

Cumulative Disadvantage and Elderly Need for Services: A Phenomenological Inquiry

Melissa McGoey

*Community Psychology and Social Change
Pennsylvania State University*

Marianne Goodfellow

*Assistant Professor of Sociology,
Lebanon Valley College*

ABSTRACT

The purpose of this study was to examine disadvantage among rural elderly. Specifically, the intent of this phenomenological study was to learn how elders in Schuylkill County--a nonmetropolitan county in Pennsylvania with a history of economic dislocation--make meaning of disadvantage and then identify factors that contribute to disadvantage and the need for services in the county. Both criterion and purposive sampling were used to recruit nine White Schuylkill County elders over 65 years of age. Five women and four men were interviewed to explore the meaning and lived experiences of disadvantage. Findings suggested that historical processes and cumulative factors were associated with the elders' present meaning of disadvantage. Feelings of isolation and loneliness were critical elements among participant experiences. Unanticipated findings showed a strong sense of resiliency among a few participants and several of the elders did not want to be considered "disadvantaged." Service need, gender differences and implications for service providers are explored.

INTRODUCTION

As Keith (1994) explains, "most lacking in research on old age and aging are the points of view of the diverse individuals who are aging or old. Misleading generalizations about old people or old age derive directly from this lack of information about meaning. For research related to service delivery or policy analysis, data about the assumptions, values, and wishes of intended recipients are essential" (pg.105). Especially significant, given the economic diversity of the aging population, is to understand the meaning of the lived experience of cumulative disadvantage for the rural elderly and how this contributes to service need.

Cumulative disadvantage may be defined as the process whereby individuals carry forward those disadvantages of early life through sequential life stages, often resulting in later life poverty or poor health (Morgan & Kunkel, 2001). The theory points to "the ways in which initial comparative advantage of trained capacity, structural location, and available resources make for successive increments of advantage such that the gaps between the haves and the have-nots...widen" (Merton, 1988 as cited in Dannefer, 2003 p. S328). This cumulative advantage/disadvantage perspective suggests that the passage of time can show how some effects of inequalities among the elderly are actually

compounded or magnified. “It focuses attention on the very skewed postretirement distribution of such resources as private pensions and savings, and frames the question to what extent programs intended to ameliorate disadvantage counteract these cumulative effects” (Crystal & Shea, 1990 p.438).

As a first stage in understanding the meaning of disadvantage, a link is forged between current disadvantage and early life/initial disadvantage. Indicators of current disadvantage examined include income/poverty, education, health care need, housing, transportation and patterns of youth out-migration. Next, factors creating initial disadvantage are studied—specifically the economic history of the region inhabited by a cohort of disadvantaged elderly that “aged-in-place”. After understanding this dynamic link, a phenomenological interview is used to detect, represent, and explicate the meaning of the phenomenon of disadvantage from the viewpoint of the actors involved (Sankar & Gubrium, 1994). Specifically three phenomenological questions guided this inquiry:

- What does disadvantage mean to Schuylkill County elders?
- How do disadvantaged Schuylkill County elders perceive and describe life challenges that have led to their current level of need?
- What implications do the lived experiences of disadvantaged elderly have for service providers?

Although this study focuses on Schuylkill County, service providers in other counties in Pennsylvania or nationally are encouraged to examine the context and meaning of disadvantage and how it is associated with current service needs.

Indicators of Current Disadvantage

Schuylkill County is a nonmetropolitan county in Pennsylvania. It has an unusually high number of older Americans. The elderly population in 2000 made up 12.4% of the U.S. population and 15.6 % in PA. Fully 19.9% of the population in Schuylkill County is 65+. Notable are two northern towns, Mahanoy City and Shenandoah, with a reported elderly concentration of 28.5% and 26.9% respectively.

Statistics show that Schuylkill County elders have low incomes relative to peers in other regions. The median personal income for older persons was \$19, 436 for males and \$11, 406 for females in 2002. According to the 2000 Census, the median household income for elders in 1999 was \$22, 259 in the US. Census data further indicated that the median income for older persons in PA was a close \$20, 259 but only \$16,221 for Schuylkill County elders. The poverty rate among elders of Schuylkill County is slightly higher than both PA and US rates. The poverty rate in 2000 among elders (65+) in the US was 10.4% versus PA’s 9.1% and Schuylkill County’s higher rate of 10.7%. Again, two communities are profiled to illustrate extent of this problem. In Mahanoy City—with 26.9% of the population over 65—fully 21% of elders live below the poverty line. Similarly, Shenandoah—with 28.5% elderly population—has 16.1% of borough elders below the poverty line.

Schuylkill County elders have a generally low level of education. In 1990, 12.6% of Schuylkill County residents had less than a 9th grade education and 19% had some high school but no diploma (CensusScope). Although some educational improvement has been made, it is certainly occurring among younger cohorts. "Education is considered one of the most significant factors impacting poverty rates among seniors... Elderly persons with lower educational levels experience higher rates of poverty...this enhanced vulnerability to poverty is rooted in lifelong employment disadvantages associated with rural economies" (Housing Assistance Council, 2003, p.11).

