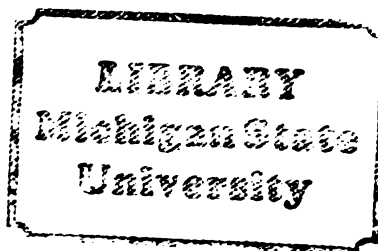




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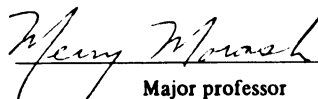
The FEAR OF CRIME AS PERCEIVED BY THE ELDERLY

presented by

Margaret M. Riker

has been accepted towards fulfillment
of the requirements for

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**THE FEAR OF CRIME AS PERCEIVED
BY THE ELDERLY**

By

Margaret M. Riker

A Thesis

Submitted to
Michigan State University
in partial fulfillment of the requirements
for the degree of

MASTER OF SCIENCE

School of Criminal Justice

1985

ABSTRACT**THE FEAR OF CRIME AS PERCEIVED
BY THE ELDERLY****By****Margaret M. Riker**

Because of a mounting concern for the safety and quality of life of America's elderly, this study was conducted to assist in determining the type and degree of fear of crime experienced by the subjects and its effect on their lifestyle.

Participants, all 60 years and over, were interviewed at various senior citizen sites within the community and while passengers of the mass transit system. Data was collected concerning their past and present lifestyle and their attitudes toward personal assault and property invasion and loss.

A qualitative analysis of the information revealed a significant decrease in their quality of life, but the majority of the respondents did not relate this decrease to a fear of crime. Loss of income and physical vulnerability were factors, however, in their ability to cope with criminal threats.

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SECTION I

INTRODUCTION

There is a specific segment of the elderly citizens in America who experience actual and measurable fear of personal crime and victimization (Duke and Lindquist, 1982). This fear and its effects has been the concern of numerous types of studies conducted during the past decade. Several, based on national surveys of victims, concluded that this fear of injury and loss through criminal activity was statistically unfounded (Bureau of Statistics Bulletin, 1981). The evidence produced by this investigation demonstrated that crime against the elderly occurred at a rate of about eight per thousand, about one-fifth of the rate against younger persons. Other sources legitimately question the relative value of focusing on victimization of the elderly, particularly since persons age sixty-five and older generally suffer lower victimization than those of other age groups. However, the patterns which emerge from analysis of victimization rates of crimes among all age groups, according to Midwest Research Institute (MRI), show significant differences between victimized persons age sixty-five and over and the younger age groups. MRI supports data from other studies which contend that, in general, men are victimized more than

women but adds the disturbing fact that in their findings elderly women (65 and over) are second highest of all female age groups to experience robbery with injury and this elderly female group is not drastically different from all male age groups in this crime category. Also, the likelihood of injury when robbed is equal to or greater for elderly women than for both males or females of any age group (MRI, 1977).

The above data coincides with the conclusions of George Antunes, et al (1977) and Cook and Cook (1976) in their studies on victimization. They found that the elderly (sixty-five years and older) victimization rates were not statistically higher or even close to being high compared to the victimization rates of the young adults eighteen to twenty-five. Their conclusions were that there was no real cause for alarm within this elderly population. More specifically, that the elderly were unduly alarmed for their safety and the subject was attracting excessive attention. On the other hand, Duke and Lindquist (1982) argue that it is not the rate of victimization but the fear of victimization caused by the knowledge of crime and violence which drastically alters the quality of life of these elderly citizens. According to them, the issue is not whether this fear is justified, statistically, but

whether the effect of this fear is diminishing the quality of life of these individuals (Duke and Lindquist, 1982).

Lawrence Center (1980), who conducted a study on victims of violent crime and the resultant attitudes of victims, feels that the fear of personal crime has forced these elderly to restrict their movements within their community and has discouraged them from caring for even their own simplest needs. He justly terms it a form of "involuntary isolation". However, if isolation breeds undue fear, as Center reports, a more recent study by Gary R. Lee (1982) contends that 'social integration' or the lack of it accounts for only a very small portion of the fear experienced by the elderly (Lee, 1982). Paul Hudson, the author of a unique "Bill of Rights" for crime victims, feels that to allow this condition to continue is to usurp the elderly's right to a meaningful lifestyle. It infringes upon their constitutional rights (Hudson, 1980). The MRI Kansas City study points out that aside from "explosive crimes" of violence and irrational acts against property, more crimes are perpetrated against victims who are most vulnerable, even when they are not the most lucrative targets. By virtually any set of objective criteria, these elderly Americans, particularly the urban poor, are the members of American society most vulnerable to criminal victimization. Common sense dictates that those elderly

persons are seldom as physically or emotionally equipped to defend or protect themselves or aid in their own security as are their younger counterparts. They are far more susceptible than any other age group to the adverse, long-term effects of criminal attacks or perceived threats of them (MRI, 1977).

It is anticipated that by the year 2000, seventeen percent (17%) of all Americans will be in the sixty-five or over age category (AGING, 1981). This growing population and its needs should be of great concern to citizens of every generation, partially because of the enormous amount of public funds, now over \$195 billion, expended each year on their well-being, and also because of an awareness we all share naturally, that as we reach our own senior years, we should be able to expect a comfortable and dignified lifestyle.

The Problem

The specific problem being addressed by this study is in what way and to what extent criminal victimization and the perceived threat of such victimization affects older Americans, especially the elderly poor living in metropolitan areas. The concern is whether the actual victimization and the related fear of such victimization generates a fear which is responsible for much of the hardships suffered by these individuals? Does this fear

inhibit their ability to remain active and care for their own needs? To what extent do these elderly perceive this threat to their security and does it reduce their opportunity to socialize, to receive proper nutrition and medication, and does it prevent them from taking part in and feeling a part of their own communities? This study intends to study the dimensions of this fear in order to determine just how this threat lessens the elderly's feeling of self-worth and their deserved quality of life.

The Purpose

This study will attempt to identify the extent of fear suffered by the elderly and examine the circumstances surrounding it. It is important to measure the extent of this fear in order to determine the most effective method by which it can be eliminated. Although economic factors and health conditions also affect the quality of life of these elderly, this study intends to concentrate strictly on fear caused by the threat of criminal violence and fraud. The purpose of investigating this fear and its resulting effects is to establish what responsibility, if any, the criminal justice system has in intervening in this situation in order to help facilitate a lifestyle for these citizen that is dignified and meaningful.

Based on the stated purpose above, the following objectives are set forth:

1. To investigate the dimensions of the fear that exists among the elderly.
2. To examine the effects of this fear on their quality of life.

The following HYPOTHESIS is based on the objectives of this study:

The fear of criminal violence among the elderly poor is sufficient to affect their quality of life.

The NULL HYPOTHESIS is:

The fear of criminal violence experienced by the elderly poor is not sufficient enough to affect a reduction in their normal lifestyle.

The Theoretical Framework

What may seem like irrational behavior on the part of some elderly persons, as they cope with the fear of personal violence, can be explained, in part, by the sociological theory of 'symbolic interactionism'. According to the symbolic interactionists, people act in relation to one another and the orderliness of social relationships centers around the communication that takes place between people as they fit their actions together (Spencer, 1979). Metta Spencer explains the theory as being as simple as one person trying to figure out what another is doing and adjusting his or her own behavior accordingly. In contrast to the beliefs of the structural functionalists, who

contend that individual behavior is only "a part of the whole" (no individual exists in his or her own right), the symbolic interactionists believe only individuals experience needs and have purposes, therefore, only individual people take action. Group action is an accumulation of its individual members' definitions of a given situation (Spencer, 1979). As each individual identifies a situation, whether in communication with another or analyzing an incident in their environment, they define it according to what they perceive the other individual is experiencing. In the case of the elderly poor and their fears, their perception of their own vulnerability and those they associate with has an immense influence on their view of situations in their environment.

Sheldon Stryker (1980) interprets this interaction between persons and the social structure as a reciprocal impact of people and their environment . . .

