EXPLORING OLDER MEN’S SOCIAL LIVES AND WELL-BEING IN THE CONTEXT OF
A COFFEE GROUP

BY

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DISSE ssattention
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ABSTRACT

With a longer life expectancy and being a large portion of the population, older adults will have a major effect on society and it will be important for them to age successfully. Leisure and social support has been confirmed to assist in the process of successful, healthy aging. This specific cohort of the population is growing in size and men are living longer. Moreover, social leisure issues related to older men have not been extensively studied.

Through participant observations and interviews I gained a better understanding of how social environments, activities and relationships can affect healthy aging. As shown in this study, participating in a coffee group is beneficial to their health and well-being. These men also identified that their coffee group buddies are a part of their social networks through the social convoy model (Kahn & Antonucci, 1980).

The men in this study expressed meaningful levels and types (i.e., emotional, informational, instrumental, appraisal) of social support exchanged while participating in the men’s coffee groups. Through their stories and examples these men also demonstrated the presence of the buffering and direct effects models of social support, indicating some of the ways social engagement promotes health. They also conveyed that the coffee group was fun, facilitated a sense of belonging, and served an important role in their daily lives. These findings begin to fill the gap in our understanding of older men’s social lives and how participation in a men’s coffee group affects emotional and social health.

In addition, this finding suggests that the older group has not replaced their peripheral relationships and is concentrating on their closer relationships which supports the tenets of socioemotional selectivity theory (Carstenson et al., 2003) This group provides the men with a meaningful and effective way to engage in life, thus positively affecting their health and well-being.
The coffee groups served as one strategy these men used to maintain involvement in social relationships and connect to the larger community. Considering the numerous emotional and social benefits they described from their participation, it appears they are aging successfully according to Rowe & Kahn’s (1998) criteria.
To my parents, Anne and Curt Broughton, who instilled the value of education and worked to ensure that I always had high quality learning opportunities.
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CHAPTER 1: INTRODUCTION

In the Midwest when you walk into a fast food restaurant for breakfast, you are greeted with the smell of hash browns and coffee. Many people who eat at establishments such as these grab a quick bite to eat before work or their next task for the day. However, in a few fast food restaurants, you can find groups of people who linger, enjoy coffee and socialize with each other. I am reminded of a time when I was at a fast food establishment for breakfast and out of the corner of my eye saw a small group of older men enjoying their leisure time together. While waiting for my food, the men exited and thanked the staff by name and said statements to each other such as, “see you tomorrow” and “until next time”. I did not think about this situation until I met another group of older men at a community center who get together every morning for about an hour during the week to have coffee. After discussing my interactions with the men’s coffee group with family and friends I have discovered there are men’s coffee groups in several towns in central Illinois. As I continued to discuss my research, more and more people told me they have seen a group or are familiar with a group similar to the ones in which I am interested.

Because these groups seem to be common (in central Illinois), I thought there would be some research conducted on this segment of the population. I reviewed the literature and after a lengthy search I concluded that very little research has been conducted about older men and their social lives. Since leisure participation has been linked to health and successful aging, I believe it would be beneficial to understand how participating in men’s coffee groups affects their well-being. There are many factors that influence health and healthy aging, however, a less understood aspect is personal relationships and social support (www.agingstats.gov). I wanted to better understand the older men’s experiences and the benefits (e.g., friendship, companionship, social and emotional health) they derive from participating in such a group. Therefore, the
overall purpose of this study was to understand how participation in a men’s coffee group affected their socio-emotional health and well-being and to determine if this group is a form of social support for the men.

**Key Concepts**

There are several key concepts that are central to understanding why this research is important, including: older adults, successful aging, leisure, social support, and well-being. I will begin by explaining why this segment of the population is important to study, and then discuss aging successfully and leisure’s role in that process. I will then elaborate on the benefits of leisure participation, social support and conclude with the connection between social support and health.

**Older Adults**

Older adults will consist of 20% of the population in 2030, doubling the number from 2000 (www.aoa.gov, 2011). A major reason for this increase is the impact of the baby boom generation. Individuals who were born between the years 1946-1964 began turning 65 in 2011 and this will significantly increase the number of older adults in the United States. Another reason for the increase of older adults is they are living longer than previous generations (www.aoa.gov). This increase implicates a need for research and a variety of social services; including health, recreation, housing and nutrition. An additional factor is that older men are also living longer and narrowing the gap between men’s and women’s life expectancies. In 2003 women who reached the age of 65 had a life expectancy of 84.5 and men had a life expectancy of 81.4. In 2010 women who reach the age of 65 have a life expectancy of 84.9 whereas men now have a life expectancy of 82.2 (www.aoa.gov). With a longer life expectancy and being a large
portion of the population, older adults will have a major effect on society and it will be important for them to age successfully.

**Successful Aging**

The definition of successful aging I find to be the most relevant in this study is by Rowe and Kahn (1998). Through their examination of the MacArthur Longitudinal Study of Aging, they proposed a model of successful aging which includes three key concepts: low probability of disease and disease-related disability, high cognitive and physical functional capacity and active engagement with life. It is the combination of these three components that facilitate successful aging. Past models of successful aging only included being free of disease, but this definition takes a more holistic and positive approach, and it involves productive activity and engagement with life (Rowe & Kahn, 1998). The aspect of successful aging highly related to leisure activity is engagement with life. Leisure activities are those that are freely chosen, meaningful, rewarding, enjoyable, and they are an important vehicle to engage with life (Rowe & Kahn, 1998).

**Leisure**

Leisure is a concept difficult to define. Generally leisure researchers look at leisure as encompassing three components; free time, activity and state of mind. Leisure occurs in unobligated time where the participant has a freedom of choice (Chick, 2010). Leisure is often associated with “doing something” (i.e., activity) such as playing or watching sports, reading, or socializing with others. Leisure is very individual because some activities may be seen as work to some, and considered leisure by others (ibid). The state of mind a person brings to an activity is also an important characteristic of a leisure experience. As asserted by Chick (2010), “Freedom of choice, intrinsic motivation, and enjoyment appear to be generally accepted by
leisure researchers as conditions for the leisure experience” (p. 18). It is the combination of these characteristics that often define an experience as being leisure. Leisure time allows people to participate in freely chosen and meaningful activities and can be an important resource for health and wellness (Iso-Ahola & Mannell, 2004; Mannell, 2007).

**Health**

Health and wellness are common terms in the literature, however exact definitions are vague and vary amongst researchers. Some sources make distinctions between each concept, while others use the terms interchangeably (Gill & Bedini, 2010). The definition of health I find the most salient is from the World Health Organization (WHO), “Health is a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity,” (WHO, Preamble to constitution, 1946, p. 100). This definition is more holistic compared to the traditional medical model used in the 1980s where there was an emphasis on treatment of disease rather on prevention and wellness. Wellness as defined by Meyers, Sweeney & Witmer, (2000) is where mind, body and spirit are integrated with a positive outlook. They define it as, “A way of life oriented toward optimal health and well-being in which body, mind, and spirit are integrated by the individual to live more fully within the human and natural community” (p. 252). For the purpose of this study, I chose to use the terms health, well-being and wellness interchangeably.

**Leisure and Socioemotional Health**

Besides being personally meaningful and enjoyable, leisure is also an area of life where people have the greatest control of their behavior (Mannell, 2007). Therefore, people have the opportunity to engage in behaviors that can improve or be a detriment to health during leisure time. There are a variety of ways in which leisure can contribute to health and wellness. Leisure
is believed to help people maintain physical and mental health and contribute to people's overall sense of well-being (Caldwell & Smith, 1988; Coleman & Iso-Ahola, 1993; Iso-Ahola, 1988).

Leisure is connected with socio-emotional health in many ways. Several studies (Parry, 2008; Shannon & Shaw, 2005; Yarnal, Chick & Kerstetter, 2008) indicate that leisure participation provides emotional support, a way to escape the stress of everyday life and offers opportunity for fun and enjoyment. Leisure experiences can also provide an emotional boost to reevaluate stressful situations and help people more effectively manage these situations (Kleiber, Hutchinson, & Williams, 2002). Importantly, many studies indicate that leisure can help alleviate stress (Coleman, 1993; Coleman & Iso-Ahola, 1993; Iwasaki, 2001) and serve as a coping mechanism for dealing with stress (Iwasaki, 2001; Shannon & Shaw, 2005; Wiersma & Parry, 2011). Specifically, social leisure is important to promoting health and well-being. In a longitudinal study of older adults, Glass and colleagues (Glass, Mendes de Leon, Marottoli, & Berkman, 1999) found that social and productive activities lowered the risk of all-cause mortality just as much as exercise, thereby emphasizing the importance of social activity to health. Also, several studies indicate that the laughter, fun and playfulness associated with social activity are important to health (Cheang, 2002; Yarnal et al., 2008). Therefore, social activity and relationships surrounding the activity are important to examine in regards their potential to improve health.

Social Relationships and Social Support

Social relationships are referred to by various terms in the literature. Krause (2011) define social relationships as “recurrent patterns of interactions with other individuals” (p. 182). Friendships, companionship, social support and social networks all elucidate distinctive relationships among people. For the purpose of this study, I will briefly describe various social
relationships, then explain social networks, provide a definition of social support and then discuss the most salient aspects of social support. I will then outline the connection between leisure, social support and health relevant for my proposed study.

**Friendship.** Relationships among different people have a variety of names and meanings and although not the primary focus of my study, I find it important to point out other terms used to describe relationships. Friendship is not an easy concept to define because it is personal to the individual. Adams, Blieszner, and De Vries (2000) examined the definition of friendships in later life. In their study, participants identified 17 key criteria of friendship within 5 broad categories, with varying descriptions for different levels of friendship. Behavioral aspects (e.g., sociability, shared activities) and cognitive processes (e.g., appraisal, loyalty, trustworthy) were incorporated in the definition of friendship. In later life, friendships are important, especially with the decrease of casual ties that occurs as people age. Friendships are considered an important bond between people in our society and are informal close relationships (Felmlee & Muraco, 2009). Pahl (2000) described friendships as a social convoy where friends are our own personal connections who are chosen. I find the way Antonucci and Akiyama (1995) described friendship to be the most fitting: the people who older adults engage in leisure activities, spend time with, have frequent contact with and who have a significant positive impact on well-being. There are differences in friendship patterns between genders, with women friendships being characterized more by closeness and support compared to men’s friendships (Rubin, 1985).

**Companionship.** Within the broad spectrum of social relationships is companionship. This is a relationship that is primarily about enjoyment where common interests and leisure activities are pursued (Krause, 2011). During this time (participating in leisure and recreation activities) people share jokes, dreams and stories with their companions. This sharing and
interaction among companions may encourage and assist people to express themselves and in doing so may help people feel as if they are contributing and participating in a meaningful activity. For older adults specifically, much of their social interactions with others occur in the context of companionship (Krause, 2011). It is uncertain if these relationships exist in the men’s coffee group, but through this study the type of relationship they have among each other should become clear. Another concept, in addition to companionship, that has been well studied is social support and social networks.

Social Networks

The broad definition of this concept typically includes the structure or type of social ties of relationships. I will discuss both aspects of social support starting with structural aspects and then present the functions of social support. Structural aspects of social support are often referred to as social networks (Haber, 2003). There are a variety of definitions of social networks and most include a distinction between social support and social networks. Haber (2003) separates social support and social networks, stating social networks are different than social support. Social networks are categorized by the number of linkages socially and the amount of contact with others. Social networks describe the breadth of the social ties people have amongst each other, not the depth of the relationship (Haber, 2003).

Social networks are identified through contact number, frequency and density. The definition of social networks that I feel fits best for my study and has been used by past leisure researchers (see Kerstetter, Yarnal, Son, Yen & Baker, 2008) is,

A set of linkages among an identified group of people, the characteristics of which have some explanatory power over the social behavior of the people involved. It is the set of people with whom one maintains contact and has some form of social bond. (Bowling, Farquhar, & Browne, 1991, p. 549)
Structural aspects of social support are similar to social networks and address how individuals are incorporated among social ties. A significant amount of research has been conducted on the structural aspects of social networks (Fiori, Smith, & Antonucci, 2007; Glover, 2004; Wenger, 1994). Many researchers have investigated social networks and attention is given to the breadth of networks and the structural aspects of social support. In terms of leisure, Glover (2004) examined how the structure of social networks is related to social capital in a community garden setting. His focus was on the distribution of social capital among its members. Through community gardens, social networks within leisure activities can facilitate the development of social capital. Relationships formed from the gardens led to further socializing among members and nonmembers outside of the garden setting (Glover, Parry & Shinew, 2005). Glover and Parry (2009) also studied the Gilda’s Club of Toronto, a “third place” where people were able to obtain support and network among people who have had cancer as a part of their lives. Gilda’s Club is a place where a variety of leisure activities take place (e.g., yoga, movie nights, lectures) where people can escape the stress of cancer, home and the outside world. Through in-depth interviews, findings suggested members are able to meet others (develop a social network) and escape the stressors of home and the hospital. Studies including older adults and social support often focus on social networks, rather than the functional benefits of social support (Faber & Wasserman, 2002).

Social support

Although social networks and structural aspects of social support have been well documented in the literature, for this study I am interested in the functional aspects of social support facilitated by the social network. This is because structure does not illustrate the function or quality of the relationships, just that they exist. It is important to understand and describe what
function the relationship is serving (Uchino, 2004). Functional measures of support provide specific information on what function the relationship serves for an individual.

The functional aspect of social support is also a difficult concept to define and there is a lack of consensus in the literature about its definition and how it is best measured (Pahl, 2003). This might be due to researchers from many different disciplines (e.g., sociology, communications, gerontology, medicine) all using their own terminology and definitions (some of which are similar) to address social support. Definitions of social support vary among disciplines from supportive acts themselves to a personality factor based on early experiences that influence how likely one is to see someone as supportive. For the purpose of my study, I find the definition by Cobb (1976) to be the most salient. Social support is “information leading the subject to believe that he is cared for and loved, is esteemed and valued and belongs to a social network of communication and mutual obligation” (Cobb, 1976, p. 300). Social support is described as feeling cared for by others and the perception that support is available if it is needed (Coleman & Iso-Ahola, 1993).

Although given different names, researchers have categorized types of functional support into four broad categories. House (1981) incorporated various views of social support from past research and created four identifying types of social support: 1) instrumental support (sometimes referred to as tangible or material aid), 2) informational support (guidance or advice), 3) emotional support (e.g. sharing feelings), and 4) appraisal support (belonging or doing things with other people) (Barrera, 2000; Cutrona & Russell, 1990).

As a concept social support has been used in a variety of ways. There are two dimensions often addressed in the functional component of social support: the support that is received and the support that is perceived to be available. Broadly categorizing social support, it can be
conceptualized as objective or subjective (Barrera, 1986). Objective or received support is the extent to which people actually provide the support through tangible means (e.g., emotional support, financial assistance, work). Whereas subjective support is the extent to which people believe their social networks will be there if they need them in a crisis or stressful life event (Coleman & Iso-Ahola, 1993). It is the perception that aid would be supplied to a person in need and is sufficient to buffer stress (Kessler & McLeod, 1985).

For example, after examining a large data set from the survey research center, Werthington and Kessler (1986) concluded perceived support is more important than received support in the ability to adjust to stressful life events. Their analysis considered the effects of both perceived support and reported support between life events and psychological distress. In other words, tangible support is not necessary to buffer stress for people who have a life crisis; just knowing that people will be there to support during a crisis if needed is sufficient to reducing stress.

Besides perceived support, a key characteristic of social support is the involvement of interaction between two people in the form of reciprocity. What a person receives from someone else may be just as important for their health as what they give to the other person. Heaney and Israel (2002) defined reciprocity as the “extent to which resources and support are both given and received in a relationship” (p.187). How social support is received and if it is positive depends upon who is giving the social support and the personality of the individual receiving social support. It has been suggested that reciprocity helps maintain social connections. It may be easier to maintain relationships with others if there is consistently a balance between give and take (Marmont & Wilkinson, 2006).
Social support is also very important for older adults who rely on others such as family, friends, or organizations to help with daily activities and well-being. Social relationships often develop during leisure activities and these experiences are vital to an individual’s health (Coleman, 1993; Iso-Ahola & Park, 1996). Also, older adults often rely on their friends rather than family members for social interaction (Potts, 1997; Robinson & Turner, 2003). Moreover, social interactions with friends may be more rewarding than interactions with family members because interactions with family can be stressful (Larsen, Mannell, & Zuzanek, 1996). In addition, Liang (2001) indicated although the quantity of social relationships decrease with age, the quality may be better and improve life satisfaction. Overall, it seems that social relationships increase in importance in older adulthood and may play a strong role in well-being (Carstensen, 1992; Carstensen et al., 1999; Carstensen et al., 2000).

While much research exists on older adults’ social support and social networks, very little of the work has focused on older men’s social relationships. The study that I found to be similar to my research goals was conducted by Cheang (2002). He examined a group of older adult men and women who met at a local fast food restaurant in the morning for coffee and breakfast. His research emphasis was on social interactions and a third place (a place that is not work or home). Using a combination of participant observations and in-depth interviews, he found they engaged in light-hearted, fun-filled conversation, yet surprisingly, very little social support was exchanged among participants. Many viewed these gatherings as fun breaks from their other activities and obligations, but very few participants socialized outside of the designated gathering at the local fast food restaurant. Although Cheang (2002) identified a local fast food location where older adults congregate, his research was on both older men and women.
Need for the study

Aging successfully is an important topic and is more than just reaching a certain age or milestone. Since more men are living longer, it is important to understand their later life experiences and learn about factors that shape their ability to experience successful aging. It is becoming more important for individuals to take responsibility over their health because lifestyle behaviors are estimated to account for 50% of people’s health (Rowe & Kahn, 1998). As men grow older they often transition from work to a more leisurely lifestyle, often changing or taking away a significant network of social interaction and social support (Der Ananian & Janke, 2010). Also, social leisure issues related to older men have not been extensively studied. By listening to the stories and personal experiences of this unique group of men, it is my hope to gain a better understanding of how social environments, activities and relationships can affect healthy aging. This information can then assist practitioners to plan activities or provide programs for the older adults in the community that might aid health and well-being.