Health problems are common among the elderly. The Administration on Aging (AOA) reported that most people over 65 have at least one chronic condition and many have multiple conditions (2003). "Evidence suggests that heterogeneity in health within older cohorts reflects the culmination of life course processes and the cumulative longitudinal effect of advantages and disadvantages" (Berkman & Gurland, 1998, p. 94). In Schuylkill County, there are a health issues that specifically impacts this group of elders. Elderly males are subject to "black lung" disease because of their work in the coal mines and women are subject to "white lung" disease because of their work with textiles. According to the 2000 Census, Schuylkill County had the 2nd highest age-adjusted mortality rate due to "Coal Workers' Pneumoconiosis" among U.S. residents over age 15 between 1985 and 1999. Second, a 2004 health care assessment (Couch, 2003) found Schuylkill County to have a higher percentage of uninsured residents than for PA as whole. The assessment also found that diabetes, heart disease, and malignant neoplasm are of high rank in the percentage of deaths among Schuylkill County residents. The county tops the states rates of alcoholism and suicide as well (Schuylkill County Office, 2004); the rural elderly have the highest per capita suicide rates of any age cohort with rural males six times more likely than rural females to commit suicide (Center for Rural Pennsylvania, 2000).

Housing problems plague some Schuylkill County elders. The Office of Senior Services in Schuylkill County reported that 45% percent of the 65 and older population live alone and that these elderly are mainly comprised of poor white females (p.14). making the housing issue even more difficult is that, most of the homes in Schuylkill County were built before 1940 (Weiss, 2005). Even though some elderly may own their homes, insufficient resources may lead to the inability to pay for heat, repair leaking roofs and faulty wiring, and upgrade needed equipment, such as toilets and showers. "Poor housing conditions can not only result in unsanitary and uncomfortable living situations, but serious health problems as well...the affordability of housing affects the ability of the elderly to afford other necessities of life such as food and medical care" (Hooyman & Kiyak, 2004, chap. 11).

Transportation difficulties are common for Schuylkill County elders. The Schuylkill County Office of Senior Services identified transportation as an ongoing problem in Schuylkill County.

"Despite a continuing increase in services provided by volunteers, particularly for out-of-county transportation, there continues to be a problem for large numbers of older adults. Although most medical and social services are available in the county, some specialized

needs are not available. Also, older adults on the fringes of the county may be involved with physicians and hospitals out of the county. Many older adults spend two to three hours on the van for doctor's appointments and a whole day and much energy is expended by the older adult for a 15 to 30 minute physician appointment" (Schuylkill County Office, 2004, p.22).

"Transportation provides the link between home and community and serves as the bridge to the goods, services, and opportunities for social engagement so crucial to successful and happy aging" (Straight, 2001, para.1). As people age, community transportation becomes increasingly important because driving is not feasible for many older persons. "Despite the needs of this population, the availability of public transportation is often limited, particularly in rural areas. About two-thirds of persons aged 65 and older living in urban areas and inner suburbs are within 10 minutes of public transportation, compared with only one-quarter of those living in small towns and rural areas" (Houser, 2005, para.10).

Finally, a critical concern in Schuylkill County is the outmigration of youth. Schuylkill County's population has continued to decrease as many young adults who are college bound or seeking work or higher wages leave the area (Schuylkill County Office of Senior Services, 2004). As younger, educated people leave the county, the proportion of elderly among the population increases. If kinship networks are not available elders are left to care for themselves. Many would need to rely on formal support to help with healthcare, transportation, housing, and financial and social needs. Goodfellow (1983) found the existence of informal help to be the best predictor of whether the elderly would use social services; that the available assistance from family members, friends, or neighbors may help link elderly to needed formal services. Isolated rural elderly may not have any knowledge of or links to social services. A more recent study suggested that gender differences in social support networks added to the likelihood of asking for services (Unger, McAvay, Bruc, Berkaman & Seeman, 1999). Because many elderly women have invested a great part of their lives to developing friendships and caretaking, they may be more comfortable with and skilled at recruiting help to meet their needs. By contrast, because many elderly men are socialized differently and have invested a great part of their lives to career and achievement, they may be more reluctant and less skilled in seeking help to meet their needs (Unger, et al, 1999).

This review documents the specific disadvantages that many Schuylkill County elders face on a daily basis. What structural conditions gave rise—historically—to these disadvantages?

Economic History of the Region

The county's economic history, including the rise and fall of coal and textile jobs, is a structural contributor to the disadvantage among Schuylkill County elders. (For a full historical review see Salay, 1984). Anthracite or hard coal is the pride of Schuylkill County and dominated the economic life of the region from the early 1980's well into this century. Necho Allen discovered coal in the region in 1790 and the construction of

the Schuylkill Canal, a series of canals along the Schuylkill River, provided transportation of the coal for industry throughout the early and mid-1800's. The need for experienced miners brought an influx of immigrants to the coal region. The early population consisted of mostly German-speaking people along with those of Scots-Irish and English ancestry. By 1900 the influx of Irish and Eastern European immigrants extended the population of Schuylkill County to over 200,000. Ethnic tension was high (Wallace & Wallace, n.d.).

“The technological changes in anthracite mining in Schuylkill County also sparked social change among its residents. Into what had been a predominately German and English farming community came an influx of Irish, Welsh, and English immigrants lured by the prospect of employment in the expanding coal industry. These ethnic groups brought with them from the old country different customs, experiences, and beliefs that influenced the course of their lives in their new home -- and in some cases led to ethnic conflicts, often violent, particularly between the Irish and the Welsh. Although they shared common Celtic origins, the Irish and Welsh found themselves separated by differences in religion, prior mining experience, and potential for advancement in the mining industry. The mix of differences proved as volatile and explosive as mine gases” (Wallace & Wallace, n.d. / n.p.).

