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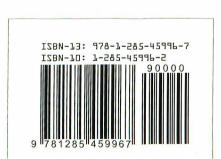
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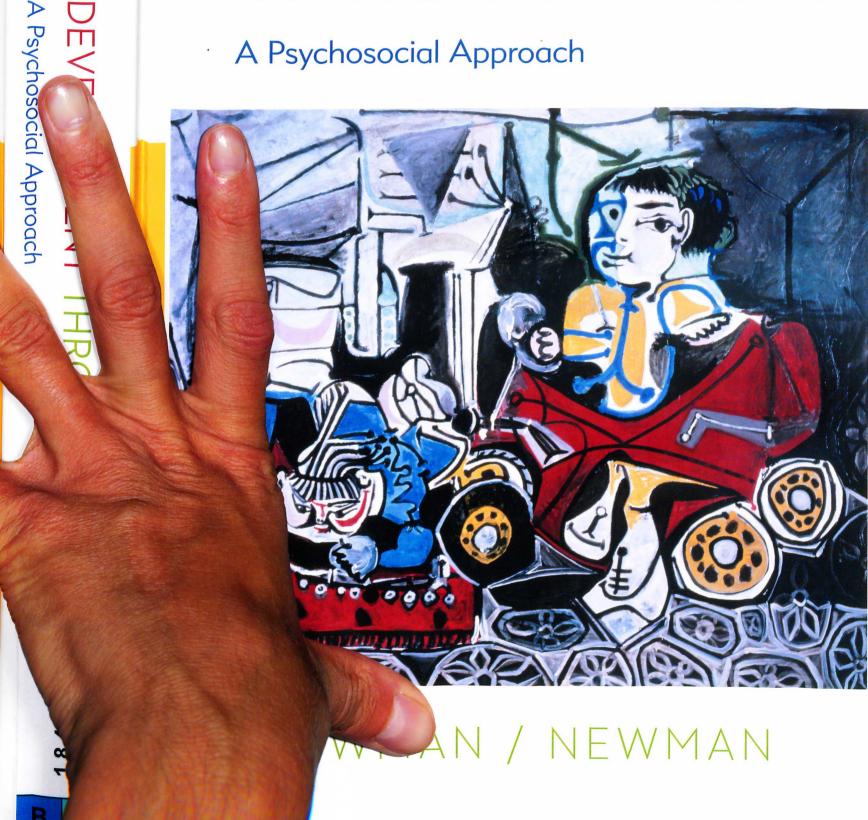
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A Psychosocial Approach





The integrating theme of later adulthood is a search for personal meaning. When older adults achieve a sense of integrity, it leads to inner peace and serves as a source of reassurance to the next generation.

LATER ADULTHOOD (60 TO 75 YEARS)

13

CASE STUDY REFLECTIONS ON RETIREMENT

Mary Gergen is Professor Emerita of Psychology and Women' Studies at Penn State University, Brandywine and co-founder of the Taos Institute, focusing on the integration of social constructionist ideas and professional practice. Here she reflects on the experience of retiring

Younger people believe that health is something one takes for granted. Middle aged people worry as they start to see chinks in their armor, but older people learn to adjust. By and large, people manage to live well, even with major decrements in their youthful capacities. It is a good idea to eat well, sleep long, and laugh heartily in one's career days as extra insurance against falling apart too soon. Keeping up good habits helps in retirement as well.

Overall, life is not that different for me today from what it was ten years ago: I don't envy people who have a full time job at all. Often wonder why some people are still carrying the burdens of fulltime employment when they don't really need to. It's snowing out right now, and the highway is packed with cars going about

10 miles an hour. In those cars are people going home from work, tense and tired, and eagerly awaiting the chance to kick off their shoes and relax with their loved ones. (At least that is my fantasy.) And here I am, writing up the joys of not being out there, struggling to get home. I'm already home. (Gergen, 2012, pp. 307–308)

CASE ANALYSIS Using What You Know

- Based on what you have read about the nature of work and career development, explain how the concept of retirement might be viewed differently and have different meaning depending on one's stage of life, including early adulthood, middle adulthood, and later adulthood.
- 2. Speculate about how retirement contributes to Mary's sense of control over her life and general well-being.
- 3. List some reasons why people might continue to work well into their later adulthood. Explain how work might contribute to life satisfaction, personal identity, health, and financial and psychosocial well-being in later life? How might continuing to work undermine these domains?

CASE STUDY: Reflections on Retirement

Developmental Tasks

Accepting One's Life

CASE STUDY: Goal Adjustment in Later Adulthood

Promoting Intellectual Vigor

Redirecting Energy to New Roles and Activities
Developing a Point of View About Death

CASE STUDY: Morrie Schwartz Reflects on His Views About Death

The Psychosocial Crisis: Integrity Versus Despair

Integrity Despair

The Central Process: Introspection

The Prime Adaptive Ego Quality and the Core Pathology

Wisdom Disdain

Applied Topic: Retirement

Income Loss

Adjustment to Retirement

CASE STUDY: Anna Quindlen Writes About Retiring as "Stepping Aside" for the Next Generation of Writers

The Future of Retirement

Chapter Summary

Key Terms

CHAPTER LEARNING OBJECTIVES

- 1. Examine the construct of life satisfaction in later adulthood and analyze factors associated with subjective well-being.
- 2. Define intellectual vigor, and describe factors that promote it in later life. Evaluate evidence about the interaction of heredity and environment on intelligence in later life.
- 3. Explain the process of redirecting energy to new roles and activities, with special focus on role gain, such as grandparenthood; role loss, such as widowhood; and new opportunities for leisure
- 4. Summarize the development of a point of view about death.
- 5. Define and explain the psychosocial crisis of integrity versus despair, the central process of introspection, the prime adaptive ego quality of wisdom, and the core pathology of disdain.
- Apply theory and research to understanding the process of adjustment to retirement.

IN THIS CHAPTER and the next, we consider the challenges, changes, and new avenues for development in later life. This chapter focuses on the period from 60 to 75; the next chapter focuses on the years from 75 to the end of life. The French refer to the years from 60 onward as the troisième age, the third stage of life (Rubenstein, 2002). One can think of the first 30 years of life as a period of construction and learning, when many avenues are open and the person is building the skills and knowledge to engage in the roles of adulthood. The second 30 years, from 30 to 60, are a period of enactment, when commitments established during identity formation are translated into roles and relationships. In this period, life is shaped by the interaction of work, family, and community demands and expectations. The individual strives to achieve personal ambitions and goals and to meet cultural expectations for maturity while coping with planned and unexpected changes in adjoining systems. The final 30 years are a period of reinvention. The integrating theme of later adulthood is a search for personal meaning. For many, this stage of life brings a gradual release from the daily demands of work and family and, depending on one's health and resources, provides the opportunity to invent a new life structure. This is a time when one faces both significant adversity and great joy.

Psychosocial theory assumes that new opportunities for growth emerge at each life stage. In strong contrast to the stereotype of aging as an undesirable process associated with accumulated deficits and decline, these chapters highlight continuous growth through coping and adaptation. Like each of the preceding stages, later adulthood is marked by stressors, risks, and forces that can disrupt growth.

However, the epigenetic principle implies that one cannot understand the full unfolding of human life without appreciating the beliefs, practices, and social relationships of those in later adulthood and old age. Moreover, the interdependence of the stages in a human life story suggests that the ways in which older adults function and are treated will have immediate impact on the psychosocial development of individuals in all the earlier periods of life. The courage and vitality of older adults are sources of inspiration that motivate children and younger adults to continue facing the challenges of their daily lives with optimism.

Physical, social, emotional, and intellectual developments are intricately interrelated during later life. The more research is carried out on aspects of aging, the greater the appreciation for the fact that patterns of aging are neither universal nor irreversible. For example, although many older adults become more sedentary and lose aerobic capacity, others continue to perform strenuous labor and remain free from heart disease and respiratory difficulties. Many life conditions ditions, especially poverty, malnutrition, poor sanitation, and limited back! limited health care, can accelerate the aging process. Other life conditions life conditions, such as access to a stimulating social environment and access to a stimulating social environment and access to a stimulating social environment. ronment, participation in a program of physical activity, and a well-balanced to a well-balanced diet, can increase physical and intellectual functioning (Rowe & Kahn, 1998). It is essential to keep in mind individual life. mind individual differences in physical and mental health when thinking about patterns of growth in later adulthood.

For people in the United States who were 65 years old in 2010, the average life expectancy was an additional 17.7 years for men, and an additional 20.3 years for women (National Center for Health Statistics, 2013, Table 7). Major improvements in hygiene, nutrition, preventive medicine, and medical treatments and technologies have allowed more people to experience a vigorous later adulthood today than was true 70 years ago. As a result, more and more people are facing the developmental tasks of later adulthood and elderhood.

Developmental Tasks

The tasks discussed here reflect major themes that are likely to be confronted in the later years of life: accepting one's life and achieving a sense of life satisfaction; promoting intellects. lectual vigor; redirecting energy to new roles and activities; and developing a point of view about death. These themes suggest new barriers to adaptation as well as new opportunity nities. Changes in memory and speed of neural processing may make the accomplishment of daily tasks more difficult. Role loss and the death of loved ones stimulate needs for new kinds of support and changes in daily lifestyle. They also convey a concrete message that a new period of life is under way. Success in these tasks requires considerable Psychological effort. As the more structured roles of parent and worker become less demanding, a person has to find new sources of personal meaning and a new pattern to daily life. In some cultures, aging takes place in a context of reverence and high regard, which makes the loss of certain instruments. instrumental activities less significant. In other cultures, emphasis on autonomy, instrumentality, and achievement form a challenging context for the preservation of dignity in late life.

Accepting One's Life

OBJECTIVE 1. Examine the construct of life satisfaction in later adulthood and analyze factors associated with Subjective well-being.

One of the significant challenges of aging is learning to accept the cept the reality of one's life and formulate a vision of this new phase of later adulthood.

"Weren't you ever afraid to grow old?" I asked.

"Mitch, I embrace aging."

"Embrace it?"

"It's very simple. As you grow, you learn more. If you stayed at twenty-two, you'd always be as ignorant as You were at twenty-two. Aging is not just decay, you know. It's growth. It's more than the negative that You're going to die, it's also the positive that you understand you're going to die, and that you live a better life because of it." (Albom, 1997, p. 118)

By later adulthood, evidence about one's successes and failures in the major tasks of middle adulthood—marriage, children to the major tasks of middle adulthood—marriage, childrearing, and work—has begun to accumulate. Data by which to judge one's adequacy in these areas are abundant. The process of accepting one's past life as it has been may be a disc. be a difficult personal challenge. One must be able to incorporate certain areas of failure, crisis, or disappointment into one into one's self-image without being overburdened by a sense of inch of inadequacy. Individuals also must be able to take pride

in areas of achievement, even when those accomplishments fall short of personal expectations. At the same time, older adults face the work of defining new goals for the future. The discussion that follows provides several models for conceptualizing how older adults establish a satisfying approach to achieving important goals in light of changing resources.

The SOC Model

Over the life span, people confront the challenges of balancing and matching a variety of opportunities with fluctuations in resources (Freund & Baltes, 1998). At every period of life, there are limited resources—whether time, energy, or money—to address all the opportunities that present themselves. For example, in later adulthood, a person may want to continue to work (an opportunity) but find that a chronic heart condition makes it difficult to bring the required energy and resilience to the task (loss of a resource). According to the SOC model, adaptation requires the integration of three processes:

Selection: Identifying the opportunities or domains of activity that are of the greatest value or importance.

Optimization: Allocating and refining resources in order to achieve higher levels of functioning in the selected domains.

Compensation: Under conditions of reduced resources, identifying strategies to counteract the loss and minimize the negative impact on functioning in the selected domains.