In the national objective to assist people to achieve optimal health, the U.S. government through the Department of Health and Human Services, established health indicators through the Healthy People program. The goal of the program is to eliminate health disparities and add life to years, rather than just years to life. One of the overarching goals of Healthy People 2020 is to promote quality of life, healthy development, and healthy behaviors across all life stages (Healthy People, 2020, healthypeople.gov). This study could assist indentifying ways to meet that goal by better understanding if these coffee group experiences (as a part of daily life) promote health and quality of life.
**Purpose and Research Goals**

The overall purpose of this study was to understand how participation in a men’s coffee group affected their socio-emotional health and well-being and to determine if this group was a form of social support for the men. The objectives were: 1) Discover how (e.g., via social support, companionship, social interaction) participating in this group shaped their health and well-being; 2) Discover explanations as to why the men continued to belong to such a group; 3) Understand the positive and negative aspects of belonging this type of group; and 4) Examine the relationships among group members and determine if social support is received.

Understanding their experiences provided insights on the potential benefits of participating in a group such as a men’s coffee hour, which contributed to the literature and offered insights to community park and recreation agencies, senior living communities or other agencies that facilitate social interactions among older adults. A deeper understanding of the benefits of participating in a leisure social group facilitated a better appreciation of the contributions of leisure to healthy aging.

**Study Contribution and Application**

The insights gained from this study will help generate future research on older adult male social groups. As previously mentioned, there is a dearth of research on older men’s social groups and participation benefits. This study will better allow us to understand how and why these men started participating in a group such as this and identify the benefits of participating in social groups. Moreover, I believe this study describes the extent to which social support is experienced by members and what types of social support exist within the group. In addition, this study will also identify any negative aspects of belonging to this type of group and potentially provide insight into how to make this group more beneficial. Participating in a group such as
this, may be a way to help achieve the Healthy People 2020 objective of improving quality of life, healthy development, and healthy behaviors across all life stages. There is a need for older adult services as the US population continues to grow and age and to determine how leisure and participating in a social group can contribute to health. This study will assist agencies that create the opportunities for older adults to meet and share socially. There may be benefits to creating programs or a space for older males to meet and socialize at a park district or senior living communities.
CHAPTER 2: LITERATURE REVIEW

My proposed research is on older men’s interactions at a coffee hour. In this chapter, I examine the leisure patterns of older adults, the connection between leisure and health, socio-emotional selectivity theory, social support (definitions, types and functions) and the connections among social support, leisure, and health and well-being.

As mentioned in the introduction, older adults are increasing in numbers and are becoming a larger portion of the US population. We perceive older adulthood in the United States to begin when adults reach their 60s and have a life expectancy of about 80 years of age for women and 75 for men. This means, older adults will be in this cohort for 15-20 years (Der Ananian & Janke, 2010). It is important to understand how to not just age, but age successfully. To age successfully, older adults are encouraged to actively age to optimize their health (Der Ananian & Janke, 2010).

Older Adults Time Use and Leisure Patterns

A unique aspect of this age group is the amount of leisure time they have in a day. In the United States, the term “older adult” is usually applicable to people who are in their 60s and older, and they have an average life expectancy of 80, which leaves 15-20 years people spend as an older adult (Der Ananian & Janke, 2010). In 2008, older adults ages 65-75 spent 25% of their time doing leisure activities (www.aoa.gov, 2011). For older adults over 75, 32% of their time was spent in leisure activities.

There have been several studies (cross-sectional and longitudinal) completed on older adults’ time use patterns. Findings are contradictory in regards to older adult leisure time use; some studies show leisure activity participation decreases after retirement, while others provide evidence that leisure participation increases after retirement (Armstrong & Morgan, 1998; Kartz-
Kent & Stewart, 2007; Janke, Davey & Kleiber, 2006). For example, some studies have shown that activity participation in later life declines. Armstrong and Morgan (1998) conducted a longitudinal study of 1,042 people over the age of 65 from 1985 until 1993 using data from the Nottingham Longitudinal Study of Activity and Ageing (NLSAA). Results showed that during the 8-year study period activity levels progressively declined, with outdoor activities indicating the highest level of decline.

In contrast, Kratz-Kent and Stewart (2007) combined 2003 and 2004 data from the Bureau of Labor Statistics’ (BLS’s) new American Time Use Survey (ATUS) to examine how older individuals spent their time on an average day during a 2-year period. Older adults who were not in the labor force spent significantly more time in leisure and sports activities than older adults who were still employed. Moreover, older adults’ retirement status affects participation in informal and physical leisure domains. Janke, Davey and Kleiber (2006) examined longitudinal changes in leisure activity among men and women over 50 years of age using data from the Americans’ Changing Lives study. The leisure patterns were examined during mid to later life, in three domains of leisure behavior: informal (e.g. socializing with friends and family, talking on the telephone), formal (e.g. participating in clubs or organizations, religious groups community activities) and physical leisure activities (e.g. sports or exercise). During the eight years, adults reported relatively stable leisure patterns. They also noted that once individuals are retired, there is an increase in frequency of involvement in leisure. They suggested that an increase in available time that comes with retirement is a factor for informal, social activities and more physically active pursuits.

Overall, the research indicates that less time is being dedicated to work and more time is allocated to leisure activities. Although older adults have more leisure time, they typically spend
more time in passive activities. Gauthier and Smeeding (2003) analyzed older adults’ time use patterns in 9 countries between the years, 1987-1992. A key finding of this study is the amount of time which used to be allocated to paid work was being reallocated to passive activities (e.g., television, reading, listening to radio). Older men participated on average in 3.5 hours of passive activities compared to 6 hours per day that was given toward paid work. In the United States for those who are age 75 and older, on average 5.4 hours per day is devoted to passive activities. Henderson and Bialeschki (2005) reported the average American watches more than 20 hours of television per week but still feel as if there is not enough time in the day. Also, Rosenkoetter, Garris, and Engdahl (2001) found an increase in watching television and reading among people who recently retired. Men and women over age 55 watched television during about half of all leisure time (Kratz-Kent and Stewart, 2007).

Leisure activity participation also differs between men and women. Older men typically participate in more physical leisure activities, while women report less involvement (Armstrong & Morgan, 1998). Research indicates that men participate in more outdoor leisure activities, while women are more involved in indoor leisure activities. Regardless of their employment status, women spent less time in leisure and sports activities than men (Kratz-Kent & Stewart, 2007). Janke et al. (2006) supported these findings and reported women have higher levels of involvement in formal and informal activities and less involvement than men in physical activities. For example, retired older men spent 3.5 to 4 hours more in leisure activities per day than those who worked full-time (Kratz-Kent & Stewart, 2007).

With a decrease in the amount of time dedicated to paid work, older adults have the opportunity to engage in more leisure activities. A well-developed body of literature indicates the opportunity to be involved in freely chosen leisure activities contributes to individual health and
well-being (Caldwell & Smith, 1988; Iso-Ahola & Weissinger, 1984; Warner-Smith & Brown, 2002). Conducting research on this segment of the population is important not only because of the number of people in this cohort, but also because leisure behaviors can play such an important role in the process of successful aging.

Passive leisure activities (i.e., watching television, listening to the radio) also become more frequent among all older adults. Low intensity activities such as gardening and walking are among some physically active leisure activities older adults are most likely to participate in (Der Ananian & Janke, 2010). Participating in leisure activities has been connected to well-being and health. Therefore, a review of literature focused on leisure and socio-emotional health follows.

**Leisure and Socio-emotional Health**

Although people obtain satisfaction and meaning from their professional lives, people also consider leisure vital to their overall well-being. Since my study is focused on social and emotional wellness, the literature reviewed is focused on socio-emotional wellness.

Leisure engagement provides the possibility to maintain and improve psychological health (Caldwell & Smith, 1988). Psychosocial, mental and emotional health, are three terms (like wellness, health and well-being) that have overlapping characteristics. Psychosocial health is the broadest of the three terms and includes intellectual, social, spiritual and emotional dimensions of health (Dontatelle, Davis, Munroe & Munroe, 1998). Mental health is more specific than psychosocial health and includes links to emotional states. It is defined based upon subjective well-being, and includes aspects of self-efficacy, autonomy, competence, and self-actualization of one’s intellectual and emotional potential (WHO). Emotional health, refers to “the feeling component and to the ability to express emotions when appropriate and to control inappropriate expressions of emotion. Feelings of self-esteem, self-confidence, self-efficacy,
trust, love and many other emotional reactions and responses are all part of emotional health” (Donatelle, Davis, & Munroe, 1998, p.4).

In regards to leisure, researchers suggest that perceived freedom and intrinsic motivation are important underlying characteristics of leisure that affect psychological well-being (Iso-Ahola & Weissinger, 1984). Because leisure is considered free time where people can participate in the activities they want and are not constrained by work obligations, it gives them a sense of freedom. Intrinsic motivation can affect psychological well-being because people are motivated to participate in leisure for its own sake. In essence they are doing what they want to do because they want to do it; there are no other reasons needed to participate in leisure. Intrinsically motivated experiences are also linked to positive social and cognitive development (Watts & Cremeens, 2011). Just as intrinsic motivation is positively related to health and well-being, being non-intrinsically motivated is associated with negative health outcomes (Caldwell & Tibbets, 2011).

In addition to self-determination and intrinsic motivation, leisure can serve as a way to escape stressors and provide a break away from stressful situations. In their seminal research, Coleman and Iso-Ahola (1993) reviewed the literature on the social aspects of health to identify ways in which leisure can contribute to health. They conceptualized leisure as a way of coping with stress to maintain good health. More specifically, perceived support from others has been an effective way to provide relief from life stress. Dispositions reflecting self-determination also assist people’s coping capabilities and health. Because leisure is often social in nature, providing an opportunity for social relationships and with the concepts of freedom, control and intrinsic motivation being key components to leisure, it can assist in health and wellbeing (Coleman & Iso-Ahola, 1993). Shannon and Shaw (2005) looked at women’s leisure experiences and leisure
choices after being diagnosed with breast cancer. They found women made leisure a priority, sought more meaningful leisure, and intentionally participated more in health promoting leisure. The women considered why they wanted to participate in certain leisure activities and a few women indicated leisure was a place where they could escape and it provided pleasure for them. Examples of ways these women escaped is reading a book and going to the beach.

Leisure experiences can also provide an emotional boost to reevaluate stressful situations and help people more effectively manage these situations (Kleiber, Hutchison & Williams, 2002). Leisure can also intervene and tackle negative emotional health states such as stress. In other words, leisure can be seen as a coping mechanism for people, especially when dealing with disease and chronic conditions (Wiersma & Parry, 2011). Therefore emotional health can become a byproduct of participating in leisure pursuits. In this explanation, participating in leisure is not necessarily the main goal of the activity, but a byproduct. For the women with breast cancer in these two studies (Shannon & Shaw, 2005; Wiersma & Parry, 2011), leisure provided the opportunity to create meaning, and helped them make the most of each day. For these women leisure was an important way to cope during treatment. There were so many positive outcomes of participating in leisure activities they continued to participate after finished with treatment. The women found several leisure activities to help maintain good mental health and described them as therapeutic (Shannon & Shaw, 2005). Another example of this is someone who started running because he wanted to lose weight and while doing this activity, he noticed his mood improved and he was more relaxed.

Leisure time activities can also help to improve cognitive and social functioning for older adults (Payne, 2002). Leisure activities often require physical, affective, social and cognitive skills (memory, planning, comprehension) and because of this, participation in leisure can enable
people to improve or adapt functional skills needed to improve health and live independently (Coyle, Shank & Vliet, 2010). “Leisure is the arena of life from which the very old derive cognitive stimulation so the intellectual demands of activities are essential to minimizing the effects of dementia” (Burnett-Wolle & Brooks Hart, 2010, p.311). Also, regular participation in physical activity may delay the onset of impaired cognitive functioning including the development of Alzheimer’s and dementia (Scarmeus et al, 2009).

Glass et. al (1999) studied the impact of activity on risk of all cause mortality among older adults. They found active older adults were less likely to die than those who were less physically active. In addition, they discovered that social and productive activities were just as important as fitness activities to lower the risk of mortality. This conclusion is important because it suggests that other activities besides physical fitness can also be beneficial. Participating in social activities is also associated with reduced likelihood of dementia and improved cognitive functioning (Der Ananian & Janke, 2010). There are a few specific leisure activities that have shown to promote cognitive well-being, including listening to music, taking walks and gardening (Chafetz, 2001). These psychological, social and lifestyle factors can affect the socio-emotional health and well-being of older adults and facilitate successful aging.

Socioemotional Selectivity Theory

One theory from lifespan developmental psychology that seems to expand the successful aging perspectives is socioemotional selectivity theory (Carstensen, 1992; Carstensen, Isaacowitz & Charles, 1999). Lifespan development psychology examines the entire life course, people’s environments, resources and examines aging as a dynamic multi-directional process (Burnett-Wolle & Godbey, 2007). As people age there can be growth and decline in functioning (e.g., physical, cognitive, socioemotional). People’s cognitive abilities may improve and physical
abilities may decline or vice versa. Multi-directional development refers to growth and recession simultaneously within various domains in life such as relationships, activities of daily living (ADL) etc. An example is with age, a person might not be able to walk as well due to arthritis, but has improved his bridge game because he plays frequently. Within the broad framework of lifespan developmental psychology, I believe the most salient theory for this research is Socioemotional Selectivity Theory (SEST).

Socioemotional selectivity theory (SEST) is an aging theory focused on relationships. According to SEST (Carstensen et al., 1999), as individuals perceive their time to be limited, they focus on important relationships and eliminate nonessential ones (Carstensen, Fung & Charles, 2003). Empirical evidence suggests that across the ages of 20-90 there is a linear trend where older adults see a more limited future than younger adults, even when controlling for health (Lang & Carstensen, 2002). However, this theory is not necessarily focused on chronological age, but on the perceived amount of time left in one’s life. Recognizing one’s mortality might change peoples’ priorities and how and with whom they choose to spend their time.

In youth or when the future is perceived to be open-ended, goals are prioritized to optimize the future. Goals may be created that establish new social contacts that can be beneficial in the future as well as gaining new information that might help in future endeavors (Lockenhoff & Carstensen, 2004). In regards to health, these goals may be gaining health related information, maintaining or obtaining a healthy diet and exercise practice. In later life, there is often a reorganization of goals and social relationships are prioritized to maximize benefits. This process allows older adults to focus on the most beneficial relationships, which is related to positive well-being. One of the aims of SEST is to avoid negative states and create positive states
Another focus of this theory is on the psychological progression that changes social behavior and preferences. The reasons for interacting with others socially can change during the life course. Interacting with people for survival (caregivers) or psychological reasons (regulating emotions) can vary based on the life cycle of a person (Carstensen, 1999). In other words, you might choose to interact with people for a variety of reasons and goals such as survival, development of self-concept and emotional support. Goals may shift in importance depending upon where someone is at in the life cycle. Socioemotional selectivity theory is based on the assumption that a similar set of goals motivate social contact throughout life. It does not just start at old age; it is a continuum throughout the lifespan where constraints (e.g., energy, health, care-giving, medical treatments/regiments) are experienced by individuals which affect their social partners (Carstensen, 1999).

A developing body of knowledge supports SEST. For example, the frequency and satisfaction with social partners as people age was assessed in a longitudinal study by Carstensen (1992). Participants were assessed as they aged at 18, 30, 40 and 50. Results indicated that satisfaction with and frequency of interacting with acquaintances declined over time. More importantly, respondents focused more on a specific group of people with whom they interacted socially and although interaction became less frequent, the emotional bonds remained the same (Carstensen, 1992). Although older adults had less contact with their social contacts, they were also more likely to be satisfied with the size of their networks (Lansford, Sherman, & Antonucci, 1998). These changing characteristics of social relationships as people age give support for SEST.

In a series of studies, (Fredrickson & Carstensen, 1990; Fung, Carstensen & Lultz, 1999; Fung, Lai, & Ng, 2001) respondents were asked to imagine they had 30 minutes of free time and
could choose who they wanted to spend it with. The choices included an immediate family member (familiar close social partner), the author of a book they have just read (novel social partner with new information) and an acquaintance whom they have many things in common (a novel partner who can provide future social contact). Each of these choices represents either a meaningful goal or a future-oriented goal. Older adults were most likely to choose an immediate family member to spend time with versus younger adults who showed no preference (Lockenhoff & Carstensen, 2004). Not all of the studies on SEST focus on older adults. The above study was repeated by Fredrickson and Carstensen (1990) where limited time was presented by the researcher by telling the people previous to asking the question, imagine you are going to be moving across country. With perceived limited time left, all ages preferred to spend time with family. Fung and colleagues (1999) also replicated this study in Hong Kong with the precursor that people will soon be emigrating. Results also supported participants choosing to spend time with people closest to them prior to emigrating. When the restrictions were lifted from the question and there were no time restrictions, the findings were similar to previous age related differences. When future time is limited, emotionally meaningful goals become a priority and familiar social partners are preferred (Lockenhoff & Carstensen, 2004).

Although well supported in the literature, there are a few critiques about this theory. Limited time left is not clearly defined and can mean different things to different people. Also, the nature of relationships will limit the explanatory power of SEST because older adults may maintain negative relationships with family members or caregivers because of an agreement. Also, older adults might not have many social contacts due to death or relocation (Pinquart & Sorensen, 2003).
According to Burnett-Wolle & Godbey (2007) socioemotional selectivity theory is being used to study older adult’s behavior in disciplines such as gerontology and human development and provides direction for also refining leisure research. This theory has not been utilized much by leisure researchers, but does provide a distinctive perspective on later life and may assist to explain older adults’ leisure and relationships. Using this theory in leisure studies might provide greater insight into older adults’ social leisure experiences and their relationship to successful aging.

