He also used a 5-point rating scale for outcomes, in which the scores ranged from very negative (+1) to very positive (+5), with the +3 category being the neutral point. Schroth found that the majority of stories told by
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subjects, both younger and older, contained themes with a sad emotional tone. However, it could be seen that many individuals gave happy conclusions to unhappy stories and this occurred among all groups of subjects. Group differences were found for age and sex; younger (18-21 years) and male subjects tended to have sadder themes than older (60+ years) and female respondents; the story outcomes of older and female respondents were happier in general. This finding may suggest that young adults view old age as a depressing time of life. The results of this study may be viewed as suggesting that people's age and sex affect their perception of later life, with older respondents and women generally being more optimistic (Schroth, 1978). Schroth also concluded that the SAT "appears to be a useful method of measuring the content of feelings and attitudes of subjects toward old age, which vary by chronological age and sex" (pp. 1303-1304).

The purpose of this study was to assess young adults' attitudes towards the elderly using the Senior Apperception Technique (Bellak, 1973). Administering the SAT to a college-aged population should elicit some themes which indicate
negative attitudes towards old age. The investigation assessed general emotional tone and outcomes of responses to a subset of cards of the SAT; as such, it is a partial replication of Schroth (1978). The Aging Semantic Differential (Rosencranz & McNevin, 1969), which assesses attitudes and knowledge of the elderly, was administered as a second, corroborative measure.

Hypotheses

Based on the literature, two hypotheses were generated. First, it was expected that there would be significant gender differences in attitudes towards the elderly such that males would tend to have a more negative attitude towards the elderly than do females. Schroth (1978) investigated sex and generational differences in SAT projections and found that the projections of elderly and female respondents on the SAT were more positive than those of younger and male subjects. This should be as reflected in responses to the SAT as well as the Aging Semantic Differential. Leland (1977) found that primarily negative stereotypes are attached to old age by younger people. It was therefore hypothesized that the
majority of responses to the SAT would generally have a negative emotional tone as well as negative outcomes.

Method

Participants. Fifty-two students enrolled in undergraduate psychology courses at Eastern Illinois University participated in the study. The mean age of participants was 22.9; 83% were female.

Procedure. The Aging Semantic Differential and the SAT were administered in a group setting consisting of about fifteen participants at a time. The Aging Semantic Differential is a 32-item instrument. Responses to word pairings are made using 7-point scales which are scored +3 to -3 with 0 as the midpoint (i.e., neutral). It was administered first, with no time limit. Detailed instructions given to the participants before showing the stimulus cards are shown in Appendix A. The SAT includes 16 cards. The stimuli used here, cards 1, 4, 7, 13, and 15, were the same subset of stimulus cards used by Schroth (1978). These cards were chosen because they are considered by the developer of the test to be ambiguous/neutral enough to lend themselves to either
positive or negative emotional tones. Each stimulus card was shown with the use of an overhead projector using the method developed by Clark (1944) for administering the TAT in group settings. Each participant was able to see each stimulus card clearly with no interference. Participants wrote their responses on the paper provided. The Aging Semantic Differential and the SAT were administered during the same testing session. In addition to the attitude measures, participants' age and sex were assessed.

Analyses of content was performed on the responses to the stimulus cards using Eron's (1951) scoring scales of general emotional tone and outcomes. Each response was rated on the dimension of overall emotional tone of the story using a 5-point rating scale, ranging from a score of -2 (very negative emotional tone) to +2 (very positive emotional tone), with 0 being the neutral point. Each response was also rated on the dimension of outcomes of each story using the same scale. The author scored each response without knowledge of the subject's gender. Responses were scored separately by a Ph.D. geropsychologist. Inter-rater reliability was computed for
each stimulus card on the dimensions of emotional tone and outcome. The average correlation for tone was .76 and .89 for outcome. Table 1 presents the inter-rater reliability correlation coefficients for each stimulus card; each is significant at $p < .001$. The author's scores were used in the analyses reported here.

Insert Table 1 About Here

Results

No significant gender differences were found on the summary scores for emotional tone and outcome of responses to the SAT cards or scores on the Aging Semantic Differential. In regards to emotional tone of responses to the SAT, responses were not more likely to be negative in tone, but, outcome responses were more likely to be optimistic than pessimistic. Scores on the ASD indicated a relatively neutral attitude towards the elderly.

The first hypothesis, which anticipated males' being more negative in attitude, was not supported. One-way
Table 1

**Inter-rater Reliability Correlation Coefficients**

<table>
<thead>
<tr>
<th>Picture</th>
<th>Tone</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Picture 1</td>
<td>.7274</td>
<td>.9017</td>
</tr>
<tr>
<td>Picture 2</td>
<td>.7573</td>
<td>.9185</td>
</tr>
<tr>
<td>Picture 3</td>
<td>.8360</td>
<td>.9215</td>
</tr>
<tr>
<td>Picture 4</td>
<td>.7996</td>
<td>.8849</td>
</tr>
<tr>
<td>Picture 5</td>
<td>.7018</td>
<td>.7990</td>
</tr>
</tbody>
</table>
ANOVAs were used to compare males' and females' scores on emotional tone and outcomes on the SAT and on the ASD; there were no significant gender effects, $p > .05$.