In later life, adults are inevitably faced with changes in resources. They may have more time, but less physical stamina and fewer financial resources. Life satisfaction and a sense of well-being are linked to selecting specific goals as important areas of functioning and then effectively directing both internal (e.g., energy, thought, planning) and external (e.g., hiring help, taking classes, technical assistance) resources in order to maximize their level of functioning. Demographic factors alone—such as gender, race, age, and income—are not adequate predictors of life satisfaction. Instead, well-being rests on two related coping strategies: (1) An ability to anticipate potential losses and prevent them through proactive coping in order to prolong the availability of resources and maintain engagement with desired activities (Ouwehand, de Riller, & Bensing, 2006); and (2) an ability to manage or reduce the impact of stressful life events by redirecting resources in order to continue engaging in valued roles and activities (Hamarat et al., 2001; Salvatore & Sastre, 2001).

Life Goals and Life Satisfaction

Many older adults have high levels of life satisfaction even though they face serious stressors and physical limitations (Brandtsadter, 2002). In part, this is due to their ability to achieve or realize important personal goals, and in part it is due to the ability to modify or adjust their goals in light

Life Goal Domains

Social relationships and Family Work and daily activities Finances Health/Fitness

Leisure Activities Self-reliance

Life Goal Orientation

Agentic Communal Self-preservation Well-being of others

Goal-Related Actions

Coping

Intentional self-development Cascading facilitation of related goals Matching goals and activities

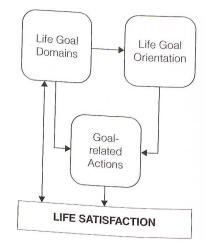


FIGURE 13.1 Life Goals and Life Satisfaction Source: © Cengage Learning.

of changing resources. Goals are characterized as linked to daily actions, related to desired states in the present or the future, and controllable, at least in so far as the person can choose to invest resources in certain goals or not (Mayser, Scheibe, & Riediger, 2008).

In later adulthood, individuals continue to aspire to new goals and strive to achieve new levels of optimal functioning. A person's life goals and needs may change over the course of later adulthood, depending on life circumstances. Rather than viewing satisfaction in later adulthood in terms of wrapping things up and facing a roleless, undifferentiated future, older adults continue to formulate personal goals and assess their current life satisfaction in light of how well they are able to achieve those goals. In order to appreciate the link between life goals and life satisfaction, it is important to consider three aspects of life goals: goal domains, goal orientation, and goal-related activities that are aligned with achieving valued goals (Figure 13.1).

Goal Domains. What are the achievements that stand out as important areas of accomplishment in later adulthood? Studies of life goals and life satisfaction present different typologies of life goals. In one international study that compared older adults in the United States and Holland, four domains were relevant to both groups: job or daily activity goals; social contact and family goals; health goals; and income goals. Across the two cultures, attainment of social contact and family goals were the strongest predictor of overall life satisfaction (Kapteyn, Smith, & van Soest, 2010). Other studies include self-reliance or autonomy goals and leisure time and physical activity goals in their analyses of the link between life goals and life satisfaction (Straechen, Brawley, Spink, & Glazebrook, 2010; Wong & Lou, 2010).

Individuals show different patterns of investment in these goal domains, and in the specific activities or achievements within domains. To some extent, a person's profile of meaningful goals takes shape in the stages of later adolescence

and early adulthood. At that time, individuals are crystallizing their identity and creating a lifestyle. The combination of one's culture and life experiences shapes an imagined self, moving into the future. As a person begins the process of accepting one of the future and the process of accepting one of the future. cepting one's life in later adulthood, there is a tendency to return to the personal goals that were envisioned at that earlier time of life in order to assess the extent to which they were realized and perhaps to reevaluate their importance given the 40 years or more of life that have transpired since these goals were formed (Cappeliez, 2008).

Goal Orientation. In addition to the specific goals one aspires to, the literature suggests that people differ in their goal orientation. Some people are more agentic in their goal strivings. The second people are more agentic in their goal strivings. Their important goals focus on achievement, power, and the expression of personal abilities. Other people are more community focus are more communal in their goal strivings. Their goals focus on intimacy, affiliation, and contributions to the moral community (Pohlmann, 2001). Other studies have contrasted goals that seem to emphasize self-preservation with those that focus on the companies of the control of the con that focus on the interest in and well-being of others. One might look back at the psychosocial crisis of middle adulthood hood, generativity versus stagnation and consider that the profile of goals emerging from that period of life might differ for those who resolved the crisis in the direction of generativity compared to those who resolved it in the direction of stagnation (Law) stagnation (Lapierre, Bouffard, & Bastin, 1997).

Goal-Related Actions. As people make progress on the developmental task of accepting their life, they are able to integrate their are able to integrate their goals and their goal-related activities in order to experience der to experience a sense of personal fulfillment. For those in later adulthes the sense of personal fulfillment. in later adulthood who have a strong sense of self-directed goal attainment, sentiments of life satisfaction feed back into life goals, strengthening their sense of purpose and providing renewed and providing renewed are that ing renewed energy. Activities that are not satisfying or that bring negative bring negative social exchanges will be abandoned in favor



FIGURE 13.2 Ray and Carla have more time for each other now that they are getting closer to retirement. Their happiness as a couple is an important source of life satisfaction.

of activities that are enjoyable and that contribute to feelings of confidence or well-being. With age, it appears that a person's goals become more supportive of each other, so that one activity, for example, joining a book club, can provide Support for both intellectual goals and social goals; spending si ing time with grandchildren can be an opportunity to experience family support and physical activity. Couples who enjoy Cooking may find that this shared interest also allows them to specific to spend time together, planning, shopping, and preparing meals (Figure 13.2). Older adults find that their goals sup-Port each other, and that they can invest more energy into personal goal pursuits as their obligations to other competing rel ing roles and role demands decline (Riediger, Freund, & Balton are Baltes, 2005). The more closely a person is able to match activities. tivities with valued goals, the greater the person's life satisfaction (LL). tion (Halisch & Geppert, 2001). As the case of Orville Brim's father its father illustrates, many of the basic motives for goal pursuits may remain the same over time, but the implementation of Specific specific activities may change as a person's physical health or endurance declines with advanced age.

CASE STUDY

GOAL ADJUSTMENT IN LATER ADULTHOOD

Orville Gilbert Brim, who contributed to the field of human development through his work on social role theory (see chapter 3), became increasingly interested in ambition and self-directed goal attainment in adulthood. He describes his father's successful adaptations in later life as an example of this process (Brim, 1992).

Brim's father, also named Orville, lived to be 103. He was born in a small farming community in a rural area of Ohio in 1883. After receiving his bachelor's degree in education at Valparaiso University, he taught school in a one-room schoolhouse for 2 years and then became principal of a high school in Indiana. Eventually he left the rural Midwest to attend Harvard and then Columbia to get his PhD. He was a professor at Ohio State University until he retired at age 60. Then Orville and his wife, Helen, bought an abandoned farm of several hundred acres in Connecticut, remodeled the farmhouse, and settled into farming. In the early years of retirement, he cleared and thinned the trees on the hills and mountains of his farm. After a while, he stopped working the hillsides and planted a large vegetable and flower garden. Orville tilled the garden with a power tiller. When he was 90, he bought a riding tractor. When he could no longer manage the large garden, he focused on a small border garden and four large window boxes that he planted with flowers. As his eyesight became more impaired, he shifted from reading to listening to "talking books," and when he had to give up actually planting the window boxes, he enjoyed watering them and looking at the flowers. Orville approached each new challenge of physical decline by correctly assessing his abilities, investing in a new project, and taking pride in his achievements within that domain.

CASE ANALYSIS Using What You Know

- 1. In this case, Brim's father drew on early life experiences growing up on a farm to guide his goals in later adulthood. Describe how a person might integrate other prior life roles into a satisfying lifestyle in later adulthood.
- 2. Explain how goal readjustment is related to life satisfaction in this case. Analyze some of challenges people might face in later life as they realize the need to revise their life goals.
- 3. Describe the resources Brim's father had that allowed him to achieve new goals for mastery.

Life Goal Domains

Social relationships and Family Work and daily activities Finances Health/Fitness Leisure Activities

Self-reliance

Life Goal Orientation

Agentic Communal Self-preservation

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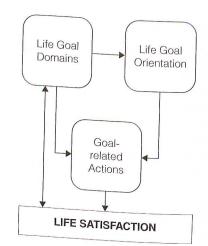


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Source: © Cengage Learning.

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A basic element in life satisfaction is the sense of belonging, a fact that has been supported by a wide range of research across life stages (Baumeister & Leary, 1995). In later life, social relationships are a primary source of pleasure and meaning and are an avenue for active engagement. People who experience loneliness or an inadequate social network are much less satisfied with life than those who perceive themselves to be positively connected to a meaningful circle of loved ones and friends (Gow et al., 2007). In the context of marital relationships, high levels of conflict are associated with depression and lower life satisfaction for both men and women (Whisman et al., 2006). Even though social connection is a source of life satisfaction in later adulthood, negative relationships and ongoing exposure to interpersonal conflict can disrupt feelings of satisfaction.

In a longitudinal study, men who had participated in the Terman Study of Gifted Children when they were in early childhood were interviewed about their life satisfaction at ages 58 to 72. Four styles of adaptation emerged: (1) poorly adjusted, (2) career focused but socially disengaged, (3) family focused, and (4) well rounded. Three family experiences from early childhood and adolescence, including parent-child attachment, family socioeconomic status, and early parental divorce, were associated either directly or indirectly with life satisfaction in later life (Crosnoe & Elder, 2004). In addition, contemporary factors including health and socioeconomic resources were generally predictive of life satisfaction for the group as a whole. Goals related to family life and religious life provided a greater sense of meaning, social benefits, and emotional support than occupational goals, especially for the family-focused and well-rounded groups (Crosnoe & Elder, 2002b). The family-focused and well-rounded groups had many areas of similarity, as did the career-focused and poorly adjusted groups. There is some suggestion that people who place too great a priority on occupational attainment during middle adulthood may find it difficult to reorient toward satisfying life goals in later adulthood.

Personality and Well-Being

We all know people who have lived difficult lives yet appear to be full of zest and enthusiasm. We also know people who appear to have had the benefits of many of life's resources yet are continually complaining about problems. Whether specific events will contribute to feelings of satisfaction or dismay depends in part on how they are interpreted. Some people are more likely to be grumblers; others are more likely to be celebrants of life. In response to this reality, some researchers have looked to personality factors to predict subjective life satisfaction in later adulthood. The construct of personality, which is typically viewed as a pattern of thoughts, feelings, and actions that are characteristic of a person across situations, provides ways of understanding individual differences in coping, goal orientation, and selfevaluative processes. Confusing as it may seem, personality is both stable and changing over one's life. Personality is

stable in the sense that people who are high in one aspect of personality in comparison to their peers remain relatively high in that quality over time. For example, a person who is outgoing and sociable, in comparison to others, will continue to rank high in sociability over time. Personality is also changing in the sense that certain personality qualities seem to increase with age, while others decline. For example, studies find that agreeableness increases with age, whereas openness to new experiences declines (Lodi-Smith, Turiano, & Mroczek, 2011).

A number of personality characteristics have been linked with life satisfaction in later life, including extroversion, openness to experiences, lack of neuroticism, usefulness/competence, optimism, a sense of humor, and a sense of control. **Extroversion** includes such qualities as sociability, vigor, sensation seeking, and positive emotions. People who are outgoing and enjoy social interaction tend also to report high levels of life satisfaction (Costa, Metter, & McCrae, 1994). In a comparison of two cohorts of older adults, those assessed in 1976–77 and those assessed in 2005–2006, the more recent group of older adults were more extraverted and less constrained by social desirability, suggesting a generational shift toward a more outgoing, trusting interpersonal style (Billstedt, Waern, Duberstein et al., 2013).

Openness to experience includes characteristics such as curiosity, imaginativeness, and enthusiasm about exploring different music, art, foods, travel, or points of view. Older adults who are open to ideas and to feelings are more likely to have a high level of life satisfaction because they seek and take advantage of the novelty and unpredictability of their lives (Stephen. 2009).

