

“They Want Me to Play F*cking Bingo!”: The Social Lives of Young at Heart Seniors

by

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Submitted in partial fulfilment of the requirements
for the degree of Bachelor of Arts with Honours in Sociology

at

Dalhousie University

Halifax, Nova Scotia

April 2022

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Abstract

There are many sociological studies concerned with the social lives of senior citizens who fit the traditional aging norms of society. In comparison, the social experiences of “young at heart” seniors are relatively absent from this literature. The following research addresses this gap by exploring the social lives of seniors who feel their chronological age exceeds their biological, psychological, and social ages. More specifically, this research explores whether young at heart seniors experience social isolation as they deviate from the traditional aging norms of society. To answer this question, I conducted semi-structured qualitative interviews with eight participants ages 65 and older, who describe themselves as young at heart, and reside in Atlantic Canada. After performing a thematic analysis of the data collected, my findings indicate that although traditional aging norms present obstacles in the social lives of young at heart seniors, they do not experience social isolation. Furthermore, the participants in this study describe living healthy social lives and do so through relationships with like-minded people who are often much younger than them.

Keywords: Senior Citizen, Social Isolation, Young at Heart, Social Lives, Social Networks, Aging, Aging Norms, Chronological Age.

Acknowledgements

I would like to express my gratitude to the many people who made my research possible. First, thank you to my Honours supervisors, Dr. Martha Radice and Dr. Karen Foster. Your guidance throughout this process has been invaluable, and I sincerely appreciate your support every step of the way. Next, I want to thank the participants in my study for their willingness to offer me the time for thoughtful dialogue that is an essential component of this research. Finally, I must thank my dearest supporters – Paula Pike and Charlie Oliver. It is my honour to dedicate this research to you.

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Introduction: Get to Know the Deviants

Across contemporary Western societies, the definition of a senior citizen is typically those individuals aged 65 years or older (Henrard, 1996, p.668). Society generally expects these people to retire, become increasingly dependent, and shift to the sidelines of social life. For this reason, there is a substantial volume of sociological research involving this cohort that is concerned with the social lives of seniors who fit the traditional aging norms of society. However, the social experiences of youthfully aging seniors and their changing social lives are relatively absent from this literature. To address this gap in the sociology of aging literature, this thesis explores the social lives of seniors who are “young at heart” - that is, seniors who feel that their chronological age exceeds their biological, psychological, and social ages. More specifically, my research investigates whether young at heart seniors experience social isolation as they deviate from the traditional aging norms of society.

Two significant and ongoing developments in society indicate that it is crucial to study the social experiences of this young-at-heart senior demographic. First, Western societies have witnessed a significant increase in life expectancy over the last several decades due to medical advances and increasingly equitable social conditions (Lobo et al., 2017, p.3). Second, the West’s senior citizen population is experiencing rapid growth due to the baby boomer cohort entering the latter stages of their life cycle (Pruchno, 2012, p.149). Together, this signals that there may be a growing population of seniors who are aging healthily and living longer, and do not align with society’s expectations of them. If this is the case, scholars must understand the implications of these developments in the social lives of this population. With this knowledge,

social support providers can appropriately address the needs of healthily aging populations to mitigate any adverse effects they may experience as social deviants.

Literature Review: Traditions in Framing

While examining the existing sociological literature regarding the relationship between seniors and social isolation, three main findings emerged: the inadequacy of traditional conceptions of age, the ambivalent nature of this relationship, and theories that explain the nature of seniors in society. These theories influenced my research design and are assessed in my study. Later in this article, I will explain these theories and how my findings compare to them. Finally, this section will acknowledge gaps in the existing literature on this topic.

Conceptions of Age

A vital component of any research on aging is how age is defined and measured (Settersten and Mayer, 1997, p.238). Age is typically defined as one's *chronological age*, or in other words, the number of years that have elapsed since birth. However, Settersten and Mayer (1997) argue that any definition of age that focuses exclusively on calendar time functions as an empty variable, as it is a flawed assumption that age itself produces behaviour (p.238). Rather, chronological age acts as an index for events society deems important (Settersten and Mayer, 1997, p.238). Since chronological age ignores many significant factors such as physiological, psychological, and social aspects of one's livelihood, it is important for researchers to consider measures of age that are more sensitive to individual differences (Settersten and Mayer, 1997, p.238).

For example, *biological age* is defined as an individual's state of biological development and physical health as indicated through various bodily systems (Hutchison, 2005, p.146). While

measuring a person's biological age is a complex process, this concept represents the position of an individual in their physical life span (Hutchison, 2005, p.146). A person's biological age is significantly influenced by genetics and a plethora of socioeconomic factors such as race, gender, economic status, and the presence of support during critical life course periods, including infancy, illness, or periods of unemployment (Hutchison, 2005, p.146). Depending on these variables, a person's biological age may be lower or higher than their chronological age. When taking this nuanced approach to understanding one's age, it is also important to consider the role that one's psychological capacities have as a defining characteristic of their age.

Psychological age is conceptualized in two main ways – behaviourally and perceptually (Hutchison, 1997, p.146). The behavioural component of psychological age refers to an individual's ability to adapt to varying biological and environmental conditions using their memory, learning, intelligence, motivation, and emotional capacities (Hutchison, 2005, p.146). In contrast, the perceptual aspect of psychological age accounts for an individual's sensory perception (Hutchison, 2005, p.146). Researchers indicate that both age-related behavioural and perceptual differences vary based on factors such as gender and culture (Hutchison, 2005, p.146)

Social age encompasses the age-based roles, behaviours, and expectations that are socially constructed and permeate society's structures (Hutchison, 2005, p.146). Guided by aging norms that indicate the expectations of people of specific ages in a particular society at a given moment in time, social age sets the parameters for the events and organizations people should ideally engage and conform with (Hutchison, 2005, p.146). An example used by Hutchison (2005) is how some cultures have an informal age norm for the appropriate time to become a parent (p,146). These culturally specific age-based expectations continue to shift over time (Hutchison, 2005, p.146). With these conceptions of age in mind, it is reasonable to consider the

consequences that arise when one's age-related behaviours do not align with society's norms, such as social isolation.

Together, these diverse conceptions of age discussed by scholars throughout the sociological literature on aging indicates that a more nuanced framing of age is necessary to appropriately understand the social lives and experiences of the senior population.