Work in the coal region was hard and wages were low. Coal region work is described as follows: “The miners were men who got up before the sun rose to plunge deep into the pits and returned home after dark. It was said men could go years without ever seeing the light of day. Workers earned less than \$12 a week and often they were paid for their long hours of backbreaking work in scrip: company-issued paper money, worthless outside the coalfields, and redeemable only for goods from the company store. Children were also employed, some as young as seven, for between \$1 and \$3 a week. In Schuylkill County alone, according to one 1955 history, it was estimated that of 22,000 miners working at the latter half of the 19th century, nearly a quarter or more than 5,000 of them, were boys under the age of 16” (Molly Maguires, Wikipedia para.5).

Due to the hardship of the miner and his family, including injury, illness and death, depending on extended family was key to survival. Wallace, Wallace & Wallace (n.d.) described how a network of kin was the primary social safety net for the working class of Schuylkill County: “The very settlement of the coal region was shaped by the family. Regardless of class or ethnic origin, the bilateral extended family remained the primary means of protecting economic well being long after emigration. For the working class and poor, family provided security and assistance in case of injury, illness, or loss of employment, but for the better off, too, family was central. For the well to do, family connections provided a means to help capitalize and promote business ventures, and to buffer against the vicissitudes of the market” (para. 2).

As coal production and transportation needs increased, auxiliary industries emerged in mining equipment, powder mills, machinery, iron manufacturing, and boat building. These needs helped create further needs and further employment opportunities in tanneries, sawmills, slaughtering houses, distilleries and breweries. Textile manufacturing

jobs were plentiful and women dominated the industry's employment base. As the garment industry gained a foothold in Schuylkill County, "runaway" factories were eager to take advantage of a profitable opportunity by employing women who lived in the coal fields.

The coal industry finally started to collapse beginning with the coal strikes 1925-1926. Coal and Iron police were instrumental in evoking resistance that helped coal workers to establish a strong labor organization to successfully advocate for laborers (Couch, 1984), but demand for hard coal declined, even as working conditions and wages improved (Schuylkill Chamber). The Great Depression, World War II and the use of alternative heating fuels such as fuel oil and natural gas added to the destruction of consumer confidence in coal.¹

De-urbanization or depopulation and unemployment were major results of coal decline. De-urbanization or depopulation relates to the massive number of individuals and families who left the region as the coal industry declined. Anthracite production peaked in 1920 and in 1930 the county reached its peak population at about 235,000. In the 1950's the collapse of coal industry caused a major migration out of the county. Textiles surpassed coal mining as top employer, and the unemployment rate reached 23% (Republican & Herald, 2006). By 1960, the population dropped to 172,586 – a loss of 50,000 people in 20 years. Schuylkill County also saw a significant manufacturing decline and local textile plants have continued to close in current times. The Center for Rural Pennsylvania (2006) reported that the manufacturing sector still topped employment at 26.8% of those employed in Schuylkill followed by wholesale and retail (20.3%). Mining, construction, utilities, and transportation and warehousing were lumped together into one category and followed behind to employ 12.4% of Schuylkill County's working population. One recent economic report stated, "Some counties have been hurt by the decline of one dominant industry. . . Schuylkill County was hurt by the decline of two dominant industries . . . in the past few decades (70's, 80's 90's), population has declined steadily and total employment has not increased" (Weiss, 2005, n.p.). The Pennsylvania Archives (2005) report that unemployment has been a problem in Schuylkill County since the collapse of the mining industry after World War II. "The county is currently experiencing one of the highest levels of unemployment in the state, exacerbated by the current economic downturn" (Schuylkill County Office of Senior Services, 2004, pg. 14).

Thus, the collapse of the mining industry and limited textile jobs available, along with limited education of this area's population, may help to explain some of the disadvantages the Schuylkill County elderly have experienced. As historical data have illustrated, many of the current cohort of elderly who stayed in the county during the industry declines were likely to be unemployed. As more modern industry has shifted toward service and technology, many of the individuals were probably limited in their ability to successfully transition to a new economy that demanded education and skill. As this brief historical review documents, Schuylkill County elders have endured lives tied to coal and industry. Given low wages, many endured childhood poverty in addition to war, depression, and a major societal bifurcation from manufacturing to service

economy. The third task of this study is to develop some understanding of the meaning of these events from the viewpoint of the actors involved.

METHOD

The intent of this phenomenological study was to learn how Schuylkill County elders make meaning of disadvantage. An additional task is to identify the factors that contribute to disadvantage and the need for services. Methods are described as follows: (a) research design, (b) participants (c) data collection procedures, and (d) data analysis.

Research Design

The exploration of disadvantage among Schuylkill County elders was approached by way of phenomenological inquiry. "Qualitative methods in research with aging are important in our continuing need to understand and represent the subjective dimension of social problems, by the need for elders to share their experiences in their own voices and from their own perspectives" (Rubenstein, 1994 p.78). Knowing behavior without understanding its meaning to the actors and its shared significances provides little useful or reliable information (Luborsky, 1994). Husserl, a founder of phenomenology proclaimed "To the things themselves!" that stresses in phenomenology how a human experience is described by the person who experienced it (Bentz & Shapiro, 1998). The phenomenological approach was especially appropriate for this study due to its ability to gain access to the meaning of disadvantage as expressed through the individual (an elder). "Although phenomenology may focus on personal experience, one of its primary goals is to understand the real world...and make public and manageable the lived experience" (Bentz & Shapiro, 1998, pg. 100).