A personality dimension described as **neuroticism** is characterized by anxiety, hostility, and impulsiveness. People who are neurotic experience discouragement, unhappiness, and hopelessness. For them, real-life events are screened and interpreted through a negative filter, resulting in low levels of satisfaction. In the study of Terman's gifted sample, high levels of neuroticism predicted worse physical health and lower life satisfaction (Friedman, Kern, & Reynolds, 2010).

The personality factor of **usefulness/competence** is related to **well-being** and high self-esteem in older adults. This quality is associated with informal volunteer work, higher levels of involvement with others, and a greater sense of purpose and structure in the use of time (Ranzijn, Keeves, Luszcz, & Feather, 1998). Continuing to work in later adult-hood may also contribute to this sense of usefulness/competence, or perhaps those who have a high sense of usefulness/competence choose to work longer. Those older adults who take on the role of mentor for new or younger workers can enhance their sense of life satisfaction through this role to the extent that it creates opportunities to feel useful, to be involved as a valued resource, and to achieve their own career goals in this relationship (Stevens-Roseman, 2009).

Optimism is another predictor of life satisfaction. Optimism is a belief that one's decisions will lead to positive

consequences and that uncertain situations will turn out well. Under conditions of uncertainty and stress, adults who are optimistic have less depression, greater hopefulness, and, as a result, a greater sense of well-being (Chang & Sanna, 2001). In contrast, those who are pessimistic experience more social strain, have lower social support, and as a result, are likely to have lower life satisfaction (Luger, Cotter, & Sherman, 2009).

Along with optimism, a sense of humor has been found to Predict life satisfaction. Given the many changes associated ated with aging, it helps to see events as amusing rather than embarrassing or demeaning. Older adults who have a good sense of humor are likely to experience life in a more playful, engaged way, even if they view life as somewhat more absurd (Ruch, Proyer, & Weber, 2010).

A sense of control is systematically associated with life satisfaction (McConatha, McConatha, Jackson, & Bergen, 1998). Life experiences such as engaging in physical activity ity, the opportunity to select one's leisure activities, or the ability to decide when to retire are all examples of factors that can improve an older adult's sense of control. A study that monitored daily activity of older adults over 2 years found that people who were able to alternate social, physical, and cognitive activities with periods of rest and relaxation had the greatest sense of happiness (Oerlemans, Bakker, & Veenhoven, 2011). Taken together these studies suggest that people who are extroverted, open to new experiences, optimistic, experience a sense of usefulness, have a good sense of humor, and feel that they are in control of events in their life will also express high levels of satisfaction.

Illness and Health

Experiencing a sense of well-being and acceptance of one's life is life is associated with physical health. In addition to an increase in vulnerability to acute illnesses, such as influenza, more than 80% of people over the age of 65 have at least one chronic chronic condition such as arthritis, hypertension, coronary heart disease, diabetes, or cancer. Chronic illnesses are long lasting and can be characterized by periods of intense illness follows. followed by periods of remission or progressive decline. The most common chronic conditions in the 65 to 74 age range are and are arthritis, hearing impairments, heart conditions, and high blood pressure (Warshaw, 2006) (Figure 13.3)

Heart disease is the leading cause of death for men and women in the United States. However, it begins about 10 Years and the United States. Years earlier for men than for women. After menopause, the risk of heart disease for women increases. Moreover, women are less the are less likely than men to be accurately diagnosed as suffering from a heart attack, less likely to recover from it, and more likely to suffer the complications of stroke. The lifestyle factors associated with heart disease are about the same for men and women. However, men are more likely to be at risk because because they do not get the physical activity they need, eat more meat and fat and less fruit and fiber than women, are less likely to go to the doctor for regular checkups, and are



FIGURE 13.3 In his later life, Renoir suffered from severe arthritis. To compensate, he tied paint brushes to his hands so he could continue to function in this highly valued domain.

generally more likely to deny being sick (National Center for Health Statistics, 2013).

Longitudinal studies of men consistently find that current health status and functional autonomy are significant predictors of life satisfaction (Barger, Donoho, & Wayment, 2009). However, the relationship of health to life satisfaction is mediated by personality, resources, and personal goals. A chronic illness, such as arthritis, may result in a significant loss of control and reduced opportunities for physical activity or social interaction. A person who is characterized by a neurotic personality may be more discouraged and embittered by these losses than one who is optimistic or agreeable. A person whose leisure activities have focused on physical activities, such as skiing or running, may find the restrictions of arthritis more frustrating than someone whose hobbies and lifestyle are more sedentary.

In a study of more than 3,000 U.S. adults, the personality traits of conscientiousness and neuroticism were found to be associated with mental and physical health. Adults who were more conscientious had reduced risks of health problems, whereas those who were more neurotic had increased risk. Among adults with diagnosed physical illnesses, those who were conscientious were less likely

to be limited by these conditions. One explanation for this association is that the more conscientious a person is, the more likely the person will follow a recommended plan of treatment and to incorporate recognized healthy behaviors into daily life (Goodwin & Friedman, 2006). Another interpretation is that those who are more neurotic are also more likely to alienate their social support system, thereby losing the important functions of social support that are associated with health and life satisfaction (Barger, Donoho, & Wayment, 2009).

Erikson on Accepting One's Life

Erikson et al. (1986) highlighted the importance of trust in the acceptance of one's life and the challenge of accepting support as it becomes needed.

Maples and aspens every October bear flamboyant witness to this possibility of a final spurt of growth. Nature unfortunately has not ordained that mortals put on such a fine show. As aging continues, in fact, human bodies begin to deteriorate and physical and psychosocial capacities diminish in a seeming reversal of the course their development takes. When physical frailty demands assistance, one must accept again an appropriate dependence without the loss of trust and hope. The old, of course, are not endowed with the endearing survival skills of the infant. Old bodies are more difficult to care for, and the task itself is less satisfying to the caretaker than that of caring for infants. Such skills as elders possess have been hard won and are maintained only with determined grace. Only a lifetime of slowly developing trust is adequate to meet this situation, which so naturally elicits despair and disgust at one's own helplessness. Of how many elders could one say, "He surrendered every vestige of his old life with a sort of courteous, half humorous gentleness"? (p. 327)

The U-Shaped Curve of Well-Being

The general sense of subjective well-being can be defined as a combination of beliefs and feelings that a person has about whether he or she is leading a desirable, rewarding life (Diener, 2012). Studies across cultures find that certain factors including social support, trust, and a sense of mastery or control predict well-being. What is more surprising is that many studies find a U-shaped relationship of age and well-being. (see Figure 13.4). The sense of well-being decreases to a low point in the late 40s and early 50s and then increases steadily with advanced age (Blanchflower & Oswald, 2007; Stone, Schwartz, Broderick, & Deaton, 2010). Controlling for income, employment status, and having children, the U-shaped pattern is still observed. Three explanations may account for this trend:

 Older people are less angry, less likely to engage in conflicts, and better able to find solutions to conflicts.

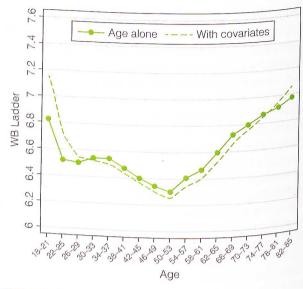


FIGURE 13.4 The U-Shaped Curve of Well-Being Source: Stone, A. A., Schwartz, J. E., Broderick, J. E., & Deaton, A. (2010). A snapshot of the age distribution of psychological well-being in the United States. *Proceedings of the National Academic of Sciences*. Retrieved June 18, 2013, from http://www.pnas.org/cgi/doi/10.1073/pnas.1003744107.

- Older people are more likely to focus on what matters in the present and not worry as much about what the future holds.
- Older people may give up certain kinds of strivings and accept the life they have.

FURTHER REFLECTION: Explain how a person might modify his or her goals in later adulthood in order to optimize life satisfaction. Give an example from your own experience or from the life of someone you know that illustrates this idea.

Promoting Intellectual Vigor

factors that promote it in later life. Evaluate evidence about the interaction of heredity and environment on intelligence in later life.

Over the life span, adaptation and survival depend on a person's ability to meet the demands of their environment. Problem solving, which begins in infancy at the sensory and motor levels, becomes increasingly flexible, abstract, and adapted to the context and situation, over the life course. Memory, reasoning, information processing, problem-solving abilities, and mental rigidity or fluidity all influence an adult's intellectual vigor, the capacity to introspect, select meaningful goals, manage changing resources, and plan for the future. These intellectual capacities also influence the adult's ability to remain involved in productive work, advise and guide others, and invent new solutions to the problems of daily life. The person's capacity to cope with the challenges of later adulthood, and thereby preserve a high level of life satisfaction, depends on the ability to promote and sustain intellectual vigor.

How can one understand cognitive functioning and change in later life? The study of intelligence and cognition in later adulthood is plagued by practical and theoretical challenges that make it difficult to make broad generalizations. In the following section, we review four problems associated with the study of intelligence and aging. Specific topics are then discussed including: memory, problem solving in loosely defined situations; and an overview of agerelated changes in various mental abilities. The focus then shifts to an analysis of the impact of heredity and environment on intelligence and factors that help to sustain high levels of intellectual functioning in later life.

Problems in Defining and Studying Intelligence in Later Adulthood

The primary goals in the study of development are to describe and explain patterns of change and continuity over time. Four problems arise in evaluating the research on intelligence in later life (Stuart-Hamilton, 1996). First, one must differentiate between age differences and age changes. Suppose that in a cross-sectional study conducted in 2000, 70-year-olds performed less well on tests of flexible problem solving than 40-year-olds. The difference may be clear, but it may not be a result of age alone. The 70-year-olds would have been born in 1930, and the 40-year-olds in 1960. Differences in performance may be a product of different educational opportunities, varying experiences with standardized tests, or other cohort-related factors. Educational opportunities nities increased markedly during the 20th century so that Younger cohorts are much more likely to have benefited from formal schooling at both the high school and college levels (U.S. Bureau of the Census, 2000). For example, only 10% of page 100 per page 100 p of people ages 65 to 74 in 2000 had completed a bachelor's degree, whereas 18% of adults ages 35 to 44 had attained this level of education. In the older cohort, 26% had not graduated at all a second ated from high school, compared to 11% in the younger Cohort. Advanced education is associated with greater reflectiveness, flexibility, and relativistic thinking. People who have attended college have been exposed to the scientific Process as a way of gaining knowledge and, as a result, are more likely to consider that their understanding of the world is tentative pending new information or new technologies (King & Kitchener, 1994; Labouvie-Vief & Diehl, 2000).

In cross-sectional studies of cognitive functioning, historical factors may be confounded with developmental or aging factors that may contribute to observed differences in performance. In longitudinal studies that follow change over time, if only one cohort is sampled, it is impossible to tell Whether changes from one period to the next are products of age and development or a result of fluctuations in resources and challenges faced by that particular generation.

A second problem is the definition of abilities. Cognitive functioning is a broad term that encompasses such varied abilities as vocabulary, problem solving, and short-term memory. It is possible that the pattern of change in abilities

with age depends on which abilities are tested. Some abilities are frequently used and have been developed to a high level of efficiency. For example, an architect is more likely to retain abilities in spatial relations and reasoning than is someone whose work is not intimately connected with the construction and organization of spatial dimensions.

A third related problem is the relevance of the tasks used to measure adult cognitive functioning. The definition of intelligence that is used in the design and application of most intelligence tests refers to capacities that are predictive of school-related success. The criteria for assessing adult intelligence are necessarily more varied than the ability to succeed in a school curriculum. Furthermore, motivational factors come into play in the measurement of intelligence. This raises the distinction between ability and performance. If a test is perceived as irrelevant or unimportant, an adult may not give much effort to performing well.