When entering interactive situations, persons define the situation by applying names to it, to the other participants in the interaction, to themselves, and to particular features within the situation, and use the resulting definition to organize their own behavior accordingly. (Stryker, 1980)

Stryker attributes his version of this theory to George Herbert Mead's 'role' concepts, a popular theme of the Chicago School of the early 1920's. According to Stryker, Mead argued that "a person initiates activity related to

himself and the environment; that is a person does not simply respond to external 'stimuli' existing apart from the activity." He explains that stimuli 'acquire' meaning in the course of activity (Stryker, 1980). Relating this thought to the restricting fears of the population under study, it seems only logical that the elderly's immobility, involuntary isolation and limited interaction with those other than the already fearful members of their own age category, reinforces their perceptions of the danger of criminal violence.

In conjunction with their emotional reactions when communicating or associating with others, it is claimed that the elderly in America have a negative self-image (Logan, 1978). Several authors attribute this tragic defect to urbanization, forced retirement and idleness, the consequences of living away from their families and alone, and their 'poverty level' economic existence (Logan, 1978 and Center, 1980). According to Stryker (1980), Mead dealt with this problem of 'self' and self-image in the same way that he developed the concept of symbols and social acts. He felt that the 'self' develops through the same social process; "the self is an emergent from social interaction . . . it arises from social experience" (Stryker, 1980). The positive social experiences required by the elderly population of interest are seemingly reduced because of

their perceived position or status and their presumed fear to interact outside of their immediate environment. It is the concern of this study to investigate the dimensions of this fear to interact and the causes of the negative self-image of these elderly in order to improve their quality of life.

Overview

In Section II of this study, the pertinent literature will be reviewed. In this review, the current status of crime among elderly groups will be detailed and an elaboration of the age-integrated dilemma will be explored. The relationships between fear and changed behavior will be investigated as well as the affect this behavior has on health, interpersonal activities and mental attitudes. Several views will be discussed that contradict the apparent importance of the problem in general.

In Section III, the major hypothesis will be explained and the methodology outlined. Data collection procedures will be presented, also. Analysis of the findings will be discussed in Section IV and conclusions and recommendations for further research study will follow in Section V.

SECTION II

REVIEW OF LITERATURE

Fear of Crime, the Debate

Much of the recent research on fear of personal crime and victimization amidst the elderly tends to infer that their fear is a type of "phobia" (Jaycox, 1978). That is to say, it is far out of proportion to the actual risk of harm they face. Victimization surveys of the 1970's and even as late as 1981 indicate that younger Americans are four to five times more likely to be victims of personal crimes than the elderly (U.S. Department of Justice, 1977 and 1981). Based on these statistics, some analysts have concluded that the fear exhibited by the elderly is irrational (Jaycox, 1978). These same victim surveys, however, show an interestingly high rate of fear within the elderly population. They prescribe programs designed to allay the crime-related anxieties of old age by altering the behavioral effects of those fears: imposing preventative measures such as self-imposed "house arrest" (Lawton, et al, 1975). Logan (1978) terms this approach "confinement" and claims it is a form of cruel and unusual punishment for millions of our aged population.

A 1978 study conducted by two behavioral scientists concerned over this abnormal confinement, indicated that

these conclusions of irrational fear by some researchers are dangerously misleading (Klecka and Bishop, 1978). Their findings suggest that the fear level of the typical elderly resident of urban neighborhoods is based on a fairly realistic perception of the risk which crime presents to her or him. It inhibits the necessary interaction among fellow members of society that they need to survive (Klecka, 1978). Their study concluded that this age group was being neglected by the justice system as well as society.

The Population of Interest

Of utmost importance in any discussion of crime and fear within the elderly population is the definition of just what segment of the population is under consideration. In most studies concerned with 'real' fear, it is the age-integrated urban resident that is the subject focused upon. A classification of the entire elderly population has been attempted by Marilyn M. Logan for definitional purposes. The factors considered were demographics, economic and social level, marital status or family connections, education, and health. Among the retirees, living in age-segregated communities, whether alone or not, there is definitely less fear recorded (Logan, 1978). The wealthy, more educated and socially elevated suburban elderly citizen is also considered to be

without noticeable fear of personal crime (Logan, 1978 and Jaycox, 1978). It is the poor, less educated urban dweller, with limited choices resulting from limited income who shows a marked effect from this fear of personal violence and loss (Logan, 1978 and Antunes et al, 1977).

Aging and Vulnerability

The natural handicaps of aging make all the elderly, rich and poor alike, obvious targets for robbery, purse snatching, and even rape. Logan (1978) notes that to the elderly person victimization is extremely disruptive. It is intensified by their past outlook of people and society and the natural handicaps of unsteadiness, slow movement, and impaired hearing and vision. These natural disabilities leave them more vulnerable to surprise attack and they reduce their likelihood of effectively participating in their own protection or being able to identify their assailants. These elderly are very aware of this vulnerability which only increases their frustration and lessens their desire to interact with their community and younger groups (Logan, 1978).

Drastic changes in our modern technological society and family structure have also separated or alienated many of the elderly from family and community creating an almost monastic isolation for them. They often see themselves as alone in the world and deserted by society. Their limited

mobility further eliminates the needed social interaction they were accustomed to. This isolation and immobility would reduce the quality of life at any age but it is more severe in older individuals who are already prone to ill health and chronic depression (Jaycox, 1978).

The question is often asked, why don't these people move away from their decaying homes or depressing living quarters; find safer, more pleasant areas to live in? Logan (1978) points out that income and old habits, even customs, prevent this class of elderly from "breaking-out" to safer neighborhoods. All the memories and meaning of their former active lives are in these old places. Very often, the resources realized from selling or renting run down old "homes" is minimal and, besides, any source of income would further handicap them by the loss of public funds or assistance. In a sense, they are trapped in a decaying, now transient neighborhood, filled with strangers. And these "strangers" are perceived as enemies. It has been found that they are very reluctant to seek assistance in emergencies because of this fear of the young newcomers. Several studies show that these elderly are genuinely fearful of retaliation from their attackers. MRI (1977) cites the case of an elderly female victim who called for help one evening saying that she thought she was starving. In an apologetical tone, she asked if someone

could help her? She had locked and barricaded herself in her single room dwelling without proper food or medication for three days in fear of some local youths who were going to "get" her if she told the authorities they had robbed her. According to the MRI Kansas City study, this is only one of thousands of such bizarre incidents that occur daily throughout the nation (MRI, 1977).

An even more alarming point is made by Richard Sundeed (1977) in a study of criminal justice agencies and their attitudes toward the elderly complaint. He found that the elderly victim or potential victim refuses to report criminal activity because she/he feels that the police won't listen or haven't the time to be bothered with "old people". Here again, their lifestyle and aging condition (self-concept) hinders them from proper interaction when needed.

The fear of crime within this segment of the elderly population has been designated as a product of their recognition of both the external and internal realities they face. Risks of victimization, the 'external reality', are different for different subgroups. Some are very precise in measuring the extent of their capabilities and the risks they face. The 'inner reality' is described by Jaycox (1978) as their increasing incapability to recover from certain kinds of assaults, "a gerontological actuality which favors no particular race or class" (Jaycox, 1978).

Fear and Interaction

Goldsmith and Tomas argued in 1974 that crime among the elderly was reaching crisis proportions and their concern was supported by other studies (Goldsmith and Tomas, 1974, and Duke and Lindquist, 1982). Even the elderly themselves, who rated crime and poor health as their two major problems, emphasized crime over health by 48 percent (Duke and Lindquist, 1982). National surveys indicated that, clearly, the elderly are afraid of being victims of crime more than any other factor and fear is higher among those that have already been victimized than in younger groups that have been similarly victimized. However, it has been noted this abstract fear is not the only factor contributing to the anxiety expressed by these people. It has been documented that their interaction with actual victims of crime and their exposure to various media sources also make marked impressions on them (Duke and Lindquist, 1982). Duke makes the point that fear from observation and through interpersonal communication is very real to them and not just a factor of their old age or imagination (Duke and Lindquist, 1982).