Ambivalence of Senior Social Life

Throughout much of the sociological research regarding social isolation among senior citizens, there is no clear consensus regarding the nature of this relationship. For example, Heylen (2010) analyzed a sample of 1,414 respondents aged 55 and up from the Panel Study of Belgian Households conducted in 2000 to examine the connection between social relationships and feelings of emotional and social loneliness in old age (p.1178). The results indicated that the quantity of a respondent's social relationships affects their sense of social loneliness, while higher satisfaction with social relationships and positive appraisal of the number of close friends reduced the risk of social loneliness (Heylen, 2010, p.1190). From this, the author suggests that loneliness is a subjective experience resulting from a comparative evaluation of actual and desired social relationships (Heylen, 2010, p.1190).

In contrast, Cornwell (2008) studied the National Social Life, Health and Aging Project data, a population-based study of non-institutionalized Americans between the ages of 57 to 85 conducted in 2005 (p.185). The author found no significant relationship between old age and social connectedness (Cornwell, 2008, p.200). However, the author suggests that if participants experienced loneliness, it might be mitigated by a positive association with volunteering, frequency of neighborly socializing, and religious service attendance (Cornwell, 2008, p.200).

Wenger et al. (1996) took a unique approach to study isolation in the social lives of seniors by differentiating social isolation from loneliness, wherein the former is an objective condition, and the latter is a subjective condition (p.333). Both the objective and subjective experience had their distinct correlates. For example, they found that ethnicity, household composition, and self-assessed health correlated with isolation (Wenger et al., 1996, p.350). In contrast, Wenger and colleagues identified social class as the primary correlation to social isolation in the senior population (Wenger et al., 1996, p.350). A brief review of these three studies illustrates the ambiguity of studying social isolation among aging populations and emphasizes the need for additional research to arrive at a clearer understanding of this relationship.

Social Theories of Aging

Over 60 years ago Cumming et al. (1960) offered a theory to challenge the presumption that older adults are solely responsible for the act of disengaging from their social environment as a direct result of increasing chronological age (p.23). In this early theory of aging, Cumming et al. (1960) acknowledge that while it is intuitive to believe chronological age is the primary catalyst for changes in a person's patterns of interaction and general orientation to life, age-related societal disengagement is more complicated than this (p.23). Putnam (2002) describes disengagement theory as the mutual disengagement between the individual and society among older populations, which serves as a coping mechanism during adaptation to the physical and psychological changes associated with later life stages (p.800).

Cumming's theory of disengagement emphasizes two key principles. First, the disengagement of seniors from society is a reciprocated process. Despite commonsense notions that older populations' loss of social roles and societal withdrawal is exclusively the product of

individual agency, disengagement theory posits that society disengages from aging people. This argument is important as it highlights the significance of social structures in the aging process. Second, disengagement theory acknowledges that there may also be a psychological component involved in the process of social withdrawal among older populations. Cumming et al. (1960) likens this potentially intrinsic change that accompanies aging to the maturation of children, however, in reverse (p.32). Rather than developing behavioural traits such as drive and self-motivation that children experience during the maturation process it is worth considering there may be a deterioration of these traits with age, which leads to disengagement from society (Cumming et al., 1960, p.32). These principles are significant when considered relative to successful aging as they emphasize the complexity of the aging process without reducing societal disengagement to simply a matter of choice.

However, in contrast to the negative hue that disengagement theory projects onto the aging process, Lobo et al. (2017) critique this theory, noting that the process of societal disengagement may be a satisfying period of life for some aging people (p.15). Hochschild (1975) argues that disengagement theory ignores the symbolic understandings that people attach to the activities and relationships their lives consist of (p.567). Hochschild (1975) seeks to build on disengagement theory by conceptualizing aging as a variable rather than a cross-culturally uniform process (p.557). The advantage that disengagement theory gains from Hochschild's alternative theory are that it considers the influence of a wide variety of intervening variables that may affect the relationship between age and societal disengagements, such as physiology, personality, type of initial engagement, and life situation. (Hochschild, 1975, p.557).

Another prominent lens through which sociologists study aging is activity theory. Rooted in the theoretical perspective of symbolic interactionism, the activity theory of aging posits a

positive correlation between activity and late-life satisfaction (Dorfman et al., 1998, p.26). More specifically, Dorfman (1988) explains how activity theory places value on the informal social activities shared between friends, relatives, and neighbors (p.26). The author suggests that these social connections are essential to providing aging people with a support system that reaffirms self-concept and promotes late-life satisfaction beyond formal social activities (Dorfman, 1998, p.26). Activity theory functions in opposition to disengagement theory to an extent in that it suggests continued social activity, particularly between intimate social connections, is crucial to the maintenance of belonging and engagement within society during life's later stages. Lobo et al. (2017) note the positive implications of the activity theory of aging relative to disengagement theory - the former focuses on the potential for aged people to develop new social roles (p.16). It is reasonable to hypothesize that populations who self-proclaim that they are "young at heart" sustain elevated levels of social activity in this sense, which renders this theory useful for framing the following research.

Gaps in the Literature

While the preceding text covers some of the common themes and theories throughout sociological research on the social lives of senior citizens, there are several noticeable gaps in the literature.

First, research suggests a significant decline in the prevalence of disabling conditions among older adults in the US over the last several decades (Freedman, 2014, p.1). Despite the medical advances that have prolonged life expectancy and lowered disability, aging is often accompanied by unavoidable disabilities that may limit daily life (Freedman, 2014, p.1).

Therefore, there may be a cohort of seniors living longer with disabling conditions. However, the literature reviewed throughout this paper was absent of any meaningful consideration of disabled

people' experiences of aging relative to experiences of social isolation. In this vein, Putnam (2002) highlights the need for theories of aging that directly address the concept of disability or how living with physical impairments changes people's position in, and interaction with, the social environment (p.801).

Along with a lack of research on the social connectedness of senior populations aging with disabilities, there is also a lack of literature addressing the social lives of healthily aging seniors - such as those who describe themselves as young at heart. Although there are volumes of literature concerning the traditional perspective of social isolation as an indirect result of people's deteriorating physical and mental condition, seniors who describe themselves as young at heart were not represented in these studies. Since this gap exists in the literature, my research question of whether young at heart seniors experience social isolation as they deviate from the traditional aging norms of society is valid. Before answering my research question, we will first outline the research methods used to obtain the findings.

Research Methods: Filling the Gaps

Participants were required to be at least 65 years old, consider themselves young-at-heart, and reside in Atlantic Canada to qualify for this study. There are two reasons I chose to frame my study population as Atlantic Canadians instead of a single province. First, early in the research design process, I recruited two participants from different Atlantic provinces - one from Nova Scotia and one from Newfoundland and Labrador. Second, the structure of formal (public and private) and informal (for instance, family-based) social support and healthcare provision is relatively similar in the four Atlantic provinces. Therefore, this justifies my decision. (In the end, only two provinces—Nova Scotia and Newfoundland and Labrador—are represented in the data.)