Finally, factors associated with health are intertwined with the functioning of older adults, although they are often not directly measured. A number of age-related diseases impact an individual's ability to learn and retain new information. However, the boundaries between what might be considered normal cognitive changes associated with age and disease-related changes are not easy to detect, especially in the early stages of an illness (Albert, 2002). In a longitudinal study of intelligence, Riegel and Riegel (1972) found clear declines in performance among participants who died before the next testing period. Vocabulary skills, which normally remain high or continue to show increases with age, are especially likely to decline in older individuals who will die within the coming few years. Adults who are in the early stages of dementia but have not yet been diagnosed as suffering from the disease are often included in samples described as normal or normative. This inclusion lowers the mean of the total group and overestimates the negative association of age and intelligence (Sliwinski, Hofer, Hall, Buschke, & Lipton, 2003). At each older age, the inclusion of adults who are in an early phase of a progressive illness lowers the average performance of the group as a whole.

Memory

The exact nature of changes in memory with age is a topic of active and ongoing research (Hertzog & Shing, 2011; Johnson, 2003). A common model breaks memory into three forms: the sensory register, short-term memory, and long-term memory; and three functions: encoding, storage, and retrieval. In this model, the sensory register is the neurological processing activity that is required to take in visual, auditory, tactile, and olfactory information. Encoding, which involves attending to information, perceiving it, and catching the gist or drift of the information, begins with the sensory register. Speed of processing which is most closely linked to the sensory register, can be slowed as a result of illness. Illness does not seem to affect higher order aspects of memory, particularly the recall of past life events (Rosnick et al., 2004).

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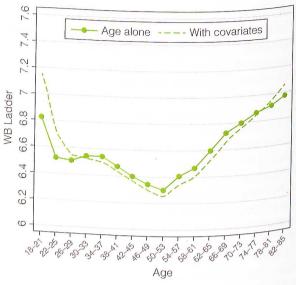


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Once information is encoded, it has to be stored. Short-term memory is the working capacity to encode and store five to nine bits of information in the span of a minute or two. This is the scratch pad of memory that is used when someone tells you a telephone number or gives you an address.

Long-term memory is a complex network of information, concepts, and schemes related by associations, knowledge, and use. It is the storehouse of a lifetime of information. Remembering something for more than a few minutes involves moving the information from short-term to long-term memory, storing it in relation to other associated knowledge, and being able to recognize, retrieve, or reconstruct it at a later time (Hoyer & Verhaeghen, 2006).

The memory functions most relevant to understanding cognitive ability in aging have to do with the ability to transfer and store information from short-term to long-term memory and then retrieve it. Studies that compare the short-term memory abilities of older and younger adults find that age is not associated directly with the capacity of short-term memory, but with the ability to transfer newly learned information to long-term memory and then retrieve it on demand. Older adults are just as effective as younger adults in recognizing information that was learned in the past, but they have difficulty summoning up a specific name or number when they want to find it (Hertzog, Fulton, Mandviwala, & Dunlosky, 2013; Rowe & Kahn, 1998).

Furthermore, older adults find that their memory functions are especially likely to be disrupted under conditions in which information is presented rapidly and contextual cues are absent. Older adults rely on meaning to store and retrieve new information. With each passing year of life, there is more to remember. We do not really know the limits of the storage capacity of long-term memory.

Studies of memory focus on different kinds of tasks, each with its own trajectory of growth and decline. **Semantic memory** focuses on basic knowledge, such as recalling the meaning of words like *vegetable*, *democracy*, or *insect*. Once learned, semantic memory seems very resistant to loss. People continue to grow in the accumulation of new ideas and information over adulthood.

Episodic memory focuses on specific situations and data. Measures of episodic memory may ask people to recall words from a list or remember what they had for breakfast 3 days ago. In general, episodic memory declines modestly with age. With age, so many daily events and bits of information are encountered that unless the events have some particular importance, they may not be encoded, or may become difficult to retrieve in the accumulated network of memories. There are exceptions to this decline, however, depending on the type of task involved (Zelinski, 2009).

A third type of memory task is called **prospective memory**. This is memory about events or actions taking place in the future. An example would be remembering to take pills at 4 p.m. or to call a spouse when arriving at a hotel after traveling on a business trip. This type of memory task

requires recalling that something needs to happen at a future time or under some future condition and also remembering specifically what needs to be done. Older adults do not do as well as young adults on prospective memory tasks in laboratory conditions. However, in naturalistic studies, the older adults do better than the young adults (Henry, MacLeod, Phillips, & Crawford, 2004). Prospective memory is a critical component of adaptive coping, and older adults use a variety of strategies to help stay attuned to their functional future.

Research using the narrative method suggests that people construct memories that make sense of their past. They tell a story about the past that puts events in a chronological sequence, highlighting events that, in retrospect, are important achievements or turning points. For example, in one study, participants were asked to provide a narrative about a time when they said, thought, or did something wise. Adolescents and young and old adults were all able to retell experiences where wisdom helped them to turn a negative experience into something positive. Adults were also able to describe how the wisdom experience helped shape their outlook or life philosophy (Bluck & Gluck, 2004). Memory may be used in a new way in later adulthood in order to resolve the conflict of integrity versus despair. Memory is used to recall and evaluate certain life events that may preoccupy one's attention tention until the role of these events can be integrated into a meaningful sense of one's purpose. This process may interfere with an adult's ability to attend to current minutiae or to rehearse and recall new information.

There is wide variability in people's memory skills. Measurement of changes in memory across different types of tasks suggests tasks suggests more stability than change over much of adulthood (Zelinski & Lewis, 2003). Some people pay great attention to describe the description to describe the describe the description to describe the description to describe the describe the description to describe the description to describe the description to describe the description to describe the described the description to describe the described the desc attention to details and are more able to recall them. Others ignore many all them. ers ignore many details and are not able to retrieve them. A salesman or politician may have a knack for remembering the names of friends, acquaintances, and family members. A historian may have a memory for historical events and personalities. A police detective may pay great attention to the details of the As the demand a physical environment from specific cases. As the demands of work and family life accumulate, people adapt by forms: adapt by focusing attention on the details and events that are most salient for their success. Over time, the differences in people's are in people's approaches to what they have learned, recalled, and found are for and found useful in coping with life shape the context for whether and the whether and how new information is encoded and retrieved.

In addition to actual declines in some kinds of memory performance, older adults complain of memory problems. Anxiety and frustration over memory loss nag many, even those older adults whose memory performance has not dramatically declined. However, memory complaints may reflect the person's accurate subjective assessment of a slowing in the retrieval process, or a decline in their episodic memory (Price, Hertzog, & Dunlosky, 2010). A loss of memory self-efficacy can become a hindrance to effective performance on memory tasks. Low self-efficacy regarding one's memory may lead

to an avoidance of tasks that require episodic memory, such as playing certain types of games or attending social events where one is expected to recall the names of new associates.

In hopes of understanding the degree of resilience or plasticity available in the memory capacity of older adults, various training studies have been performed. Training strategies have been shown to improve the episodic memory of older adults. However, when younger and older adults are given the same training, the younger adults benefit significantly more and show greater improvement in their memory skills than the older adults. This suggests that there may be some upper limit to the plasticity of memory in later life (Singer, Lindenberger, & Baltes, 2003).

Solving Loosely Defined Problems

Research based on the standard Piagetian tasks has been criticized for its lack of relevance and familiarity to older participants. The traditional tasks are dominated by the role of Pure logic, disconnected from the situation. They emphasize Problems that have a scientific rather than a pragmatic focus. Although the solution to most formal operational problems requires the manipulation of multiple variables, there is typically only one correct solution. In adult life, most problems involve multiple dimensions with changing or poorly defined variables and more than one solution. For example, given my limited resources, should I buy more life insurance, Put cash in a certificate of deposit, or invest in the stock and bond market to best protect my family's financial future?

As a result of these limitations or criticisms of formal operational reasoning, scholars have formulated a view of Postformal thought which has been characterized in the following ways (Commons & Richards, 2003; Labouvie-Vief, 1992; Sinnott & Cavanaugh, 1991).

A greater reliance on reflection on self, emotions, values, and the specific situation in addressing a problem

A willingness to shift gears or take a different approach

depending on the specific problem

An ability to draw on personal knowledge to find pragmatic solutions

An awareness of the contradictions in life and a willingness to try to include conflicting or contradictory thoughts, emotions, and experiences in finding a solution

A flexible integration of cognition and emotion so that solutions are adaptive, reality oriented, and emotionally

satisfying

An enthusiasm for seeking new questions, finding new problems, and new frameworks for understanding *experience*

Different types of problems require different strategies. When a problem has clear parameters and needs a single solution. However, lution, concrete or formal operations may work. However, when a problem is loosely defined, value laden, ambiguous, or inor involves many interpersonal implications, a more flexible approach may be required. Given the complexity of adult life, adaptive problem solving requires flexibility, differentiation of positive and negative aspects of a single alternative. and the ability to consider the implications of a course of action. When older adults face a loosely defined problem. they tend to consider multiple aspects of the situation. Their solution is altered depending on the larger overall goal they are striving to achieve (Berg & Strough, 2011).

Increasingly, problem solving becomes a social task, whereby several people or groups of people work together to arrive at solutions. Older adults tend to be sensitive to the emotional impact of their solution, especially when the problem is embedded in a social situation. Older adults are likely to strive for a solution that maintains harmony and avoids conflict. They are likely to benefit from collaboration with a close or trusted colleague or partner in solving complex problems, drawing on the collective experience of their partner in identifying alternative strategies. A component of collaborative problem solving includes the ability to balance the interpersonal and analytical aspects of the work. Because members of groups are vulnerable to pressures toward conformity or groupthink, it is important for individuals to retain their capacity to differentiate or distance themselves from the group in order to examine the group's product in a more objective light. At the same time, when trusted and valued colleagues work together, the product may become a more creative, innovative solution than any single individual may have been able to produce alone (Martin & Wight, 2008) (Figure 13.5).



FIGURE 13.5 Diplomacy is an example of advanced problem solving that requires interpersonal skills, collaboration, and an awareness of the rules and conditions impacting the political constraints on the partners. Hillary Clinton is shown here on a diplomatic mission to China.

Patterns of Change in Different Mental Abilities

There has been growing interest in assessing the extent of cognitive plasticity in later life. How readily can older adults improve their skills or learn new skills? This question seems to produce two different kinds of answers. One line of research finds evidence of DNA damage in the human brain with reduced capacity for repair beginning after about age 40. Damage of this kind has negative consequences for synaptic plasticity leading to declines in learning and memory. Certain brain areas are more vulnerable to the accumulated stressors of aging than others, and certain individuals are more vulnerable to the neurological diseases of aging than others (Erraji-Benchekroun et al., 2005; Lu et al., 2004; Mattson & Magnus, 2006).

In contrast, other researchers find that among people in their 60s and 70s, continuing improvement in performance is possible through training and practice. According to this view, much of the decline in cognitive performance is a result of limited educational opportunities and disuse. Following training, improvement has been observed in tasks involving memory, reasoning, perceptualmotor speed, and visual attention, as well as specific areas of expertise (Krampe & Charness, 2006; Yang, Krampe, & Baltes, 2006). In one longitudinal study, cognitive interventions resulted in a long-term benefit lasting from 7 to 14 years after the training (Schaie & Willis, 2010). One possible way to reconcile these opposing observations is to consider how different types of mental abilities might change with age.

Cognitive functioning involves the coordination of a variety of mental abilities that change as a result of experience and aging. John Horn (1979) proposed that the course of mental abilities across the life span is not uniform. Some areas are strengthened, and others decline. Horn suggested differentiating **crystallized intelligence** (*Gc*) and **fluid intelligence** (*Gf*). *Gc* is the ability to bring knowledge accumulated through past learning into play in appropriate situations. *Gf* is the ability to impose organization on information and generate new hypotheses. Both kinds of intelligence are required for optimal human functioning.