Another view is that the exposure of most of the urban residents to media campaigns against crime and local publicity aimed at educating citizens adversely affects their awareness of their situation. It has been advocated

by those concerned for these elderly persons, that the media has been more detrimental than informative. Their brand of sensationalism has created more fear and distrust in urban communities than it has exposed real dangers (Duke and Lindquist, 1982). Cook and Cook (1976), however, have taken the dispassionate scholarly view that the so called 'crisis' concerning the amount of elderly victimization is all media created and media-fed. They conclude that a false conception has been constructed and that it is politically and publicity-motivated. They are concerned that by concentrating on the elderly and their fears, the real victims of crime, the poor, young black males, will be overlooked (Cook and Cook, 1976). Clemente and Kleinman (1976), agreeing with Duke, see the problem of "fear" through communication" and community interaction as essentially a social issue and regardless of its course, they feel that . . ." for the older people, fear of crime is even more of a problem than crime itself." (Clemente and Kleinman, 1976).

Whether the fear of crime is stimulated through media and personal communication or an actual reflection of experience, it is agreed that the elderly are "at risk" in a very real sense. If the 'at risk' factor, which takes into account the frailty and environment of these persons, is figured into the victimization rate, the rate for the

elderly will equal or exceed the victimization rate for other categories (Duke and Lindquist, 1982).

Fear and Its Affect on Lifestyle

There is a consensus among the authors mentioned, at least those who recognize the existence of "fear", that where there is fear among the elderly, regardless of their physical condition or environmental situation, there is a notable change of lifestyle (Logan, 1978, Duke and Lindquist, 1982). Lawrence Center (1980) notes that the most important issue raised by this fear is the effects on both the elderly and society. He feels that the impact of crime on the elderly can be measured in three primary ways: economically, physically and emotionally. Both he and Logan (1978) stress the point that the elderly are hurt more when victimized or fearful than other age groups because they are often least financially equipped to deal with the economic or property loss which occurs. They suffer more physically also, simply because of the aging process itself; for them recuperation is more difficult and costly. He and others agree that the emotional consequences of crime are most severe among the elderly because of their shortened life expectancy and feeling that they cannot spare time and strength to recoup their losses (Center, 1980; Jaycox, 1978; Logan, 1978 and Lawton, 1980). Stress studies indicate that problems from fear and

actual victimization have added an enormous amount of stress to this already vulnerable group. Aging process concerns, stress and poor coping mechanisms cause a continuing decline of their self-image and a heightened susceptibility of additional stress (Center, 1980).

It has been reported that seniors living in the center of major cities are victimized at the same rate as young residents (Jaycox, 1978). Although Center (1980) agrees, he feels that an indirect victimization factor should be added to these rates. He contends that there is a definite indirect effect on all elderly as news of crime spreads rapidly throughout their social network. Fear and anxiety are indirect forms of victimization and this interpersonal communication forces them to adopt even more restrictive measures and isolates them further in order to cope with their environment. Although those that are successful in avoiding victimization are not statistically counted in most studies, Center (1980) considers them living "safely" only because they are virtual prisoners in their own homes (Center, 1980).

The quality of life experienced by these elderly recluses is obviously reduced by this seclusion, and Logan (1978) feels that it should be of concern to all members of society. Their communities suffer because of the absence of their contributions to normal community life. They are

perceived as a burden rather than effective citizens. Goodstein and Shotlund (1980) are convinced that the elderly's involuntary absence from the neighborhood actually increases crime. In their "crime causes crime" model, they contend that the frightened individual hiding in a single room or decaying dwelling is useless to her/himself as well as to their neighbors. Deserted streets and unconcerned (or frightened) citizens breeds crime. Cooperation among the communities' elderly in providing for their own protection would be of double value. It would provide the needed activity they are avoiding and would also improve their image in the immediate neighborhood. As active, respected individuals, they would be less vulnerable targets (Goodstein, et al, 1980). Elderly volunteer programs, although not always popular with agencies, are effective in many communities. Watchful, active older people are felt to be a valuable asset in reducing crime (Goodstein, et al, 1980).

An even sadder aspect of the enforced isolation and loneliness of these elderly people, is that these once proud and productive people are now the targets of "friendly" conartists who feed on their isolation and financial insecurity (Jaycox, 1978). Both Jaycox and Logan agree that their self-image and usefulness declines with each physical and emotional attack on their lives. In

their separate studies on elderly communities (retirement villages and age-segregated housing) and age-integrated areas, they found definite fear and diminished quality of life for those in inner-city areas even with the same income and health conditions. They concluded that their declining quality of life was a direct result of stress from fear of violence and isolation (Jaycox, 1978 and Logan, 1978). Logan (1978) concedes that it is, indeed, "cruel and unusual punishment" for Americans who have produced so much but are guilty of surviving too long.

Literature Summary

Reliable studies demonstrate that fear of criminal violence, a very detrimental fear, does exist among the urban poor and elderly population. These same studies, for the most part, also conclude that this fear affects this population's quality of life. However, few, if any authors reviewed focus on the dimension of this fear. The debate of whether or not the elderly's fear is 'real' or 'statistically founded' (thus warranting further quantitative research) was more of a concern than the question of cause or how often it was found to be disruptive or excessive enough to restrict routine life. Many queries such as these need to be investigated in order to even consider some of the solutions suggested by these studies.

In general, the texts and articles reviewed did establish a basis for concluding that there was a fear among the elderly, therefore, the next step, one which this study intends to pursue, is to determine as best as possible, just how this fear effects this population. Of utmost importance, as already inferred, will be the study of this fear and its effects as the elderly themselves see it. Any recommendations for change will be useless if the change only includes the findings of professionals and practitioners and overlooks the interpretations of the population of interest. Therefore, general concepts gleaned from the literature will be used to formulate the kind of interview questions that will allow the elderly the opportunity to explain their views concerning 'fear' and how it affects them.

SECTION III

PROCEDURES

This is a descriptive study or, to be more specific, it is a qualitative study searching for patterns in attitudes and methods of coping with the changes imposed by age and the presence of crime in the daily lives of the elderly population. This sample was drawn from elderly persons in the Lansing, East Lansing area. The study was designed to elicit opinions and comments from a broad mixture of the elderly in this diversified locality. The researcher felt that previous studies, as discussed in the Review of the Literature, did not look at cross-sections of the elderly population in any one area sufficiently to determine how their fear was manifested, expressed, and adapted to. Victimization records and crime reports fail to disclose the types of fear experienced by individuals nor do they discuss the adaptive skills developed to relieve these fears.

In order to achieve the study's goal of identifying and defining this fear and its affect on the elderly, the researcher adopted an informal semi-structured interview procedure which permitted the interviewer to record the answers to open-ended questions concerning their present and past life-styles as well as personal observations

concerning their environment and the respondents' own descriptions of their situations.

The interviews were conducted over a period of ten months in 1983. The unusually hot summer months of July and August (1983) aggravated the interview procedures. The individuals involved were physically uncomfortable and often abrupt or disinterested by the time the final questions were discussed but it was important to continue the process as these were the months which were most conducive to personal assault situations and considered to be especially stressful to the population being studied.

Sample Selection

A pilot study was conducted in the early Spring of 1982 in order to develop an instrument suitable to the needs of the project. This original study was directed primarily toward an elderly group of retired senior advocates living in the area. As these elderly were not necessarily 'low income' or isolated, their experiences with crime and their fear was considerably less than was expected by the researcher. This preview was useful, however, in that it suggested to the researcher the importance of a more purposive sample. It was apparent that a more diversified group of urban and suburban elderly would be required; one including varying income and educational levels as well as those who were immobilized by physical impairments or lack

of social contacts. The researcher, a public transit commuter, decided that the local CATA bus system would provide a wide variety of elderly passengers as well as furnish a place for the interview. Contacts were also made at the various Lansing Senior Centers and by the researcher's volunteer connections with the Meals-On-Wheels program.

Of the thirty-four individuals approached, thirty-two interviews were completed. Two individuals were unable to continue the interview due to time or personal reasons. Nine men and twenty-three women finally made up the sample of thirty-two people. Twenty of these individuals were white, eleven were black and one was Hispanic.