The second hypothesis suggested that responses to the SAT would be negative in both tone and outcome; it was not supported. Mean scores for each stimulus card on emotional tone and outcome are shown in Table 2. Scores for emotional tone and outcome were summed and categorized. Summary scores on emotional tone less than or equal to $-1.00$ were categorized as unhappy tones; scores greater than or equal to $1.00$ were categorized as happy tones; scores of zero were categorized as neutral. Summary scores for outcomes less than or equal to $-1.00$ were categorized as pessimistic; scores greater than or equal to $1.00$ were categorized as optimistic; scores of zero were categorized as neutral. Neutral (i.e., 0) scores were omitted from this analysis which focuses on positive and negative responses only. Differences in proportions of positive and negative tones were tested using the Binomial test with the test proportion set at .500. The same procedure was used to compare positive and negative
outcomes. As shown in Table 3, 48.78% of tones were negative, as were 19.05% of outcomes. Responses were not more likely to be negative in tone, \( p = 1.00 \); but, outcomes were more likely to be optimistic than pessimistic, \( p = .000 \).

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Insert Tables 2 and 3 About Here

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Although tone scores were not more likely to be negative than positive, tone scores were more negative than outcomes. Tone and outcome were compared using a pairwise t-test. There were 49 participants for whom both measures were available; 3 participants gave no outcomes in their responses. Tone was significantly more negative than outcome, \( t(48) = -5.97, p < .05 \).

Scores on the ASD potentially range from +96 to -96. The scores obtained here ranged from -20 to 60. The mean scale score, 18.69 (SD = 21.51), indicates that the responses to the average item was +0.58 (i.e., 18.69/32) which indicates a positive, though relatively neutral, attitude towards the elderly.
### Table 2

*Means and Standard Deviations for Stimulus Cards on Emotional Tone and Outcome*

<table>
<thead>
<tr>
<th></th>
<th>Tone</th>
<th></th>
<th>Outcome</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Picture 1</td>
<td>-.827</td>
<td>.734</td>
<td>.333</td>
<td>1.087</td>
</tr>
<tr>
<td>Picture 2</td>
<td>.135</td>
<td>.929</td>
<td>.049</td>
<td>1.048</td>
</tr>
<tr>
<td>Picture 3</td>
<td>-.596</td>
<td>.995</td>
<td>.100</td>
<td>1.128</td>
</tr>
<tr>
<td>Picture 4</td>
<td>.519</td>
<td>.980</td>
<td>.684</td>
<td>.904</td>
</tr>
<tr>
<td>Picture 5</td>
<td>.731</td>
<td>.972</td>
<td>1.000</td>
<td>.913</td>
</tr>
<tr>
<td>Summary</td>
<td>-.038</td>
<td>2.473</td>
<td>1.714</td>
<td>2.441</td>
</tr>
</tbody>
</table>
Table 3

**Frequencies and Proportions of Positive and Negative Scores***

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Tone</td>
<td>21 (.5122)</td>
<td>20 (.4878)</td>
</tr>
<tr>
<td>Outcome</td>
<td>34 (.8095)</td>
<td>8 (.1905)</td>
</tr>
</tbody>
</table>

*On emotional tone n = 11 were neutral; for outcome it was n = 7.*
Discussion

Neither of the hypotheses were supported. Males were not more likely to have a more negative attitude towards the elderly than females and responses to the SAT were not generally negative in tone and outcome. In fact, outcomes tended to be more optimistic than pessimistic. These results may indicate that young adults do not view the elderly in a negative light and that gender does not play a major role in their attitudes towards the elderly.

The findings differ from those of Schroth (1978), who found that the majority of responses to the SAT contained sad themes; this might be due to several factors. First, it may well be that attitudes have changed in the 17 years which intervened between the two studies, Schroth in 1978 versus 1995 in the present study. Three methodological considerations must be considered. One involves the procedure for administering the SAT. Schroth apparently administered it to his participants individually -- no evidence to the contrary; whereas, here it was administered in a group setting. However, Clark (1944) compared individual and group
administrations empirically in a counter-balanced design and concluded that "the two methods produce quite similar responses" (p. 42). Hence, the different manners of presentation should have minimal effect, if any, on the different outcomes in the two studies. Another factor to consider is the mean age of participants; average age of participants in Schroth was 19.8 years and average age in this study was 22.9 years. Further, participants in this study were enrolled in upper-division psychology classes; whereas, Schroth used introduction to psychology students. More neutral responses in this study may be due to this difference in average age, as older or more educated participants may be less vulnerable to negative ageism and stereotypical thinking about the elderly; additionally, college education, per se, has a liberalizing effect on many attitudes.