From these initial two participants, I used snowball sampling as the primary recruitment method to secure the remaining six participants in my sample. Snowball sampling is a non-random sampling method facilitated by the referral of people who qualify for my research from the network of my initial participants (Bernard et al., 2017, p.190). After interviewing my initial participants, I emailed them a recruitment flyer, and they were asked to share it with people within their social network who fit the criteria for this study. This process continued with each new participant. While this recruitment method benefited my study as it granted me access to a hard-to-find population, it also introduced limitations to my study that will be discussed later in this section (Bernard et al., 2017, p.190).

I conducted eight semi-structured qualitative interviews consisting of open-ended questions to answer my research question. There were two main reasons for choosing this method of data collection. First, it provides participants the freedom to discuss experiences in their social lives openly and any changes they perceive in their sense of social connectedness at this stage in their lives (Bernard et al., 2017, p.212). However, semi-structured interviews also provide me, the researcher, with a degree of control over the direction I want them to take the interview and the discretion to follow leads or probe further when necessary (Bernard et al., 2017, p.212). The primary research instrument used in the data collection process was a research guide constructed as a list of questions that I formulated to ensure topics were covered in a particular order (Bernard et al., 2017, p.212).

My interview guide was constructed to test the three prominent theories of aging found in the literature: disengagement theory, modified disengagement theory, and activity theory. Each of these theories frames seniors' engagement with society from different perspectives. While the interview process provided ample opportunities for participants to express their unique

perspectives, it also shed light on the validity of these theories relative to my topic. All the interviews were conducted via the Zoom video conferencing software to mitigate any risks related to the COVID-19 pandemic. This virtual interview setting was also beneficial as it allowed me to reach participants located across Atlantic Canada. With participant's consent, I recorded the interviews using the in-software screen record option, which afforded reliability as I analyzed the data collected from these interviews after they were completed (Bernard et al., 2017, p.227).

To analyze the descriptive data obtained through these semi-structured interviews, I used the principles of grounded theory to conduct a thematic analysis. This process involved identifying categories, concepts, and themes that emerged from interview transcripts and linking all these findings into comparative groups (Bernard et al., 2017, p.492). Through this inductive coding process, I used memoing to keep notes on potential links between categories and how this data relates to the theoretical frames and preexisting literature used to frame this research (Bernard et al., 2017, p.493). After the common themes were categorized, analyzed, and referenced to the preexisting literature, I constructed a logical narrative that presents the main findings of my research and describes whether young at heart seniors experience social isolation and how they navigate their social lives.

It is essential to acknowledge the ethical considerations involved in my research. After receiving approval from Dalhousie University's Research Ethics Board, I conducted this research with confidence that the risks or discomforts associated with my study are unlikely to surpass those incurred in day-to-day life. To mitigate any risk or discomfort that may have arisen, I informed all participants that they could pause or stop the interview at any point or refrain from answering any questions they did not wish to answer, as outlined in the informed consent

process. At the outset and conclusion of the research, I affirmed the consent of my participants and reminded them that if they experienced any feelings of vulnerability after the interview's conclusion, they could choose to have some of, or all of, their data withdrawn from the research up to two weeks after the interview date. Finally, all identifying information from interview notes, transcripts, and my results were removed to ensure confidentiality.

There are two limitations in my research associated with the sampling methods. First, with only eight participants, the sample size is relatively small, and therefore, the findings in this research are not representative of the entire young at heart senior population. Second, due to the use of snowball sampling as the sole recruitment method, my research did not contain the degree of gender, racial, or socioeconomic diversity I would have liked. Nonetheless, the findings in this study are valuable as a jumping-off point for future research on the social lives of healthily aging seniors, and recognizing these limitations opens other possible directions for research on this topic.

Findings: Aging Beyond the Norm

Through the interview process, I obtained a robust set of data on the social interactions and personal relationships of eight seniors who consider themselves “young at heart.” Critical to understanding the relationship between this demographic and their social experiences, my research participants first described what they believe it means to be young at heart and how this description fits them personally. Following this, participants discussed the effect that being young at heart has on their social networks and sense of social connectedness at this stage of their lives. Three prominent themes illustrate how these people navigate their social lives and whether they experience social isolation due to their young-at-heart identity. The first theme is chronological age and the social norms associated with this age, how this concept functions as an

obstacle in their social lives, and how they navigate this obstacle. Second, participants describe their sense of social connectedness at this period in their lives. And finally, they discuss the level of difficulty they experience in achieving and maintaining a sense of social connectedness as a young at heart senior.

The “Young at Heart” Senior

Since the idea of being young at heart can have a diverse range of meanings for different people, each interview began by establishing a consensus of what this concept means to my participants. Among the most common responses, participants spoke of several elements that are at the core of this identity, including a person’s physical, mental, social, and attitudinal capacities. When asked about how they identify with these unique capacities, three main topics arose: physical fitness, continued pursuit of knowledge, and positive attitudes about life.

Five of my eight participants highlighted the positive role of exercise and dietary habits in their lives. These people believe that physical fitness is a central element of their young at heart identity. My oldest participant, a 74-year-old man [J], stressed the importance of diet and exercise, saying, “[...] diet and exercise are the main two components to a long healthy life. I tell all my young friends, I say, you know, if you wanna live long, you gotta eat the right foods and exercise.” After a colon cancer diagnosis at 38-years-old, this man attributes the adoption of a strict diet and exercise routine to his recovery several decades ago, and subsequent longevity since. Detailing the substantial role of physical fitness in his lifestyle, a 69-year-old man [C] described his exercise routine as consisting of “weight training four or five days a week, a lot of cycling [...] wintertime you get into snowshoeing, hiking”. Finally, a 65-year-old man [K] elaborated on the significance of physical fitness to the young at heart identity by arguing, “It’s

hard to think young and consider yourself to be young but not be fit and active and able to do things physically, right?”. While physical wellbeing was a common focus amongst many of my participants, the importance of one’s attitude and outlook on life also frequently presented in their responses.