The design of the study required that the elderly be selected from a cross-section of the area population, therefore, individuals were approached and asked to participate at several locations throughout the city. It was anticipated that the more mobile elderly within a particular income bracket would use public transportation. Nineteen interviews were conducted on a CATA bus or at the bus stop. Eight subjects were interviewed at the Lansing Senior Center and four were contacted through the Meals-On-Wheels program. One elderly woman was interviewed at an Adult-Care facility in a local hospital. Two subjects agreed to be interviewed in their living-quarters after

being referred to the researcher by other interviewees. This snowball technique was responsible for two of the study's most revealing interviews.

Data Collection

Pilot Survey. The study's data source originated with a pilot study conducted in March of 1982 in conjunction with the Area Agency on Aging Association and its advocacy arm, The Michigan Seniors' Advocacy Council (MSAC). (For survey questionnaire, See Appendix A) The results from this structured demographic and attitudinal instrument were tabulated and reported in the association's newsletter. It was immediately evident to the researcher that the group of elderly involved in this survey was not the population mix that would be representative of all urban elderly. In designing the present study, the researcher used the results of the pilot survey and, also, spent many hours discussing crime and individual fear of crime with both elderly poor and financially secure elderly people. Prior to compiling the major data collection instrument from the pilot study, it was necessary to develop an instrument that would produce sufficient data concerning the subject's income level, past and present, their previous educational history, their marital status and family relationships, and primary activities. These data were recorded on a questionnaire with scaled questions (See Appendix B).

Three sheets followed this initial introductory data which were intended to elicit information on their present activities and relationships in the community and their attitudes toward crime, the criminal justice system, family, and youth. Although these were structured questions, they were designed, also, to permit discussion and to record the opinions of the subjects. The value of these structured but open-ended questions was apparent when the subject of 'fear' was introduced. It was important to the validity of the study not to approach this subject directly. The researcher felt that prompting the respondents to discuss their fears would contaminate the data. Questions concerning 'night travel', the safety of buses, and the amount of community involvement or social integration were asked in order to broach the subject. A Likert-type scale was used to determine the degree of fear or concern for each of the issues under study. The length of the interview ranged from 20 minutes to two hours depending on the location. "On Bus" interviews were usually the shortest, 20-30 minutes.

After each interview, usually in the privacy of the researcher's home, a summary sheet of observations was completed and attached to the original interview schedule. (See Appendix C) These summaries were later used to familiarize the interviewer with general atmosphere of the

interview plus a compilation of demographic data used in Tables I and II.

Major Data Collection Instrument. The interview schedule was administered solely by the researcher, a single, white female. Observations and quotes were recorded on the interview schedule at the time of the interview and later on the post-interview summary sheet. The exact place, time and date of the interview is included on the instrument.

The sample was considered purposive because of the age and type of individual approached. The general purpose of the study was explained to each person willing to participate and in every case, the subjects were previously unknown to the researcher.

SECTION IV

FINDINGS

The qualitative nature of this study limits graphic displays of demographic information, educational level information, economic status, sex and race. The degree and type of fear affecting those interviewed can be best conveyed through excerpts from their responses and their attitudes as observed by the interviewer. The changes in the subject's lifestyle, although quite visible to the researcher, will be described in a general discussion section concerning the accumulative results of the thirty-two interviews.

Demographic Characteristics

Eighteen of the subjects fell into the seventy-three and over age group. Thirteen of the thirty-two had experienced some form of victimization within recent years. Almost fifty percent of the sample were widows and twenty-two of the thirty-two considered themselves to be in 'satisfactory' or good health. (See Table 1) The phrase 'good for my age' was commonly used when discussing health but this 'good' condition usually included afflictions such as arthritis, diabetes, crippling foot problems, vision and hearing deficits, and hypertension. Very few spoke of

Table 1
Demographic Factors of Sample (N-32)

FACTORS:	* Marital Status				* Age Group				* Income Source				* Educ. Level				Live Alone				Victimization				Poverty				Phy. Imp.			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
GENDER & RACE	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Female-N/23 White-15	2	13	0	1	2	7	3	3	8	2	2	1	9	9	2	1	11				5				13				8			
Black-7	1	1	0	1	0	3	2	2	2	0	2	3	5	3	0	0	3				4				7			3				
Other-1	0	1	0	0	0	0	1	0	0	0	0	1	1	0	0	0	1				0				1			0				
Male-N/9 White-7	0	5	2	0	0	4	3	0	7	2	2	0	7	7	1	0	6				3				7			2				
Black-2	1	1	0	0	0	0	2	0	1	0	2	0	2	1	0	0	1				2				2			0				
Other-0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0				0			0				
* Ed. Level	1. Grades				* Marital Status				* Age Group				* Income Source																			
1. Grades					1. Married				1. 55-60				1. Soc. Sec.																			
2. High School					2. Widow/Widower				2. 61-72				2. Pension																			
3. College					3. Never Married				3. 73-80				3. Wages																			
4. Prof'l					4. Divorced				4. 81 plus				4. Gen. Assist.																			

daily exercise routines other than housework or walking and two claimed they never left their living-quarters.

As Table 1 indicates, fifteen of the females were white, seven were black, and one Hispanic. Seven males were white and two black. Eighteen of the subjects found means of supplementing their social security benefits with part-time wages while thirteen claimed to have savings or retirement benefits in addition to social security payments. A majority of them fell into the 73-80 age group (See Table 1). Eight individuals depended on general assistance and all but three of the thirty-two subjects fell under the poverty line for income (\$10,000). A majority of these had incomes of less than \$4,000 per year.

Twenty-two subjects lived in their family homes or with family members (a son, daughter, or niece). Six people lived in segregated senior residence buildings and ten lived alone in apartment buildings or rooming houses.

Fifteen individuals finished elementary school, nine more completed high school and five were college graduates. Two women, of the latter group, were still active as volunteers in their educational fields.

Victimization

Thirteen of the thirty-two subjects actually had been involved in personal assault incidents or had experienced a breaking and entering of their property resulting in

material loss. One widow expressed her feelings over the attempted break-in of the family grocery store. Her husband was injured while defending the store, and as a result of the injuries suffered, was unable to work or provide for the family. They lost the business and incurred tremendous medical debts, some of which she was still responsible for years after his death.

Another woman reported that her home was broken into while she and her family were on vacation and the 'kids' took food and condiments from the refrigerator and spread it over her livingroom furniture and carpet. She was unable to receive compensation from the offenders or their families for the destruction or for her labor in cleaning the house.

An elderly bachelor, who had supported and cared for his aging parents for years before their deaths in 1974, reported that their home and garage had been broken into several times. There was property destroyed as well as stolen and he was convinced that it was neighborhood youths although the police apprehended no one. He claimed that if they 'came around' again he would not hesitate to shoot them. He also mentioned two neighbors, both widows, who had experienced the same type of loss within the past few years. He knew that neither of them had insurance or had recovered any of their stolen property.

One subject, a widow living on only her social security benefits, was mugged in her apartment entrance by three teenage girls and robbed of her whole month's payment. She was unable to identify any suspects and therefore was unable to receive any form of restitution. She was extremely agitated with both the justice and social systems. She was a very proud and independent person and resented the intrusion and the fact that she was now behind in her rent and utility bills. Most of the subjects that had been victimized related the same story concerning the effects of their losses on their daily living but they also demonstrated amazing coping skills and inventiveness when it came to protection techniques.

Extreme Fear

The economics of loss and the frustrating inconvenience heavily outweighed the issue of fear for safety among the subjects interviewed. Two women, however, did profess to being afraid for their personal safety and it was evident that their fear affected their quality of life. Both women were widows, over seventy-five years old, in poor health, and both lived alone in apartment dwellings. The interviewer conducted lengthy interviews with each of them in their own living quarters. They had been referred by former friends who were concerned about their well-being

and who felt that any contact, even from a stranger, might have positive results.