Gc and G can be identified as integrated structures in both early and later adulthood (McArdle, Ferrer-Caja, Hamagami, & Woodcock, 2002). However, Horn argued that these two kinds of thinking draw on somewhat different neurological and experiential sources. Gc reflects the consequences of life experiences within a society. Socialization in the family; exposure to the media; and participation in school, work, and community settings all emphasize the use and improvement of Gc. Gc increases with age, experience, and physical maturation, and remains at a high level of functioning throughout adulthood.

Gf is characteristic of what is meant by someone having common sense. Finding a general relationship and applying it without having been schooled in that problem-solving area

is an example of Gf, as is being able to approach new problems. lems logically, systematically, and quickly. Horn hypothesized that Gf depends more on the specific number of neurons available for its functioning than does Gc. Thus, neurological loss would be more damaging to Gf than to Gc. Subsequent research has supported the notion that neural efficiency, of ten recognized through changes in sensory functioning and speed of response, is closely related to fluid intelligence and shows an age-related decline, independent of disease (Baltes & Lindenberger, 1997). However, the extent of this decline may be related to the domain in which it is studied. For example, one study focused on men who had different levels of expertise in playing the game of Go. Measures of reasoning, memory, and cognitive speed were developed to apply specifically to that game. Older players generally showed the expected decline in deductive reasoning and cognitive speed. However, for those older men who were very expert players, no decline was observed (Masunaga & Horn, 2000). The implication is that in areas where there is highly developed expertise, aging is not necessarily accompanied by declines in either Gf or Gc.

In an analysis of the pattern of cognitive abilities across the life span, Tucker-Drob (2009) gathered data from a nationally tionally representative sample of over 6,000 individuals from ages 4 to 101. He looked at age groupings, comparing high and low scoring individuals at different ages, to address two basic questions: (1) How do various abilities change with age? (2) Do abilities cluster together (e.g., people who are good at visual-spatial thinking are also good at short-term memory), or is there differentiation among abilities with age (people can be very good in one area, and average or not so strong in another)? Seven broad areas of cognitive ability were measured. were measured: comprehension knowledge (similar to Gc), fluid reasoning (CC) fluid reasoning (Gf), visual-spatial thinking (e.g., identifying the pieces needed to complete a pattern), processing speed (e.g., quickly identifying two identical numbers in a row of numbers) characteristics and the following two identical numbers in a row of units of numbers), short-term memory (e.g., repeating a list of unrelated words). related words), long-term retrieval (e.g., naming as many examples as namidal for obexamples as possible from a specific category of places or objects), and and a when jects), and auditory processing (e.g., identifying a word when it is presented and its presented and i it is presented against a competing background of distracting sounds). As illustracting with sounds). As illustrated in Figure 13.6, all the abilities with the exception of C. the exception of *Gc* increased in childhood and adolescence, peaked in lateral in lateral in the peaked in lateral in lateral in the peaked in lateral in l peaked in later adolescence and early adulthood, and then declined through declined through adulthood and aging. In contrast, crystallized intelligence lized intelligence continued to increase throughout adult-hood, until about hood, until about age 60, and then declined slightly into later life. Among the later life. Among those of higher general intelligence, there was less commended. was less commonality in the scores across the various cognitive abilities suggested to the scores across the various comes tive abilities suggesting that with greater intelligence comes a greater capacity. a greater capacity to express certain abilities to a uniquely high level. Over the transfer of the suppression of the suppressi high level. Over the life span, the abilities were more differentiated; that is ferentiated; that is, people in middle adulthood and later life showed more variety: showed more variability in their cognitive capacities than did younger children and younger children and adolescents.

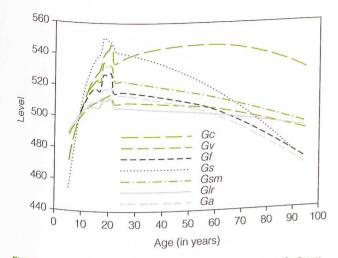


FIGURE 13.6 Changes in Cognitive Abilities over the Life Span Source: Tucker-Drob, 2009, Figure 5, Page 1107.

Legend: GC = comprehension knowledge; GV = visual spatial thinking; Gf = fluid reasoning; Gs = processing speed; Gsm = short term memory; Glr = long-term retrieval; Ga = auditory processing.

The Interaction of Heredity and Environment on Mental Functioning

For years, it was assumed that the environment played an increasingly major role in intellectual functioning over time. The accumulation of life experiences, education, and socialization were expected to introduce new bases of knowledge and problem-solving structures. Recent work suggests that the construct of the norm of reaction, introduced in Chapter 4 (The Period of Pregnancy and Prenatal Development), provides a more appropriate framework for understanding intelligence in adulthood. Genetic factors, early childhood family environment, and contemporary work and family environments all contribute to adult cognitive functioning (DeFrias & Schaie, 2001; Schaie & Zuo, 2001).

Research on identical and fraternal twins who were 80 years old or older found that the heritability of general cognitive ability was about 60% (McClearn et al., 1997). In other words, genetic factors substantially contribute to the stability of cognitive capacities over the life span. Hereditary factors related to health also impact cognitive functioning. For example, genetic factors that contribute to longevity are associated with resistance to disease and greater vitality in late life. Likewise, hereditary factors associated with diseases that have a late-life onset such as Parkinson's or Alzheimer's contribute to changes in cognitive functioning with age (Wilcox, Wilcox, Hsueh, & Suzuki 2006).

Evidence also supports the increasing role of the environment on cognitive functioning in late life. Long-term exposure to environmental toxins, poor nutrition, or social isolation can impair optimal cognitive abilities. The stimulating or stifling nature of the environment—including access to social support, the quality of health care, exposure disease, and opportunities for continuing involvement in

challenging work—transforms the genotype into an observed phenotype (Baird & Bergeman, 2011; Gottesman, 1997; Shanahan & Hofer, 2005).

The noted learning theorist B. F. Skinner (1983) described some possible environmental qualities that fail to reinforce systematic thinking or new ideas in aging people. Many people who live alone, for example, lack the diversity of social interaction that produces cognitive discrepancy and new concepts. Older people may be reinforced for talking about the past. Their recollections of early memories are interesting to students and younger colleagues. However, preoccupation with these reminiscences does not encourage thinking in new directions.

Skinner claimed that one is more likely to repeat oneself as one ages. He suggested that it may be important for older adults to move into new areas of work in order to prevent the repetition of old ideas. Skinner believed that it is possible to analyze how the quality of one's thinking is influenced by the circumstances of aging and also to identify interventions that will prevent the deterioration of cognitive abilities. These interventions include attempts to be sensitive to the signs of fatigue, planning for regular opportunities for stimulating verbal interactions with others, making careful outlines of written work to avoid distraction, and acting on ideas as they come to one's mind rather than counting on remembering them later.

Cognitive functioning in later adulthood is multidimensional, with substantial differences among individuals as well as differences among cognitive domains within the same person (McArdle et al., 2002). Adults experience tremendous growth in domain-specific areas of knowledge. Within these domains, many complex networks of information, strategies, and frameworks of meaning are elaborated that result in high-level, flexible functioning. The overall level of functioning is subject to environmental influences that promote particular specialization and cognitive organization based on the demands of the situation, the stresses and challenges of daily life, and the opportunities for mastery in particular areas of competence. At the same time, certain aspects of the processing base that are dependent on neural functioning may decline with age. This decline, however, is not always great. and studies have shown that capacities described as elements of fluid intelligence, such as speed of response, inductive reasoning, and spatial orientation, can benefit from targeted interventions (Saczynski, Willis, & Schaie, 2002; Yu, Ryan, Schaie, Willis, & Kolanowski, 2009).

On the basis of extensive longitudinal research, the following factors have been identified as effective for retaining a high level of cognitive functioning in later adulthood:

- 1. Absence of cardiovascular and other chronic diseases
- 2. Favorable environment linked to high socioeconomic status
- 3. Involvement in a complex and intellectually stimulating environment

- 4. A strong sense of control over one's work
- 5. Flexible personality style at midlife
- 6. High cognitive functioning of spouse
- 7. Maintenance of a high level of perceptual processing speed
- 8. Rating oneself as being satisfied with life accomplishments in midlife

This list illustrates the interplay of the biological, psychological, and social systems that contribute to cognitive functioning in the later years (Schaie, 1994; Schaie & Willis, 2010). Retaining one's intellectual vigor and problem-solving abilities is closely linked to the ability to cope with the inevitable role transitions that occur in later life.

FURTHER REFLECTION: Summarize the aspects of intellectual functioning that are most vulnerable to the effects of aging. What are some strategies that individuals can use to preserve and/or promote intellectual vigor?

Explain some ways that the social environment, including immediate family, friends, and community resources, may influence cognitive functioning in later life.

Redirecting Energy to New Roles and Activities

OBJECTIVE 3. Explain the process of redirecting energy to new roles and activities, with special focus on role gain, such as grandparenthood; role loss, such as widowhood; and new opportunities for leisure.

Role transition, role gain, and role loss occur in every period of the life span. In later adulthood, however, a convergence of role transitions is likely to lead to a revision of major life functions and a reformulation of one's lifestyle. Roles are lost through widowhood, retirement, and the death of friends. At the same time, new roles, such as grandparent, senior adviser, or community leader, require the formation of new patterns of behavior and relationships.

Grandparenthood

Grandparenthood is a new role that provides opportunities for psychosocial growth, both for individuals and for grandparent couples (Taubman-Ben-Ari, Findler, Ben Shlomo, 2013). Becoming a grandmother or grandfather brings a psychological transformation as well as a change in the family system. With the birth of a first grandchild, an adult may begin to reflect on one's own life phases of childhood, parenthood, and grandparenthood, revisiting earlier personal and interpersonal themes, and possibly revising earlier understandings of the parent—child relationship. Depending on one's level of engagement in the grandparent role, grandparenthood may require a renewal of parenting skills that have been stored away along with the bottle sterilizer and potty

chair. Grandparents begin to rekindle their acquaintance with the delights of childhood, including diapering the baby, telling fairy tales, taking trips to the zoo, or having the pleasure of small helping hands with baking, gardening, or carpentry. A person's parenting skills, patience, and knowledge come into play in a new configuration and may be more in demand in the grandparent role than they were in the parent role.

Grandparenting Styles. Grandparenthood involves a three-generational family system. The average age for becoming a grandparent is in the decade of the 50s, resulting in the potential of a 20- to 30-year relationship with one's grandchildren (Giarrusso, Silverstein, & Bengston, 1996). The enactment of the grandparent role depends on the timing of entry into this role and on the outlook or interest of each generation in having interactions and access to one another. The quality of the grandparent–grandchild relationship is negations and access to one and access to one is negations. gotiated through the adult child and is likely to change as the grandchildren mature (Smith & Drew, 2002). Across a variety of studies, certain common factors appear to predict feelings of closeness between grandchildren and their grandparents. These include frequent contact, grandparents' educational level yours level, younger age of the grandparent, and general health. Maternal grandmothers tend to be more involved in their grandchildren's lives than other grandparents (Danielsbacka & Tanskanen, 2012; Hakoyama & MaloneBeach, 2013).

People differ in the way they enact the grandparent role. In one of the first empirical studies of grandparenthood, Neugarten and Weinstein (1964) interviewed the grandparents in 70 middle-class families. The following five grandparenting styles were identified, each expressing a distinct interpretation of the role:

1. Formal. This type of grandparent was interested in the grandchildren but careful not to become involved in parenting them other than by occasional babysitting.

2. Fun seeker. This type of grandparent had informal, playful interactions with the grandchildren, enjoying mutually self-indulgent fun with them.

3. Surrogate parent. This style was especially likely for grandmothers who assumed major child care responsibilities when the mother worked outside the home.

4. Reservoir of family wisdom. This style was an authoritarian relationship in which a grandparent, usually the grandfather, dispensed skills and resources. Parents as well as grandchildren were subordinate to this older authority figure.