“It’s not just about fitness,” one 66-year-old woman [D] insists, addressing what being young at heart means to her. This lady believes that sustaining a passion and appreciation for life is equally important as physical fitness. “To keep you really young at heart, I believe one of the most important factors is gratitude [...] if you don’t have gratitude, you’ve got nothing,” she later added. These statements speak to the attitudinal aspect of the young at heart identity and the importance of one’s perspective on life, which six of my eight subjects supported. For example, the 74-year-old man [J] who survived cancer at 38 noted, “You know, the whole term young at heart [...] we got the physical side, but there’s uh, you know there’s something about your perspective on life that helps you keep the physical in check”. Others described the idea of being young at heart through positive attitudinal characteristics such as open-mindedness, living without regret, and continuing to “hunt for freshness in your life [...] it’s good for your brain actually to take up something new,” the 73-year-old man [S] contended. This statement leads us to the third prominent theme throughout my respondents’ descriptions of how they relate to the young at heart identity – intellectual stimulation.

Of my eight participants, six stated that continuing to expand their horizons in terms of knowledge that they want to achieve is a salient aspect of what makes them young at heart. “I’ve always got four or five books on the go, you know most of them are non-fiction,” stated the 67-year-old man [F] in my study, before proceeding to describe being young at heart as having “[...] a continuing thirst for knowledge and education and then staying current around what’s going on

in the world.” These views were supported by my 69-year-old man [C] respondent, noting that he is constantly “identifying books that are on a subject that give me more knowledge [...] not only books but podcasts.” Further, he explained that he and his friends have “created a mailing list” wherein they share their latest topics of study with each other. Although the most prominent form of education that my participants spoke of was informal, one of the 66-year-old-woman [D], who has owned a hair salon for over four decades, spoke about attending formal workouts to continue expanding her education in the latest industry techniques.

Accordingly, the consensus among my participants is that one’s physical, mental, social, and attitudinal capacities are at the core of the young at heart identity. Summarizing these ideas, the 69-year-old man [C] in my study insists, “it’s a combination of you know, physical activity, intellectual activity, and grounding in your perspective [...] and most important, it’s the infinite pursuit of awareness and knowledge.” However, in the case of my participants, they contend the significance of these capacities is not the capacities themselves. It is that these capacities do not align with traditional norms and expectations associated with their chronological age. Consequently, they acknowledge that the deviance from age-related societal expectations inherent in the young-at-heart lifestyle can present obstacles in their social lives.

Chronological Age and Social Norms

As one-half of my participants explicitly stated, and the other half implied in some way, their chronological age is simply a number with little relevance as to how they live their lives. They believe that these physical, mental, and social capacities that characterize their young at heart identity differ from the traditional norms and expectations of their cohort – senior citizens. For instance, a 65-year-old man in my study attested,

My lifestyle is different from what people expect for someone of my chronological age [...] with the exception of my silver hair, if you consider the physical and social aspects of my life, I don't think that you would believe that I am 65. [G]

Echoing similar sentiments, a 65-year-old man [K] affirmed that “age is not something that I even think about [...] my ability, my capacity for things would probably be more associated with someone a lot younger than what I am.” In this sense, being young at heart involves, as [F], a 67-year-old man suggests, “a disregard of traditional norms associated with age [...] it’s living the same way you did when you were much younger and ignoring the fact that you’re getting older.” When asked about the challenges that their departure from traditional aging norms presents in their social lives, two salient issues emerged: a sense of discontent with the nature of community-based social programs that service their cohort and, for some, a disconnect from traditionally aged people of their cohort.

Five of eight participants expressed that society does not offer healthily aging people enough opportunities for social engagement outside of their immediate milieu. “If you're sick, if you're feeble, if you're decrepit, if you're not able to take care of yourself, the system is skewed significantly towards that [group],” insisted the 67-year-old man [F] in my study as he discussed the general orientation of social supports for seniors. Other participants provided direct examples as to the inadequacies of senior-focused social programs. For instance, discussing the types of social activities that are presumed to be suitable for seniors, a 66-year-old woman [M] spoke of her 92-year-old friend who currently resides in an assisted living facility. She said,

I was asking him about the place he is in and what he's up to, and he said, ‘they want me to play fu*cking bingo.’ He's 92-years-old and he doesn't want to play fu*cking

bingo, and I don't blame him. Yet for some warped reason, we think that is stimulating enough for seniors to keep them happy.

This sentiment that the nature of social support programs serving seniors tends to be too limited arose again when a 66-year-old man [G] asserted that,

If I go to a frigging club and people there are 50 yet act like they are 70, everyone is sitting around drinking a cup of tea and talking about their grandkids [...] I would not be interested. Mainly because I do consider myself more youthful than the average person of my age.

Expressing his discontent with the activities presumed to be appropriate for his cohort, he told me about a time he was asked to be an advisor for a community-based social program.

I said what do you mean seniors programs? 'They said people over 50'. And I would just start laughing. What are you doing for people over 50? 'Well, they sit in a swimming pool, and they kick their legs' [...] I'm like are you serious? It used to drive me crazy. [...] If there was a little more diversity in these sorts of thing.

With this said, he later recognized that at some point in time, these social programs might be appropriate for him, "at some point you might, just might, fit into that slot. I might be recovering from a disease. I might have an injury." As five of the eight participants in my study suggested, the narrow nature of social support serving their cohort, shaped by traditional aging norms, are often unsuitable for people of their capacities. With this in mind, I was curious what effect these aging norms have on the relationships between my participants and traditionally aged seniors.

My participants described their relationships with traditionally aged seniors in three general ways. Two respondents noted having many relationships with traditionally aging seniors and spending plenty of time around them. Five suggested that they have relationships with these

people; however, they tend to be at the periphery of their social life. The remaining participant indicated that he does not have many social connections with these people and has no desire to.

Intriguingly, the lone person in the latter category was the oldest participant in my sample. “I’m not really attracted to hanging out with older people because they don’t have the lifestyle I do,” the 74-year-old man [J] said. Expressing the difficulty he experiences socializing with the “normal aging group of souls” who get together and “talk on the topics of the day and only the topics of the day, the 69-year-old-man [C] in my study stated that, “for people like me to stay around there for a long time, it’s hard to do.” However, while six of eight participants shared a sense of disconnect between them and the traditionally aged demographic of their cohort, five of six still associate with these types of people to varying extents. “Well, there is more of them than there is us,” the 69-year-old man [F] stated. In my study, one of the 65-year-old men [G] described the role of traditionally aged seniors in his life, asserting that “they tend to be people I associate with through my wife, but there is still a divide in activities that we take part in.” Finally, one of the two who respondents that noted the significant presence of traditionally aged seniors in their life, a 72-year-old man [S], argued it is “healthy to have a mixed group of people that you’re relating to, right?”