No gender differences were found on responses to the SAT, which also differs from Schroth (1978). The mean composite scores for males and females on emotional tone and outcome in Schroth's study were compared with those measures obtained here using the 95% confidence interval.
Schroth coded tone and outcome using a scale of +1 to +5. In this study they were coded +2 to -2; therefore, his scores were transformed to the same scale for the comparisons. Males were more positive in tone and more optimistic in outcome when compared to Schroth. The mean for males on emotional tone in Schroth was -5.93 which falls below the C.I. (95%) for males here, C.I. (95%) = -2.62 to 1.73. The mean for outcome in Schroth was -1.79 which is also below the C.I. (95%) for males here, C.I. (95%) = -1.51 to 5.26. Females were also more positive in tone when compared to Schroth, but outcome responses from females in both studies did not differ statistically. The mean for females on emotional tone in Schroth was -1.81 which is below the C.I. (95%) for females here, C.I. (95%) = -0.70 to 0.79. For outcome, the C.I. (95%) for females here was 1.03 to 2.34, which includes the mean for females in Schroth's study, 1.94. It may be that differences from Schroth are due to the highly subjective nature of projective tests. Alternatively, they might be due to the age/educational differences noted above.

Emotional tone was found to be significantly more
negative than outcome, which is similar to the findings of Schroth. Outcome responses from this study tended to be optimistic, which may be due to the nature of projective tests. Projective testing requires use of the imagination when developing responses; a fantasy is being projected. Therefore, it may be logical to give a negative or neutral response a happier ending, as noted by Eron (1951).

Our findings indicate that young adults may not view the elderly in a negative light, which is similar to the findings of Altobello (as cited in Bellak, 1975). She found that responses to the SAT from young adults did not differ significantly from the responses of elderly participants on several measures and that responses to the SAT contained aspects of hope as well as themes which deal with activity in the elderly, which indicate that aging may not be viewed as "depressing, unhopeful, and isolating" (p. 288).

Limitations
The main limitation of this study was the low number of males who participated which resulted in relatively low power during statistical analysis of gender differences. Clearly, one
way to improve on this is to increase the number of male participants in the study. Comparison with Schroth would be furthered by including subjects from introductory psychology classes.

Implications

It appears that the SAT is a useful instrument in assessing attitudes towards the elderly with clinical and educational implications. In a clinical setting, the SAT might be helpful in gaining insight into familial issues dealing with elderly members, such as a family's debating whether or not to institutionalize an elderly parent. Examining the projections of family members may give the clinician a better understanding of how members feel about the elderly as well as their feelings about institutionalization. Clinicians can be flexible with their use of the SAT, as they can use specific cards or subset of cards depending on the familial issue; some pictures may be more suited for a particular issue than others. This flexibility is a strength of the SAT, as clinicians can save time by using only relevant cards with clients.

Use of the SAT in educational settings such as courses
that deal with the elderly may be useful as well. Students can
gain awareness regarding the kinds of attitudes they have
towards the elderly. With the combination of this assessment
and the curriculum, students will be better informed, and thus,
less vulnerable to negative ageism and stereotypical thinking
about the elderly.

Suggestions for Future Research

Suggestions for future research include using all the
stimulus cards of the SAT to examine attitudes towards the
elderly. Another suggestion is to use different subsets of
stimulus cards to assess attitudes. It would be of interest to
then compare responses from both subsets. Future research
might also include examining cultural differences in attitudes
towards the elderly using the SAT as well as possible
differences between psychology majors and students with
other majors (e.g., Business).
References


Garrone, L. (1990). Object relations as reflected in psychological testing of older women: paraphrenic inpatients, depressed outpatients, and normal controls. Dissertation Abstracts International, 50(08), 3694B.


Footnotes

1Dr. William T. Bailey, Psychology Department, Eastern Illinois University.
Appendix A

Instructions

This is an opportunity for free imagination.

Some pictures will be projected on the screen and you are to make up a story concerning each picture. Write your ideas about the pictures on the paper provided at your place.

The picture will be shown for 1/2 minute, the lights will then be raised to provide enough light so that you can write. The picture will remain on the screen another 3 minutes. At the end of 3 and 1/2 minutes another picture will be shown and the same procedure followed. A separate sheet of paper is provided for each picture with the picture number at the top. If you need more space for a story, continue your story on the back of that page.

INCLUDE THE FOLLOWING PARTS IN EACH STORY
1. What has led up to the situation shown in the picture.
2. Describe what is happening at the moment and what the characters are feeling and thinking.
3. State what the outcome will be.

There is no right nor wrong stories, use your imagination freely and make up anything you please.