A field experiment was conducted to assess the effects of enhanced personal responsibility and choice on a group of nursing-home residents. The experimental group showed a significant improvement over the control group in alertness, active participation, and general sense of well-being. Whether or not the person has exercised, and that day, how much ice cream is consumed, the person depends on what else was eaten. Whether or not that ice cream will hurt though it is treated by many people as abso-
diabetes and sugar is probabilistic even have ice cream? The relationship between er. Should an elderly diabetic be allowed to bothered me. probabilistic statements so their certainty could “they” be so sure they knew better than these people. I thought all facts were probabilitic statements so their certainty bothered me.

Let me give an example to make this clearer. Should an elderly diabetic be allowed to have ice cream? The relationship between diabetes and sugar is probabilistic even though it is treated by many people as absolute. Whether or not that ice cream will hurt the person depends on what else was eaten that day, how much ice cream is consumed, whether or not the person has exercised, and so on. Recent evidence, in fact, suggests that no sugar is more dangerous than a small amount of sugar. Regardless of the findings, however, I think nursing-home staff should make recommendations, but leave the final decision up to the resident. One cannot know today what “facts” will turn up tomorrow.

I approached Judy Rodin at Yale, who was also working in the area of control at this time. She too felt that this population was characteristically denied the opportunity to exercise control. Together we visited local nursing homes. Our experience was interesting. We spoke to one director about wanting to increase the control residents experienced. He agreed it was important and then told us about all of the programs available at his nursing home that encouraged independence (for example, they had parties, a hairdressing salon run by the residents, a singing club, and more). We were surprised and thought we had misjudged the situation. Perhaps life was not as bad as we had thought for these people. (To put this in a historical perspective, this was before the general public or the social sciences became aware of gray power). Then, just before we left the nursing home, we decided to visit the residents. We did and found what we originally expected. Residents lined the halls with their wheelchairs and sat there in a virtual stupor. All of the activities he told us about existed, but it was to no avail if people were not aware of them. Hence, for us, the difference between objective control and perceived control became clear.

The experiment we conducted was successful. Psychologically, control proved to be a potent variable. The follow-up showed us that control was also important physiologically. Half as many people given our control intervention had died 18 months later than those given a comparison treatment. Because the longevity findings were so dramatic, I’ve spent a good deal of time trying to understand how such a simple treatment (a pep talk encouraging decision making, a few decisions, and a plant to take care of) could have such a profound effect on people. Many of these ideas are summarized in my book, The Psychology of Control, and are further expanded in Mindlessness/Mindfulness, to be published in 1986.