5. Distant figure. This type of grandparent appeared on birthdays and holidays but generally had little contact with the grandchildren.

More than 35 years later, Bengston (2001) offered a revised picture of the nature of multigenerational family bonds. His research was based on the Longitudinal Study of Generations (LSOG), begun in 1971, and continuing with data collection every 3 years. This study is based on more than

2,000 members of three-generational families, enabling the assessment of relationship characteristics between parents and their adult children, adult children and their children, and grandparents and grandchildren. The study highlights that the way a person enacts the grandparent role is not only a product of a personal definition of the role, but also a result of how the interconnected family members permit and support intergenerational interactions.

The LSOG identified five aspects of intergenerational solidarity—a construct that reflects closeness and commitment within the parent–child and grandparent–grandchild

relationships. These dimensions are as follows:

1. Affectional solidarity: Feelings of affection and emotional

2. Associational solidarity: Type and frequency of contact

3. Consensual solidarity: Agreement in opinions and expec-

4. Functional solidarity: Giving and receiving emotional and instrumental support

5. Structural solidarity: Geographic proximity that would allow for interaction

Based on these measured dimensions, five intergenerational family types were identified, which closely resemble the grandparenting roles characterized by Neugarten and Weinstein. The tight-knit families were emotionally close, lived near one another, interacted often, and both gave and received help. The sociable families were emotionally close and had frequent contact but did not offer much functional help. The intimate but distant families had high levels of agreement and felt emotionally close but did not interact often, lived far apart, and offered little functional help. The obligatory families lived near one another and had frequent contact but were not emotionally close and did not share much in the way of common opinions or expectations. Finally of nally, the detached families had low levels of all measures of solidarity.

Looking at the adult children's views of their parents, the sample was divided rather evenly across the five groups. Tight-knit and sociable families were each about 25% of the sample, obligatory and intimate but distant families were each about 16%, and detached families were about 17%. When ethnic groups were compared, European Americans or Hispanic cans were more likely than African Americans or Hispanic Americans to describe their relationship with their mother as obligatory or detached. Cultural dimensions including the emphasis on filial obligation, immigration or acculturation status, and the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages to one's ancestry all the symbolic meaning of linkages and the symbolic meaning of li try all influence the emphasis that various cultures place on the grant the the grandparent role (Ikels, 1998).

Two important ideas emerge from these descriptions. First, contemporary U.S. families are characterized by a variety of intergenerational relationships. No single type is normative. Second, about two thirds of these relationships can be characterized as showing high levels of affectional and

consensual solidarity. This has been observed in repeated measurements between 1971 and 1997. Thus, despite many changes in family characteristics, including decreased family size, increased involvement of mothers in the labor force, parental divorce, and increasing educational attainment of the parent generation, sentiments of intergenerational closeness are strong. This implies an important stabilizing role for the grandparent generation—a role that may become increasingly important for the large number of children growing up in single-parent and dual-earner parent families.

The Meaning of the Grandparent Role. Grandparenthood has a variety of personal meanings that contribute to the grandparent's overall sense of purpose and worth (Gattai & Musatti, 1999; Kivnick, 1988; Scraton & Holland, 2006). Grandchildren symbolize an extension of personal influence that will most assuredly persist well beyond the grandparent's death. To this extent, grandchildren may help older adults feel more comfortable about their own death. Grandchildren offer concrete evidence that some thread of their lives will persist into the future, giving a dimension of immortality to themselves and the family ancestry that they represent.

Active grandparenting can also promote a process of life review, stimulating a revisitation of one's own parenting role and possibly supporting the achievement of a psychosocial sense of integrity. In an interview of study, grandsons shared the ways that their grandfathers helped them make meaning of fatherhood. In these conversations, themes included consciousness of the family's lineage, a sense of who they are and what they do as fathers, ideas about multigenerational family bonds, and intergenerational and intragenerational improvement (Bates & Goodsell, 2013). In all of these ways, grandparents transmit their generative concern.

In an analysis of the sources of vitality in later life, Erikson, Erikson, and Kivnick (1986) found that relationships with grandchildren played the following critical role:

The major involvement that uniformly makes life worth living is the thought of and participation in their relationships with children and grandchildren. Their pride in their own achievement in having brought up their young, through thick and thin, and their satisfaction in the way these young have developed gives them, for the most part, deep gratification. With the arrival of grandchildren, they may identify themselves as ancestors, graduated to venerability. Listen to their voices as they trace their own ancestry and that of their children's traits: "She has her mother's fire, that first girl of ours. She has more energy and more projects than anyone. Come to think of it, my mother had that fire, too. And my wife's two grandmothers." "My son is a perfectionist, like me." "The kids are innately smart, like their father." (p. 326)

Grandchildren also stimulate older adults' thoughts about time, the changing of cultural norms across generations, and the patterning of history. In relating to their grandchildren as they grow up, grandparents discover elements of the culture that remain stable. Some familiar stories and songs retain their appeal from generation to generation. Certain toys, games, and preoccupations of children of the current generation are remembered by grandparents from their own childhood. Grandparents may become aware of changes in the culture that are reflected in new childrearing practices; new equipment, toys, games, and forms of entertainment; and new expectations for children's behavior at each life stage.

For example, when grandmothers were interviewed about their experiences of breastfeeding, it became clear that though many women wanted to be helpful to their adult daughters, they came from a generation where breastfeeding was not typically practiced. Some women had very negative memories of how their own mothers and grandmothers viewed breastfeeding as vulgar, unsanitary, or lower class. Others recalled resisting the negative pressure and went ahead with breastfeeding. These personal experiences were very salient as they tried to support and encourage their own daughters in an era when breastfeeding was much more highly valued (Grassley & Eschiti, 2011).

By maintaining communication with their grandchildren, older adults keep abreast of the continuities and changes in their culture that are reflected in the experiences of childhood. Through their grandchildren, adults avoid a sense of alienation from the contemporary world. The more involved grandparents are in the daily care and routines of their grandchildren, the more central they become to a child's

sense of security and well-being. This kind of importance is a benefit not only to the child, but also to the older adult's assessment of personal worth. Over time, the grandparengrandchild relationship has the potential for becoming increasingly meaningful as grandchildren mature into adulthood. This relationship, typically sustained through mutual personal choice, combines love, respect, mutual support, and a unique form of shared as well as diverging history (Crosnoe & Elder, 2002a; Kemp, 2005).

Some adults interpret the role of grandparent as an opportunity to pass on to their grandchildren the wisdom and cultural heritage of their ancestry. Through interactions with their grandchildren, grandparents can transmit cultural values, providing insights that they hope will guide and protect future generations and preserve something of the cultural heritage that they treasure from their own past (Thompson, Cameron, ST Finles T. 2013) In & Fuller-Thompson, 2013; Quéniart & Charpentier, 2013). In the process of fulfilling this role, older adults must try to find meaning in their experiences and communicate it in meaning ful ways to the ful ways to their grandchildren. Grandparents select many avenues to educate the select many avenues the select many avenues to educate the select many aven nues to educate their grandchildren, influencing their thoughts and fantasies. Storytelling, special trips, long walks, attending religious comit religious services, and working on special projects are all activities that allows. ities that allow grandparents moments of intimacy with their grandchildren. Educating one's grandchildren involves a deep sense of inverte sense of investment in experiences and ideals that one believes to be central to a fruitful life (Figure 13.7).

The many ways in which grandchildren can contribute to an adult's feelings of well-being have been replicated in studies conducted in European countries (Smith, 1991).

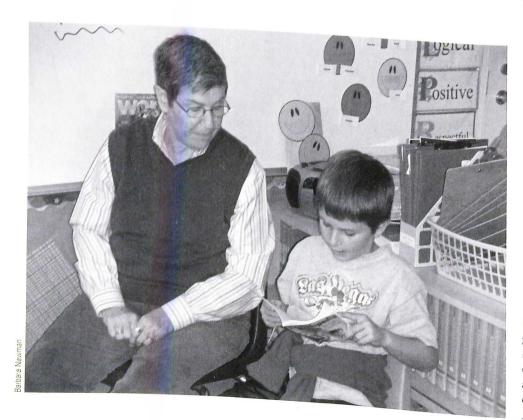


FIGURE 13.7 Jakob invited his grandmother to come to school with him. First she read a story to the class; then Jakob read one. Reading aloud is one of the things they have enjoyed doing together ever since Jakob was small.

A German grandmother addressed the meaning that her grandson gave to her life:

Yes, he is the most important thing in my life, because I have nothing else at the moment. They all say I spoil him. I don't know. Mama is a little bit strict, and so I always am careful not to spoil him too much. And it is actually Carsten this and Carsten that; he means so much to me. Since I am a pensioner, I have time for him. (Sticker, 1991, p. 39)

Grandparent Caregivers. Roughly 7 million children, or 10% of U.S. children under the age of 18, live in households with at least one grandparent present. In comparison to other ethnic groups, African American and Asian American children are more likely than Anglo or Latino children to be living in households with one or both grandparents. For about one third of these children, their parents are the primary householders and one or more grandparents live at home with them (U.S. Census Bureau, 2013b). These grandparents are likely benefiting from some type of support or care from their adult children. They may also provide direct and indirect support for their grandchildren, including being home when the children dren return from school, taking care of the children when they are ill and the parents have to work, and taking over household tasks so that parents and children can have time together.

In the other two thirds of this group, the grandparents are the householders, suggesting that many grandparents are using their resources to help support their adult children and grandchildren. About 1.5 million children live with their grandparents with no parents in the household. These children dren are more likely to be living in poverty, without health insurance, and receiving some type of public assistance than are children who live in their grandparents' household with their own parents present (Fields, 2003). Among grandparents of a setimated ents who have custody of their grandchildren, an estimated 40% cared for their grandchildren for 5 years or more (Abel, 2010). In other words, this is a long-term commitment when the adult children are unable to parent.

Many grandparents play an especially important role in Supporting the development of their grandchildren during times. times of family stress (Goodman, 2003; Mills, Gomez-Smith, DeLeon, 2005; Villar, Celdrán, & Triadó, 2012). In contemporarios temporary American society, one can view grandparents as a potential resource that is called into active duty when certain difficulties arise for parents. In cases of parental divorce, grandparents often assume a central role in the lives of young children. Some custodial mothers move back home with a with their parents. Grandparents often assume more child care responsibilities during this time.

Grandparents also play a key role when their young, unmarried daughters become pregnant. The pattern of unmarried to ried teen mothers living with parents is especially common in Ar. in African American families (Minkler & Fuller-Thomson, 2005) 2005). African American grandmothers are likely to perceive them. themselves and to be perceived by their daughters as ac-



FIGURE 13.8 Increasingly, more grandparents fall into the involved category, taking on parenting responsibilities for their grandchildren on a daily basis.

tively involved in childrearing. Among young adult African American parents, the grandmother is most often viewed as the person to count on for child care assistance, advice, and emotional support (Hunter, 1997). These grandmothers may be young themselves, just entering middle adulthood, when they assume the grandparent role. The presence of grandmothers appears to affect the family atmosphere as well as the childrearing environment. Having a grandmother in the home allows the mother to be more flexible in managing daily demands, thereby reducing much of the stress that characterizes single-parent families.

Maternal employment is another condition in which grandparents are likely to give direct support. Increasingly, parents of young children call on grandparents to provide all or part of daily child care (Brandon, 2000; Goodfellow & Laverty, 2003). These grandparents are intimately involved in the lives of their grandchildren, directing significant energy, talent, and time to this role (Figure 13.8). For more information on resources for grandparents who are raising their grandchildren, visit the government website USA.gov, topic "grandparents."

Grandparents who take on primary responsibility for their grandchildren face challenges as well as experiencing satisfactions in this off-time role. Grandparents who are raising their grandchildren are likely to have fewer financial resources than other families. Many grandparents are working as well as caring for their children. They may have to support their grandchildren with little access to the social and financial services that would be available to other lowincome families or foster families because they do not have legal guardianship of their grandchildren.