When asked if they ever feel judged by aged people who align with society’s expectations of their age, seven of my participants denied ever feeling this in an imposing way. However, the 69-year-old man [C] in my study described what he feels is lighthearted judgement at times, wherein these people say, “half mocking like ‘do you realize how old are?’ ‘you shouldn’t be doing that stuff at your age.’ “You’ll get statements like that from time to time, but that’s from their frame of reference,” he acknowledges.

With their unique lifestyle and capacities, the young at heart seniors in my study indicate they do not relate to their chronological age, and experience varying degrees of separation from the norms and social expectations associated with it. Since these norms shape the opportunities for social engagement throughout society, such as social programs and personal relationships, it raises the question of whether this impedes their sense of social connectedness. In the following, we confront the question, do participants experience social isolation as an implication of being young at heart?

Healthy Social Lives

All eight participants indicated that social isolation is not a problem for them. In fact, participants expressed a high level of satisfaction with their social networks and connectedness at this stage of their lives. To illustrate this satisfaction, participants described two general types of social lives.

Five respondents noted having robust social lives consisting of longstanding friendships and the continued development of new ones. For instance, the 72-year-old man [S] described his social life as “rich,” stating that he has friends who go back to when he was in his 20s: “[some] live in different cities... but we stay in touch”. Addressing the ever-present opportunities for social engagement, “there is always stuff to be doing, always conversations to be had. [I am] always engaging with people,” the 67-year-old man [F] insisted. These opportunities for social connections seemed to have reached excess for one 65-year-old man [K], as he jokingly told me, “I’m trying to keep [my social network] from growing more (laughs). I’m not in the stage where I don’t want any more friends, but I really don’t need anymore.” He later continued, “people torment me and say I’m a pretty gregarious guy [...] so I got circles within circles and circles. I

have a lot of different social groups on the go.” On the other hand, some respondents find satisfaction in their social lives through more intimate social connections.

The three other respondents alluded they have consciously narrowed their social lives to fewer but more devoted relationships. Two of these three people suggested that these relationships are akin to family members. As a 66-year-old woman [M] explained, “I have a great group [of friends] [...] it is almost like a big family.” Expressing her belief that it is not about the number of relationships in your social life, but the meaningfulness in the relationships you do have, she insisted, “if you can have one or two really good connections, you’re really lucky.” Another 66-year-old woman [D] shared sentiments of familial like connections in her social life, stating, “I have friends that are all different age groups, but these people are like my family that I choose for me.” Conveying gratitude toward the close relationships she has chosen for her life and the fun they enjoy together she said, “we play corn hole, I didn’t even know what the hell corn hole was (laughs) [...] we dance, we like to sing [...] so, I’m in a great place in spite of life challenges which are always there.”

Whether participants described their social lives as vast or tighter knit, they demonstrate the ability of young at heart seniors to avoid feelings of social isolation and enjoy healthy social lives despite the implications of age-related norms. However, an observation emerged from these two predominant forms of social networks. That is, across both types, shared interests, attitudes, and lifestyles are often at the core of their relationships.

Across all interviews, respondents either explicitly or implicitly stated that their immediate social circles primarily center around, and are maintained through, shared interests, attitudes, and lifestyles – many of which are properties they described as being at the core of their youthful identity. The significance of like-mindedness in their social lives presents itself in

various statements where participants described how they maintain their social networks at this age in their life. For instance, a 73-year-old man [S] described the nature of his immediate social circle, saying, “it’s a shared interest thing, one of them is the physical stuff that I do, but it doesn’t have to be physical activity, it’s an attitudinal thing too.” A 65-year-old man [K] supported this notion when he explained the similarities between the people in his main social group, saying, “we’re all very active, we all think the same, we all live healthy lifestyles.” While these connections facilitate through shared attitudes and activities, they grow to exist in other social settings. “The people you do that stuff with, you tend to kind of socialize with, go out to dinner at a restaurant [with],” asserted another 65-year-old man [G] as he explained the evolution of these relationships. Highlighting the appeal of having like-minded connections in her social life, a 66-year-old woman [M] explained, “if you are lucky enough to be surrounded by like-minded people, then you just shine. You enjoy life.” However, this is not to say their social lives are filled exclusively with young at heart seniors, but people with similar physical, intellectual, and attitudinal capacities.

As previously demonstrated, my respondents often noted an unrelatability to traditional senior activities and expectations, which manifests as an obstacle in their relationships with people of their age. However, this unrelatability leads them to find opportunities for social engagement with other demographics – particularly younger people of similar capacities.

Six of eight participants noted the significant role that younger people of similar physical, mental, and social capacities have in their social networks. A 69-year-old man [C] described the change in demographical make-up among his social network as he has aged, saying, “what happens is you tend to shift the people who are in your social environment to be people who are capable of doing some of, if not all of, the same things that you can do.” Another man, 67-year-

old [F], expressed his appreciation for the young members of his social circle, “I value my relationships with young people like I’m really keen to hear about their experiences and what they’re putting their energy into.” Again, this value found in relationships with younger people was echoed when [J] said,

I don't feel like I'm 74 when I'm with a group of guys that are in there 50s. I feel the same as them really [...] I don't feel like I'm 30, don't get me wrong, I'm not psycho (laughs).

But I still feel like I'm not I'm not a 74-year-old.

However, after voicing the value he sees in the inclusion of young people in his life, a 65-year-old man [G] clarified his position, “I’m not saying you always have to hang around with younger people. But the notion of hanging around with people who can do what you are doing, whether they be 30 years younger or your age, that’s all that counts.” So, while my research indicates that the young at heart seniors in this study live healthy social lives, having relationships with young and like-minded people helps achieve this. Further, many participants in my study suggest that maintaining these social connections has not become any more difficult and, in some cases, is easier than earlier in their lives.

Ease of Maintenance

Seven of eight participants contended that the difficulty involved in maintaining their sense of social connectedness has not changed or has become easier at this stage of their lives. Of the seven, five suggested that maintaining a sense of social connectedness has become easier, and there were two prominent reasons for this.

With two of my participants being retired and two others have taken a step back from their careers, these people note having more time and energy to maintain or expand their social

life. As [K], a 65-year-old man, explained, before he retired, work was all-consuming, "because of that it was difficult to devote time to my personal life. I have more time on my hands than I had back then. So, in that sense, it has become a little bit easier." He detailed new interests that have even led to his social network growing during the four years since his retirement, one of which is his interest in technology startups. Through this, he said,

"I've become associated with and spending time with a lot of young tech startup people [...] so at a time when others sort of shrink their world socially, I have added another new chapter, and I'm loving it. I would have never been able to get to know all these young tech startup founders [before retirement].