Participants

Criterion and purposive sampling, using inclusion and exclusion criteria, were used. "A phenomenological study usually involves identifying and locating participants who have experienced or are experiencing the phenomenon that is being explored" (Rudestam & Newton, 2001, pg. 92). The criteria for selection included: persons living in Schuylkill County who were 65 years of age or older, who have grown up and lived most of their lives in the County, and who demonstrated financial hardships based on the current poverty level (\$9,800 for 1 individual in 2006). Due to the nature of the study, participants were required to demonstrate the ability to reminisce; therefore, elders with medical diseases or cognitive deficits that would likely impair their ability to reminisce about their lives were excluded from the study. Given the above, 9 participants were appropriate for this study.²

Data was collected from the in-depth interviews of nine white elders. Participants included 5 women and 4 men with ages ranging from 66-91 years old. Three individuals were over 80 years of age, all female. All nine elders resided in Schuylkill County from the following towns: (2) Mahanoy City, (3) Shenandoah, (1) Gordon, (1) Frackville, (1) Schuylkill Haven and (1) from Tamaqua. All but one participant grew up in Schuylkill

County from childhood. Data from this participant was included in the study due to the wealth of information and insight she was able provide about her life and services received in Schuylkill County. All but 1 participant lived alone: (3) lived in high rises, (1) lived in an apartment, and (4) were homeowners. Of the 4 homeowners, 1 homeowner reported still paying a mortgage.

The ethnic backgrounds of the sample were diverse and are as follows: (2) Italian; (1) Polish/German; (1) Polish/Dutch, (1) Polish/Jewish, (1) German, (1) Irish/English, (1) English/Welsh. The diversity of ethnic backgrounds is discussed throughout this section.

Data Collection Procedures

Data for the phenomenological study was collected by use of in-depth interviews. A strength of using an in-depth interview for the phenomenological study is that people generally like talking about their lives and will respond thoughtfully if questions are asked carefully (Kaufman, 1994). Kaufman (1994) also states “when asking about deeply personal and subjective topics, the interviewer is in fact inviting the person to recall, reveal, and construct aspects of the personal life and to make that discussion coherent and meaningful” (p.127).

The semi-structured interview format largely included open-ended inquiries about the participants’ life experiences and their perceptions about their needs and the current services in place. “Although the interview itself may be quite loosely structured and flexible, phenomenological researchers generally prepare some questions in advance, preferring to alter them if it seems appropriate as the interview progresses” (Rudestam & Newton, 2001, p. 95). Interviewing began with a series of background questions in an informal style. Participants were asked about age, ethnicity, educational attainment, employment history, household composition, and financial status. Questions that followed were general and inquired about past life adversity and feelings about current status. In addition, questions about current services received and knowledge about services available were asked. All participants were made aware that they have the right not to answer a question or stop the interview at any time and without any adverse consequence. Interviews ranged from 60 to 90 minutes. Field notes were taken and interviews were tape recorded.

Data Analysis

Transcribed interviews and field notes were analyzed first individually, then across interviews and collectively for emergent and converging categories and themes. Coding within and across cases serves as a method of triangulation that contributes to confidence of the findings. Emergent themes and categories are supported by ample use of direct quotes from raw data to provide thick description about the meaning and experience of disadvantage.

RESULTS

Prominent themes about disadvantage included: (1) health and mobility limitations, (2) lack of financial resources, (3) lack of family or social supports, (4) lack of opportunity for elders (including education and employment) (5) lack of opportunity for young people (including education and employment) and (6) feeling of disregard by community and government.

Health and Mobility Limitations

Some participants discussed how poor health conditions and being homebound or having limited ability to get around, impedes participation in pleasurable activities and dampens quality of life. At the same time, some related their limitations as a simple fact of life and not related to their own disadvantage. A woman with limited mobility stated, “When you can’t get around—a lot of people can’t get around. Thankfully I’m not disadvantaged like that.” Similarly, another homebound elder explained, “I’m old, disabled; I can’t get around to do things – it’s there, but I can’t do it.”

Lack of Financial Resources

Several participants discussed how it is difficult to survive on the amount of money they currently receive considering housing costs, food, bills, prescriptions and leisure activities. The following lists direct statements about linking disadvantage with finances:

“Disadvantage is just trying to get by with what you got with no opportunity to get more.”

“Money. I always had it rough. I scimp. I scrape. I sacrifice.”

Lack of Family or Social Supports

Several participants described feeling alone or forgotten because many of their same age or elder friends and relatives had passed away, and their children lived out of state or do not keep in touch. Although only a few participants described that their meaning of disadvantage was associated with this category in direct response to the specific question, limited social networks, both informal (ex. family) and formal (ex. home health care) emerged as a salient issue among the group in subsequent questions. One lonely woman described what disadvantage meant to her in the following: “If you don’t have a family to help you—it’s really hard. When we just had that flood, nobody even called to check on me. Before that I had hip replacement surgery. I couldn’t even get a ride home...I just feel like a failure... I can’t make friends. No one is friendly in this town -this is an unfriendly place. I used to belong to a Women’s Club, but it shut down and I was booted out of the Elks when I got divorced... Now I’m a very private person.”

Another woman attempted to downplay her lack of supports in describing what disadvantage means to her, “I get very lonely. I’m homebound. I’m lucky though. My neighbor mows my lawn...my minister comes to visit.”

***Lack of Opportunity for Elders
(Including Education and Employment)***

Participants and their parents were generally uneducated, which is consistent with educational norms throughout history. Of those participants who could remember when and why their ancestors migrated to the United States, they reported parent and grandparents who came to Schuylkill County as farmers and coal miners. For example, one man stated, “My grandparents came over from Italy in the 1800’s. My grandpa owned mule barns for the mines. My dad worked as a breaker boy. He later became a fire boss.”