Overall, past studies on older adults and leisure support the tenets of SEST (Lockenhoff & Carstensen, 2004; Carstensen, Fung & Charles, 2003). As predicted by SEST, older adults versus younger adults place a greater emphasis on emotional implications of social relationships (Lockenhoff & Carstensen, 2004). In a study by Carstensen and Frederickson (1998), they investigated mental depictions of social partners. Three underlying dimensions emerged from the descriptions of social partners; potential for emotional rewards, potential for information gathering and possibility for future contact. Older adults compared to younger adults placed a greater emphasis on emotional aspects of the relationships. The same study was duplicated with people of similar ages but different health statuses, some of the participants were diagnosed with HIV. Those who had HIV (and the shortest time perspective) placed a great emphasis on the emotional dimension of relationships.

Older adult’s emphasis on emotionally important information is consistent with SEST (Lockenhoff & Carstensen, 2004). Studies on older adults and social leisure conclude that familiar relationships are more desirable than new ones in later life. Older adults may be satisfied with a narrow scope of activities and do not necessarily have a desire for new ones (Iso-Ahola, Jackson & Dunn, 1994). Furthermore, Mannell & Kleiber (1999) asserted that expanding leisure
repertoires or increasing relationships may be less beneficial in later life. As such, SEST appears to be an important approach to help understand older adults’ leisure behavior and its relationship to successful aging. I feel this theory is to my study because SEST examines the interpersonal interaction aspect of social support. Throughout their lives, people create their social networks to maximize social and emotional gains and minimize risks. Past research on socioemotional selectivity theory also contends that close friendships are more important than social acquaintances to older adults. Empirical evidence also suggests that as people age there is a reduction in the number of social contacts, maintaining only those that are the most important (Carstensen et al., 2003). Age is related to social network composition, where older adults have decreased the most peripheral social contacts thus decreasing the network size. In addition, studies show older adults are satisfied with their social network size and are activity involved in maintaining them (Carstensen, Fung & Charles, 2003). For example, Lansford, Sherman and Antonucci (1998) examined SEST across 3 different cohorts over 4 decades to determine if respondents’ satisfaction with size of their social network differed by age, cohort or both. They found more older adults compared to younger adults were satisfied with their current size of their social group and did not want a larger social network. It would be interesting to see if this study supports SEST in regards to men’s participation in a coffee group.

Social Networks

Social networks are categorized by the number of linkages socially and the amount of contact with others. It is the breadth of the social ties people have with each other, not the depth of the relationship (Haber, 2003). One method of discovering more about a person’s social network is to use the Social Convoy Model. The convoy model created by Kahn and Antonucci (1980) is used as a framework to consider social relationships and attachments. This is a tool to
map each individual’s social network at a given time. The term convoy originally used by anthropologist David Path (1980) is used to demonstrate that each person is surrounded by a set of people where social support is either given or received throughout their life. Although the people and relationships change throughout life, there is a network of people around each individual person at a given time (Antonucci & Akiyama, 1987). For example parents are most likely to remain a part of one’s social network, but their relationships might change over time. Convoys are life-long in nature and each person moves through life, interacting with people who exchange social support.

Because of the fluidity in nature, the convoy model considers individual’s experiences (ibid). Convoy relationships can be positive or negative influences on an individual. These relationships can be beneficial, helping the individual make positive decisions, learn and grow. However, these relationships can be detrimental and can undermine success, create problems rather than helping and misdirect an individual (Antonucci, Akiyama, & Takahashi, 2004). Some people benefit from the people in their social convoys and are able to cope with life’s stressors, while others may have increased difficulty with situations because of their convoy.

The model creates a visual representation of an individual’s social network, identifying those people who are emotionally close and important. This model distinguishes three specific levels of closeness for an individual with each circle representing an important but different level of closeness (Antonucci, et. al, 2004). The inner circle describes people so close and important to you that it is hard to imagine life without them. The middle circle describes people who are still very important but not as close to you as the center circle. The outer circle describes people who are less close, but still important.
The social convoy model has been used to understand the structural and functional aspects of social networks of older adults (Antonucci & Akiyama, 1987). The convoy model suggests there will be changes in an individual’s social network as people’s roles change during the life-cycle. Age is used as a way to compare life-span differences. In a preliminary examination of older adults social convoys by Antonucci and Akiyama (1987), inner circles of support had mainly family members and were likely to be spouse and children. These members of the inner circle lived close to the older adults, were known for a long period of time and were in frequent contact with the respondent. The convoy model has also been utilized to identify attachment and other close social relationships across the life span (Antonucci, et al., 2004). After the examination of role relationships between people aged 8 to 93, results indicate there is an age difference in all close relationships over time. For example 8 to 12 year olds place more people in their outer circle than all of the groups of people over 60.

**Social Support**

Participating in social networks, activities and leisure are associated with improved health outcomes for older adults (Der Ananian & Janke, 2010). Social support is one element of social resources and House (1981) includes four different types of support: 1) instrumental support (sometimes referred to as tangible or material aid). An example of instrumental support is by offering to pay for fees associated with a leisure activity and providing transportation is another type of instrumental support. 2) informational support (guidance or advice). This may include providing information about knowledge one has about benefits of participating in physical activity or opportunities to participate in leisure activities. 3) emotional support (e.g. sharing feelings). An example of emotional support encompasses encouragement and interest in the
activity and 4) appraisal support (belonging or doing things with other people). An example of this is joining the person in a leisure activity (Barrera, 2000; Cutrona & Russell, 1990).

Now that I have reintroduced social support, I would like to address the process by which social support affects someone. Researchers have explored social relationships and identified connections with health and well-being for over 30 years (Lowenthal & Robinson, 1976; Reis, 1984; Wood & Robinson, 1978). Findings indicate people who have relationships with others who provide psychological and material resources are in better health than those who do not have as many (positive) social contacts (Cohen & Wills, 1985; Leavy, 1983). Through these studies, social support has been shown to be beneficial to well-being by two processes. The first model is the main-effect model because there is evidence that social resources have a positive effect on people even if they are not under stress (Cohen & Wills, 1985). The second model suggests support is related to well-being for people who are under stress. This model is the buffering model because the support buffers or protects people from the harmful effects of stress (Cohen & Wills, 1985). Companionship in leisure activities helps buffer stress and enhance psychological well-being (Rook, 1987).

Both models are supported by research (Cohen & Wills, 1985). In the main effects model, the positive and negative effects of social support have direct effects on people’s health (Marmont & Wilkinson, 2006). This model highlights the involvement in a social network (Berkman, 1995; Cohen & Wills, 1985). It also focuses on the existence of roles and examines structural (e.g., contacts, frequency, density) measures of support. Research suggests high levels of support promote well-being, regardless of the stress level (Thoits, 1986). The direct (main) effect model is supported when social support is addressed through structural dimensions. Support from others may increase healthy behaviors, perhaps to stop someone from smoking or
changing to a more healthy diet. Friendship and companionship obtained by participating in leisure activities can help people cope with stress because of the perceived availability of social support (Coleman & Iso-Ahola, 1993).

In the buffering model, social support can diminish the detrimental effects of stress on mental and physical health (Cohen & Herbert, 1996; Gore, 1981). Stressful events can take away feelings of personal control and self-esteem (Krause & Borawski-Clark, 1994). In the buffering model, support does not have any direct effect on health; however it helps to moderate the impact of acute and chronic stressors on health. The model was created because some stressors negatively affect some people and not others. It is a way to determine what other reasons might influence the health of someone who has experienced a stressful situation (Marmont & Wilkinson, 2006). It is common that the effects of stress are buffered during leisure, if people perceive themselves to be intrinsically motivated and self-determined (Iso-Ahola & Park, 1996). Leisure-generated friendship and companionship interact with life stress and are consistent with being buffers against the adverse effects of life stress on physical and mental health (ibid). In addition, Caltabiano (1995) also identified a significant stress-buffering effect of social leisure activities on physical and mental health.

When stress increases, people are able to look toward their friendships for emotional support and aid (Iso-Ahola & Park, 1996). One example of how the buffering model works is when a person is able to discuss a health threat with someone who offers social support. This might help someone evaluate their stressor in a new way and make the threat manageable or simply avoid it. Providing tangible or material types of social support may also help to lessen the impact of the stressor. For example, if someone finds out he or she has skin cancer, having
someone provide information about how to manage this condition or provide ways to continue to be outside and not have the condition get worse might lessen the stress.

Existing research also emphasizes the importance of social support to shape or influence physical and psychological health outcomes of older adults (Liang, Krause & Bennett, 2001; Robinson & Turner, 2003; Stanley, Beck & Zebb, 1998). Social support and social networks also have potential to positively affect the functional status of older adults (Everard, Lach & Heinrich, 2000). Being engaged in social activities is also associated with increased physical functioning, (e.g., activities of daily living). Research about older adults has also suggested social support lowers depressive symptoms (Horowitz et al., 2003; Hays et al., 1997) and helps people cope with the stresses of aging (Lawrence & Schigelone, 2002).

Research on social support also suggests it positively affects physical and emotional health and social isolation can negatively affect health (Marmot & Wilkinson, 2000). For example, Marmot and Wilkinson (2000) found that older adults who had a workout partner or participated in physical activity at a workout facility were more likely to participate in the recommended amount of daily physical activity than those who did not have a partner. Social isolation is also associated with increased rates of depression among older adults. Moreover, research indicates social support can boost the immune system, reduce illness, decrease recovery time and lower the risk of death from heart disease (Bassuk et al., 1999; Eng et al., 2002; Fratiglioni et al., 2000; Kawachi et al. 1996; Koenig et al., 1997).

**Social Support and Health**

Evidence suggests social support has a positive effect on physical and mental health.
Studies where people were asked to describe their own notion of what constitutes good health include responses of having strong social support and meaningful social relationships (Sebren & Chisum, 2010).

Research findings indicate that social support is beneficial to health and social isolation can negatively affect health (Marmot & Wilkinson, 2000). In a longitudinal study by Iecovich, Jacobs, and Stessman (2011), loneliness and solitude was determined to be a risk factor of mortality. The data consisted of randomly selected people from the Jerusalem Longitudinal Study (1990-2008), where data was collected from 605 community dwelling older adults at ages 70, 78, and 85. A sense of loneliness was a constant among the majority of respondents for many years. According to Iecovich et. al (2011), the main cause of loneliness is some form of actual shortage in meaningful social relationships. Several aspects of social network (marital status and household size) were found to predict mortality among men. Their findings imply that attention should be given to older men who do not have social networks or support. However, older adults who maintain frequent contacts with friends and social relationships have fewer feelings of loneliness (Mullins & Dugan, 1990). Moreover, social support is inversely correlated with loneliness (Iecovich, Jacobs, & Stessman, 2011). Olsen et. al (1991) found among men, feelings of loneliness were associated with cardiovascular mortality. Therefore, having emotional support is also a key to reduced cardiovascular disease mortality (Der Ananian & Janke, 2010).

House (1987) asserted that social relationships, social networks, and social support have important causal effects on health, stress, and their relationships. Rowe and Kahn (1997) made several assertions regarding social support and health. The first is that social support (emotional and instrumental aspects) can have positive health effects. The second idea is that having a lack of social ties is a risk factor for health. Their final conclusion is the effectiveness of support
depends upon the person involved. This refers to the idea that each person is different and each situation is different, so the effectiveness of the support is contingent on the person involved. Participating in social activities is also associated with increased cognitive functioning and reducing the likelihood of dementia (Der Ananian & Janke, 2010). Moreover, Stansfeld (1999) suggests social support can assist with chronic conditions and be beneficial for the immune system. “Social support has been helpful in dealing with chronic disabling and painful diseases such as rheumatoid arthritis, preventing the onset of secondary depression and limiting disability” (Stansfeld, 1999, p. 165).

Although the relationship between social support and health has been well documented, social support can affect each individual differently. Social support from family and friends has been consistently and positively related to physical activity participation (Sallis, Cervero, Ascher, Henderson, Kraft, Kerr, 2006). “Lack of social support and low self-efficacy are important barriers to regular exercise and physical activity.” (Orsega-Smith, Payne, Mowen, Ching-Hua, Godbey, 2007, p.1). Orsega-Smith and colleagues examined the role of social support and self-efficacy in achieving recommended levels of leisure time physical activity (LTPA). They identified social support from friends rather than family was related to LTPA. Social support can also provide a network of relationships and produce feelings of stability in one’s social realm (Levine & Perkins, 1997). This can assist with promoting a sense of purpose in life and increasing self-efficacy which has been associated with physical health outcomes (Iwasaki, 2010; Mannell, 2005). “Heart disease, stroke, cancer and all other causes of death show increased risks with isolation. Overall people are about twice as likely to die from a wide range of diseases if they are isolated compared to those with more contacts” (Berkman, 2000, p. 10).
Social support acquired in the context of leisure experiences is essential to individuals’ health (Coleman, 1993; Iso-Ahola & Park, 1996; Larson et al., 1996).

**Leisure, Social Support and Health**

Social support, social interaction and friendships are prevalent in most leisure activities and are important in the beginning and maintenance of health behaviors (Caldwell & Tibbits, 2010). Psychological factors such as coping and the ability to regulate emotions may substantially influence health and risk for disease (Lockenhoff & Carstensen, 2004). Being able to cope with stress successfully may also influence vulnerability to memory destruction. More specifically, elevated cortisol levels in response to stress have been linked to accelerated brain degeneration (hippocampus atrophy) among healthy people and those in the early stages of Alzheimer’s disease (Lupien et al., 1998). Leisure’s role in the stress-coping process has been given substantial consideration in the past 20 years (Caltabiano, 1995; Coleman & Iso-Ahola, 1993; Iso-Ahola & Park, 1996; Iwasaki, 2001; Iwasaki & Mannell, 2000). Amongst leisure researchers it has been suggested that leisure can be an important buffer against stress and assist with maintaining good health (Caldwell, 2005). One of the seminal articles by Coleman and Iso-Ahola (1993) hypothesized that social support and self-determination obtained through leisure were important to buffer stress. Iso-Ahola and Park (1996) also used the buffer model to examine the role of social support in stress coping. They discovered that social support arising from leisure participation contributed to stress reduction for individuals experiencing high stress levels, thus promoting physical and mental health. Moreover, Kleiber, Hutchison and Williams (2002) and Iwasaki and Mannell (2000) suggested that leisure can function as a means to escape or distract attention away from stressors and provide a break to reevaluate a stressful situation. During a stressful time, taking a break and participating in a favorite leisure activity (e.g., getting
together with friends, going for a swim, or a walk with friends) might provide enough of a break to think about the stressor differently.

Leisure by nature is social. Often, leisure activities are part of a social group (Coleman 1993). Some leisure activities can be comprised of almost all socialization (e.g., dancing, cards). By participating in leisure activities which are social in nature, friendships and social networks can be formed (Coleman & Iso-Ahola, 1993). There is a connection between leisure, social networks, social support, and health. Leisure is a setting and an activity that can provide people with feelings of social support. For people who are embedded in social networks, they are more likely to perceive they will be supported in times of crisis (Caldwell & Smith, 1988; Iso-Ahola & Weissinger, 1984; Weissinger & Iso-Ahola, 1984). Perceived social support is where support has the most value; it is the idea that if needed someone will be there to help.

Support from members of one’s social network (family and friends) also increases leisure satisfaction and participation (Horowitz et al, 1999). Moreover, participating in leisure activities with other people from your social network has also been linked to life satisfaction (Holman & Jacquart, 1988). Social support provides people with the necessary resources to cope with life events that are stressful (Parry & Glover, 2010).

**Negative Aspects of Social Support**

Although social support can lead to healthier behaviors and improved well-being, some research suggests social relationships can be a negative influence on health and well-being (Locher et al, 2005). Recent literature has explored the negative aspects of social support. People who provide social support can influence others negatively and create mistrust with poor advice. There is a stronger correlation of negative relationships with poor mental health than with social support and positive mental health (Israel & Schurman, 1990). Evidence suggests that in close
relationships, negative aspects of social support may have a greater effect on poor heath than positive aspects on health (Coyne & Downey, 1991). In essence, if someone is providing negative social support, it will have a stronger effect than someone who is providing positive social support.

Social support may be less effective to improving health depending upon the source of the support. Emotional support may have a different meaning based on who is providing the support. For example, in a time of emotional distress from the death of a loved one, a phrase such as, “everything will be fine in time” might be welcomed if coming from a loved one but not looked at as support if said by an acquaintance (Uchino, 2004).

Moreover, Caltabiano (1995) found that under some conditions people found too much social support stressful. Although this unexpected finding may have occurred because people who were less healthy obtained additional social support, the association could also have been produced by excessive social contact generating stress rather than buffering it. Rook and Dooley (1985) identified that some seemingly supportive measures by peoples’ social network may be linked to an increase in stress. Friends or other members of a social group may push too much or unwittingly press too hard when what is needed is a little space.

Even though there might be a negative aspect to social support, there is a consensus that social support is important in health and well-being. The relationships between social networks, participating in social activities and health have been established in the literature. Evidence also indicates interpersonal relationships (friendships, companions, people who you can rely on) are important to maintain health and longevity (Cohen, 1998; House, Landis & Umberson, 1988).
Social Support and Older Adults

Understanding the types of functional support older men receive from leisure based social networks is important because they are living longer and many participate in informal leisure groups. Social networks are comprised of family and friends. Research reveals for older adults, friends are more important than family in improving life satisfaction (Adams, 1986). In a seminal article by Larson, Mannell and Zuzanek (1996) friends had a stronger impact on subjective well-being than family members. This is because relationships with friends are voluntary while relationships with family are often out of obligation. Interactions with friends can create feelings of self-worth while interactions with family members might not (Lee & Shehan, 1989). Social support is very important for those older adults who rely on others such as family, friends, or organizations to help with daily activities and well-being. Older adults refer to their friends rather than family members for social interaction (Potts, 1997; Robinson & Turner, 2003). Relationships of non-family members may enhance the quality of life for older adults (Krause, 2011). Older adults may also turn to community groups (such as bridge clubs, coffee groups) for specific social support needs outside of their family and friends (Cheang, 2002). Liang (2001) indicated although the quantity of social relationships decrease with age the quality may be better and improve life satisfaction.