Although not yet retired, three others have taken steps back from their careers which grants them additional time to focus on their personal relationships. [D], a 66-year-old lady, described the gradual retreat from her business and focusing more on her personal life, saying, "I'm at that point now where I'm stepping back from the business a little and enjoying my personal life more."

Three of the five participants who argued that maintaining their sense of social connectedness has become easier at this stage of their lives believe that, with their age, they have developed the wisdom to know what relationships are important in their lives and prioritize these. As [M], a 66-year-old lady, stated, "it's perhaps a little easier because I think as you get older, you have a better sense of who you are and what you want and need out of life [...] you know what you're not going to settle for." [F], a 67-year-old man, echoed these sentiments, explaining how earlier in his life he had more superficial relationships because "I want the attention, I want to be a member of this, and that's just so that that I'm out there." In contrast to

the current period of his life, he said, “right now I don’t care about that [...] as time goes on, I focus on the range of friends who I really like and have a common interest with.”

Two participants suggested that, due to their personalities, the level of difficulty to maintain their social connectedness has not changed. For instance, [C], a 69-year-old man, told me, “Due to my nature, it has always been easy for me and still is today – now that is an extrovert answering that.” [K], a 66-year-old man, held the same perspective as he told me, “It has probably stayed the same. I would say it certainly has not become any tougher. [...] I have a built-in bias in that regard because that is the way I am.” While not explicitly stated by other participants, this outgoing, extroverted personality seemed to be a common intrinsic trait across many of my participants.

On the other hand, [S], a 73-year-old man, described how he believes maintaining social connections can get tougher as people age. He said,

As people get older, they get markers and stripes that differentiate them. ‘You can’t be my friend ‘cause you’re not rich and successful. You can’t be my friend ‘cause I don’t agree with you in politics.’ Whereas when you are 19 or 20, what are you interested in? Going up for a beer? Dating? It is easier, right?

So, while most participants agree that maintaining a sense of social connectedness has stayed the same or gotten more manageable as they age, a case can be made for how it gets more challenging. Nonetheless, this research indicates that young at heart seniors can maintain satisfying social lives without experiencing increasing difficulty as they age.

Discussion: Antiquated Perspectives

Although there is a robust volume of literature exploring the relationship between senior citizens and social isolation, there is little mention of those who deviate from traditional aging norms – for example, seniors who describe themselves as young at heart. After analyzing the data produced by my research, the young at heart seniors in this study do not experience social isolation. In fact, there was a common sentiment among them that they live healthy social lives despite the obstacles they encounter. One of the primary obstacles in their social lives is the conception of chronological age and the societal expectations associated with their age. They navigate this to achieve a sense of social connectedness through their connections with like-minded people, who, in some cases, are much younger. Further, my research suggests that for some young at heart seniors, achieving and maintaining social connectedness may become easier at this stage in their lives. Relating these findings to the literature used to frame this study, they support some perspectives and challenge others.

For instance, much of the sociological literature on aging used to frame this study explored conceptions of age – specifically chronological age. This concept proved critical in my research, with many participants describing their inability to relate to their chronological age and the obstacle it represents in their social life. While not explicitly stated by the respondents in this study, my findings support Settersten and Mayer’s (1997) argument that chronological age is an “empty” variable and that there is a need for a more nuanced understanding of age throughout society that is more sensitive to physical, psychological, and social individual differences (p.238).

Throughout the sociology of aging literature, three popular theoretical frameworks have been tested in this study: disengagement theory, modified disengagement theory, and activity

theory. Disengagement theory posits that a mutual disengagement occurs between aged people and society as a coping mechanism during the process of adapting to the physical and psychological changes associated with later life stages (Cumming et al., 1960, p.23). My research challenges this theory, as the participants in my study remain meaningfully engaged in society. However, my sample consisted of young at heart seniors, a group described as possessing different physical, intellectual, and attitudinal qualities than the general population of this age cohort. Therefore, after completing my research, the broad lens of disengagement theory does not consider the nuances of my study population.

The modified theory of disengagement is more appropriate to understand my population in relation to experiences of social isolation. The modified theory of disengagement considers many intervening variables that may affect the relationship between age and societal disengagement, such as physiology, personality, type of initial engagement, and life situation (Hochschild, 1975, p.557). This modification captures the depth of my subject's identities as my data suggests that attitude, lifestyle, social, and economic factors are crucial to these people remaining healthily aged and socially engaged. Although not covered in my findings, the consideration of socioeconomic status in this theory is particularly interesting as this topic emerged throughout my interviews in relation to the young at heart identity.

Four of eight participants acknowledged the impact of socioeconomic status on being young at heart. As [G], a 65-year-old man, argued, "I don't care what anyone says, your level of income assists you with living a better lifestyle. Exercise memberships are not cheap, and bicycles are not cheap. Moreover, Wenger et al. (1996) found social class as the primary correlate of social isolation among older populations (p.350). So, your economic level makes it easier." In this regard, Hochschild's modified theory of disengagement is more effective than

Cumming's theory of disengagement for understanding the relationship between young at heart seniors and social isolation.

In contrast to disengagement theories, activity theory suggests continued social activity, particularly between intimate social connections, is crucial to maintaining satisfaction and belongingness within society during later life. This theory proved to be significant in my research as all my participants report living active lives in either the physical, intellectual, or social sense – and for some, all three. Based on my findings, it is reasonable to theorize that seniors who identify as young at heart sustain elevated levels of activity in their lives and therefore avoid social isolation.

It seems as if society views the social patterns of seniors through a lens that reflects the theory of disengagement. This perspective, in turn, shapes the types of opportunities for social engagement available to these people. However, suppose society adopted the activity theory perspective. In that case, there may be a more diverse offering of social opportunities for a wider range of aging people – such as young at heart seniors. Therefore, the findings of this study highlight the need for a societal shift in how senior citizens are viewed as physical, intellectual, and social beings.

Conclusion

While many sociological studies investigate the social lives of senior citizens and their experiences of isolation, there is a noticeable absence of healthily aging seniors from this literature. My research has addressed this gap by asking the question of whether seniors who are “young at heart” experience social isolation as they deviate from the traditional aging norms of society. Based on the findings in this study, young at heart seniors do not experience isolation in their social lives. Participants in my research expressed that they live healthy social lives, and the

nature of their social lives took various forms. For some, this meant having large social networks consisting of old and new relationships. For others, this meant narrowing their social circles to consist of fewer but more meaningful relationships. In both cases, participants emphasized the high degree of satisfaction they experience in their social lives. However, this feeling of satisfaction does not come without its challenges.