Depending on their age and their own health, grandparent caregivers may feel they have less energy and that they are less effective when it comes to discipline strategies. In some instances, they face conflicts and ambiguities with respect to the relationship with their adult children that create a negative interpersonal environment (Barnett, Mills-Koonce,



HUMAN DEVELOPMENT AND DIVERSITY

Intergenerational Relationships in Various Ethnic Groups

Grandparents play a variety of roles in U.S. families, and these roles can vary from remote and minimally involved to actively engaged. A cross-cultural perspective highlights the qualitatively different ways that grandparents are viewed in ethnic groups that emerge from a more collectivist orientation, and the central role that grandparents play in the socialization process and family support systems. Although the majority of U.S. families do not have three generations living together in one household, the presence of grandparents living with their grandchildren is more than twice as likely in African American, Asian American, and Hispanic American families than in European American families. This may, in part, be a result of the financial pressures on ethnic families, but it is also a result of a more collectivist outlook in which family and kinship relationships are central to the value system and priorities of many ethnic groups.

In an interview study of African Americans, Latin Americans, Filipino Americans, and Cambodian Americans, older adults (ages 50 and up) described the importance of mutual assistance and its critical role in fostering a sense of continuity across the generations. This can be especially important

for immigrant families. Older adults provide care, guidance, and instrumental assistance for families, especially when there are young children in the home and the parents have to work (Becker et al., 2003). Immigrant families from collectivist cultures express a strong sense of family obligation which has an intergenerational pull. Children and adolescents strive to respect and please their adult family members; and aging adults offer instrumental support, guidance, and affection to their children and grandchildren (Merz, Ozeke-Kocabaas, Oort, & Schuengel, 2009).

In many ethnic groups, the grandparent generation is highly revered. In others, the intimacy of the family's daily concerns extends to grandparents, aunts and uncles, and other kin (Burnett, 1999; Lockery, 1991). The following brief descriptions suggest the outlook of four U.S. ethnic groups on intergenerational relations. Each has a slightly different flavor (Contreras et al., 1999; DeGenova, 1997; King et al., 2006).

African Americans value strong kinship bonds and a supportive extended family system. Caregiving responsibilities are shared among kin and non-kin as needed. Grandparents tend

to support working parents by providing care to young children and are cared for in return. Their active role in the family often contributes a strong moral and religious strength and provides emotional support to the parent generation that reduces stress in the household (Pellebon, 2012).

Chinese Americans place a strong value on bringing honor to the family. Filial piety is one of the highest values, evidenced in a great sense of obligation, respect, and responsibility for parents. Contemporary Chinese American adolescents place a great deal of importance on treating their elders with respect, and spend more time assisting and being with their parents and grandparents than their Anglo age-mates (Wong, 2012). (Figure 13.9)

Japanese American families value and promote a high degree of interdependence. The Japanese children feel a strong motivation to seek their parents' approval for their own self-esteem, and Japanese parents' sense of well-being depends heavily on their children's achievements. The intergenerational transmission of this mutual interdependence results in a deep sense of obligation for the care of aging parents. Retired parents may live with their adult child who

Gustafsson, & Cox, 2012). Caregiver stress is associated with poverty, absence of social services or financial support for child care, loss of freedom, and lack of involvement with friends and interests outside their family circle. When the grandchildren have been exposed to chaotic or neglectful parenting, they may have physical and mental health problems that place additional strain on grandparent caregivers (Dunifon, 2013; Longoria, 2010).

On the other hand, grandparent caregivers perceive that are expressing that the care of th they are expressing their generative motives in caring for their grandchildren. their grandchildren. They are in a unique position to form a close emotional box close emotional bond with their grandchildren, helping their grandchildren to company the grandchildren to company their gra grandchildren to cope during periods of family disruption and preserving kinet. and preserving kinship and community ties (Bullock, 2005; Dolbin-MacNab & R. 2005) Dolbin-MacNab & Keiley, 2006; Landry-Meyer, Gerard, & Guzell, 2005: Minkley 2006; Landry-Meyer, Gerard, & Guzell, & Gu Guzell, 2005; Minkler & Fuller-Thomson, 2005).



FIGURE 13.9 Chinese American families continue to feel closeness across generations. These families are they enjoy a family members obviously have a strong sense of affection for one another as they enjoy a relaxing day in the park.

takes on the leadership role for the family (Sakamoto, Kim, & Takei, 2012).

Puerto Rican and many other Latino cultures embrace the value of familialism, a sense of closeness and interdependence among members of the nuclear and extended family, which includes a deep respect for elders. Family members serve many functions, including Socialization, protection, companionship, social and business contacts, and

economic support. Puerto Rican families create a formal intergenerational link through the role of the compadrazgo, or godparent, who has a responsibility for the child's well-being through life (Negroni, 2012)

Critical Thinking Questions

1. If you have a living grandparent, describe your relationship. Summarize the impact that your grandparents had on your development at different stages.

How has your ethnic or religious group shaped the way you view your aging family members and the quality of your relationship with them?

- 2. Summarize the idea of different styles of grandparenting. How do you think your grandparents conceptualize their role? Talk to them and ask if they have a sense of the kind of grandparent they are and how they would like to be. How does their sense of themselves compare with how you think of them in their grandparent role? What are the implications of the similarities and differences in these conceptualizations?
- 3. For each American ethnic group discussed above, consider some likely tensions between the grandparent and the grandchild generation. Speculate about problems that might arise in each family if the adult children and the grandchildren identify with American individualistic values and grandparents identify with more collectivist values.
- 4. Imagine yourself as a grandparent. How would you conceptualize your role as a parent of adult children? As a grandparent? Based on the information presented in the chapter, what kind of grandparent would you like to be? Why? How do you think having a grandchild would influence your psychosocial development?

Bill and Sharon Hicks were interviewed about the experiences of raising their granddaughter, Brittany:

"It has not been easy. Sometimes we feel a little bitter because our anticipated freedom has been taken away." But when asked if he and his wife would open their home to Brittany again, he answered: "Positively, yes! Brittany has been a shining light in our lives. She

has forced us to stay young at heart. And that's not such a bad thing to happen." (Abel, 2010)

Loss of Grandparent-Grandchild Contact. In contrast to the picture of an increasing role for grandparents in caring for their grandchildren, a growing number of grandparents are losing contact with their grandchildren as a result of parental divorce, conflict between the parents, death of an adult child, or adoption of a grandchild after remarriage. Disruption in the grandparent-grandchild relationship is especially great when the grandparent's adult child is not named as the custodial parent after a divorce. In the 1980s, most states created statutes allowing grandparents to file for a legal right to enforced visitation with their grandchildren, even over parental objections. The laws differ from state to state, establishing different conditions under which grandparents may be granted visitation. In 1998, a law was passed to ensure that grandparents who have visitation rights in one state may visit their grandchildren in any state. However, in some states, earlier visitation laws have been overturned, finding that they interfere with parental rights regarding the rearing of their children. Legal recourse is not very effective given that it tends to increase the hostilities between grandparents and their adult children, making normalized visitation even less likely (Drew & Smith, 1999; Drew & Smith, 2002). For more information about grandparent visitation rights, visit the website of the Foundation for Grandparenting (www.grandparenting.org/) (Kornhaber, 2004).

Widowhood

Among those ages 65 to 74, 6% of men and 22% of women describe their marital status as widowed; by the ages 75–84 these rates increase to 14% for men and 46% for women (U.S. Bureau of the Census, 2013b, Table A1). For many adults, the psychosocial consequences of widow-hood include intense emotional grief, loss of social and emotional support, and loss of material and instrumental support. Emotions of depression, anger, shock, and overall grief as well as yearning for the deceased partner are observed 6 and 18 months after the loss (Carr, House, Wortman, Neese, & Kessler, 2001). Most older widowers remarry, whereas the majority of widows remain unmarried and live alone.

Widows. Widows must learn to function socially and in their own households without the presence of a marriage partner. Adaptation to this role requires resilience, creative problem solving, and a strong belief in one's personal worth. A woman who is widowed at age 60 can expect more than 20 years of life in which to create a new, single head-of-household lifestyle.

In addition to the bereavement itself, a number of stressors challenge the coping resources of widows. Studies of economic changes among widows show that many experience increased expenses just prior to widowhood, as well as marked decreases in their financial resources for years following widowhood (Fan & Zick, 2006; Gillen & Kim, 2009). Women who have never participated in the labor market during their married years may have no marketable skills and feel insecure about entering the labor force. They may be uninformed or uneasy about using social service agencies to meet their needs. For most women, the loss of their husband is most keenly felt as a loss of emotional support, as expressed in the following example: "He is most apt to be mentioned as the person the widow most enjoyed being with, who made her feel important and secure" (Lopata, 1978, p. 221). The transition to widowhood may be especially difficult for those who have been caring for an ill partner, hoping for recovery yet observing constant decline (Bass & Bowman, 1990).

Despite the extreme pain and prolonged grief that accompany widowhood, most women cope with it successfully fully. In a study of women ages 60 through 98 who had recently become widows, there was a high degree of selfsufficiency (O'Bryant & Morgan, 1990). The majority of respondents said they performed a variety of daily tasks, including cluding transportation, housekeeping, shopping, preparing meals, personal care and hygiene, financial and other decisions and sions, and providing financial support, without help from others. Manual others. More than 30% said they managed their own home repairs, yard work, and legal questions without help. From this study, a picture emerges of older, widowed women functioning functioning at a high level of independence and autonomy yet benefiting from assistance from others, especially their children, in specific domains, depending on where help is needed. Research from other national samples in the United States, Australia, and Hong Kong confirm this picture. Resilience which ience, which may be expressed in a variety of ways, including recovery ing recovery of positive mood, engaging in new activities, or experiencing experiencing new levels of efficacy, are commonly observed in the months. in the months and years following widowhood. Women report that wild a life event, port that widowhood is a very difficult negative life event, but that after but that after a period of bereavement they find themselves making a chiff. making a shift to a new, positive phase of adult life in which they both rethey both receive and provide social support to others (Cheng & Cheng (Cheng & Chan, 2006; Dolbin-MacNab & Keiley, 2006; Dutton Ziscol, 2006; Dolbin-MacNab & Keiley, 2000; Dutton Zisook, 2005; Feldman, Byles, & Beaumont, 2000; Ha, Carr Lie, 6, 200 Ha, Carr, Utz, & Nesse, 2006).

Widows are likely to find support from their siblings, ildren, and friends children, and friends. Over time, a widow's siblings, especially her sisters cially her sisters, may become a key source of emotional sup-port and direct. port and direct, instrumental assistance with home repairs and shopping. and shopping. In an exploratory analysis of the responses of widows in a of widows in a support-group discussion, comments about the positive and rethe positive and negative contributions of their social support network port network were analyzed (Morgan, 1989). The widows described their parts described their nonfamily, reciprocal friendship relationships as somewhat ships as somewhat more positive than their family relationships. In many ships. In many cases, widows found that as a result of their own sense of family negations. own sense of family obligation, they were drawn into negative events occurring the sense of the tive events occurring in their families, especially divorce, illness, and the death of their families, especially divorce negative ness, and the death of other families, especially divolveness, and the death of other family members. These negative events added to the contract of the second sec events added to their distress and prevented them from receiving the support ceiving the support they felt they needed at the time of their own loss.

The analysis also concluded that the most positive form of immediate support from family, especially children, was a



FIGURE 13.10 Two old friends provide social support for each other. After they became widows, they moved into an apartment together to help manage costs. They're re-Viewing a box of bills and receipts as they get ready to do their income taxes. This also helps them reminisce about what they did during the past year.

willingness to accept the widow's feelings of grief and to talk openly about their father. Social support from friends included a similar willingness to allow the widow to take her time in finding a new identity. These women did not want to be forced to mourn too quickly or be told how strong they were and how well they were handling their grief: "The fact that you're using the strength that you have, just to cope, and to stay alive (another voice: "to survive") is a big job and they don't recognize that, you know it makes you angry" (Morgan, 1989, p. 105). The widows wanted to have their anger, grief, and the disruption in their lives acknowledged and accepted by their friends. In this way, they felt they could begin to come to terms with their loss and build a new life (Figure 13.10).