There is research emphasizing the importance of social support on physical and psychological health outcomes of older adults (Liang et al., 2001; Robinson & Turner, 2003; Stanley et al., 1998). Social support and social networks have the potential to positively affect the functional status of older adults (Everard et al., 2000). Research about older adults has also indicated social support lowers depressive symptoms (Hays et al., 1997; Horowitz et al., 2003) and has shown to help cope with the stresses of aging (Lawrence & Schigelone, 2002). There are
positive correlations between perceived support of older adults’ well-being, both physically and mentally (Krause, 1997; Shaw & Janevic, 2004; Stanley et al., 1998).

One group of older women that has been extensively studied in the leisure literature is the Red Hat Society (RHS). The RHS is a leisure group for women over the age of 50 who are encouraged to play, be silly and engage in relationships with other women. This group of women consists of over 1 million members in over 30 countries with 42,000 different chapters (Kerstetter, Mitas, Xinyi, & Yarnal, 2011). There are not any rules to belong to the group, however members must be female and be compliant with the dress code (red hats and purple attire for women over 50). Younger women are able to participate but they must wear a pink hat and lavender attire (ibib). Many chapters travel together including cruises, however most meet regularly at members houses or restaurants to socialize. Studies on this group of women have identified a variety of benefits of participating in this group. The RHS provides women the opportunity to socialize and learn to cope with challenges and losses in their lives (Hutchinson, Yarnal, Stafford-Son, & Kerstetter, 2008). In addition to socializing, Mitas et. al (2008) acknowledged participating in this group produces positive emotions including: joy, interest, contentment and love. The main reason why participants were active in this group was for fun. However, they found this group to be emotionally beneficial because it alleviated stress and provided social support during challenging life events. Specifically, they reported experiencing relief from the ups and downs of daily life (Yarnal et al., 2008). In addition, Son, Kerstetter, Yarnal and Baker (2010) examined members’ experiences of RHS and findings suggest participation in the club contributes to health and well-being. The women indicated participating in this group is an important means for enhancing their sense of self and interacting with others.
In a study more closely related to my dissertation, Cheang (2002) studied the social interaction among older adults who frequent a fast food restaurant. He suggests older adults participate in a social group at a restaurant to “play” and be among their friends (e.g., to meet friends, to sit with my friends, to share things with my friends). The older adults formed a group at a neutral location where they could be themselves and act silly among peers. This third place provides structure and opportunities for the adults to engage in social relationships. The group has fun, laughs and is sociable, but Cheang concluded these older adults do not exchange social support. However, Cheang asserted his group is important to the members who participate and can assist in healthy aging through a sense of belonging, laughter and fun (Cheang, 2002).

Overall, Krause (2011) suggested older adults with strong social ties have better physical and mental health than those who do not have relationships with others. Social support may help older adults gain self-esteem and increase feelings of control and contribute the meaning in life (Krause, 2011). This is important because this demonstrates a way research can be used to improve the quality of life for older adults.

Gaining a better understanding of how to age successfully and improve health and well-being is an important aspect in researching older adults. Leisure and social support has been confirmed to assist in the process of successful, healthy aging. Through researching this social leisure group of older men, I hope to gain insights about the benefits of their involvement in this social group and understand how their experiences contribute to better health and well-being.
CHAPTER 3: METHODS

The purpose of this study was to understand how participation in a men’s coffee group affected their socio-emotional health and well-being and to determine if this group is a form of social support for the men. The objectives of this study were: 1) Discover how (e.g., via social support, companionship, social interaction) participating in this group shaped their health and well-being; 2) Discover explanations as to why these men continued to belong to such a group; 3) Understand the positive and negative aspects of belonging to this type of group; and 4) Examine the relationships among group members and determine if social support is received. Clarification or a deeper understanding of the benefits of participating in a leisure-based social group will facilitate a better appreciation of the contribution of men’s leisure to quality of life.

Qualitative Research

Qualitative methods are appropriate within the leisure realm to gain a better understanding of leisure experiences in a different context (Dupuis, 1998). Qualitative research is inductive in nature and brings the researcher into the world of the participant. “Qualitative researchers study things in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them” (Denzin & Lincoln, 2005, p.3). Qualitative methodology produces data from observations and peoples’ spoken and written words (Taylor & Bogdan, 1998). In qualitative research, data collection is in a natural setting and is sensitive to the people being studied (Creswell, 2007). It is also appropriate when there is a need to study a specific group or population whose stories and experiences you want to understand (Creswell, 2007). Also, the researcher is the primary instrument for data collection (Creswell, 2007; Taylor & Bogdan, 1998).
**Phenomenology**

The epistemological framework I used is phenomenology. This framework is used to understand and interpret the meanings people receive from life experiences. It is based in philosophy and psychology (Bloor & Wood, 2006). As Moran describes,

> Phenomenology is best understood as a radical, anti-traditional style of philosophizing, which emphasizes the attempt to get to the truth of matters, to describe phenomena, in the broadest sense as whatever appears in the manner, in which it appears, that is as it manifests itself to consciousness, to the experience (p.4).

Edmund Husserl (1859-1938) influenced the development of the philosophy of phenomenology. He described a concept of lifeworld (i.e., everyday experiences that are lived and reflected upon) which is central to phenomenology. The goal of Husserl’s phenomenology is “to use the lifeworld as a source of evidence and secondly to describe the essential qualities of a phenomenon so that we can better understand its nature.” (Bloor & Wood, p. 128).

Phenomenology assumes that people make sense of lived experiences in regards to the significance it has for each individual person.

Data collection methods which are the most salient to phenomenology are in-depth interviews and narratives as these methods are important to generate a description of the lived experiences (Bloor & Wood, 2006). I focused on understanding the meaning of the experience (Flood, 2010). I wanted to understand how individuals make sense of their lived experiences within the context of a coffee group (Annells, 1999). As such, in-depth interviews are considered one of the best ways to gain a full understanding and a first person account of experiences (Smith et. al 2009). It is important for the participants to get the opportunity to tell their stories and speak freely.

I conducted qualitative research using a responsive interviewing paradigm (Rubin & Rubin, 2005). Responsive interviewing is a specific way of qualitative interviewing. The
emphasis is on flexibility of the design and allows for adjustments while interviewing. This paradigm assumes that what the people are saying is correct and true to them and by sharing these lived experiences the researcher can understand their world as they see it (Rubin & Rubin, 2005). This is appropriate because I wanted to understand the experiences and perspectives of older men who participate in men’s coffee groups. I studied older men in a regular familiar setting at a coffee hour and gathered in-depth information by talking and listening to their stories. Individual interviews allowed the participants to have time to think about responses, speak and be heard by the researcher (Smith & Osborn, 2008). I created an interview guide that served as a guided conversation to understand men’s experiences at coffee hour. An interview has been described as a “conversation with a purpose” (Smith Osborn, 2008 p. 57). Through each distinctive conversation I gained a better understanding of participants’ individual experiences. I established a connection that allowed for a candid exchange and hope to act as a conversational partner who will play an active role in shaping and guiding the questions.

By using a responsive interviewing paradigm I was able to design questions and create an experience unique to that individual. Some people were extremely chatty while others were more reserved. This approach allowed me to tailor the interview to that particular person in order to gain as much insight as possible. This approach allowed a voice to be given to the men of the coffee group and they were able to share ordinary events that may have major impacts on them. This process allowed me to give a voice to an under researched segment of the population. I gained a variety of perspectives by including anyone in the group who wished to be interviewed (new recruits vs. veterans).

My role as a researcher was to gather narratives, interpretations from conversations and put them together in a way that participants see as real. Responsive interviewing is cooperative
between the researcher and the interviewee (Rubin & Rubin, 2005). Both the interviewer and the interviewee are active participants in the research process (Smith & Osborn, 2008). The way I approached this interview is appropriately articulated by Seidman (1991) “Interviewing is both a research methodology and a social relationship that must be nurtured, sustained and then ended gracefully” (p. 72). Within responsive interviewing I tried to acknowledge and learn about people’s perceptions and recognize my biases. I wanted to understand how the older men see the coffee group they attend. This model recognizes that each party, the interviewer and the interviewee, are people, have feelings, opinions and emotions. This model also encourages building relationships between the researcher and the interviewee (Rubin & Rubin, 2005).

**Study Setting**

This study took place at two locations in Champaign, IL; The Helen Mark Stevick Center (Stevick Center) which is a local senior center and at a local McDonald’s.

**Stevick Center.** There is a long history to the Stevick Center coffee group and I received a case study written in the early 1990s by Jennifer Long outlining the history of the group. The original men’s coffee group started from a group of men who regularly gathered at a local Walgreen drug store in the 1930s. The drug store burnt down in 1974 and the group was without a place to meet. The men’s coffee group contacted Marilyn Abbuel, the director of the senior citizens center located downtown Champaign for help. The group met at the senior citizens center until 1986 when the center closed because of limited funding. At that time, the publisher of the News-Gazette, Maryjane Chinigo offered the group a meeting space and utility costs. Currently the News-Gazette provides the funding for the Helen Mark Stevick Senior Citizen’s Center. The center offers a variety of senior services and operates under Family Services of Champaign County.
The Stevick Center is a place where older adult programs are held and where a men’s coffee group meets every weekday from 9am-10am. The Stevick Center is located in downtown Champaign near a few small businesses, bars and restaurants. There is parking available for the participants at parking meters in a parking lot across the street as well as metered parking on the street. The center was the old newspaper printing building and is on the edge of the downtown businesses. The center consists of a large lobby area, two conference rooms, bathrooms and several offices. When walking into the center you are greeted by a volunteer at a receptionist desk and must sign a sign-in sheet with your first name and the county you live in. Just behind the women at the front is a large open area with couches, comfortable chairs, piano, coffee table and a few card tables. There are bookshelves with books and games/puzzles located on the shelves. This room reminds me of a large living room. This is an area where people can go and socialize. This area also acted as a waiting room during tax season. There is a free program available to anyone who wants assistance with their taxes at the Stevick Center.

The men meet in a large conference room where tables are pushed together in the center to create a large table with chairs around the edges. This is also where their coffee and coffee cups are located. They are able to keep a mug at the center on a hook and rinse it out every day and hang it up for the next use. There are also Styrofoam cups available for use as well. Powder creamer and sugar are available for the men to add to their coffee. Several carafes are on the table filled with coffee, so the men do not have to get up every time they want a new cup of coffee. This room has two entrances, one from the lobby and one from the back hallway near the restrooms.

Permission to participate at Stevick Center and rapport building. I developed a relationship with the older men’s coffee group at the Stevick Center during the fall semester of
While enrolled in a qualitative methods class, I discovered the Stevick Center and conducted observations, focus groups and interviews with the participants of the center. My interaction with the men’s group was used to practice my qualitative research skills over about a month period. I met with the men and asked very superficial questions about their experiences at the center. They assisted in my qualitative research class project by allowing me to sit in on their coffee group. The overall goal of my interaction with the men was to use the information I obtained in class to apply in a real life scenario.

For this study, I received written permission from the manager of the Stevick Center, Karen, to once again interact with the group members. The reintroduction to the Stevick Center men was formal. Karen asked the men prior to my arrival if I could come in and speak with them. The men all said yes, however on my first day meeting with the men for this study, she double checked with the men to make sure that day was a good day. They agreed and I was brought back to the room at the center where they meet. She reintroduced me to the older men again as a University of Illinois student conducting a research project. I also introduced myself and told them that I had been here before and wanted to discuss more with them about their coffee group. Some of the men said that I looked familiar to them and remembered that I had been there before.

**McDonald’s.** While discussing my research interest with my friend, the Regional Director of the McDonald’s in Champaign, he mentioned that there are several groups of men who meet and have coffee at local McDonalds. I contacted him to discuss in more detail what locations and what time the older men meet for coffee. He discussed the objectives of my study with each of the store managers to determine the specific time and days any older men meet for coffee. Each manager provided him with a description of the groups, when they meet and for
how long. I was given three different locations where the manager’s identified older men meeting on a regular basis. I was given written permission and visited the specific fast food restaurants he mentioned everyday for a week and then periodically for a month to see if the group of people the managers described fit my study criteria (i.e., older men, meeting on a regular basis). Several of the restaurants did not have the group of men in which I was interested. There were a few groups of older adults who came in and ate breakfast at three different McDonald’s around town, but they were not there every day and also did not stay long. The people I observed came in and ate their breakfast (with others) and then left. This was not the type of group that I was interested in speaking with. However, there was one location where everyone seemed to know each other and people met on a regular basis at a predetermined time every day. Therefore, after visiting three different McDonald’s to find older men to talk with, there was one location that had multiple groups of older adults who meet on a regular basis. The location is at 1605 S. Neil, Champaign, IL which is on the corner of Kirby and Neil St. There are a lot of people headed back and forth to work who eat at this location. According to the owner, this store also serves mostly college students and travelers (because of events going on at either Assembly Hall or Memorial Stadium). This is considered a high volume store that was recently remodeled. The customers can be described as white college students, business people and older adults.

The lobby was just renovated and has a more modern look to the inside, with various types of seating. There is a high bar top, with several chairs (without backs), and there are tables made for two and four people, both circular and rectangle. Along the outer edge of the restaurant there are circular booths created for larger parties and can sit 4-5 adults comfortably. There are also several tables that are booths (bench) on one side and a chair on the other side of the table.
This store also has picnic style tables which are a bit lower to the ground and have stools (without backs) for seating. When you walk into this store in the morning, there are several different groups of people eating and visiting with each other. There is one section comprised of several tables with 8-10 seats with both older men and women sitting and talking every day from around 8am until 10am.

In the morning, this restaurant serves a large proportion of older adults and some college students. During local school district’s spring break and summer break, this was a spot where several high school students would also come for breakfast and eat in the lobby. After observing the restaurant customers for several weeks, as strictly a patron looking for coffee groups, I recognized several groups of people coming on a regular basis. I spoke with the manager and asked them if the groups I noticed were regulars and he said yes.

**Permission to participate at McDonalds and rapport building.** The actual introduction to the men at McDonald’s was less formal than expected. As I was speaking to the manager of McDonald’s, I made eye contact with one of the gentleman in a group in which I was interested. He smiled and I walked over to the table and as I was coming over he said hello. He asked me if he knew me and I said, “you do now.” I introduced myself and told him that I was studying older men’s social lives, specifically older men who participate in a coffee hour. He offered a chair to join the group of four and I sat down and discussed with the men what I was doing and asked them if they would be interested in discussing their experiences with me. They agreed and I outlined the process for them.

**Permission to conduct study.** In addition to permission from the specific locations, I also had permission to conduct this study by the Institutional Review Board at the University of Illinois. I received specific consent from each of the men participating in the coffee hour. The
men all read a letter created by me outlining the study and asking their consent to participate in
the study. I had each of the men sign the consent form prior to conducting interviews.

Field Notes and Observations

This study was conducted over a 6-month time period, the first two months were spent
observing and participating in the group and then one-on-one interviews were conducted in
conjunction with participating and observing the coffee hour group. Each group met for about an
hour to an hour and a half, Monday through Friday at the designated location.

Once I had established initial contact with the members of each coffee group, I observed
the group and created brief field notes during the meetings. After every meeting, I then went into
my car and wrote up longer, more detailed notes about what I observed and key topics of
conversation. I found the less I wrote while sitting and talking with the men, the more I was a
part of the group. I continued to just observe the men and interact with them as part of the group
for several months, acting as a participant in the group. After about two months of meeting with
the men a few times each week, I scheduled in-depth in-person interviews with members of the
groups. I continued to participate in the coffee group, observe and take field notes before and
after interviewing the men. There were some days after the interviewing began, where I just
acted as a participant in the group and did not interview anybody. I believed that it was important
for the men to understand I was still interested in their lives even after I had interviewed them.
In addition, the field notes obtained provided more information to support the themes that
emerged from the interviews. This also provided me with information to triangulate data from
the interviews. Patton (2002) supports the use of triangulation by stating “triangulation strengthens a
study by combining methods. This can mean using several kinds of methods or data, including using
both quantitative and qualitative approaches” (p. 247).
My presence changed the dynamic of the group at the beginning, especially with the McDonald’s men. Although they were still having conversations, I became the focus of the group the first few meetings I had with the men. The men asked me questions to get to know me (i.e. Where are you from?, How long have you lived in Champaign?). After they got a chance to get to know me and I was able to get to know them, I was still introduced to any person who approached the group, but was not the focus anymore. After about two months, my presence did not change, in fact one of the men said a dirty joke and then said, “looks like you are part of the group now.” After the novelty wore off, I blended in as someone who was there to participate in the group. My presence was a topic of conversation among the coffee group members. Because I am a young white female, time was needed to build a relationship with the group members. Listening and participating in conversations enabled me to get to know the members. I acknowledge that I influenced the conversation and the regular flow of the group at the beginning.

While conducting my observations and meeting with the group, I felt very welcomed in the group. There was a sense that they were happy that I was there, this was expressed through cheerful hellos and smiles. They would often ask me about my weekend and things going on that I shared with them. After I met with the men for a couple of months and they became familiar and comfortable with me, I started the interview process.

Interviews

After they were comfortable and seemed to be very open about different topics, I asked them if they would be interested in participating in one-on-one interviews the following week. I wanted to give them enough time to feel comfortable about being interviewed. Because these groups are small I did not limit the number of interviews for each of the groups. The participants
were purposefully selected so that they are a rich source of information that will bring light to my questions (Patton, 2002). Inclusion criteria for this study was defined as men over the age of 60 in attendance at the coffee hour who are able to speak about their experience. All of the participants were informed they will not be identified in the study and a pseudonym was used. They were also able to stop the interview at any time.

To start the interview process, during coffee hour, I asked the men if someone would be able to be interviewed today. The interviews were scheduled at a time most convenient to the participant, and the men were able to decide when they were interviewed. Some days, the men did not want to be interviewed because they had an appointment right after coffee hour. So, they often suggested another day to be interviewed later in the week. Most of the interviews occurred during and just after the coffee group met. It was convenient for the men to move to a more secluded section of the restaurant or room for the interview. It was important to conduct it at a location where the participant was comfortable and the interview could ensue without too much interruption. Each of the 14 interviews took place at the McDonalds or the Stevick center and were audio recorded and transcribed. Interviews lasted between 20 and 60 minutes, with an average of 30 minutes per interview. I concluded interviews when the data was saturated (Strauss & Corbin, 1998). The data is saturated when “no new information seems to emerge during coding, that is, when no new properties, dimensions, conditions, actions/interactions, or consequences are seen in the data” (Strauss & Corbin, 1998, p. 136).