The first individual, a black woman of seventy-six years, was, by her own admission, dangerously overweight and in poor health. Her physical condition made it extremely difficult for her to move about her two room apartment and almost impossible for her to leave from the second floor. She explained that she had nailed the windows and inside stairdoor shut 'years ago' and she kept her shades pulled so 'they' would not know she was inside. The researcher was able to gain access to her living space, after several phone calls, by climbing a set of deteriorating outside wooden stairs. 'They', a niece, granddaughter or a friend, brought in what food she had and took away the trash. There was little evidence that anyone had done either chore at the time of the interview. The interview was conducted on a hot July morning (1983). The temperature and bad air within the room was intolerable but the subject was eager to talk and appeared grateful for the opportunity to discuss what she considered to be 'God's will'. While inquiring about her past, her family of origin and of pro-creation, the researcher learned that it was her third generation descendants that she feared and whom she barricaded her home against. She claimed that the individual who brought in her groceries stole her food

stamps and because of her poor eyesight, they took what possessions she had left. She said they thought she couldn't see them but she knew what they were up to. She expressed a stronger fear of relatives than strangers, but was very adamant about the fact that she didn't let any of them in if she could help it. She claimed to have hidden any and everything worth having but she knew 'they' would come back to get it from her. When we discussed her rent payments, phone bill, and electric bill, she said "the other fellow from the government place pays it." The government and her religious convictions provided her with protection from strangers, but, according to her accounts of abuse by her relatives, she felt it was a family matter and no one could help. When driving past her apartment in late August 1983, the building (an old two story house) was empty and boarded up.

The second subject who expressed 'fear' was a white woman, a widow in her late seventies. The interviewer first contacted her through the Meals-On-Wheels program. She permitted the interview after a lengthy telephone conversation explaining the purpose of the study. She explained that she had moved to a segregated senior residence approximately eight years before. She had lived in her own home after her spouse's death but moved out when her son and his family decided that they would

take over the house and her financial affairs. She was resentful of her family's lack of attention but said that she had a few friends still living and claimed to have 'all the visitors she could handle.' When asked how often she saw her family and friends, she confessed it had been four or five weeks. She was afraid to go out because of strangers and 'thugs' and no one came in. Her health was poor and she had a multitude of prescription bottles sitting around on tables and the kitchen counters. She suffered from both arthritis and diabetes and appeared very frail. She said she quit subscribing to the Meals-On-Wheels program because she couldn't tolerate 'cabbage and squash' all the time. It was difficult to learn just from the answers to the questions how she procured her basic needs or what community involvement she had. Her conversation indicated that some person in the apartment building brought her 'things' but she didn't allow 'dark' (black) people in or talk to them. She was very negative toward the criminal justice system, especially the police, whom she must have called several times with unsatisfactory results. She assured the researcher that 'dark' people had attempted to force their way into her apartment many times and she knew that she heard them trying to pick the lock on the entrance door. Her method of coping with this concern was ingenious. She

arranged bottles and cans (all neatly washed and the labels removed) in front of the door and below her two windows. They were stacked seven or eight rows high so that, if jarred, they would topple over and cause a loud noise. She demonstrated the door arrangement for the researcher and it seemed quite effective.

This woman was obviously fearful and experiencing a great deal of frustration over her surroundings. She spent almost all her time alone, according to her answers to the questionnaire, however, she did rely heavily on television for news and entertainment. She was very knowledgeable on subjects such as current events and local politics, prone to racial remarks concerning individuals, and definitely intolerant of social policies and government. She professed to acquiring all her information about crime and its perpetrators from the media and she was convinced that criminals preyed on old ladies. We discussed moving to another place but she was sure that 'they' (blacks) would know where to 'catch up with her'. Her comments about being 'old' were bitter statements such as "living too long", "not of any use", and "no one cares". Her final remark was that the real trouble with all old people today is "they just sit around, take medicine, and get nowhere".

Quality of Life

Thirteen subjects, all women, considered themselves to be living in 'poverty' and in circumstances definitely inferior to their former lifestyles. The majority, both men and women, felt that their 'quality' of life had decreased drastically since their middle years (35-55 years). Although difficult to measure, it was evident to the researcher, also, that there was a change in the physical and material quality of their lives. Without exception, they described former activities, relationships, and work situations that involved greatly different lifestyles.

Attitudes

In attempting to record 'attitudes', the interviewer read the questions to the subject and recorded the answers on the questionnaire. A discussion usually followed each question, however. Therefore, the first response was noted and later tabulated (See Table II). Eight of the subjects responded 'negative' to 'very negative' when asked about present social conditions and political activities. Five subjects were 'indifferent' and seven were 'positive' or 'very positive'. Discussions and opinions were lengthy and varied as a consequence of the individuals' experiences. The majority felt that their activities had little affect on their social community and only four were active in

advocacy groups. Several women complained about their lack of control over what was important to them and what they felt they needed (proper diet, clothing and social activities).

Attitudes toward present crime rates and criminal activities were more pronounced. Thirteen were 'afraid' or 'fearful', eleven were 'aware' of current crime conditions and seven were recorded as being 'unconcerned'. Of those expressing 'fear', it was apparent that strangers posed the greatest threat, lack of physical strength was second, and the type of 'unprotected' living quarters they lived in was third. Most received their information about criminal activities, local and nationally, from television and the press. Eight subjects had relatives or neighbors that had experienced some form of violence or robbery.

After explaining what was meant by the criminal justice 'system' (courts, police, etc.) nineteen subjects felt that it was inefficient, seven were without opinion and six reported it to be satisfactory. The question concerning 'youth' and the questions concerning 'strangers' stimulated much conversation, mostly negative, but these questions were included in order to determine sources of 'fear'. When asked about bus travel, the safety of local streets, types of neighbors, strangers, police contacts, and young people, eleven subjects indicated that they were 'very'

Table II

Attitudes - Fear Related Issues Sample (N-32)

ISSUES:	FEMALES			MALES	
	White (N - 15)	Black 7	Other 1)	White (N - 7)	Black 2)
Criminal Justice System:					
Efficiency	4	0	0	1	0
Satisfactory	8	2	0	2	1
Insufficient	3	5	1	5	1
Crime Awareness:					
Unconcerned	2	2	0	2	0
Indifferent	11	0	1	1	0
Fearful	2	5	0	4	2
Family Relations:					
Close	3	3	1	0	0
Satisfactory	3	2	0	1	0
None	9	4	0	6	2
Youth & Strangers:					
Positive	2	2	1	5	1
Indifferent	8	3	0	0	0
Negative	5	2	0	2	1

much afraid in their present neighborhoods. The same individuals distrusted strangers and youths and only traveled on buses by day. Eleven others, nine men and two women, indicated that they were not concerned by any of these factors and one woman (76 years) insisted that she had no fear of strangers at all. She drove her own car and even picked-up hitchhikers if she 'had a mind to'. Several women described what they termed the 'buddy' system of contacting each other or neighbors when concerned for their safety. Three individuals, as mentioned previously, greatly feared strangers and their communities and did not attempt to mix at all. Several previous studies (Jaycox, 1980 and Center, 1980) reported that the elderly were uncomfortable around young people and easily intimidated by them. When this study's subjects were asked about their associations with 'young people' and their opinions concerning 'modern' youth, ten reported to be very uncomfortable or dissatisfied with them, and eleven were quite positive about them and their futures. Several had working relationships with them; one woman was a foster-grandparent and another woman volunteered at a Hispanic youth center. A part time rubbish collector said he often had to rely on young boys to help him unload his truck. The subjects were evenly split on the subject of segregated housing for the elderly. Most of the women felt it was

safer to be away from young 'hoods' and strangers but those that did prefer it noted it was unavailable because of the cost.