Two males and one female participant did not graduate from high school. One of those men was drafted into the military in his senior year and just recently was awarded a diploma. Another woman dropped out at age 15 to work for \$30 a month in New York as a servant. She sent \$20 of that \$30 home every month to help her parents care for her family of seven. This woman further stated, “I would have liked to become an RN. I really wished my aunt would have encouraged me and helped me. She had some education and money. I always remembered that and I encouraged my granddaughter to get educated. She now has her Master’s degree.”

Some men went on for machinist or construction training; two women later became nurses. Most participants described that their own children were better off than them financially, in terms of education and training, which helped them to leave the area. This is consistent with more recent educational statistics regarding Schuylkill County that document increasing high school graduation but minimal further education and data that show the outmigration of young educated adults. The following statement exemplifies participant reflections about their place in society and their limited abilities to “get ahead:”

As one woman described, “I’ve turned up every avenue only to find the doors closed. “When it’s right there [wealth and opportunity] in front of you and you can’t touch it...there’s so many people with money...the government gives up so much to other nations too, but we have to live right here - What do I have?”

***Lack of Opportunity for Younger People
(Including Education and Employment)***

Some participants were more concerned about life for younger people in Schuylkill County. They described a perception of misguided values in a place with nothing to do and limited opportunity to succeed. For example, one woman described, “It depends on the individual – there’s no sense moaning. Disadvantage, I’m not disadvantaged. The older people have advantages; it’s the younger one’s I’m worried about. There’s nothing left here for the younger people.”

Similarly, a male participant stated, “What’s around here for young people- no fun, no industry, no coal, no factory jobs.”

Feelings of “Alienation” by Community and Government

Some participants felt alienated. These elders shared perceptions about how some providers and the general society have disregarded them as useful human beings or have made them feel like a drain on societal resources. Some discussed stigmas, set down from society or exhibited by agency representatives, associated with needing help and asking for services.

As one woman described, “When there’s this lack of dignity about where you’re at. People forget they are going to be old too...the local community and the stores should consider us more...there’s often disrespect for the elderly. They treat you like you don’t belong. They try to make you feel bad – like you live off the government.”

Others discussed their feelings about how older veterans have been “given the shaft” regarding the sacrifices they have made for their country with minimal or no compensation later in life. As one veteran male exclaimed, “My government let me down....You give everything to them, then the government screws up your life and you get nothing!”

One woman pointed out that her husband worked on the railroad but he “quit too early when he got sick to get anything from it.” She added that her son had worked in the coal mines for 28 years, came down with Black Lung and has been fighting for disability ever since, to no avail.

Findings suggest a merger of both failure and triumph that was reflected in the sample’s varying perception about their lives and their positions within society. As several participants perceived life adversity as devastating and permanently disabling, a few described life adversity as something they have overcome, a challenge that was met with victory. Although many participants described a history of disadvantage from their childhoods and throughout life, *resiliency*, or the ability to overcome adversity through strengths and adaptability, was evident among a few of the participants and is illustrated below.

Some statements about life challenges, adversity, or disadvantage that reflected this sense of resiliency in spirit were reflected by females and included:

“I don’t feel disadvantaged anymore...I am so much happier with my life now...I have everything I need right here.”

“I’ve made the best with what I got and I am satisfied.”

“You got to wake up everyday and be thankful for what you have.”

“What was it like growing up in Schuylkill County?” was the initial interview question used to address life adversities or challenges, particularly throughout history. Again, the participants answered this open-ended inquiry with a variety of intriguing responses. One emerging theme regarded the hustle and bustle of early life during the “coal” days. Another emerging and dominant theme was loss of jobs and loss of population in

Schuylkill County following coal industry decline. A full list of prominent themes in no particular order included: (1) being poor growing up; (2) religion and church attendance very important (3) diverse ethnicity with ethnic and religious tension; (4) vast number of bars and local businesses due to booming coal industry; (5) loss of businesses, jobs and population following coal industry decline.

Being Poor Growing Up

Although reports of contentment varied, almost all of the participants related some degree of poverty as children. As one woman explained of growing up in the late 1930's and early 1940's, "We were very, very poor. We had a 4 room house. The rent was \$10.00 a month. There were rats in the walls and chickens in the back yard – that's how we'd eat. We'd bathe in a large basin like once a month and used an old outhouse. We had no electric like everybody else – we'd use kerosene instead of electric."

Other elder women described an early life of sewing their own clothes, working as indentured servants and babysitting. A few of the men described carrying coal buckets and having paper routes as children. These elders sometimes worked for pennies as children, but they played too. Some participants described that they were poor but so was everyone else. They accepted life as it was, and it was a "wonder life." As one male participant stated, "I enjoyed my childhood. I have no regrets."

Several participants reminisced about a simple but happy childhood, spending time with family, playing outdoors, and playing competitive sports games against local ethnic groups and schools. As one man described, "I grew up with nothing but food - but it was booming here - I really had a lot of fun. We had Italians, Irish, Lithuanians, and Pollocks. We'd all play baseball."

Similarly, another man stated, "We didn't have much, but we weren't fussy. It was great here – we played at the stripping pits, went skinny dipping, and played baseball."

Others reported unhappiness and family tension due to financial problems and alcohol abuse. One woman stated with resentment, "There was no good work around here for our parents...my dad drank. I was embarrassed of him. Life was hard...I think everyone was poor, but I think we were definitely at the bottom of the barrel."