I created an interview guide to assist in my conversation with the older men (Figure, 1). It is a guide that shaped our conversation and sharing of information (Dupuis, 2008). I also asked the men several demographic questions and noted them after the interview was completed (Figure, 2). When interviewing the men, I started with general questions (ex, how long have you
been coming to coffee hour?), I then asked each additional question depending upon the person and where the interview was leading. I tried to lead the conversation from one topic to the next, flowing as if there was not an interview taking place but a conversation among two people.

**Social Convoy Model**

I wanted to understand the dynamic of the men’s social network so I used the network mapping procedure developed by Antonucci (1986) (Figure 3). The main reason for utilizing this model was to see where the coffee group men fit into each person’s social network. Because this model provides a visual representation, it is a tool that can easily show someone’s own personal network. During the interviews, most of the men described these guys as friends and close buddies, but it was unclear as to where these men actually fit within all of their relationships. This model illustrates which relationships are the most important.

I showed the men a diagram with three concentric circles with “you” written in the center circle. I told the men that they should think of the people who are important in their life right now and then place their names in the circle that corresponds to how you feel about them. To assist this process I wrote down the names or relationships of the people the men mentioned. This created less of a burden on the men and created a flow to the process. I started by asking the men to “begin with the people you feel closest to, is there one person or persons that you feel so close to you that it’s hard to imagine life without them?” The next circles were completed the same way, asking the men to think about people who you may not feel quite that close but who are still very important to you.” For the outer circle the men were instructed to place names of people whom you haven’t already mentioned but are close enough and important enough in your life that they should be placed in your personal network. The men started with the center circle, but during the process of filling in the circles the men would often come back to a circle and add
a name. I found it best to complete the social network mapping after the interview process was complete. The first time I presented this mapping to the men, they continued to go back to the model while I was conducting the interview, remembering people who they forgot to add to their network. To help keep the men focused on the interview, I decided to interview the men and then present them with the network mapping, giving them an opportunity to add to any additional names or comments after the interview and social network mapping was complete.
## Interview Guide Draft

<table>
<thead>
<tr>
<th><strong>Research Question</strong></th>
<th><strong>Interview Questions</strong></th>
</tr>
</thead>
</table>
| Discover how (e.g., via social support, companionship, social interaction) participating in this group shapes their health and well-being. | Are you healthy enough to carry out the things you want to do?  
What does coffee hour mean to you?  
What do you get out of it for yourself?  
What would your life be like if you didn’t have you coffee hour group each week?  
How has being a part of coffee hour affected your life?  
If you were not at coffee hour, what would you be doing instead?  
How has being a part of this group affected your health and well-being?  
How long have you been coming to coffee hour?  
Describe your health status |
| Discover the reasons why these men continue to belong to such a group. | How many days/wk do you come?  
What are the reasons you started coming to coffee hour?  
Why do you participate in coffee hour?  
How do new men join the group? |
| Understand the positive and negative aspects of belonging to a group such as this | When was the last time someone new joined?  
What are some of the benefits you get out of participating in a group such as this?  
Are there any negatives aspects of belonging to a group such as this? |
| Examine the relationships among group members and determine if social support is received. | Do you consider yourself a newcomer to the group?  
Do you consider these coffee members friends?  
If so, how would you describe your relationships?  
Do you spend time with you coffee hour friends outside of coffee hour?  
Do you talk about your experience with others outside of the group? What do you say?  
Do you talk about the people who have fallen ill or passed away? |
| Social Support/ SEST continued | Has anyone died/been sick within the group? Close friends outside of the group?  
Do you have family in the area? If so who  
Are you happy with your current social network size?  
Happy with your preferred social partners?  
Happy with whom you choose to spend time with? |
Demographic Questions

1. How old were you on your last birthday? ____________

2. Do you live alone or with others?
   - Alone
   - With others

3. Are you … (check all that apply)
   - American Indian or Alaska Native
   - Asian
   - African American or Black
   - Native Hawaiian or Other Pacific Islander
   - White or Caucasian
   - Hispanic or Latin

4. What is the highest level of education you’ve completed?
   - Graduate Degree
   - Bachelor’s Degree
   - Associate’s Degree
   - Some College/Tech School
   - High School Degree
   - Some High School

5. What is your marital status?
   - Married
   - Divorced
   - Widowed
   - Living with partner
   - Never married

6. What is your work status? (Paid, non-volunteer work.)
   - Work full-time
   - Work part-time
   - I am retired
“Think of the people who are important in your life right now and then place their names into one of the three circles based on how close they feel to you. Beginning with the people you feel closest to, is there one person or persons that you feel so close to that it’s hard to imagine life without them? Write their first names or initials. For the next circle, place the people whom you may not feel quite that close but who are still very important to you. For the outer circle, place names of people whom you haven’t already mentioned but are close enough and important enough in your life that they should be placed in your personal network.” Antonucci, Akiyama, Takahashi, (2004) p. 358
Description of Participants

I met with and conducted one on one interviews with 14 men (see Table, 1), they ranged in age from 64 to 93 years. The men attending the McDonald’s group coffee hour were overall younger and had been attending for a shorter period of time than the Stevick Center men. The men were all Caucasian and with the exception of one man were all retired. Most of the men interviewed were married; however 3 of the men were widowed. The majority of the men earned a bachelor’s degree or higher (N=9), while three completed high school and two completed some college. Most of the men lived with others, either their wife or children. There were two people who lived alone.

Table 1.

Description of Older Men

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Years in Coffee group</th>
<th>Group</th>
<th>Marital status</th>
<th>Work Status</th>
<th>Education Level</th>
<th>Live alone or with others</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matt</td>
<td>65</td>
<td>2</td>
<td>McD</td>
<td>M</td>
<td>R</td>
<td>High school</td>
<td>Others</td>
</tr>
<tr>
<td>Ron</td>
<td>66</td>
<td>2</td>
<td>McD</td>
<td>M</td>
<td>R</td>
<td>Bachelors</td>
<td>Others</td>
</tr>
<tr>
<td>Warren</td>
<td>66</td>
<td>1.5</td>
<td>McD</td>
<td>M</td>
<td>R</td>
<td>High school</td>
<td>Others</td>
</tr>
<tr>
<td>Joe</td>
<td>64</td>
<td>1.5</td>
<td>McD</td>
<td>M</td>
<td>R</td>
<td>Some College</td>
<td>Others</td>
</tr>
<tr>
<td>Charles</td>
<td>72</td>
<td>7</td>
<td>McD</td>
<td>M</td>
<td>R</td>
<td>Bachelors</td>
<td>Others</td>
</tr>
<tr>
<td>Bob</td>
<td>78</td>
<td>12</td>
<td>McD</td>
<td>M</td>
<td>PT</td>
<td>High school</td>
<td>Others</td>
</tr>
<tr>
<td>Chris</td>
<td>82</td>
<td>1</td>
<td>McD</td>
<td>M</td>
<td>R</td>
<td>Some College</td>
<td>Alone</td>
</tr>
<tr>
<td>Chuck</td>
<td>93</td>
<td>27</td>
<td>SC</td>
<td>W</td>
<td>R</td>
<td>Bachelors</td>
<td>Alone</td>
</tr>
<tr>
<td>Burt</td>
<td>81</td>
<td>15</td>
<td>SC</td>
<td>M</td>
<td>R</td>
<td>Bachelors</td>
<td>Others</td>
</tr>
<tr>
<td>Rob</td>
<td>80</td>
<td>12</td>
<td>SC</td>
<td>M</td>
<td>R</td>
<td>Graduate</td>
<td>Others</td>
</tr>
<tr>
<td>Dan</td>
<td>84</td>
<td>10</td>
<td>SC</td>
<td>M</td>
<td>R</td>
<td>Graduate</td>
<td>Others</td>
</tr>
<tr>
<td>Kevin</td>
<td>75</td>
<td>17</td>
<td>SC</td>
<td>M</td>
<td>R</td>
<td>Graduate</td>
<td>Others</td>
</tr>
<tr>
<td>Steve</td>
<td>92</td>
<td>14</td>
<td>SC</td>
<td>M</td>
<td>R</td>
<td>Bachelors</td>
<td>Others</td>
</tr>
<tr>
<td>Donald</td>
<td>89</td>
<td>12</td>
<td>SC</td>
<td>M</td>
<td>R</td>
<td>Bachelors</td>
<td>Others</td>
</tr>
</tbody>
</table>

M- Married, W-Widowed
R- Retired, PT- Part Time
Years- number of years in the coffee group
McD- McDonalds; SC- Stevick Center
Analysis

I used interpretative phenomenological analysis (IPA) because I am interested in understanding the meanings the coffee hour has for specific participants. IPA is a recently developed and growing approach in qualitative research (Smith & Osborn, 2008). This approach is based in phenomenology because it identifies and recognizes the individuals’ perceptions of the experience and is from the view of the participants (ibid). This analysis is appropriate to understand how individuals perceive the situations they face and what it is like in their personal and social world (Smith, & Osborn, 2008). Also, my data collection and analysis was conducted simultaneously, because in qualitative research the process is important (Henderson, 1994). Each interview I conducted shaped and informed the following interviews (Rubin & Rubin, 1996). The sample size for this project is small (14 interviews, which is when saturation was reached) and the purpose is to say something meaningful about this particular group, not the entire population. This analysis helped me identify the depth of each interview.

Interviews. I analyzed the data using the interpretative process suggested by Smith and Osborn (2008). First, I transcribed the interview verbatim using dragon software. I was able to listen to the recordings and speak into a microphone to dictate what was said. I then reviewed the audio-recordings and made any necessary changes to the transcripts. I created a clean transcript ready to be analyzed. I ensured confidentiality by providing pseudonyms for all of the men. The audio-taped interviews and transcripts were kept in a locked file cabinet and computer, accessible only to me and my committee members. I read the transcripts one case at a time and noted what was significant or interesting in the margins. I commented on anything of importance including similarities, differences and contradictions. Then I went back again through the
transcripts and wrote down any emerging themes that I found, looked for connections between them and clustered them together. Once I had the themes, I went back through the interviews and matched actual text to themes to gather quotes. After all of the interviews were transcribed and analyzed in this manner I combined all themes and determine which ones are consistent. There were not a lot of divergent perspectives found among the men in the coffee groups. I suspect because they meet so often and have such a positive group dynamic, they are more in sync with each other than another social group may be.

**Participant observation.** I wrote down key phrases and topics during the coffee group meetings and then made more detailed notes when I was alone after meeting with the group. I typed up all of my field notes and observations. I read through all of the field notes from the observations I made while participating in the coffee group with the men. I utilized the field notes to support the themes that emerged during the interviews. There were several stories shared and topics covered during the coffee hour that supported the themes. One example where field notes assisted in my analysis is when the men shared a story about when they went down to Kentucky to offer support for a man who had a broken boat. The men also discussed current events and shared information about what was going on in the community which supported the theme social support was received from the men. I was also able to observe the fun and the laughter that was had that was able which enforced the theme of fun and enjoyment. Although the men commented about how much fun they had, it was clear through my participant observations that they truly enjoyed being there (i.e., the laughter heard on a daily basis, jokes being told, smiles on their faces). Participant observations lend support to various themes that emerged from the interviews.
Validity of Qualitative Research, Trustworthiness and Credibility

There are two main threats to validity in qualitative studies; researcher bias and the effect of the researcher on the individual in the studies which is sometimes called reactivity (Maxwell, 1992). The researcher’s bias or the subjectivity of the researcher can affect the validity, by either choosing data that supports the existing theory or preconception or selecting data that stands out to the researcher (Miles & Huberman, 1994). Another problem for qualitative researchers is called reactivity, when the researcher may also influence the setting or individuals being studied. Especially during interviews, the researcher is part of the process and everything is always influenced by the interviewer in that situation (Hamersley & Atkinson, 1995).

To help reduce the threat to validity, at the end of every interview I summarized the men’s answers reviewing each question and asked them if this is what they meant to say. I wanted them to validate the responses and make any changes that they needed. This was to help ensure the meaning and interview occurred as the participant intended. This is a critical way to ensure the researcher does not misinterpret the meaning of what the participants say (Bryman, 1998). This also assists in indentifying what biases the researcher may have. I used another triangulation strategy in my analysis to improve the validity and reliability of my research. I provided my dissertation chair with at least half of the interviews and then she reviewed the transcripts and coded them. We then met and shared our findings, discussed the similarities and differences in our analysis and compared emerging themes. To improve analysis and understanding is to use triangulation by involving several investigators or peer researchers to interpret the data (Golafshani, 2003). I also used field notes and observations to triangulate the data from the interviews. Using various methods, such as observation, interviews and recordings, helped improve the reliability and validity of the conclusions (ibid).
CHAPTER 4: RESULTS

This chapter portrays the themes that emerged from interviewing the coffee hour participants. I carefully read each interview and made notes about commonalities among the men, for anonymity I have changed their names. I have organized this chapter by identifying themes. The major themes that surfaced are: (a) similarities and differences between the groups (b) coffee group as facilitator to emotional health and well-being (c) coffee group as facilitator to social health and well-being. Because of the phrasing of the questions, some of the men’s comments cross over themes. There were some distinct similarities and differences between the two groups of men and I have acknowledged them at the beginning of this chapter to paint a picture of what each group was like.

Similarities and Differences Between the Groups

After speaking and meeting with both coffee groups, I have discovered there are some similarities and differences between the groups. First I will acknowledge some of the group’s similarities and then outline some of the differences.

From most of my observations and interviews, a common theme emerged about the reasons people came to the coffee hour: socializing and being with friends. It is a way for them to get together and talk to discuss things that are going on in their lives. It is a place where they can enjoy the companionship while participating in an activity. It is a fun atmosphere, where they know people will be there and they look forward to seeing them.

Men in both groups identified the coffee hour as a way for them to start their day and it was what they did first thing in the morning. Participating in this group was how they got out of the house and it gave them a reason to get up instead of sleeping in. Several of the men stated that they look forward to meeting up with the guys and they enjoy spending their morning with
the group of men at coffee hour. This group provided them with a place to go and feelings of belonging followed, they were able to identify as being a member of the group. They felt that they had a purpose to the day. For each of the groups it was a way for them to have something to look forward to, the men describe the group as fun and enjoyable with a sense of camaraderie. The men continue to go because these groups act as a way to combat boredom and it gives them something to do. Men said that they would just be couch potatoes if they didn’t have this group and they would not know what to do with themselves, According to Chuck and Joe, “It gives me something to do.” The men continue to belong to this group because of the people they are able to interact with everyday at coffee hour. They enjoyed getting out of the house and spending time with their friends socializing, finding out what was going on.

Another similarity between both of the groups when asked if they were healthy enough to carry out the things they wanted to do, most of the men also said that they were. Chuck said,

“I went to the doctor here last week and he said I have a 70-year-old body in a 90-year-old frame, so my health is good honey, I can’t complain, my balance is off a little bit but I don’t think anybody my age’s balance is right.

The men all believed they were healthy and would list their symptoms, and then acknowledge something that could be worse. The example is Kevin, he has sleep apnea, is overweight, has diabetes, but he said that all of those are things that he can manage and he feels like he is healthy enough to carry out the things he wanted to do. The men have changed what they want to do because of their age and health, several men commented that they just don’t do the same things that they used to but still consider themselves is good health. Both groups of men also said they had as many friends as they wanted and did not want any more. I asked the men about their social networks and relationships that they currently have. Every person that I interviewed said they were happy with the number of friends they currently have in their lives.
Several of the men mentioned that meeting all of the time might not be so great for their waistline. There are a few times where there are snacks (usually sweet treats, i.e. cakes, muffins, ice cream) at the Stevick center for the men to eat. The McDonald’s men meet at McDonald’s and have a variety of choices both healthy and unhealthy in which to choose. Warren discussed a potential negative health aspect of participating in a group such as this,

Physically I don’t know if it’s been that good because a year ago I weighed 222 pounds and now I was at 238, so I don’t know physically if its’ been very good but mentally I think it has been. If you were having breakfast every morning, loading up on pancakes and sausage, I could see where that could be a problem. But as far as the social aspect, I don’t see that as an issue.

Another member Dan shares how he feels about this group and his health, “Health wise it sure hasn’t helped my waistline at all. Ha. Ha.” Rob says that eating the sweet treats, “shows a bit and goes right to the middle, I could get along without that, but it’s a temptation.” They get out of the house and do things but on the other hand they eat unhealthy food at times that can contribute to weight gain.

McDonald’s group. Although there were many similarities between the groups, there were a few differences. Overall the McDonalds group was younger, their age ranged from 64-82. The atmosphere surrounding this group was also different; it was much more informal compared to the Stevick center group. I would describe the environment and the men as very warm and welcoming. The men participating in coffee hour at McDonalds would walk in, say hello as they went to the counter, ordered whatever they were interested in having for the day (i.e. coffee, breakfast, coke, ice tea) and then sit down with the group. The surrounding environment was lively, there were many other older adults sitting and having breakfast together and pop music was being played throughout the restaurant. While the men were sitting down in their group, sometimes others would stop over for a little while and say hello. As people were
coming or going, there were often “hellos and goodbyes” said to the men as well as “did you see this story in the paper?” They were welcoming to anybody who would stop by their table and the men would engage in conversation with most of the people who came past. I would describe their meetings as fairly casual, as they seemed very friendly with the other people in the restaurant even though they were not a part of their coffee group. When discussing how he started coming to coffee hour, Dan spoke of it very casually,

I knew a couple of the people and happened to run into them, they said, hey we have a group that likes to get together and found out that I sort of fit in and we have a lot of common interests and have been coming ever since.

Dan also said, “There is no official membership, there is nothing, you come and go as you want.”

New men join the group by sitting down and start talking. For example Bob said, “we had an old guy sit down yesterday, Bill Anderson. He has been sitting right over here for two or three years and he just came over and started talking with us.”