In order to probe the issue of 'isolation', as it relates to fear and increased risk of vulnerability (Duke and Lindquist, 1982), the questionnaire elicited answers and comments to questions concerning family relationships and community involvement. If a subject was living with members of his/her family, the strength of their relationship was discussed and if living alone, the number of contacts with the family were recorded and personal attitudes toward family members were noted. Eight of the subjects had little or no contact with family members either because of death or distance. Two of these eight even refused to discuss their family members because of past relationships which were disagreeable or as in the one instance, there was 'fear' of physical abuse. Three women expressed a longing to be 'closer' to their sons or daughters but found travel too expensive. Thirteen subjects were very dependent on their families, socially and financially, but were not necessarily pleased with the arrangements.

SECTION V

DISCUSSION

It was hypothesized by this study that the fear of criminal violence experienced by the elderly poor was sufficient to affect their quality of life. Although many of the subjects were noticeably affected by a decline in their quality of life, only two could relate the decline to their 'fear of criminal violence'. These two individuals experienced extreme 'isolation' due to this fear and would be excellent examples of the type of involuntary isolation referred to by Center (1980). Their fear originated, primarily, from poor family relationships and narrow perspectives concerning the role of older people. These attitudes had progressed to such a state of distrust and negativeness that they easily distorted the actions of everyone. The majority who were socially active and who were not fearful, however, were concerned for their well-being and indicated by their responses that they were definitely dissatisfied with their present lifestyles. They attributed this decline in everyday living to (1) economic factors (decreased income, inflation), (2) poor health, (3) loneliness (lack of meaningful relationships), and (4) lack of control over the events in their lives (poverty, decisions).

Thirteen individuals who had at some time in their lives been victimized, contrary to the literature (MRI, 1977), were not necessarily concerned about future reoccurrences. One woman was quite rational in her discussion of the incident and explained her recent purchase of a protection device to keep her home safe. Another woman had 'faith' that they would not try it again and a gentleman, living at the YMCA, said he did not have much left so he didn't 'worry' anymore. Many victims had simply moved in with relatives or to safer housing. It was interesting to note that all of these people blamed poor police practices or economic decline as the reason for the criminal assaults. Only one woman felt she had been deliberately selected because she was elderly and an 'easy target'.

Actual 'fear' of personal violence was negligible among even those that had been previously involved in criminal assault incidents and property loss. The majority had developed what to them were acceptable methods of coping with the problem of physical decline (vulnerability) and, although they complained and voiced their opinions about social complications, in general, they recognized that many of their concerns were due to the natural aging process. It was noteworthy that several displayed a great deal of pride and creativeness in their efforts to be independent.

One black man in his eighties used pets to insure his safety and that of his invalid spouse. He commented that she was unable to go out of the house so he kept two large dogs fenced in his yard to keep out the undesirable 'hoods' and 'dopers' that had moved into the neighborhood. He felt it was his duty to 'take care of himself' and not that of society. He humorously raised his voice when he looked up toward the ceiling of the bus and said 'ain't anybody up there going to do it for you.' He and the seventy-six year old man who resided at the YMCA were typical of the subjects with decreased standards of living who maintained a partially fatalistic, but partially optimistic attitude toward their present condition and their general safety. It was more prevalent among the males interviewed to be independent.

The majority of females, black, white and Hispanic were all more pessimistic and considered themselves less well off. Several resented having to give up their homes to live with relatives just to be safe. These same women complained constantly throughout the interview session about disrespectful young people, lack of consideration from relatives and business people, and the inconvenience of buses and travel. Although they had had no personal contact with crime, they felt that just the idea of not being safe on the streets or in their own homes was

stressful and unnecessary. One woman said, " . . . I know they are out there and I don't think I should have to move out and leave my belongings just because there are bad people around. The police should be more useful. . . ." Another attitude was that the police were too busy these days, and one woman said, ". . . people should be allowed to have guns and kill anyone that even tried to break in." This same woman, however, admitted that she couldn't even handle a gun and she couldn't see well enough to hit anyone.

One woman, sixty-two, who lived in a northwest neighborhood where an elderly widow (eighty-two) was assaulted and murdered a year prior to the interview, claimed she was unable to move away because of the devaluation of her property. She felt very insecure in her home, she said, but after a brief stay with her daughter, she decided to take in 'boarders'. She resented having to resort to sharing her home but she felt that there was no other alternative.

With regard to the elderly and their reported fear of young people (ten years to twenty-five years), it was interesting to note how many of the subjects who had continuing relationships with young relatives and neighbors were quite comfortable around them and participated in various activities that involved teenagers and young

adults. They expressed no fear and were unable to accept the fact that all elderly were being victimized by youths. Conversely, those who were socially isolated and those who had no young relatives that they interacted with regularly were more negative in their comments and were convinced that the 'young' were disrespectful and a personal threat.

Taking the entire group of subjects and dividing them into two categories, the fearful and those professing or appearing unafraid of crime, created an interesting picture of how people with varying degrees of experience and resources viewed themselves and how they interacted within their environments. The two individuals who were obviously affected by their fear, the two women who isolated themselves entirely from community and relatives, condemned everyone else for their condition and demonstrated by their actions and words that they had held negative and condemning attitudes toward relatives and authorities prior to old age. They resented suggestions that might aid their circumstances. Neither woman was willing to take steps to correct her concerns and fears. Eight of the other women who were 'somewhat' fearful and resentful were different personalities altogether. Although they complained (and justly so) about irritating inconveniences in their daily living, they accepted the responsibility of looking after their safety and found means of coping with

the constraints imposed upon their freedom. All eight had high school educations, had worked previously and had been active in community affairs. They all considered their relationships with family to be important and talked about remaining active as long as physically possible. Needless to say, their previous lifestyles contributed more to their attitudes than any factor. Two male subjects expressed 'fear' but it was not overwhelming them and had little effect on their daily routines. Both men were retired factory workers who resented the lack of protections they felt they deserved as citizens. They were both negative toward young people and had no contact with relatives or community groups. The few that still worked part-time, although lacking high school education or extended families, were bubbling with enthusiasm for life and their accomplishments. The fact that they were physically able to work and were creative enough to find work that they could do appeared as a positive factor. On a continuum, as interpersonal relationships, community activity, health, and resources increased, fear and negativeness toward old age and crime decreased.

Conclusions

It has been concluded from this study that 'fear of personal criminal violence' is not the primary factor involved in the decline of the quality of life of this

sample of elderly poor. 'Fear' did account for approximately six percent (two out of thirty-two) of the decline observed. This was due to the two sample members that expressed extreme fear and reacted to this fear by drastically changing their living routines and restricting social activities. Whether rational or not, their fear caused them undue hardship and would appear significant. The greater majority of the sample, however, could be considered only 'resentful' at the inconvenience that crime caused them. Their need to spend limited resources on protection against criminal activities was a more pronounced concern than 'fear'.

It has been noted that the majority of the sample did not isolate themselves or restrict their daily routines because of the criminal activities around them. General health, present income levels, past patterns of behavior and social activity, and present and former family relationships were the contributing factors to the reduction of life's satisfaction and declining lifestyles.

Previous studies have reported similar results (Lee, 1983; Lawton, 1980; Center, 1980; Duke et al, 1982) relating to poor health and isolation, vulnerability and increased risk, and income. This sample's subjects without exception, listed only lack of sufficient income as the prime factor. Health, mobility, nutrition, and

socialization of these elderly could benefit from an increase in financial security and financial independence.

Recommendations

Many social and medical programs for the poor and elderly have not kept pace with the increase in this population. The lack of funds available to this segment has greatly impacted on their lifestyle and their well-being. Most elderly are experienced survivors of life, as was observed by this research. It would be a waste not to incorporate their expertise into useful channels within society. Our elderly populations, even with their physical deficits, are a valuable resource of labor and knowledge. This study heard many suggestions from its subjects and was able to identify areas where this human resource could be utilized. Four major ones are: (1) senior advocacy to improve the general condition of the elderly through legislation, (2) volunteer networks to assist less mobile elderly in acquiring their basic needs, (3) part-time 'work' (to supplement income) in the court and criminal justice systems, and (4) volunteer work interacting with youth. A prime concern of these individuals was to be able to be useful to their community, to make decisions regarding themselves and their welfare and to maintain their self-esteem and dignity in our society. As for those few individuals who do experience extreme fear of personal

crime, a network system should be devised to locate them and monitor their condition, perhaps even intervening on their behalf to eliminate whatever factors there are that cause the undesirable condition.