Diverse Ethnicity with Ethnic and Religious Competitiveness

The participants described a very diverse ethnic population that was separated by geography as specific areas of the towns were comprised of a single group. Some participants spoke poorly of the each other's ethnicities or about how groups were ranked in their childhood by heritage. As one Italian male reflected, "It seemed like it was based on the darkness of your skin then. Italians were like the minority." A German woman described, "I was afraid of Catholics back then...The Irish were dirty – they lived over in the flats (of Schuylkill Haven). The Pollocks and most of the other Irish all lived north of Pottsville. I didn't bother much with any of them."

It was reported that each ethnic group had their own church, but that now many churches have consolidated likely due to pressures of the decrease in population as well as a decrease in inter-ethnic separation. A few participants discussed the difficulties of courting women from different ethnic groups and religious backgrounds. One Italian elderly man stated, "My father in-law-to-be at the time was very hesitant and eerie to step foot on my 'Italian' street' Others didn't come down here much, but it's all integrated now."

Religion and Church Attendance Very Important

All 9 participants interviewed discussed going to church as children. Some men discussed their duties as altar boys and some women described the importance of their "Sunday dresses," of which they usually wore the same dress every Sunday to church. Catholic faith was reported by 7 participants; one female reported as Lutheran and one male participant reported Protestant faith. Three participants mentioned attending two separate churches to appease the denominations of both parents. For example, "I went to two churches. My mom was Lithuanian but adopted and raised Italian. She still stayed Protestant. So I was an altar boy in the Protestant church with her and I was an altar boy in my dad's Catholic church."

Vast Number of Bars and Local Businesses Due to Booming Coal Industry

These Schuylkill County elders discussed with pride the great number of bars and local businesses around during their childhood. A couple of participants reported having 100 or more bars in the towns of Shenandoah and Mahanoy City. One elderly male described, "In Shenandoah we had the biggest population around. We should have been the county seat. There were also a lot of bars, had to be over a 100 - on some streets there was literally a bar in every other building. Everybody drank. Even kids drank wine."

A male participant from Mahanoy City explained this affect on his later life: "We had lots of factories, 3 movie theatres, and like 100 bars around here- there wasn't much else to do...I learned to drink and gamble as a child and that's how I lived my life...I even lived in a bar for awhile...I ended up losing everything. I beat smoking and drinking eventually, but I lost everything to gambling."

Loss of Businesses, Jobs and Population Following Coal Industry Decline

Several participants described life in Schuylkill County after the coal industry's decline. The following excerpts reflect historical data about population and employment decline during this time in Schuylkill County. One Shenandoah man stated, "When the coal disappeared, everything went away...there's nothing here for kids...but (older) people lived here so long they won't leave...they don't know any other place." Another Shenandoah man reminisced, "In the late 50's, I just went away for awhile because there

were no jobs here and the population was just less and less. I was 17 years old – just graduated... I flipped a coin to go east or west. The toss decided [east] so I thumbed it to Jersey flat broke... Later I came back and counted 147 businesses that closed down here.”

A Mahanoy city man who had grown up in Shenandoah described, “I came home in ‘65 from the service. Things changed for the worst. The mines closed down. No one was here. The population had hit rock bottom... I thought the town (Shenandoah) was going to become a pit because they were talking about wanting to dig up the whole town to get the coal out from under the streets... My mom had stopped working cause’ all the dress factories were closing down too.”

The interview questions “Can you tell me about any life disadvantages or adversities or challenges you have faced?” and “How about right now?” served as both a follow-up probe about growing up in Schuylkill County and stood alone to assess perceptions about current disadvantages. Participant responses were categorized as follows: (1) death and loss of loved ones (2) family tension (including divorce and conflict) (3) financial problems and (4) health problems.

Death and Loss of Loved Ones

Death of loved ones included: parents, siblings, friends, children, spouses. Only one participant currently resided with a living spouse; two of the elders were never married and the others were widowed or divorced. All nine participants described distressing and often traumatic losses. Several participants lost parents and siblings during their childhood. One elder male described, “Mom died of Cancer when I was 14... Dad died right in front of me 10 years later – heart attack. Then I was sent to a group home for a while.”

Listening to their stories was often heart wrenching. One woman tearfully told a detailed story of how her youngest daughter died just two years ago on Easter Sunday. Some participants described in few but painful words the devastating loss of their own spouses and children as they fought back tears. For example, one woman described, “My husband died from his injuries in the war when my daughter was only a few weeks old.” This Shenandoah woman went on to state that she never re-married, or even dated, after her husband’s death. She also did not receive any benefits from his death. Instead this selfless woman signed over all benefits to her husband’s mother at the time of his death because she felt his mother was “worse off” than she, as the mother in-law had also just lost her own husband and now her son.

One man was resistant at first to speak of his family. With no detail, he stated uncomfortably, “My first wife and daughter were killed by a drunk driver in 1966. Then my 2nd wife died in 1990.”

Family Tension (Including Divorce and Conflict)

One female participant was divorced 3 times. Some participants described not only being divorced from spouses, but divorced from children and other family members due to what they described as a “falling out.”

Among a few participants were obvious feelings of resentment and feelings of being abandoned by family that were sometimes expressed in angry voices and tears. Although a few participants were resistant to discuss their family conflict, particularly male participants, a couple of elderly women gave detailed accounts about how family members had deceived, betrayed, and abandoned them. As one woman described with resentment, “I have divorced myself from my daughter a long time ago. She never appreciated anything I’ve done for her. She’s very selfish.”

Financial Problems

Most of the participants described living on a very fixed income, making sacrifices and doing without. Some participants complained of hospital, ambulance and doctor bills that were not covered by Medicare and high prescription co pays that depleted monthly resources. One woman’s response summarized the general comments of all participants. “There’s so many bills and not enough coming in. I pay all the expenses. I just try to get by.”