Participants indicated that their chronological age has consequences in their social lives. These consequences do not arise as an inherent feature of their age, but rather how the norms associated with their chronological age shape their opportunities for engagement in society. The challenges that stem from this appear in the difficulty they have relating to traditionally aged people of their cohort and the inability of social support that serves their cohort to satisfy the youthful capacities they possess. However, participants suggest they navigate these obstacles and achieve a satisfying sense of social connectedness through networking with like-minded people. In many cases, these people are much younger than they are.

Interestingly, not only do the seniors in this study live healthy social lives but most contend that maintaining a sense of social connectedness is not any more difficult or has become easier at this stage in their lives. They gave several reasons for this. First, they are at a point in their career, allowing them more time to focus on their social lives. Second, they believe that with age comes wisdom to know what relationships are worth their time, and they prioritize these relationships. For others, they credit their outgoing and extroverted personalities as the reason it has always been easy to live a healthy social life and still is to this day. Finally, the seniors in this study expressed that their active social lives positively affect their young at heart identities.

These findings challenge some of the theories used to frame this research and support others. While there are limitations to the generalizability of these findings due to a lack of

socioeconomic diversity in the sample, these findings nonetheless highlight the need for more nuanced understandings of age and how antiquated age conceptions have implications in the seniors' social lives. Through this study, the groundwork has been laid for future research that may help further understand the effects that deviating from traditional aging norms has on the social lives of healthily aging seniors and provide these people with the necessary resources to ensure their continued longevity.

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Appendices

Appendix A: Recruitment Flyer

Hi there!

My name is Paul Pike and I am a fourth year undergraduate student completing my honours in sociology at Dalhousie University. I am conducting a research project that explores the social experiences of “young at heart” seniors in Atlantic Canada.

If you are 65 or older, consider yourself to be young at heart, and are interested in sharing your experiences of how your social life has changed as you age, I would love to have a conversation with you! Participation includes a single interview that will be about one hour in length, and all aspects are completely voluntary. If you decide to participate, your identity will be made anonymous in all aspects of the research.

If you are interested in participating or have any questions about the project, please email me at ppike@dal.ca.

Thank you! :)

Appendix B: Consent Form

CONSENT FORM

“Young at Heart” Seniors and Changing Social Lives

You are invited to take part in a research study being conducted by me, Paul Pike, an undergraduate student in Sociology, as part of my honours degree at Dalhousie University. The purpose of this research is to find out more about the social experiences of seniors who describe themselves as “young at heart,” including whether and in what contexts they experience social connection or social isolation, and how they feel about these experiences. I will write up the results of this research in a paper for my class, called the honours thesis.

As a participant in the research, you will be asked to answer a number of interview questions about how your social life has changed and what your experiences of social isolation and connectedness have been as you age. The interview should take about an hour and will be conducted in a quiet location of your choice or using a video conference platform of your choice (Zoom or Microsoft Teams). The interview will be audio-recorded. If I quote any part of it in my honours thesis, I will use a pseudonym, not your real name, and I will remove any other details that could identify you from the quote.

Your participation in this research is entirely voluntary. You do not have to answer questions that you do not want to answer, and you are welcome to pause or stop the interview at any time if you no longer want to participate. If you decide to stop participating after the interview is over, you can do so until two weeks after the date of your interview. I will not be able to remove the information you provided after that date, because I will have incorporated it into my analysis.

Information that you provide to me will be kept private and will be anonymized, which means any identifying details such as your name will be removed from it. Only I will have access to the unprocessed information you offer.

I will audio-record all the interviews (with your consent), using the voice memo function on my personal iPhone with the “auto-sync” setting disabled. After each interview, I will transfer the recording from my iPhone onto my encrypted, password-protected personal laptop, and delete the audio file from my iPhone immediately thereafter.

If we conduct the interview by Zoom/Teams, I will also record the interview using the platform's internal recording feature. During the live Zoom/Teams meeting, audio and video content is routed through the United States, and therefore may be subject to monitoring without notice, under the provisions of the US Patriot Act, while the meeting is in progress. However, the risk associated with using Zoom/Teams recording for this research is no greater than using

Zoom/Teams recording for any other purpose. After the meeting is complete, meeting recordings are securely stored in Canada and are inaccessible to US authorities.

If you choose to use Zoom, I will save the meeting recording on my password-protected laptop. I will delete the video recording immediately, retaining the audio recording to transcribe. If participants choose to use Teams, I will save the full meeting recording in my password-protected Dalhousie OneDrive account.

I will store the interview recordings on my laptop and OneDrive until Dr. Radice has submitted my final grade for my thesis, at which time I will permanently delete the recordings.

I will transcribe my handwritten notes and the interviews recordings myself. I will file these notes and transcripts in a password-protected Microsoft Word document on my encrypted, password-protected laptop shortly after the interview. When I have transcribed my handwritten notes, I will immediately dispose of the originals by shredding them. Immediately after having transcribed the interview recording, I will anonymize the transcripts by omitting details which would clearly identify you, and I will assign a pseudonym to each participant. I will retain these anonymized transcripts for two years following the conclusion of this study so that I can learn more from them as I continue with my research.

If you choose to withdraw from my research after the interview prior to the two weeks post-interview deadline, I will immediately delete all files associated with you, including interview notes, transcript, and recordings, and I will shred your consent form.

I will describe and share general findings in a presentation to the Sociology and Social Anthropology Department and in my honours thesis. Nothing that could identify you will be included in the presentation or the thesis.

The risks associated with this study are minimal but include potential discomfort that might arise from sharing sensitive or negative experiences. If you feel upset at any point during the interview, you are welcome to take a break or stop the interview entirely.

There will be no direct benefit to you in participating in this research and you will not receive compensation. The research, however, will contribute to new knowledge on the social experiences of “young at heart” seniors. If you would like to see how your information is used, please feel free to request a copy of your interview transcript and/or my honours thesis, which I can send you after April 30.

If you have questions or concerns about the research, please feel free to contact me or the honours class supervisor. My contact information is ppike@dal.ca. You can contact the honours class supervisor, Dr Martha Radice, at the Department of Sociology and Social Anthropology, Dalhousie University on (902) 494-6747, or email martha.radice@dal.ca.

If you have any ethical concerns about your participation in this research, you may contact Catherine Connors, Director, Research Ethics, Dalhousie University at (902) 494-1462, or email ethics@dal.ca.

Participant's consent:

I have read the above information and I agree to participate in this study.