It is evident that much planning is required in order to utilize this human potential but the expertise of the resource itself is available to perform this task and, as noted previously, there is a willingness on the part of these elderly individuals to perform. One area for future research could be devising a program of 'out-reach' services to the victims of personal crime as well as those identified as 'fearfully' impaired. Work in this area is already being provided but there is a need for intense investigatory measures in order to locate those not coming forth on their own. The elderly, themselves, may be able to provide this information. Another area for investigation, one that was discussed by almost every subject in this study, is that of media influence. The isolated elderly rely heavily on the media for outside contact . . . the degree of this reliance and its effects should be researched and action taken to improve the quality of this information source.

A P P E N D I X A

AN EXPLORATORY QUESTIONNAIRE:
CRIME AND THE ELDERLY CITIZEN

We would greatly appreciate your cooperation in answering the following questions. Your answers and opinions will assist us in assessing the needs of the elderly with regards to CRIME in their various communities.

Please answer all questions. Absolute confidentiality is guaranteed.

I. Respondent's Status: (please circle)

1. How many members in household?
 - a. Respondent only (1)
 - b. Respondent and spouse (2)
 - c. Respondent and family (2 or more)
 - d. Other _____
2. Chronological Age:
(please circle approximate age)
 - a. 55-60
 - b. 61-65
 - c. 66-70
 - d. 71-75
 - e. 76-80
 - f. 81-85
 - g. 86 and over _____.
3. Sex:
 - a. Female
 - b. Male
4. Former Employment:
 - a. Professional: Education
Law
Medicine
Other _____
 - b. Management
 - c. Self Employed
 - d. Sales/Clerical
 - e. Other _____.
5. Type of Residence:
 - a. Own Home
 - b. Apartment/Townhouse
 - c. Condominium
 - d. Mobile Home
 - e. Retirement Village
 - f. Joint Quarters (with friend or family)
 - g. Other _____.
6. Length of Time in Residence:
 - a. 1 - 5 years
 - b. 5 - 10 years
 - c. 11 - 15 years
 - e. 16 years and over
7. Educational Background:
 - a. Degrees (Circle those that apply)
BS, BA, MS, MA, Ph.D, JD, MD, RN,
Other _____.
 - b. High School Diploma
 - c. Trade/Vocational School Certificate
 - d. Other _____.

Continued (over)

7. Physical Disabilities:

(Please circle all that apply)

- a. Hearing
 b. Sight
 c. Ambulatory Problems
 d. Other _____

8. Present Income Status:

- a. \$3,000 - \$7,000
 b. \$8,000 - \$16,000
 c. \$17,000 - \$22,000
 d. \$23,000 - \$30,000
 e. \$30,000 and over

II. Respondent's Demographic Area:(Please circle any that apply)

1. Is residence in an integrated (all ages) urban setting?
 Residential Area (City over 90,000 pop.) - a. -
 Residential Area (City-3,000 - 30,000) - b. -
 Commercaill Area (City over 30,000 pop.) - c. -
 2. Suburban residential area within metropolitan area. - d. -
 3. Housing complex for the elderly in urban area. - e. -
 4. Retirement Village or complex (age-segregated). - f. -
 5. Rural retirement complex. - g. -
 6. Rural area, single family home. - h. -
 7. Other _____. Please Specify.

III. Home Crime Prevention Measures:

- | | <u>Yes</u> | <u>No</u> |
|---|------------|-----------|
| 1. Do you have 'crime preventitive' devices, such as; | | |
| Entrance Lighting | ___ | ___ |
| Yard Lights | ___ | ___ |
| Garage Door Openers | ___ | ___ |
| Plug-in Timers for Lights | ___ | ___ |
| Special Security Locks: | | |
| Basement Windows/doors | ___ | ___ |
| Sliding Doors | ___ | ___ |
| Dead-bolts/entrances | ___ | ___ |
| Screen and Storm doors | ___ | ___ |
| and windows | ___ | ___ |
| 2. When absent from your residence, do you; | | |
| Notify police | ___ | ___ |
| Notify neighbors | ___ | ___ |
| Leave lights on in rooms | ___ | ___ |
| Leave shades/blinds open | ___ | ___ |
| Remove valuables from sight | ___ | ___ |
| Cancel newspapers and all | ___ | ___ |
| regular deliveries | ___ | ___ |
| 3. Have you identified your valuables (etched name or code numbers) so that they might be more easily recognized if stolen? | ___ | ___ |
| 4. Do you have an inventory of your valuables and household goods to use as a check list in case of a burglary? | ___ | ___ |

- | | <u>Yes</u> | <u>No</u> |
|--|------------|-----------|
| 5. Does your neighborhood or complex have an organized "crime watch" program? | _____ | _____ |
| 6. Would you be willing to take part in such a program if one was available? | _____ | _____ |
| 7. Do you open the door without first identifying the individual who is knocking (ringing bell)? | _____ | _____ |
| 8. Do you give out information over the phone that might expose your situation to strangers? | _____ | _____ |

IV. Prevention Measures - Away From Home And In Public Areas

1. Do you use public transportation? Always ___ Often ___ Sometimes ___ Never ___
2. How safe do you feel it to be?

<u>DAYTIME</u>	<u>NIGHT TIME</u>
Very Safe _____	Very Safe _____
Safe _____	Safe _____
Somewhat Safe _____	Somewhat Safe _____
Unsafe _____	Unsafe _____
Dangerous _____	Dangerous _____

Comments _____
3. How safe do you feel ... your neighborhood streets to be?

<u>DAYTIME</u>	<u>NIGHT TIME</u>
Very Safe _____	Very Safe _____
Safe _____	Safe _____
Somewhat Safe _____	Somewhat Safe _____
Unsafe _____	Unsafe _____
Dangerous _____	Dangerous _____

Comments _____
4. Approximately how many hours a day do you spend away from your home?

1 - 2 hours _____
3 - 4 hours _____
5 - 6 hours _____
7 - 8 hours _____
5. Do you travel out with a friend or relative?

Always _____
Usually _____
Sometimes _____
Not Often _____
Never _____
6. Do you travel in your car with doors LOCKED? Yes ___ No ___
7. Do you take precautions when parking your car, such as;

	<u>Yes</u>	<u>No</u>
Park in lighted area	_____	_____
Lock all doors	_____	_____
Inspect rear area before entering	_____	_____
Have keys ready for immediate entrance into vehicle.	_____	_____
8. Are you in the habit of informing a neighbor or relative of where you will be and just how long you expect to be gone?

Yes _____	No _____
-----------	----------

Continued (over)

V. Victimization: Crime (personal) Incidents

1. Have you been involved in any of the following types of criminal invasions?

	<u>YES</u>	<u>NO</u>
Purse Snatching	___	___
Armed Robbery	___	___
Robbery (physical force)	___	___
Assault (physical force)	___	___
Burglary (residence)	___	___
Rape	___	___
Fraud/Bunco	___	___
2. Have any members of your household or family been victimized by any of these activities?

Yes ___ No ___
 If Yes, which _____.
3. Have such activities be experienced by any of your neighbors?

Yes ___ No ___
 If yes, which _____.
4. If such victimization was experienced, was the loss compensated for by: (check all that apply)

___ Insurance
 ___ Public Assistance Compensation
 ___ Support Services (ex: Church, Counselor, Peer Group Support)
5. How effective was your local law enforcement official?

Very effective _____
 Incident Not Reported _____
 No Action Taken _____
 Other _____
6. Was Offender apprehended?

Yes ___ No ___

VI. Issues of General Concern

1. Are you or your neighbors more concerned about personal crime now than you were 10 years ago?

Yes ___ No ___
2. What type of crime do you concern yourself with most?

___ Personal Assault/Robbery
 ___ Burglary
 ___ Fraud/Bunco
 ___ Other _____
3. What crime-prevention programs or legal-aid programs are you aware of in your immediate neighborhood or community?