Health Problems

All of the participants reported health problems to some degree. Health problems reported included: asthma, bronchitis, cancer, Parkinson’s, arthritis, hip problems, osteoporosis, heart problems, diabetes, carpal tunnel, sciatica, cataracts, and high cholesterol. Health problems were associated with the participants’ report of being homebound and were associated with their definition of, or meaning of, disadvantage discussed in the above section. Health problems appeared to disadvantage the women in this study especially, evidenced by greater reports of mobility among the men and more reports of being homebound by the women.

Interview questions such as “What are your experiences with senior and government services and benefits for the elderly?” and “What kinds of services do you receive?” were asked to gain an understanding of how these elders gain assistance with their health, financial, and other needs. The implications of these experiences for service providers will be addressed in the discussion section of this paper.

The open-ended nature of the interview questions did not require a definitive list of services received; thus it is possible other services or benefits were received. The following is a list of reported services and benefits received in no specific order: (1) Meals on wheels, (2) Schuylkill Transportation Service (STS), (3) Home health aides, (4) Social Security Income (SSI), (5) VA income benefit, (6) Food stamps, (7) Housing and utility assistance (8) Medicare and VA insurance and PACE prescription card.

Meals on Wheels. One homebound woman reported receiving Meals on Wheels three times a week (2 meals on Monday and Wednesday and 1 meal on Friday). She related being thankful and appreciative of this service. A male participant reported that the local soup kitchen delivered meals to his high rise a couple times a week, and one man reported he used Meals on Wheels for a time after hip surgery.

STS. All the participants had something to say about STS. One female participant still drove and didn't need services. One male participant praised the ease of using STS for local appointments in Shenandoah. This individual had a STS bus that ran every hour through town and stated "I don't leave the city much." Participants who were homebound or of poorer health described being thankful for the transportation system but they would not use it unless absolutely necessary. They complained of the limited route systems "...sometimes the bus would pick me up and I'd be at the appointment before the place would even be open ...I am in a wheelchair...then I'd have to wait sometimes two to three hours after the appointment to be picked up...it literally took the whole day."

Home Health Aides. Four participants reported receiving home health care for help with medical needs, some transportation to appointments, assistance with ADL's, grocery shopping, and running errands. Participants spoke highly of their aides and related feeling really dependent upon them due to lack of family and other supports. As one elderly woman explained, "I have a marvelous aide. I don't know what I'd do without her. I have a girl coming 5 days a week to do some cleaning, care for me, and do errands."

SSI. All nine participants received SSI to some degree. SSI income ranged from \$500 - \$800 per month, but averaged around \$600. Work history and sex differences were apparently associated with the amount of SSI income received. Throughout history, men have benefited from greater social mobility throughout the life course than women. As would be expected, those individuals who held past jobs and were male reported higher SSI benefits than women with limited or no formal job experience.

VA Income Benefit. Two elder men reported receiving a VA benefit. One man reported a supplemental VA income of \$61 per month and the other male participant reported a benefit of \$49 per month.

Food Stamps. All but one elder reported receiving food stamps in variable amounts, ranging from \$0 - \$88 dollars per month. One female participant described why she did not receive this benefit by telling the story of applying for food stamps. She described being on the phone "forever" with a rude caseworker to receive word of her eligible benefits and then turning down the "measly" \$10 per month she was offered. The elder woman reported receiving a consequential "you just wasted all my time" on the other end of the phone.

Medicare and VA Insurance and PACE Prescription Card. All participants reported Medicare insurance. Two male participants reported VA insurance. One man related his VA insurance was wonderful and was used instead of Medicare now. He described how

his total monthly bills have decreased: "I used to have to pay \$200 - \$300 dollars per month but the VA helps out a lot now. I usually don't pay a thing."

As previously addressed, some participants complained of hospital, ambulance and doctor bills that were not covered by Medicare and high prescription co pays that depleted monthly resources. One male participant recently received a PACE prescription card and described the drastic change in medication co-pays paid per month. "The scripts went from \$1000 in the beginning to \$78 with the better Medicare coverage and now only \$12 with the Pace Net insurance."

DISCUSSION

Although not always clear, there is evidence of cumulative disadvantage for these nine elders. Most of the participants described being poor as children and seeing their parents struggle with work. Although these elders were more educated than their parents, three participants did not graduate from high school and not one participant had a formal college education. Limited education among these elders and poor upbringings were early disadvantages. Early disadvantage was likely compounded by limited opportunity for employment which became even more sparse as the coal and manufacturing industries have declined in Schuylkill County.

For elders whose children were afforded a stronger value on education and greater opportunity for employment, they were often left to care for themselves as their children left the area. Some participants also described poor relationships with their families as children and then further family conflict throughout their lives, which likely contributed to feelings of loneliness and abandonment.

In addition, bars and the availability and use of alcohol during childhood had an impact on later life, especially for one man who's gambling and drinking resulted in losing his job, failing at relationships and being arrested.

Along with alcohol and impulsivity problems, it was apparent that several of the participants exhibited symptoms of depression and unresolved grief. These psychological conditions are likely associated with both causes and results of adverse experience and disadvantage throughout the life course. Notably, not one participant reported he/she currently received counseling and only one woman reported using counseling services in the past, following her divorce.

Findings supported the earlier hypothesis that factors such as poor economic conditions of the region, limited education or skill, out migration of young educated adults, and lack of filial obligation have disadvantaged the current cohort of Schuylkill County elders. The hypothesis that Schuylkill County elders have likely accumulated disadvantage over the life course is not conclusive but is supported through narrative histories about life adversities and challenges.