These men also participated in activities outside of the coffee group. One of the common passions among them is fishing. The commonality outside of coffee group is going fishing and as often as they can, the men try to get out and go fishing. Most of the men have their own boats and they meet out to go fishing. Sometimes they will ride together or take people that do not have a boat. Especially when it is nice out, the men try to make a trip to Clinton Lake or Lake Shelbyville, between 45 minutes to 1 hour away from Champaign. The men really enjoy spending time together fishing, usually it is just for fun, but sometimes the men will fish tournaments together (against each other). There are tournaments throughout the state that the men have gone to together or met at the tournament. During coffee hour, they brought in different types of fishing bobbers and lures to show each other (and me). This was a time where
they would talk about going out to fish or what they caught the night or day before. Two of the men were fishing coaches for local high schools and sometimes they would talk about upcoming fishing events with the high schools. Joe enjoys talking about fishing and he said, “The other fellows are bass fisherman too so we just talk about fishing during the winter.” Bob continues to come to coffee hour for the “conversation and fun.” They would make plans during this time to go to Bass Pro Shop in Peoria or other bait and tackle shops. They often fished the same tournament and spent time fishing with each other at various lakes around Champaign.

In addition to doing things outside of coffee hour together, this group seemed to be more tech savvy. They all had cell phones and several of them are on facebook, showing me pictures of grandchildren and different fishing tournaments. They were able and utilized the internet on their phones and knew how to operate different functions on the I-phone or other smart phones they had. They also discussed text messaging and how they have started to use that technology as well as sending e-mails from their phones. They also all had each other’s phone numbers in their phones, which speaks to them seeing each other outside of the coffee hour and using other ways of communication besides talking in person with each other to make plans and check up on each other. If someone doesn’t show up for a few days or misses a day when they know that they are going to be coming, the men call each other or text each other to discover what is going on.

Most of the McDonalds men started going to have coffee roughly two years after they retired. This was a very common time frame for these men. They felt like they had the time now that they were not working to socialize with some of the people whom they have been acquaintances with and now (through coffee hour) are considered good friends. This group is very open and accepting of new people, there were several people who stopped by and I could
see them joining the group on a regular basis. They also are open to having their wives or women join them on occasion if the women wanted to do so.

**Stevick Center group.** The men at the Stevick Center have been attending coffee hour for a very long time. Most of them have been coming to this group for over 12 years. The oldest member of the group is 93 years old and the youngest is 75. This group has also been established quite a bit longer than the McDonald’s group. There are records of this group meeting as far back as 1945. This group is more formal than the McDonald’s group and they keep a notebook outlining how many people came on a given day and if anything notable occurred. As Rob stated, “It’s kind of a semi organization.” If someone new comes on a day then they are asked to sign a guest book. When I first started coming to this group, I was asked to sign the guest book several times. They also have guest speakers come in and talk about various topics to the group. The Illinois volleyball coach has come in to speak to the men. Lou Henson, the former basketball coach will also come down and talk with the guys when he is in town. There have also been more formal presentations from the sheriff and other guest speakers. Inviting guests to come in and speak at the group is one way they are more formal than the McDonald’s group. Chuck recalls his favorite speaker,

> Every now and then we get a speaker, we had one guy that came in here but then his dad died, his father used to come all the time. He sailed the seas, had the big sailboat and he would come down and bring pictures and talk about his sailing and stuff, it was very, very interesting. He was the most interesting speaker we’ve ever had.

The exclusivity atmosphere of this is group is one of the things that brings this group together and is detrimental to increasing the group size and longevity. I saw a sense of pride in the men when they talked about how long they have been a member of this group. Many of these men are very highly educated (professors, doctors, veterinarians, former city officials), set in
their ways, and very political. Every day that I observed the men and interviewed them, there was some kind of conversation about politics. In fact the republicans sat in one area of the large table and the democrats sat at the other end of the table. For example Rob said, “We all seem to have the sense to come back to the same seats, it is a division, the south side of the room tends to be more democratic and the north tends to be more republicans.” When I asked Dan if he considered these guys friends? His response was, “Ya, even if some of them are Republicans.” According to Dan, “sometimes you want to tell them to shut up” when members of the group are arguing or commenting about politics. When interviewing these men, several of them made comments about how aggressive people have been in the past, almost with a physical altercation.

When I first came into the group, the key phrase to be a member of this group was “men only, have thick skin and not be a lawyer.” This is because they often poke fun at each other and say whatever is on their mind, even if it might offend other members of the group. This group has a tendency to harass each other “in good fun.” The members of the group have all become accustom to the motto, “having thick skin.” Sometimes they make fun of each other, other times they will give each other a hard time. Often they will have discussions where no feelings are spared, when most of the conversation revolves around politics and an occasional dirty or politically incorrect joke. Kevin said, “You got to have thick skin to bond with this group. You know like we were talking Democrats and Republicans, we banter back and forth but it’s a good-natured you see.” Dan mentioned that, “sometimes it gets a little contentious when we talk about politics.” They say you must have thick skin because often what they say is not meant to be personal or a personal attack even though it can be perceived that way. I believe Bob phrased it tactfully,
Well, I think we are all at different levels of sensitivity and a couple of people that come down here always get back to politics, it’s all they ever talk about….I tend to read the paper during that time, ha, ha, ha.

Kevin suggested, “If you were someone who was insulted easily, who just doesn’t like having a good time, who can’t take a joke. If you don’t like to tell jokes regardless of how clean or dirty they are, if you’re insulted by that, then that maybe negative.” Burt said,

Like someone said you have to be tough skinned because there have been some situations in the past where a number of guys quit coming because they were kind of a like …somebody talked them down and then they said, ok I’m not coming anymore.

The way Burt phrased this quote, it was as if there was nothing wrong with the coffee group’s behavior, it was the gentleman who left who could not handle being in a group like this. Although the men say they are welcoming and try to welcome new members, in the same breath they say you have to have thick skin to join this group.

These men enjoy each other’s company but do not have new men join the group. This is a concern for some of the younger members, because there have been many members who have died and there are not new members to replace the ones who have passed away. This group is older and several of the men talked about how there are problems finding men who want to join this particular group. When I asked them why they thought that was, they often said, “Sometimes they come by but we can’t get them to stick.” According to Kevin,

There is just no other coffee group like this. It satisfies our needs, the thing that almost concerns me as much as any is we’ve lost a bunch of guys and we have not been replacing them. I don’t know if we just feel so comfortable with each other and the new person that comes in doesn’t feel comfortable. But we’re just so comfortable with each other and may seem that we are indifferent to them.

Chuck has had a similar experience, he said,

I’ve asked people to come and they say okay and usually they come one time. I guess it just doesn’t stick and they just don’t come anymore. We’ve has a lot of people come maybe one or two times but they never come back.
Rob said, “It has been several years since we’ve had a new person.” Burt said, “Some people come by and it just doesn’t take.” Although these men did not acknowledge this as a negative, they did share their concerns about new members joining and the future of the group.

Another difference between the groups is how everyone pays for their coffee. At the Stevick Center, there is a game that is played every day to see who pays for the coffee for that day. The secretary (person who keeps the notebook) starts out and creates a phrase of 4 words. The first person picks any letter of the alphabet to start and they go around the room and each person says the next letter in the alphabet. The first person to say the first letter of the first word of the phrase created must pay two dollars. This continues until all four letters have been said. That is the total for them to have coffee each day. The people who pay for the coffee are written down in the notebook. The total amount any person can pay per week is $4. So, if someone has to pay on Monday and Tuesday then they do not have to participate in the game the rest of the week because they have already given their total for the week. Usually by Friday there are several people who do not have to pay for their coffee. The common phrase is “I’m free today.” This is a fun way for them to be able to end the group and have a few more laughs.

One more difference among the two groups is the action taken if someone is not there for a few days. The Stevick Center men will talk about the missing member and if that particular person doesn’t show up for a few days, then they will talk about calling him. There is a real sense of concern for the men who miss several days, but not much action to discover why they are missing. They do not have each other’s phone numbers, and there are two people who are designated (unofficially) as the people who call to check in on the missing member. This group is much less technologically savvy and although they have cell phones, they typically use them to make phone calls and do not have smart phones or i-phones. This difference might be due to
age of the members. The youngest member of the Stevick center is 75 (Kevin) and the oldest is 93 (Chuck) so they are older than the McDonald’s group and have very different life experiences, with many of them being veterans of WWII.

**Similarities and differences in their social networks.** There were also similarities and differences between the two group’s social networks. To identify where the coffee group relationships fit into the men’s social networks, I showed them the diagram and asked them to think of the people who are important in their life right now. I then wrote down a name (e.g. Bob, Mike) or a relationship (e.g. wife, son) where they told me to. The center circle I wrote down the people to whom they feel the closest. The middle circle, I wrote down the names/relationships of people who they are not as close to but still very important and in the outer circle I placed the names of people who the men haven’t mentioned but are still important enough to be placed in your network.

The men in each group had very similar circles, both included their wives, children and as grandchildren in the very center circle. Both of the groups of men included the coffee hour men in the second circle. This relationship is describe as not as close as the people in the center, but still very important. The men emphasized how important this relationship was to them, although not as important as their wife or children, this relationship is very meaningful to the men.

However the McDonalds group had more relationships listed in their circles than the Stevick Center men did (see Fig. 4 and Fig. 5). Although some of the same types of relationships are listed, in each figure, the McDonald’s men had more names listed within each category. For example, the Stevick Center men may have listed 5 or 6 people under the category church friends, while the McDonald’s group listed 12-15 people under the same category. The
McDonald’s group had more peripheral relationships, including work friendships. Many of the McDonald’s men have been recently retired and still included former work relationships within their circles. The Stevick Center men have been retired for a longer period of time and did not include work relationships in their social network map. A group of people the Stevick Center men included in their social network that the McDonald’s group did not is great grandchildren. The Stevick center group is older than the McDonald’s group and is more likely to have great-grandchildren because of the age of the group members.
So close you can’t imagine what your life would be without them
Not quite that close
Less close but still important

YOU

Coffee group
Neighbo

Other relatives; cousins nieces/ nephews/aunts

Church friends

Other club

Work friends

Siblin

In-laws family

Wife

Children

Long time friends

Grandchildren

McDonald’s Group Social Network Map
Figure 5

Stevick Center Social Network Map

YOU

So close you can’t imagine what your life would be without them

Not quite that close

Less close but still important

Friends from college, growing up

Coffee group friends

siblings

wife

Long time friends

greatgrandchildren

grandchildren

neighbors

church

Friends in Community
Although there is the temptation of sweet treats and fast food, there were factors that contributed to these coffee groups as a facilitator to health and well-being. The men believe it is a positive way to start their day and feel like they are getting out and being social. Through companionship, camaraderie, social support and social interaction, the coffee group is a positive influence on their social and emotional health and well-being and can be a positive or negative influence on their physical health and well-being.

**Emotional Health**

**Emotional outlet and stress coping.** They feel that this group is a place where they can express their emotions and feelings thus benefiting their emotional health. For example, when asked if participating in this group affects your health, Warren said, “Probably mentally, it has given me a venue to express opinions and maybe some relaxation that way.” Being a part of the coffee group keeps the men’s minds active and seeking information about what is discussed at coffee group. Ron said,

> The good side is, I think it is great to have a group of people and it’s enjoyable and gives you a release for your emotions. You know, we cover such a huge variety of topics and everything, so that is good.

Charles believes this provides an opportunity to maintain mental health, he said, “As opposed to just vegging, mentally it keeps you sharp.” Some of the men feel as though they are more social since participating in this group. When I asked Joe if there were any health benefits to participating in a group such as this, he states, “I’m more social.” Bob said, “It has probably [made my health] better, we have a good time sitting around talking and that is part of your health.” The men also feel comfortable discussing medical issues with each other. While observing these men, they have discussed current health issues and have been able to get health information from current coffee group members. One example is when Don hurt his knee and
was able to share some of his concerns with another man who had the same surgery Don was contemplating getting. After speaking with Matt, Don felt better about talking with his doctor about the possibility of surgery.

Another example of how this group has assisted with coping with stress was when Bob came to coffee hour using oxygen one day. (He had been having some health problems). Through my participant observations, I could see that he was a bit embarrassed and quiet when he first got to the table. However, after talking with the men, he was laughing and joking around as if he did not have oxygen with him. This group provided him with an escape and it was a place where he was able to go to get away from his health stressor.

The final example of how this group assisted with coping with life stress was from Steve. During his interview, I asked him about his emotional health and he shared with me that he was doing better than a few years ago. Steve went on to tell me that his wife has passed away and he had been married to her for over 62 years. She was diagnosed with COPD and was sick for several years. He was her primary caregiver until the end of her life, when he needed additional help and brought in hospice care. He was very depressed when she died. He told me that his friend Jeremy (another coffee group member) had helped him move on and have a better outlook. His friend Jeremy started bringing him to coffee hour and he had something to look forward to. The men at the coffee hour gave him support and friendship. This is a place where Steve felt comfortable sharing his emotions and would reminisce about times he had with his wife.

**Engagement with life.** The men thought that this group was a way to get together and helped get them out of the house and socialize. For Ron,
It’s a good motivator for me to get up and get the day started, so that I don’t have to hang around the house. Get out and go and do other things, you are not just moseying around, sleeping and all that.

Chris disclosed that this group keeps him active and looking forward to meeting with others, he said,

I’ve enjoyed being active and it gives me something to look forward to, to come down here to talk about some things that are happening this week and what they are doing that type of thing or what’s going on, it is just very satisfying. It’s just the satisfaction to come to visit with people and keeps you active.

Matt said, “If I didn’t have coffee hour I’d probably be sitting at home drinking coffee there and I’d be bored”. Donald said,

It is something to do. It beats sitting at home, because I’m not going to be doing any work around the yard, I’m done doing that stuff. I have bad knees and a bad back and I’ve had triple bypass and I’m done doing all that crap, I’m done working.

He also said, “I think it is a good healthy relationship, that’s one of the reasons why people come in here and continue the camaraderie that they have with each other.” In fact all of the men expressed the coffee group is so important to them, it has become a daily part of their lives. For most of them it is how they begin their day and it has become a routine, a habit.

According to Ron,

[Coffee hour] is a simple place to start your day and a way to interact with the people, it has become sort of an important part of my day. If you don’t go for some reason, you are going here and there, you do sort of miss it now, it sort of becomes a routine, or a habit, whatever you want to call it.

Burt feels this group, “gives you a routine and just being here and talking helps your mental capacity.” For Rob, “it is a good start to the day and it becomes a habit pretty easily and I buy into it.” He continues and said, “It’s kind of a substitution for going to work.” This group is an important part of their lives and they are very satisfied with the friends they have met and
become closer with while participating in this group. Burt explains that it is “Fun, to see all the
guys. To get in on some interesting conversations and hear some interesting conversations.”

They enjoy themselves while at coffee hour and look forward to coming to meet the
“fellas” or “buddies”. One member, Steve, told me a story about getting up too early to come
down to coffee hour. If he gets up too early he is anxiously waiting until he can leave his house.
He has it timed down perfectly. Steve said, “If I get up too early then I think, when can I start to
go down? So it is important and I look forward to it.” Rob also shares his excitement about
coming down to coffee hour by stating, “I look forward to coming down here.” Bob said the
reason he keeps coming back is, “just to talk to the guys.”

Some of the men try to avoid boredom by coming down to have coffee with the other
men. According to Chuck, “When you get to my age, there is no place else to go.”

**Sense of belonging.** The men have found a group where they feel like they belong. They
do not continue to meet because the coffee is so delicious; it is the conversations and interacting
with others that brings the men back. I think Charles summarized many of the men’s thoughts
when he said, “It is just good to be with my friends and have a conversation about nothing half
the time.” The men have similar interests and feel like they can be themselves and be open about
their thoughts and feelings. According to Warren, “It’s basically a social event, somebody to
come down here and most of us guys share the same philosophies.” Another example is from
Charles, “I find it extremely enjoyable to reconnect out of the pressure cooker away from the
bottom line mentality, just really enjoy talking to people I have really connected with.” It is nice
for them to have a group to belong to away from their significant others. According to Steve, “It
is a place to go to get out of the house, away from the wife, and that's important as it's important
for her to get away for me it is a mutual thing.”
Another aspect of belonging to a group such as this was having something to do and a place to go. Because they are out of the house moving and meeting with friends, they feel that it is a catalyst to start their day and prevents them from just sitting around the house. According to Donald, “It means to me, I'm established and solid in the group and in the area and I don't have much of an effect on it but that doesn't matter that is and the important part.” He continues by saying, “I think it would be kind of intolerable to not have some group to go to. It doesn't matter the importance of the group it's just important to have something.”

**Fun.** The men all enjoyed their time during the coffee hour, including; laughing, joking and having a good time with their buddies. According to Kevin, “It is a place where you can come and really have fun. It just gets me up and out and you have just a great group of guys, even if they are Republican.” As I watched the men interact, they all seemed to be joking and enjoying each other’s company. I saw the men having fun by hearing them laugh at each other or a joke that was said, the smiles on their faces and the desire to continue to return. They seemed to really enjoy themselves and this time was very entertaining for everyone. They seemed to use this hour as a way to escape their current stressors they may have going on. This was a chance to get together and have a good time with friends and not think about all of the other issues that may be going on in their lives. The men all mentioned that a benefit of belonging to a group such as this was becoming better friends with the men in the group. For example, Joe said, “I now have a better friendship with Matt and Dan.”

**Social Health**

All of the men consider each other friends or “good buddies” and have developed a stronger friendship though participating in this group. Through a variety of stories, these men
perceive and many have received social support. I will first discuss the relationships between the men and then convey the ways in which social support was present.

**Relationships.** I asked the men to describe their relationships with the other men of the coffee group and they often said that they consider these men friends. According to Bob, “These are my fisherman buddies, I have another group of guys [who come about one a week to the group], I’ve known them for 50 years. I shot a bow and arrow with them.” Chuck described his relationships with the men as,

> I like all of them and I think that they all like me. Even though they make fun of me all the time, just like if you’d been here a minute ago, Don came in and every time he comes in, he reaches over and kisses me on top of my bald head. Ha ha ha.