Name:
Signature:
Date:
Researcher's signature:
Date:
I would like a copy of <input type="checkbox"/> my interview transcript <input type="checkbox"/> the honours thesis emailed to this address:

Appendix D - Interview Guide

Introduction

- Summarize my research project, goals, and explain why the participant is appropriate for this study.
- Remind participant of their ability to withdraw from the interview at any point up, the two-week post-interview withdraw deadline, and reaffirm their consent to record audio.
- Prompt questions they may have before beginning the interview.

Social Networks, Connectedness, & Isolation

- How do you define the notion of being “young at heart”?
 - How do you feel the description “young at heart” fits you, personally.
 - Do other people see you as young at heart? In what context?
- How would you describe your social network at this stage of your life?
- What are the primary ways you maintain your social connections?
- Do you participate in online social communities? (Facebook, Twitter, etc.)
 - If so, what role does this play in your social life?
- Do you feel that maintaining a sense of social connectedness has become easier, tougher, or remained the same as you have aged?
 - How so?
- Are there any activities that you take part in that you feel facilitate relationship building with like-minded people of your age?
 - Further, does engaging in social activities elevate your sense of social connectedness at all?
 - If not, is there anything else that you feel does elevate this sense?
- In general, do you feel that society offers healthily aging people a reasonable amount of opportunity for social engagement?
 - If yes, in what forms do you see this presented in?
 - If not, are there any ways you believe this can be improved?
 - Is there any role government or other establishments can fill to promote social relationships among healthily aging populations?
- Do you feel that staying socially connected has any impact on you maintaining your sense of being “young at heart”?
 - If so, how?
 - Are there any obvious factors that help you maintain this sense?

- As someone who is described as young at heart, how would you describe your relationships with aged people who are represented by the traditional norms associated with aging?
 - Have you ever felt negatively judged by these people for your youthful behaviour?
- If you could provide the next generation with one piece of advice for remaining “young at heart,” what would it be?

Conclusion

- Ask participants to offer any concluding thoughts.
- Ask for preferred pronouns.
- Remind participant of their ability to withdraw from the study at any point during the next two weeks.
- Thank participant and encourage them to share my Dalhousie email address with any people they believe are appropriate for my study and may like to participate in it.

Appendix D: Participant Description

Name	Age	Pronouns	Race/Ethnicity	Location
Chuck	69	He/Him	White	Newfoundland
Dee	66	She/Her	White	Newfoundland
Frank	67	He/Him	White	Nova Scotia
Gary	65	He/Him	White	Newfoundland
John	74	He/Him	White	Nova Scotia
Ken	65	He/Him	White	Newfoundland
Mary	66	She/Her	White	Newfoundland
Steve	73	He/Him	White	Nova Scotia

Appendix E: REB Final Report

ANNUAL/FINAL REPORT

Annual report to the Research Ethics Board for the continuing ethical review of research involving humans / Final report to conclude REB oversight

A. ADMINISTRATIVE INFORMATION

This report is (<i>select one</i>):				<input type="checkbox"/> An annual report	<input checked="" type="checkbox"/> A final report
REB file number:	2021-5894				
Study title:	"Young at Heart" Seniors and Changing Social Lives				
Lead researcher (named on REB submission)	Name	Paul Pike			
	Email	ppike@dal.ca	Phone	709-691-0123	
Current status of lead researcher (at Dalhousie University):					
<input type="checkbox"/> Employee/Academic Appointment		<input type="checkbox"/> Former student			
<input checked="" type="checkbox"/> Current student		<input type="checkbox"/> Other (please explain):			
Supervisor (if lead researcher is/was a student/resident/postdoc)	Name	Dr. Martha Radice			
	Email	Martha.Radice@Dal.Ca			
Contact person for this report (if not lead researcher)	Name				
	Email		Phone		

B. RECRUITMENT & DATA COLLECTION STATUS

<p>Instructions: Complete ALL sections relevant to this study</p> <p>Study involves/involved recruiting participants: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, complete section B1.</i></p> <p>Study involves/involved secondary use of data: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, complete section B2.</i></p> <p>Study involves/involved use of human biological materials: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, complete section B2.</i></p>
--

B1. Recruitment of participants	<input type="checkbox"/> Not Applicable
B1.1 How many participants did the researcher intend to recruit? (provide number approved in the most recent REB application/amendment)	8

B1.2 How many participants have been recruited?
(if applicable, identify by participant group/method e.g. interviews: 10, focus groups: 25)

a) In total, since the beginning of the study: 8

b) Since the last annual report:

B1.3 Recruitment for this study is:

complete; or

on-going

B1.4 Data collection from participants for this study is:

complete; or

on-going

B2. Use of secondary data and/or biological materials

Not Applicable

B2.1 How many individual records/biological materials did the researcher intend to access?

(provide number approved in the most recent REB application/amendment)

B2.2 How many individual participant records/biological materials have been accessed?

a) In total, since the beginning of the study:

b) Since the last annual report:

C. PROJECT HISTORY

Since your last annual report (or since initial submission if this is your first annual report):

C1. Have there been any variations to the original research project that have NOT been approved with an amendment request? This includes changes to the research methods, recruitment material, consent documents, study instruments or research team.

Yes No

If yes, list the variation here:

(You will be notified if a formal amendment is required)

C2. Have you experienced any challenges or delays recruiting or retaining participants or accessing records or biological materials?

Yes No

If yes, please explain:

C3. Have you experienced any problems in carrying out this project?

Yes No

If yes, please explain:

C4. Have any participants experienced any harm as a result of their participation in this study?

Yes No

If yes, please explain:

C5. Has any study participant expressed complaints, or experienced any difficulties in relation to their participation in the study?

Yes No

If yes, please explain:

C6. Since the original approval, have there been any new reports in the literature that would suggest a change in the nature or likelihood of risks or benefits resulting from participation in this study?

Yes No

If yes, please explain:

D. APPLYING FOR STUDY CLOSURE

Complete this section only if this is a FINAL report as indicated in section A

D1. For studies involving recruitment of participants, a closure may be submitted when:

- all research-related interventions or interactions with participants have been completed
- N/A (this study did not involve recruitment of participants)

D2. For studies involving secondary use of data and/or human biological materials, a closure may be submitted when:

- all data acquisition is complete, there will be no further access to participant records or collection of biological materials
- N/A (this study did not involve secondary use of data and/or human biological materials)

D3. Closure Request

- I am applying for study closure

E. ATTESTATION (both boxes *must* be checked for the report to be accepted by the REB)

I agree that the information provided in this report accurately portrays the status of this project and describes to the Research Ethics Board any new developments related to the study since initial approval or the latest report.

I attest this project was, or will continue to be, completed in accordance with the approved REB application (or most recent approved amendment) and in compliance with the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2).