Lawyer-referral _____
 Legal-aid Society _____
 Neighborhood Watch _____
 Other _____

Thank you!
 Margaret M. Riker

A P P E N D I X B

Interview Form II
Riker-Crime and the Elderly
June, 1983

PERSONAL-DEMOGRAPHIC DATA

Respondent's Age: _____

Age of Household Members:

Spouse _____
Child _____
Sibling _____
Other _____

Respondent's Family:

Number of Children _____
Living Children _____
Living Siblings _____
Parents _____
Spouse _____
Other relatives _____

Respondent's Education:

Elementary School _____
High School Diploma _____
College 1 year _____
 2 years _____
 3 years _____
 4 years _____
Graduate Degree _____
Professional _____

Respondents Marital Status:

_____ Never Married
_____ Married
_____ Widow/Widower
_____ Divorced

Number of Members in Household _____

Does Respondent Live With:

A Child	Yes	No
Parent	Yes	No
Spouse	Yes	No
Sibling	Yes	No
Other Relative	Yes	No

Respondent's Occupation:

Professional _____

Business _____
Clerical/Retail _____
Skilled/Laborer _____
Homemaker _____
Farmer _____
Other _____

Has Respondent been a United States
Citizen all his/her life?

If not, place of birth? _____
How many years in the U.S.? _____
How many years in this area? _____
Previous locations? _____

HEALTH:

Present:

Past:

Type of Residence:

Family Home-Single _____
Duplex _____
Apartment in a Home _____
Apartment Bldg. _____
Senior Residence _____
Living with Relative _____
Other _____

Sources of Income:

General Assistance _____
Retirement Income _____
Social Security _____
Family _____
Wages/investments _____
Other _____

Present Residence:

Lansing:
Name of Street:

East Lansing:
Name of Street:

Other:

SOCIAL PATTERNS

1. How often do you visit your family and relatives? _____
2. When did you last visit with your family? Last Week, Last Month, _____.
3. How often do you visit old friends? Once a Week, Every Month, _____.
4. When was your last visit? _____
5. Did someone take you on your visit? Who? _____
6. Did you ride public buses? _____ How often do you ride buses? _____
7. How long did you stay away from your home? Hours: _____
Days: _____ Weeks: _____
8. Does your family visit you or take places? _____ How often? _____
9. When was the last time? _____ What did you do? Shop _____
A Week ago _____ Medical Trip _____
A Month ago _____ Social _____
Two Months _____ Other _____
10. Do you invite guests into your home? _____ When was the last time?
Last Week _____ Last Month _____ Other _____
11. How often do you receive guests? _____
12. How often do you eat out in a week's time? _____
13. Do you go with a friend or relative? _____ Friend _____
Relative _____
Group _____
14. Are you able to attend church regularly? Yes _____ No _____
15. If you go, how do you get to church? Walk _____
With family/friends _____
16. Have you been out to church or one of your church functions within
the past week? _____ The past month? _____ When? _____
17. Do you plan to attend any club or organizational functions within
the next week? _____ What type of function? _____
18. When was the last time you attended a meeting or entertainment
function? _____
19. What type of function did you attend? _____

SOCIAL PATTERNS, cont'd.

20. Are you attending any educational classes presently? _____
21. What type of class? _____ When was the last time? _____
22. Are you active in political affairs? _____ What type? _____
23. When was the last time you participated in either of these activities? _____
24. Do you visit the Community Senior Centers? _____
 Did you eat your noon meal there? _____
 When were you last there? _____
25. What type of crafts or hobbies do you prefer? _____
 1. How much time in one day do you work on such hobbies? _____
 2. Do you take classes anywhere? _____
 3. How often do you attend? _____
26. Do you enjoy music concerts? _____ If so, how often do you get out to one? _____
 Do you enjoy museum showings or art shows? _____
 When was the last time you attended such entertainment? _____
 How did you go? _____ Who did you go with? _____
27. What do you like to do most when you go out? _____
28. How often do you do this? _____ Have you ever been able to do this activity within the last week? _____ Month? _____ When? _____
29. How often do you go shopping for food or medicine? _____
 When was the last time? _____ How did you go? _____

PERCEPTION OF CRIMETransportation (Public) and City Streets

1. Do you ride city buses? 1. _____
2. When was the last time you rode the bus? 2. _____
3. Do you feel that they are safe places for elderly people? 3. _____
4. Have you had any problems or fears when riding the bus? 4. _____
5. Do you go out alone in the daytime in your neighborhood? 5. _____
6. Do you go out at night (alone or with friends/relatives)? 6. _____
7. If not, why not? 7. _____
8. Do you feel that the streets are a safe place to be (day or night)? 8. _____
9. When was the last time you left your home to go somewhere at night? 9. _____
 a) Did you go alone? a) _____

Perception of Crime Home Safety:

1. Do you have safety locks on all doors and windows? 1. _____
2. Do you use outside door lights and yard lights? 2. _____
3. How safe do you feel in your own home? 3. _____
Very, Slightly, Not?
4. Have you experienced any type of intrusion? 4. _____
5. Have you or any member of your family been robbed or assaulted? 5. _____

6. Are you aware of any such incidents in your immediate neighborhood? 6. _____

7. What do you do to protect yourself when at home? 7. _____

8. Are you fearful of someone trying to break into your home? Yes No
9. Do you keep police/fire numbers on hand to call? Yes No
10. Do you keep a weapon in your home? Yes No
11. Do you keep a pet for protection? Yes No
12. How efficient do you feel the police are in responding to c o m p l a i n t s ? 12. _____

13. When was the last time you had need to call the police? 13. _____
14. APARTMENT BUILDINGS: 14. _____
Well lighted hallways and stairs? a) _____
Helpful neighbors? b) _____
Secure door locks and door peepholes? c) _____
Exterior lighting? d) _____
How safe do you feel your apartment is? e) _____

- Are you aware of any crime (robbery or attempts to break-in or assault) in your building? f) _____

- How often? g) _____
- When did it occur last? h) _____

GENERAL

1. What type of shows do you watch on TV?

_____ Audience Participation	_____ News
_____ Games Shows	_____ Adventure
_____ Travel	_____ Public TV
_____ Afternoon Serials	_____ <u>OTHER</u>
_____ Comedy	_____
_____ Police	_____

2. How do you feel about young people and their activities today?
 Good, bad, fearful? _____

GENERAL cont'd

3. Do you have younger friends/relatives that help you or that you
 help? _____
4. How do you feel about the courts and sentencing?
 Too Strict, O.K., Too Lenient
5. What is your feeling toward the police and their ability to serve
 you? Efficient, Satisfactory, Not Effective
6. Do you feel that stronger sanctions should be imposed on offenders
 who victimize the elderly? Yes No
7. Are you insured against theft? Yes No
8. Do you have complete medical coverage in case of assault? Yes No
9. What would you do if robbed or attacked? _____

A P P E N D I X C

SUMMARY SHEET

File No. _____

Interview Location: _____

Interview Date: _____

Conducted by: _____

Tape: _____ # _____

Comments:

AGE:	55-60	61-72	73-80	81+					
SEX:	Male	Female							
RACE:	Hispanic	Black	White	Other					
ATTITUDE - Crime (fearful/unconcerned)					1	2	3	4	5
ATTITUDE - General (negative/positive)					1	2	3	4	5
HEALTH: (satisfactory/disabled)					1	2	3	4	5
DIFFERENCE IN LIFESTYLE:					1	2	3	4	5
ECONOMIC STATUS: (condition=poverty/well off)					1	2	3	4	5
FORMER LIFESTYLE: (lower-working/upper middle)					1	2	3	4	5
EDUCATION: (elementary/professional)					1	2	3	4	5
ATTITUDE: (Criminal Justice System)					1	2	3	4	5
TYPE OF RESIDENCE: (segregated/family)					1	2	3	4	5
INCOME SOURCE:	Gen. Ass't	Soc. Sec.	Pension	Other					
ATTITUDE -	Strangers				1	2	3	4	5
	Young People				1	2	3	4	5
	Family				1	2	3	4	5

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