Burt discussed the, “Camaraderie and maintaining contact with these guys” is an aspect of belonging to this group that he enjoys. He is around “good friends and this gives an opportunity to converse with the boys.”

Some of the men have grown into better friends through the coffee group, when I asked Joe what he gets out of participating in a group such as this Joe responded, “Better friendship with some of the people, Walt, I just casually knew him, now I know him better.” Chris also gets friendship from this group, his response was, “Friendship. Actually I look forward to it now and again, seeing friends, talking with them. We talk about the good times years ago, possibly some of the things we did back then that type of thing.” Kevin and many other men also find friendship as a reason to continue to participate, he said, “I get the friendship of these guys. That is the main thing, just the friendship that we develop and in the years I’ve been here we’ve lost a lot of really great members.” Warren said he receives “companionship [from being a part of this group].” Chris’s response to what he gets out of this group was, “satisfaction to be able to see a
lot of friends and to enjoy the camaraderie that goes with it.” Burt describes these relationships as, “positive, friendly relationships.”

When asked if Chris considered these guys friends, his response was, “Yes, very much so. When you look at life, I think that family is family but the prize winner is having friends in your life, especially if you lose family. Friends are very important in your life.” Warren, “would consider these guys friends” while Bob describes them as, “good buddies.” Dan describes the relationship as “a strong relationship, built around in a lot of our case, the commonality of fishing, a strong friendship.”

**Social support.** I asked the men a specific social support question: Would these men be there for you if you or a loved one were to fall ill or pass away? There was an overwhelming response of “yes” and “of course they would, just like I would for them.” Steve said, “Oh yes I do I feel that and I feel like they would do anything that I asked them to do. Just as I was in like manner I would do anything they asked me to do.” Throughout the conversations with the men, they brought up different ways of how the men have supported them and I have presented these findings by what specific type of social support was indicated.

When I asked Warren to describe his relationships with the men he said,

Casual. I haven’t known them that long and like I said Mike and Bill, I’ve known of them but I didn’t really know them, just through mutual relationships. I trust them, I know good and well if I needed one of them to do something I could depend on them, but I mean we are not like club members or church members.

I interpret this statement to mean they are not casual friends, but that their relationship takes place in an informal environment, unlike an official club or organization. Kevin said, “I feel like anyone in this group you could call and asked them to do something and they would do it for you if they could.”
Instrumental support. There were a few stories that I heard about when someone was ill or got hurt, the men would often help out each other by providing material aid or tangible support. For example Charles had someone help him when he injured his shoulder recently. He said,

They are willing to help me, especially when I can’t do things because of my shoulder. The elderly gentleman who just left sent his son over to my house to fix things. I could not even change a light bulb.

Charles also assisted a fellow group member’s wife when he fell ill and then after he died. He said, “Some of them are in bad shape health wise, someone just died and she needed help moving hoses, fixing his gutters. [He Assisted with] anything from taking his wife to and from places including to the football game.”

Kevin mentioned another story….. “there was one guy several years ago, he was 96 years old and he got hurt, couldn’t drive so I would go by and pick him up and bring him down here.” There was another guy who used to come down to coffee hour and he was blind, he would take a taxi down to coffee hour every day and then one of the guys would take him home.

Another example of instrumental support occurred after a fishing incident. The men spend time with each other fishing and Matt blew out his motor on his boat (messing around, racing another boat) and Warren from the coffee group drove down to Kentucky with him to get his boat fixed. This trip lasted two days and Warren assisted Matt with getting the boat ready to drive down to Kentucky and then stayed with Matt to help in any way Matt needed. Because of Warren, Matt did not have to drive by himself and had some company.

Informational support. Another type of social support that was identified is informational support, since these men, share advice and ideas about everything. They provide information to each other to assist with fishing, places to eat, Illini athletics and politics to name
a few. Many of the responses to the question, why do you keep coming down to coffee hour were in regards to finding out what is going on. Joe continues to come because of, “Good conversation and talking with the other people finding out what’s going on.” While Warren mentions, “It’s a social event for me coming in here and share a cup of coffee with some guys. Maybe talk about Illinois sports, lightly touch on the political situations.” Something that I thought was a great example of information support was a story by Warren, who said, “Matt has never been someone who was politically active and never voted and this year he went to register to vote just simply because of the atmosphere around this place.” For Chuck, he enjoys, “Just being around friends and sitting down here and talking and listening to conversation and different facts of life and everything that is going on, it makes a big difference.”

I had the opportunity to observe informational support being shared among both group of guys. At the Stevick center there are newspapers laid out on the table for the men to read and daily someone comments about a story or starts a conversation based on something that was read in the newspaper. For Dan this group provides a, “certain circle of friends and something to do. I think it is a shared experience, it is a source of ideas.” For Dan, “It is a source of what is going on. They know what is behind a lot of the stuff in the paper.” Many of these men have lived in the community for over 60 years and Dan has only lived in the area for about 20 years. These men provide him with details about why things are happening in the community, not just what is happening. He appreciates the background information.

Sometimes the information is shared with the entire group, while other times the dialogue is contained to the person next to whoever is reading the newspaper. Often they bring in outside information via e-mail, magazines or articles and talk about it. This information or advice is sometimes informative or perhaps a joke or a political cartoon. Burt said “I frequently bring in e-
mail jokes and stories and pass them around here. So that creates some reaction we talk about.”

The men share stories, information and advice with each other daily. As for the McDonald’s group, they often share informational support through different conversations about fishing lures, boats, articles or stories. They share how they caught the fish (i.e. what type of bait, lure, size), where they caught it and how they will modify it and try again. There were multiple conversations about particular fishing spots that were lucky or where they caught large fish. The men also shared information about how to use their smart phones and how to access facebook accounts. One of the guys was unable to access his account on his phone and another person showed him how to do it. Bob said, “you learn a little bit by coming down here.” Joe said one of the benefits he gets out of participating in a group such as this is, “to be updated on what’s going on and about people talking about different things that are going on in the community so I supposed some information about what’s going on.”

**Emotional support.** If someone is feeling ill or has been at the hospital, the men support each other. Typically they will visit each other in the hospital and bring get well cards that everyone has signed. This provides the opportunity for someone to feel cared for. This was mentioned previously as a space where the men can share their feelings and emotions with each other. When I asked Ron if these men would be there for him if he fell ill or was injured he replied, “Get well cards are passed around, and then taken to them. People will call you up, to check to see how you are doing, visit you at the hospital.” Rob and Bob both received emotional support from members of the coffee groups when they were in the hospital. According to Rob, “Recently I had an injury and was in the hospital here in town, most people here came over to see me and I was only there for two weeks.” When asked if the other coffee group men would be there if he got sick or if someone in his family was sick Bob said, “I know they would. I was
sick, I was over the hospital and 50% of the people that are here were over there. Yeah, I know they would, they are a pretty close bunch around here.”

The men care about each other and make sure they are doing ok, according to Dan,

I think that it is interesting the people in the group, sort of care for each other, if someone doesn’t show up for a few days, then you wonder, Where is he at?, Is there a problem? What is the problem?, you know, they sort of watch over each other a bit.

Kevin shared his thoughts and said,

Well, I think you make really good friends down here, we are concerned about each other. Dave hasn’t been here for over a week, we are wondering if we should give him a call just to make sure he’s alright and they are concerned about you and you are concerned about them.

Matt explains these guys are, “just a bunch of nice guys, friends. Because if you don’t show up they call you and see if you are alright or text you or whatever to make sure you are alright.” Something that was true for all of the men is that everyone would go to the visitation or funeral if someone died and they would support their friend if they needed it.

**Appraisal support.** These men really enjoyed being a part of a group and gave them something to do. For Donald, “It means to mean I'm established and solid in the group and in the area and I don't have much of an effect on it but that doesn't matter that is and the important part.” He continues and said, “I think it would be kind of intolerable to not have some group to go to. It doesn't matter the importance of the group it's just important to have something.” Joe enjoyed being with other people he said the reason he continues to come to coffee hour is, “Good conversation and talking with the other people finding out what’s going on.” Matt expressed his reasons for coming to the group is being with others, he said, “Just getting out and talking with friends, finding out what is going on at different places.”
These men always have someone to talk to, there is always going to be someone else at the coffee hour. They are able to go do something knowing that someone else will be a part of it and able to share the experience with.
CHAPTER 5: DISCUSSION

The findings outlined in this study offer important insights into the leisure and social lives of older men who participate in a coffee group. These groups provide more than just a cup of coffee for the men, it is the place where they belong and can meet with friends, have fun, share stories and build strong positive healthy relationships. There were several consistencies between the two coffee groups; this is a positive, steady occurrence in the men’s lives, social support is perceived and received and it is a positive outlet for their mental and social health. This study is also consistent with Carstensen, (1992) Socioemotional Selectivity Theory (SEST) in that the older men have placed a greater emphasis on close relationships and have decreased their nonessential social contacts as they have aged. The major themes that surfaced in this research project are: (a) similarities and differences between the groups (b) coffee group as facilitator to emotional health and well-being (c) coffee group as facilitator to social health and well-being.

Similarities and Differences Between the Groups

Overall, these groups are a positive influence on the people who participate in them. Although sometimes there can be negative aspects of friendship (Rook, 1987; Chick & Roberts, 1989), these men did not identify any negative aspects of belonging to these groups. They are very glad to be a part of the group and look forward to coming to the coffee hour. One difference between the two groups is the inability of the Stevick Center group to add new members. This could be a problem in the future if they are not able to maintain the group.

Coffee group as component of their social networks. I asked the men specific questions about their social networks and they all have as many friends as they would want and they are happy with the size of their social network. Even though some of the men have lost friends, they do not want to replace the friends that they have lost. This is a difference between
older men and women, as older men are less likely to replace lost friendships (Kessler et al., 1985). This study also supports Carstensen, Fung and Charles (2003) in that older adults are satisfied with their social network size. Older adults have decreased the most nonessential social contacts. When I asked these men if they wanted more friends or relationships, they all said, no, they were satisfied with the number they have.

These men identified that their coffee group buddies are a part of their social networks. Putman (2000) argued that informal conversations are very important in sustaining social networks. In addition interviewing the older men coffee groups, I utilized the social convoy model to help map their social networks. A convoy is a set of people whom each person is surrounded by where there is an exchange of help, emotional support and companionship (Van Tilburg, 2003). The social convoy model is represented by three circles, representing different levels of closeness to the person filling it out. The coffee group men identified their fellow coffee group members as inside the circle designated for those people who are not as close as the center circle, but still very important. Both groups of men placed their coffee group as a part of their social circle, deeming this relationship is an important aspect of their lives. The inclusion of men inside the social networks is important and supports the increase in importance of friends in older adults’ lives. This is consistent with the strong role social relationships play in the well-being of older adults. (Carstensen et al, 2000). These men all enjoyed coming down to coffee hour and spending time with the men in the group. After speaking with these men, they feel it is an overwhelmingly positive activity and they continue to spend time with the “boys” or the “fellas” because they want to. They also enjoy the conversation, emotional outlet and information received while sitting and talking with the men. All of the men were satisfied with the number of people they have in their social networks.
However, there was a difference in the men’s social convoys between the two coffee groups and this difference supports socio emotional selectivity theory. There was a difference in the number of relationships mentioned between the McDonald’s group and the Stevick Center group. The McDonald’s group is younger (64-82) than the Stevick Center group (76-93). The McDonald’s group acknowledged many more relationships in the outer circles of the social convoy. This is consistent with SEST, because the frequency of interacting with people not as close declines as people age. Carstensen asserts that with increasing age close friendships are more important than social acquaintances. This study supports the evidence that suggests as people age, they maintain the most important relationships and reduce the number of social contacts (Carstensen et al., 2003). The men identified their coffee group friends as an important aspect of their lives. One plausible explanation is this could be due to a loss of age-peers (Fiori, Smith & Antonucci, 2007). Older adults are hypothesized to have a smaller network than younger people because more people within their network will die and not be replaces (ibid).

Another difference in the social convoys between the men’s coffee groups is the decline in the number of work relationships mentioned. The men at the Stevick Center did not mention as many work relationships if any, while the McDonald’s group men still maintained some contact with the people with whom they used to work. As a reminder the McDonald’s men on average started coming to the coffee group about two years ago and they all retired about 2 years prior to that. The Stevick Center men have been retired for no less than 12 years. Tilburg (2003) found there was a decline in network size including the number of co-worker relationships among people who are working and those who have been retired. Because the Stevick Center men have not been working for over 10 years, their co-worker relationships might have become less important and not included in their current social networks. This is consistent with the
literature, where the longer the man has been retired, the less likely he is going to maintain friendships that were made at work (Bosse, Aldwin, Levenson, Spiro & Mroczek, 1990). As people age, they tend to focus on the core relationships within their network because it is more rewarding than the peripheral ones (Carstensen, 1992).

Participating in leisure activities with people in one’s social network has a positive association with life satisfaction (Holman & Jacquart, 1988). Furthermore, belonging to a strong social network is associated with longevity (House et al, 1988). Health can be influenced by a variety of factors, including someone’s emotional and social well-being.

**Emotional Health and Well-being**

One of the major themes to emerge was the coffee group acted as a facilitator to emotional health and well-being. These groups provided the men with an emotional outlet and a way to cope with stressors in their lives, a way to engage with life, a sense of belonging and a place where they can have fun. This study is consistent to a qualitative study by Duay and Bryan (2006) where they examined older adults and asked them what they thought successful aging was. The older adults revealed, engaging with others, coping with changes and maintaining physical, mental and financial health are indicators of successful aging. Because results of participating in these coffee groups are similar to the components of aging successfully, participation in these coffee groups may contribute to successful aging.

**Engagement with life.** These groups were the reason for the older men to get up and start the day. They found that having someplace to go aided in them getting up early and getting out of the house instead of sitting at home and doing nothing or “vegging.” A consistent phrase for the men was, “it gives me something to do.” These findings are consistent with leisure
literature in that participating in leisure activities is a way to prevent loneliness and isolation (Caldwell & Smith, 1998).

These groups provided these men with the chance to do something they wanted to do, when they wanted to do it. This supports past research that outlines the importance of maintaining a sense of freedom and independence for older adults (Duay & Bryan, 2006). Leisure activities help older adults to fill their time, add structure to their day and in turn help stave off depression, boredom and anxiety (Hutchinson & Nimrod, 2012). These findings are consistent with the current study, as the men expressed a reason why they chose to participate in this group was because they would be bored at home or not have anything else going on.

An interesting pattern I noticed is that all of the men started going to the coffee groups after roughly two years from being retired. They felt that they had time to socialize and be with friends now. The men who were in their mid 90s have been coming to the coffee hour for at least 12 years. The men attending coffee hour felt like they were in relatively good health. This has been a constant leisure activity for them through their older adult life. This study is consistent with Janke, Davey and Kleiber (2006), in that men’s participation in leisure is relatively stable until their mid 80s. Janke, Davey and Kleiber acknowledged a decline in participation in leisure activities due to health declines rather than age. This is evident with the older men who have continued to participate in this group for over 12 years. They continue to go to the coffee group every morning regardless of their age. However, the men do stop participating if they feel ill or are hospitalized. They do not stop participating just because they are getting older, it is because they are not able to participate due to health reasons.

Transitions with older adults are very important because so many older adults transition and have large changes in life such as: retirement, widowhood and development of chronic
disease. Leisure can assist with coping with these transitions. Successful maintenance of life’s activities during and after these transitions could suggest a component of aging successfully. Silverstein and Parker (2002) found widowed respondents who disengaged from activities evaluated the previous 10-years more negatively than those who increased their activities. Those who increased participation in activities evaluated the change over the past 10 years as no differently or slightly higher. These men might be using this coffee group as a transition between work and retirement, continuing to engage in activities. Don would sometimes say, “this group kind of replaces work”, meaning that he has a place to go and somewhere he needs to be.

**Sense of belonging.** Being a part of these groups gives the men a sense of purpose and identity. A social network compiled of supportive friends and family has been shown to provide individuals with a sense of purpose (Castelli, 2010). Moreover, leisure is an area where sense of self can be maintained and the ability to choose or substitute activities for those that are lost can preserve a sense of self. Therefore, maintaining activities where personal identity is linked is important to emotional stability (Mannell & Manske, 2010). I believe these groups have become a part of their identity and they enjoy being a part of something. Coming to this coffee hour is a routine and it is a place that provided some type of structure for the men’s lives. Cheang’s 2002 study was the most similar to mine. He conducted observation and interviews of older adults at a fast food restaurant and he also found that the routine and meeting regularly was especially important to the older adults who lived alone and the people who did not have many others to socialize with. The ability to find or create a routine is a key factor to a satisfactory retirement because having a routine can assist with maintaining stability, order and sense of well-being (Hooyman & Kiyak, 1996). In the current study, many of the men would describe their day to me and this would be how they would start their day, often five days a week.
**Emotional outlet and stress coping.** While participating in the coffee hour, the men were able to discuss their emotions, thus providing some relaxation. This is consistent with the culture of leisure according to Rojek (1999), “The culture [of leisure] encourages people to be relaxed, to speak their minds, and be themselves” (p.87). The men were able to engage in leisure activities with others with whom they felt comfortable. Their health and well-being was positively affected by participating in the coffee hour. This is perhaps due to the leisure environment and being around friends. This study is also consistent with research by Payne, Mowen and Montoro-Rodriguez (2006). In their study about leisure style and health of older adults with arthritis, they found respondents who had social contact with friends at least once per week had the highest perceived mental health scores. This continues to support the research that highlights the connection between social support and well-being. Likewise in this study the coffee group men also expressed a positive emotional health outcome from participating in groups such as these. They believed they were able to express their emotions, feelings and have positive social interaction with their friends. Social support was identified as a mediator of stress and as a coping strategy (Schneide & Iwasaki, 2003).