However, it is important to consider the perceptions of disadvantage. It became apparent during some interviews that these elders did not want to be considered *disadvantaged*. The label of *disadvantaged* seemed to mean to some elders, “vulnerability,” or “helplessness” and in need of an undeserved “hand-out.” Thus, it is not clear how much the stigma of being disadvantaged, or the differences in perception of what being disadvantaged is, had impacted responses that appeared to be associated with resilience.

Loneliness and isolation were identified as prominent elements of participant responses and consequentially, an elder’s social network, both formal and informal, was a critical factor in this study. All but one participant lived alone. Some participants outwardly admitted being lonely while for others, loneliness and lack of socialization crept out of their narratives indirectly. Many experienced the demise of their informal networks as their friends and spouses have died, family ties have been broken, and health problems have limited their mobility.

Gender differences in the meaning of disadvantage also emerged. Women were more emotional and descriptive about perceptions of disadvantage associated with loneliness and isolation, along with family conflict and loss of loved ones. Women also reported less income overall and were more likely to be limited in mobility. Consistent with historical data, these elderly women appeared to experience less social mobility than their male counterparts throughout the life course. Men tended to be less emotional overall, and more descriptive about the general history of Schuylkill County and the effects of the decline of coal. The biggest challenge in reaching out to elders will be locating those who are truly “reclusive” because “isolates and recluses are by definition difficult to locate and contact because they have few ties to informal or formal support networks or to researchers” (Klinenberg, 2002, pg. 45).

CONCLUSION

The most disadvantaged elderly of Schuylkill County were possibly underrepresented due extreme marginalization from the community. Further, caution must be used in generalizing findings to the broader population due to the smaller sample size of nine elders. Given the nature of phenomenological inquiry, this limitation is both a positive and negative—the depth of meaning ascertained must be weighed against the sample representativeness. Despite these limitations, three conclusions are drawn.

First, how these elders made meaning of disadvantage was of primary interest. Although most participants described their lives in a way to suggest accumulated disadvantage, some described being better off and happier in their present circumstance. Resiliency, or at least a sense of resiliency, was an unanticipated and remarkable finding among these “disadvantaged” elders. The discourse of disadvantage, including the power of the stigma often attached to being labeled disadvantaged, had an obvious impact on the way these elders responded to questions about their own disadvantage. Gender differences emerged from the data as well.

Secondly, loneliness and isolation emerged as critical elements of these elders' lives, especially for those with health problems and limited mobility. This finding further indicates the need for formal networks to increase social support as many elders lack any informal support networks.

Finally, the general public and service providers should consider the historical processes and social positioning of elder disadvantage and elder need. The intersection of biography and history in this community, as demonstrated throughout this paper, has been a clear indicator of how these Schuylkill County elders make meaning of disadvantage. As C. Wright Mills (1959) has asserted, "neither the life of an individual nor the history of a society can be understood without understanding both" (p. 3). The subjective voice of elders, of how they lived and how they suffered, needs to be an integral part of how providers create and deliver services. If we ignore the sufferer's lived experience, we surrender a prospectively exciting backdrop for learning more about the aging experience (Jaffe & Miller, 1994). Future studies should incorporate evaluation and policy research along with face to face qualitative measures to help ensure proper execution of planned objectives and to provide a voice for the citizens involved. Service providers and researchers need to increase their relationship with the elderly as "co-researchers," recognizing their strengths and learning from them. As a sense of resiliency among some participants was evident, future research might consider more specifically factors of resilience throughout the life course of rural elders

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Footnotes

¹Before silk mills were launched in the early 1900's, legitimate employment opportunities for women in the coal region were scarce. Women mostly did household and caretaking work. But interestingly, women of the coal region in the nineteenth century were better educated than males because outside employment opportunity resulted in young males dropping out of school at very early ages (Wallace & Wallace, n.d.). It is then no surprise that as later times would bring reduced operations in coal, the garment industry gained an even stronger foothold in Schuylkill County. "Runaway" factories recognized the plight of women in Schuylkill County and were eager to take advantage of a profitable opportunity. These were garment mills that could escape the high prices in expensive city like New York and get very cheap labor in the coal fields from the women. Runaway factories from Manhattan especially set up shop in mining. Unions were scarce at that time so these companies could get away with it (Wolensky, Wolensky & Wolensky, 2002).

²Phenomenological researchers must take into account time and rigor when choosing sample size and can obtain a large quantity of useful information from a fairly small number of people. This typically ranges from about 5 to 15 participants (Agency for Healthcare Research and Quality [AHRQ], 2001). Larger samples are generally unrealistic for the qualitative researcher and result in no more useful data than a smaller sample. "In general qualitative researchers investigate a small number of cases because they want to gain an in-depth understanding of each case...we recommend at least eight." (Hill, Thompson, and Williams, 1997 p. 531-532). Several authors suggest saturation of data, which occurs when participant reflections produce no new data, is of greater importance than a large sample. (AHRQ, 2001; Hill, Thompson, and Williams, 1997; Rudestam and Newton, 2001). These practices must meet criteria of adequacy and appropriateness of data. "Adequacy" refers to obtaining saturation so that previously collected data are confirmed, and "appropriateness" refers to meeting theoretical needs of the study by means of a purposeful rather than random sample to collect information (Morse, 1998 as cited in Rudestam & Newton, 2001).

Authors' Notes:

Thanks to the Schuylkill County Office of Senior Services for their support in locating a sample for this study. Thanks to the nine Schuylkill County elderly who participated in this study for their time and for sharing their insight and life histories.