This study supports the main effect model of social support. The men know that they will be cared for and help is available if they need it. They are integrated into this social network with friends and have a sense of purpose and belonging. They have a group of friends that encourage each other to get out of the house and socialize. Leisure participation acts as a coping resource because participation in leisure activities may provide people with companionship which leads to a perception that social support would be available if needed (Coleman & Iso-Ahola, 1993). Perceptions of available social support can protect people from the ill effects associated with stressful events (Cohen & Wills, 1985).
This group also supports the buffering model and is consistent with Iso-Ahola and Park (1996) where they argued that the social support received through family and friends in a social network has a buffering effect on stress. During the time that I was there, a few of the men had some health issues and concerns. They were able to discuss these concerns and possible outcomes with each other. They shared information about each other’s health concerns with me and there were several times where the conversation would lead to doctor’s appointments or particular ailments. For example, Don discussed his knee issues and because Matt had already had surgery on his knee, he was able to provide Dan with some information about different treatment options. Dan felt better about his situation after talking with Matt. This is consistent with the literature that indicates there are health benefits of interpersonal relationships, where emotional support is given by having someone to talk about problems with (Cohen & Wills, 1985). There is additional evidence that this group also provided them a place to have fun and to forget about health issues or concerns. They would get together and have fun, talk about things that they enjoyed and become distracted. This supports the buffering role of leisure to counteract the negative aspects of stress. Coleman and Iso-Ahola (1993) proposed that social support and self-determination obtained through leisure participation can act as a buffer against stress to assist in maintaining people’s health. Where,

Social support is conceptualized as individuals’ general perceptions that they are cared for by significant others and that adequate support would be available when they needed it, and a self-determination disposition refer to people’s general beliefs or orientations that their actions are mainly self-determined, freely chosen, or autonomous. (Iwasaki & Mannell, 2000, p.164)

The men identified each other as people whom they care for and the men also believe their actions are freely chosen and self-determined. They chose when they want to come to the coffee group which is an essential element to leisure. This group also provided a distraction to
the men who had doctor appointments and other medical conditions and symptoms they had to manage. Their worries were able to be diverted during this coffee hour time. They were able to engage in a leisure activity that improved their mood and be with friends. My findings are also consistent with Iso-Ahola and Park (1996) who found that leisure companionship moderated the effect of life stress on mental health and friendships formed through leisure moderated the effect of life stress on physical health.

Fun. The men felt comfortable and enjoyed their time during the coffee hour, including; laughing, joking and having a good time with their buddies. Humor is an important aspect of health, healthy people seem to have a sense of humor about life, laugh often and can even laugh at themselves. According to Godbey (2010), “The ability to laugh, at ourselves, and at life, is positively related to health and longevity” p. 41. Laughter has been linked to health and life satisfaction. Moreover, Cheang (2002) asserted that humor was important to promoting health among his coffee group participants. According to Fry (1994) 20 seconds of laughter can double your heart rate for three to five minutes. Humor was evident in the men’s daily interactions. One example from Chuck when describing his relationship with the group,

I like all of them and I think that they all like me. Even though they make fun of me all the time, just like if you’d been here a minute ago. Don came in and then every time he comes in he reaches over and kisses me on the top of my bald head, ha, ha, ha.

This is one example of an ongoing joke that these two men have with each other. Poking fun at each other has become a fundamental aspect of the Stevick Center group. This is embedded in the culture of the Stevick group but not in the McDonald’s group.

The McDonald’s group still laughs at each other and themselves but it is slightly different. They will share a story about a time when they did something silly themselves and then they will be poked at for awhile by the other men. One example of the men laughing at
themselves and poking fun at each other is when Matt was drag racing his boat with a bunch of young guys and he ended up losing because he blew up his motor in the process. He was stranded in the middle of the lake and it took him over two hours to get back to shore using his trolling motor. This event had the men talking and laughing throughout the week. The men typically have a good time sharing stories, even if they are the center of the joke or laughter.

The group is fun for the men; it is a place they look forward to going and spending time with each other. In regards to the reasons why they continue to participate in a group such as this the coffee group men are similar to the well studied Red Hat Society (RHS) women’s group (Kertsetter, et. al, 2008). The main reason why the women on the RHS continue to meet is because it is fun. Also, the RHS provided the women with emotional support and health similar to the men who participated in the coffee groups. As with Cheang (2002) these groups enjoyed laughter, joking with each other and having fun. It was common for the older men at the Stevick Center to poke fun at each other and the McDonald’s group would laugh about a recent fishing expedition.

Overall, the men expressed that they feel participating in this group has a positive influence on their health. A plausible explanation is that it is the emotional support the men receive that had positive effects on health (Rowe & Kahn, 1998). Social connectedness impacts health where emotional support and physical assistance have positive effects on health for older adults. The emotional support these men receive could have an impact on how they age. Rowe and Kahn (1998) suggested that supportive social relationships can assist and reduce some of the health-related effects of aging. According to Rojek (1999), “leisure mitigates social isolation and loneliness and therefore has the capacity to increase health and wellness” (p. S46). These
coffee groups allowed the men the opportunity to be social and be with others thus affecting their health and wellness.

**Coffee Group as Facilitator to Social Health**

A common theme with the coffee hour men is that they strengthened their relationships with each other. This is consistent with research, where leisure also assists with maintaining social relationships. Nahpiet and Ghoshal (1998) asserted that it is important to the maintenance of social relationships to strengthen them through interaction, because sometimes they will fizzle if not maintained. Many of the men only had casual or nonexistent relationships prior to participating in the coffee hour. Now, they described their relationships as friends, good friends or as a strong relationship. These friendships are very important in the health and well-being of older adults. According to Iwasaki and Mannell (2000) the friendships obtained during leisure and through leisure activities may help people cope with stress in different ways depending upon the individual. These men had supportive people to talk to about stressful life events. The friendships the men have made provide an outlet for the men to discuss their life stresses and can help them process or work through those problems.

These men all described each other as friends and from their behavior and descriptions of their relationships, it is consistent with the definition of Antonucci and Akiyama (1995) where friends are the people who older adults engage in leisure activities, spend time with and have frequent contact with and who have a significant positive impact on well-being. All of these characteristics of friendship are evident in the men’s coffee group.

It was also evident this coffee group is very important to the men and they don’t know what they would do without it. Some might try and find another group while others might just be bored at home. These relationships are meaningful and important to the men. In fact, Larsen,
Mannell, and Zuzanek (1996) discovered that interactions with friends may be more rewarding than interactions with family members because family matters can be stressful. A quote by Chris seemed to support this finding appropriately. “When you look at life, I think that family is family but the prize winner is having friends in your life, especially if you lose family. Friends are very important in your life.” These men have become very important to their daily lives and they appreciate being around friends and buddies.

Friendship has been linked to social support, health and well-being. The groups of men who gathered for coffee exchanged social support. This is consistent with Kleiber, Hutchinson, and Williams (2002) where “Leisure in its compassionate and friendship forms, and through social activities, clearly has the potential to provide people with feelings of social support and a decreased sense of loneliness and isolation” (p.22). The men of this study identified this group as being fun and a chance to engage in conversations and included perceived and received social support. One difference between the RHS study and this study is that the women primarily focused on emotional support received from being a part of this social group versus informational and tangible support. The men of the coffee group received an abundance of informational and tangible support in addition to emotional support from the other members of the group.

These men experienced social support from this group. Their experiences are similar to the definition provided by Cobb where social support is “information leading the subject to believe that he is cared for and loved, is esteemed and valued and belongs to a social network of communication and mutual obligation” (Cobb, 1976, p. 300). The men described social support in many ways, such as informational support from fellow members who would bring in articles or explain how to do something. Instrumental support was given on multiple occasions,
especially after someone was physically unable to complete a task, the men would assist. Emotional support was evident both from watching the men interact as well as the stories expressed in the interviews. Emotional support received by family and friends is important for health and well-being. These findings are consistent with research suggesting that older adult’s health related behaviors were positively affected by the emotional and instrumental support by family and friends (VonDras & Madey, 2004).

Appraisal support was also experienced, because they knew there will always be someone there to participate in this group. The men would be there for each other and they all feel like they could ask these men for help or aid if they needed to do so. After interviewing the men, I believe they have experienced social support from fellow coffee group members. Social support is viewed as an important element of wellbeing and life-satisfaction of older adults (Antonucci, 1990).

They also experienced perceived social support. They were confident that if they needed to call on someone they would be able to do so. In addition to believing the coffee group men would be there for them, the men said that they would be there if someone asked them to do something. Everyone who I spoke with said that they would be happy to do something for the other members of the group. What a person receives from someone else may be just as important for their health as what they give to the other person. This concept is called reciprocity. Heaney and Israel (2002) define reciprocity as the “extent to which resources and support are both given and received in a relationship” (p.187). There was a sense of reciprocity between the men, which is consistent with Rook (1987) who found reciprocity in social relationships is a significant predictor of social satisfaction. Coleman and Iso-Ahola (1993) argued that friendship and
companionship formed through participating in leisure and the perceived availability of social support can help people cope with life stress and help maintain or improve health.

However, this is in direct contrast to Cheang (2002). Through interviews and observations with older men and women at a local fast food restaurant, he determined that the participants enjoyed the company of the others and it was a fun group to be a part of, however, there was no social support exchanged among the participants. This may have been a result of the group’s rule which included not talking about personal things.

**Theoretical Implications**

While much of the spotlight on aging research in the past 15 years has focused on physical activity and cognitive function, it is important to acknowledge the important role of social activity in promoting emotional and social wellness among older adults (Glass et al., 1999; Holt-Lunstad, Smith & Layton, 2010), particularly among men. Despite the fact that Cheang’s (2002) study found no social support was exchanged among coffee group participants, the men in this study expressed meaningful levels and types (i.e., emotional, informational, instrumental, appraisal) of social support exchanged while participating in the men’s coffee groups. Through their stories and examples these men also demonstrated the presence of the buffering and direct effects models of social support, indicating some of the ways social engagement promotes health. They also conveyed that the coffee group was fun, facilitated a sense of belonging, and served an important role in their daily lives. These findings begin to fill the gap in our understanding of older men’s social lives and how participation in a men’s coffee group affects emotional and social health.

Studying older men’s social lives is also important because later life is associated with numerous transitions such as retirement, onset of chronic disease which limits mobility, loss of
spouses and loved ones, and loss of friends due to retirement related migration. All of these factors can negatively affect older men’s ability to engage in social leisure and can lead to increases in loneliness, which has been connected with poor health outcomes such as increased blood pressure and increased risk of mortality (Hawkley, Thisted, Masi, & Cacioppo, 2010; Holt-Lundstad et al., 2010). For example, in a 5-year longitudinal study, Hawkley et al. (2010) found that higher levels of loneliness were associated with greater increases in systolic blood pressure, independent of health conditions, cardiovascular risk factors, medications, depressive symptoms, and stress. Therefore, as Ory and colleagues (Ory, Yuma, Wade, Kaunas, & Bramson, 2008) asserted, social health and specifically social activity, should be discussed in medical visits between primary care physicians and older adults.

In addition to examining participation in the coffee group, I examined the social networks of these older men to understand the structure of their networks and where the coffee group men fit into their networks. Through the social convoy analysis, the group of men provided a helpful framework for understanding the social networks of the men. Results revealed that this group is an important component of their social network, provides them with various forms of social support and is a positive influence on their health and well-being. Because the two groups of men are of varying ages, I was able to compare the two and acknowledge some similarities and differences in the social networks of the two coffee groups. One group was significantly younger and recently retired, while the other group was older and has been coming to coffee hour for a longer period of time. When I compared these two groups via social network mapping strategy I recognized that the older group of men had fewer relationships in their outer circles than the younger group. This finding suggests that the older group has not replaced their peripheral relationships and is concentrating on their closer relationships which supports the tenets of socioemotional selectivity theory (Carstenson et al., 2003)
This group provides the men with a meaningful and effective way to engage in life, thus positively affecting their health and well-being. Numerous studies have emphasized that active engagement is also a key component to aging successfully (Payne, Mowen & Montoro-Rodriguez, 2006; Rowe & Kahn, 1998). The coffee groups served as one strategy these men used to maintain involvement in social relationships and connect to the larger community. Considering the numerous emotional and social benefits they described from their participation, it appears they are aging successfully according to Rowe & Kahn’s (1998) criteria.

**Practical Implications**

World Health Organization (WHO) defined health as, “A state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity,” (WHO, Preamble to constitution, 1946, p. 100). Recreation and leisure practitioners are interested in facilitating programs and providing facilities where people are able to achieve this definition of health. In order to provide the best services and meet the individual needs of older adults, it is important to understand what people are looking for to meet their specific recreation needs. Leisure programmers spend time and money to create settings where older adults can feel welcome. However, many times, programmers overlook some essential components of programming for older adults, such as what the adults want and how they want it delivered to them. For example, according to many of these older men, they do not want to be at a “senior center” or to be called elderly.

Providing information regarding the types of programs that are offered might encourage participation. This could perhaps help the Stevick Center to bring in additional members. As of now, there is no marketing for the group and in order for the group to continue into the future, there needs to be more men who join the group. Programmers should be aware of how programs are marketed to older adults in order to most effectively increase the program participants.
Perhaps providing other causal programming or facilitating a space for older adults to gather would be beneficial for their health and well-being. I think it is important to keep away from the stigma of a senior center because these men do not consider themselves as old or needing to be in a place only for the older population. As indicated by Maynard and Kleiber (1997), senior centers may be less appealing to older adults because of their implied age segregation. This could be one explanation for the decline of the Stevick Center group. Perhaps older adults do not want to be affiliated with a senior center. This is consistent with Cheang (2002) when he asked his older adult participants why they came to a fast food restaurant instead of a senior center, the overwhelming response what that “senior centers are for old folks.” They also thought of senior centers as over programmed and they just wanted to meet and have coffee or breakfast.

Other leisure agencies should consider different programming to facilitate casual interaction with older adults. Perhaps other local businesses or fast food restaurants could encourage groups to meet at their establishments. This could bring in more business for an establishment and provide a meeting space for older men to gather and “hang out with the fellas”. The quote, “it gives me something to do” speaks to the men feeling like there is not much for them to do. This is a place where money is not an issue, they can choose to purchase a beverage or they can just sit and visit with their friends.

Often times a fast food restaurant is not associated with health and well-being. However, as one coffee group showed, there can be some health benefits from participating in a coffee group at a local fast food restaurant. This could bring positive stigma to fast food restaurants. Perhaps, this is something McDonald’s can use as a community outreach program or they can assist in continuing to build a rapport with the community.
Limitations

There were a few limitations that need to be addressed. It is important to note the sample consisted of white retired men and this research, since it is qualitative cannot be generalized to the general population. Interviews were the primary means of collecting data and although I noted my bias there was still potential that I biased their responses. Because I am a younger white female and not a part of the group, they could have responded to my interviews differently than if someone else was asking the questions.

My examination of the social convoys was cross sectional and I was able to compare the two groups but not compare within the groups over time. To identify significant changes in social networks, the men should identify their social convoys while still working, after working and then years later. Retirement is a major life change and an indication of entering old age (Tilburg, 2003). To really understand how the social networks of these men changed, identifying their social convoys while still working would create a more accurate picture of the social network changes. Typically retirement decreases the likelihood of a continuing relationship with co-workers (Tilburg, 2003). In addition, while in retirement, there are also several social network changes depending how long someone has been retired. It is important to follow prior to and after retirement to determine how much retiring truly effects one’s social convoy. The changing of how people are retiring also could affect their networks because people are working longer or going back to work in a different career or field.

The findings and conclusions of this study are a direct result of my interpretations of my observations and interviews with the old men. I understand that I bring my own bias to this project. I acknowledge that my interpretations might be different from the older men, however I hope I was able to overlook my own bias and allow their stories and words to express their
experiences within the coffee group (Lincoln & Guba, 1985). Because this study took place at only two locations in central Illinois, the results are not be transferable to other older men in different coffee groups across the country. The beliefs, values and culture make these older men unique and the findings are specific to this group of older men.

Leisure service agencies offer a variety of programs, services and facilities to various groups of people. In order to provide the best services and meet everyone’s needs, it is important to understand people’s needs and preferences. Through this study, I attempted to understand older men’s social lives in the context of a coffee hour. Although not affiliated with a specific park and recreation entity, there is an opportunity for recreation professionals to provide a place for older men to gather and socialize. I now have a better understanding of what these men take away from participating in a group such as this. They have developed friendships, it is a positive influence on their health and well-being and they perceive and receive social support. This group is just one of many ways to improve the quality of life of older men.

**Future Research Recommendations**

It would be beneficial to understand what draws people to fast food restaurants and to conduct future research on how the culture of fast food restaurants is positive for social networks and social support. White (2007) suggested that older adults are drawn to restaurants, shopping areas and other public spaces because they are in a public place where they feel connected to the social group and to the larger community around them. Future research should be conducted on what attracts people to these places and why they continue to come. Henderson and Bialeschki (2005) found environments can enhance or hinder a variety of activities. It is important that recreation professionals create environments suitable to participate in leisure activities.
These men found these groups to be a positive and healthy aspect of their lives. Future research should address other men’s social groups in different settings so as to be able to identify any additional benefits or costs of participating in a group such as this. From discussing my research topic with others, people have commented that other groups such as this exist in other locations and areas, including; assisted living communities, dinner groups, coffee shops and cafes. Older men are a unique segment of the population and research should continue on older men specific groups, because from what I have learned, being a part of a men’s group is important. My study consisted of white men living in a central Illinois community and it is important to study more diverse groups of men including race and residential location.

In addition to various settings and types of groups, to really gain a true understanding of social networks as people age and transition, the social convoy segment of this study should be repeated at different life stages (i.e. while working, just retired, several years after retirement, 5-10 years after retirement). Although I compared different groups and determined support for SEST, it would be interesting to compare the same group of men but at different life stages. In addition, I asked the men about the structural components of their social networks, it would be beneficial to discover the functional aspects of each person placed in their convoy model. This information could assist in discovering what purpose each individual plays in their life and to gain a better understanding of how much social support is received.

**Conclusion**

The major contribution to the literature of this study is that these older men who participate in these coffee groups experience a variety of social support, a decrease in boredom and loneliness, and their involvement in this group facilitates their health and well-being. This specific cohort of the population is growing in size and men are living longer and more studies
need to be done on older men. As shown in this study, participating in a coffee group is beneficial to their health and well-being.
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