Widowers. Widowers suffer greater increases in depressions of the side with the side sion following the loss of their spouses than do widows (Lee, DeM. Wortman, & DeMaris, Bavin, & Sullivan, 2001; Umberson, Wortman, & Kennya Bayin, & Sullivan, 2001; Umberson, Wortman, & Kennya Bayin, & Sullivan, 2001; Umberson, Wortman, & Kennya Baying at hotorosex-Kessler, 1992). Perhaps because men in traditional heterosexwal marriages rely heavily on their wives for both the instrumental support of managing daily household tasks and the emotional and social support of companionship and social activity, their lives are more intensely disrupted when their wives die. This may result in an immediate search for a new marriage partner. In a 2-year follow-up study of dating and temarriage after widowhood, 61% of men and 19% of women had had remarried or were in a new romantic relationship by 25 months after the death of their spouses. For men, a higher monthly income and level of education were the best predictors of the state of the tors of being remarried. For both men and women, involvement in a new relationship was positively associated with psychological well-being and interpreted as a positive coping strate. strategy (Schneider, Sledge, Shuchter, & Zisook, 1996).

Widowhood also results in increased death rates among surviving spouses. In a longitudinal study of married couples in the United States, the death of one spouse from any of a variety of causes, such as cancers, infections, and cardiovascular diseases, was associated with an increased risk of death for the surviving spouse (Elwert & Christakis, 2008). The process of bereavement seems to accelerate the course of preexisting diseases and leads to increased rates of suicides, accidents, and alcohol-related deaths. To some degree, the relationship of widowhood to mortality is tied to the well-known health effects of marriage. Depending upon the way that spouses support each other's health, the loss of a spouse may result in less effective adherence to medical care, less adequate diet, and less social interaction and social stimulation, all of which are known to support physical and mental health in later life (Elwert & Christakis, 2006). Most adults cope successfully with widowhood, either by forming a new, intimate relationship or establishing a new, independent lifestyle; however, others find it difficult to recover from the impact of their loss. The Applying Theory and Research to Life box Patterns of Adaptation During Widowhood illustrates the variety of patterns of adaptation to widowhood.

Leisure Activities

Whereas widowhood brings role loss, one way of coping is to become more involved in new kinds of activities and interests. As the role responsibilities of parenthood and employment decrease, older adults have more time and resources to devote to leisure activities. Involvement in leisure activities is associated with higher levels of well-being and lower stress. In a study of adaptation to widowhood, such activities were



APPLYING THEORY AND RESEARCH TO LIFE

Patterns of Adaptation During Widowhood

In a prospective, longitudinal study of widowhood, researchers surveyed married couples where the husband was 65 years old or older. Following the death of one partner, the surviving spouse was surveyed again at 6 and 18 months following the loss (Bonanno, Wortman, & Nesse, 2004). Five patterns of adjustment following the death of a spouse were described:

- 1. Common grief
- 2. Chronic grief
- 3. Chronic depression
- Depression followed by improvement
- 5. Resilience

The most common patterns, for 56% of the sample, were common grief and resilience. These two groups had no signs of depression before the loss. The common grief group had evidence of depression at 6 months but returned to pre-loss levels at 18 months. The resilient group had low levels of depression even at 6 months following loss. Although these groups experienced fond memories and moments of yearning for their partners, they did not experience long-term grief at 18 months. A second, unexpected pattern, characteristic of about 10% of the sample, was a group that showed a change for the

better following widowhood. The participants in this group had high levels of depression before the loss and lower levels at 6 and 18 months following the loss. Participants in this group were in unhappy marriages, and many of them had been caring for chronically ill partners. They reported being more confident and having found a new sense of personal strength in coping with the events of widowhood.

Two other groups were described as chronically grieving and chronically depressed. The chronically grieving group was not depressed before the death of their spouse but continued to show high levels of depression at 6 and 18 months following the death. These widows and widowers were often coping with the sudden loss of a healthy spouse and had trouble finding meaning in the death of their partners. The chronically depressed were already depressed prior to the death of their spouse. The death added a new stressor that increased their levels of depression at 6 and 18 months after the loss.

Subsequent studies of the transition from caregiver to widow support the idea that the conditions that surround the caregiving role and the quality of the marital bond, as well as the physical and mental

health of the surviving spouse, will influence the coping process (Pruchno, Cartwright, & Wilson-Genderson, 2009). The majority of adults are able to cope effectively with the loss of a spouse. An understanding of the context of the loss and the emotional well-being of the surviving spouse before the loss are important factors that influence the bereavement process. Those striving to support widows and widowers need to be mindful of these differences in order to offer appropriate interventions.

Critical Thinking Questions

- 1. Summarize the contexts of widowhood that might determine how a person adjusts to loss.
- 2. Imagine that a person has spent several years caring for a dying spouse. Describe the aspects of role loss that might result upon the death of the spouse.
- 3. Consider the case of couples who have been happily married for 40 years or more. List the challenges of widowhood when one spouse dies. Identify the resources that might be useful to support adjustment under these conditions.
- 4. Explain how widowhood might influence the resolution of the psychosocial crisis of integrity versus despair for the surviving spouse, either positively or negatively.

most commonly social activities with family and friends. Recent widows and widowers who were more involved in leisure activities had lower levels of stress than those who did not participate. This does not mean that they were less bereaved, but perhaps social activities helped them to feel less isolated and gave them a sense of continuing social value (Patterson, 1996).

Different types of leisure activities are available that meet a variety of psychosocial needs. Table 13.1 shows the percentage of older adults, ages 55 to 64, 65 to 74, and 75 and older, who participated in five types of leisure activities at least once in the prior year: exercise programs, playing sports, charity work, going to the movies, and gardening (U.S. Census Bureau, 2012i, Table 1202). Gardening to the list in each of these age groups, with relatively ference between those 55 to 64 and those 65 to 74.

A range of needs may be met through leisure pursuits, including companionship and social integration, experiencing something new and unusual, opportunities to enhance competence and mastery, finding solitude and relaxation,

TABLE 13.1 Participation in Various Leisure Activities by Age, 2008

AGE PROGRAM	ACTIVITY* (% PARTICIPATION)								
	EXERCISE	PLAY SPORTS	CHARITY WORK	GO TO MOVIES	GARDENING				
		17	33	46	52				
55 to 64	52	12	30	32	55				
65 to 74	48	13		19	41				
75 and older	30	6	23	19	41				

^{*}Respondent has participated in the activity at least once in the last 12 months

Source: U.S. Census Bureau, Statistical Abstract of the United States, 2012i. Table No. 1202.

Opportunities for creativity and self-expression, opportunities for creativity and self-expression, ties for intellectual stimulation, and opportunities for community service.

Gardening. There is growing awareness of the health and therapeutic value of gardening. Gardening provides regular Physical activity, including stretching, coordination, and Weight resistance. Depending on the size and demands of the garden, gardening can help an older adult meet the recommendations for half an hour of physical activity each day. Gardening requires planning, research, and problem solving. Preparing a garden, evaluating plants and their care, and monitoring their health and growth are natural forms of cognitive stimulation which can be enhanced with classes, books and magazines, and online resources. Gardening is a stress-reducing activity, especially when approached in an appropriate pace and with tools that are well adapted to one's physical capacities. The sensory components of the garden, including smells, colors, and textures, can have a Soothing, reassuring impact. Gardening can be an expression of sion of generative motives, providing a lasting contribution to the to the community through the planting of public gardens or the enhancement of public spaces. Gardens are increasingly. ingly incorporated into senior centers and nursing homes to encourage cognitive, sensory, and motor activity and to Provide a positive opportunity for exercising mastery. Master Carl positive opportunity for exercising mastery. ter Gardener programs are sponsored by many universities where adult volunteers learn about up-to-date researchbased information on horticulture to share with home gardeners and implement in the beautification of their com-Inunities (Morgan, 2005).

Volunteerism. Volunteerism is a salient area for activity and a salient area for a salient area for activity and a salient area for a salient area ity among older adults. In the United States, among those 65 and older, about 25% volunteer, giving a median of 90 hours hours annually of unpaid time (U.S. Bureau of Labor Statistics, 2015) tics, 2013d). Especially in the year or two following retirements. ment, individuals who are not already involved in volunteer services. service are especially open to considering it (Caro & Bass, 1997) 1997). Volunteering provides a meaningful structure to daily is daily life, especially when other significant work and family

roles are becoming less demanding. High rates of volunteering are associated with increases in life satisfaction and improved perceptions of physical health (Van Willigen, 2000). At the same time, certain types of volunteer work have been shown to have a positive impact on cognitive complexity and memory functions. The opportunities to assume new responsibilities and learn new skills are two of the rewards of volunteering in later adulthood (Newman, Karip, & Faux, 1995).

Johns Hopkins University researchers compared the health of volunteer tutors in Baltimore's public schools with that of nonvolunteers, ages 59 to 86 (Fried, Carlson, Freedman et al., 2004). The following benefits were observed:

- Sixty-three percent of volunteers had increased their activity level, compared with 43% of nonvolunteers.
- · Volunteers boosted their weekly calorie burn by 25 percent.
- Volunteers reduced TV-watching time 4 percent whereas nonvolunteers increased theirs by 18%.
- · Their networks of friends expanded, whereas nonvolunteers' social circles shrank.
- Volunteers perceived that they were making a difference: The students they tutored became better readers—and had fewer behavior problems at school.

Expanded research built upon this study through collaboration with Experience Corps, a high-intensity volunteer program. Older adults were trained as volunteers to tutor elementary school children. The program combined goals to support health among older adults and reading competence among children. Studies of the health impact of this program on older adults across 17 national sites found evidence of significant health benefits and reduced symptoms of depression among volunteers (Hong & Morrow-Howell, 2010).

Exercise. Physical exercise is becoming a focus of leisure activity for increasing numbers of older adults because the benefits are linked to better health, positive self-esteem, and a new zest for life. Almost 50% of adults ages 65 to 74 reported being involved in an exercise program during the prior 12 months. Research suggests a relationship between physical fitness—especially a regular pattern of aerobic exercise—and the improvement of certain visualspatial cognitive abilities that typically decline with age. In the past, professionals were reluctant to encourage vigorous activity for older adults. They believed that a person who was unaccustomed to active physical exercise might be harmed by it. However, research on exercise in adulthood suggests that adults profit from a program of exercise, and that through systematic exercise, some of the negative consequences of a sedentary lifestyle can be reversed (Riebe, Burbank, & Garber, 2002). For example, Hopkins and her associates described a program in which women ages 57 to 77 participated in a low-impact aerobic dance class three times a week for 12 weeks. The program included stretching, walking, dance movements, large arm movements, and major leg muscle movement. After 12 weeks, the group showed improvement in cardiorespiratory endurance (walking half a mile as fast as possible), flexibility, muscle strength, body agility, and balance. A comparison group of women who did not participate showed stability or decline in all of these areas (Hopkins, Murrah, Hoeger, & Rhodes, 1990).

Physical exercise has been identified as a component of optimal aging. Regular participation in moderate activity, such as walking, biking, or gardening, for 30 minutes a day may provide protection from certain chronic diseases and ease the discomfort of arthritis (DiPietro, 2001). Exercise is associated with increased muscle tone, strength, and endurance, which build confidence about one's body movement, coordination, and stamina. Exercise also increases perceptions of self-control and self-efficacy in meeting one's own needs. As a result, people who exercise tend to have a generally more positive self-evaluation and higher levels of self-confidence than their inactive peers (Clark, Long, & Schiffman, 1999; Fontane, 1996). Fitness training has also been shown to contribute to improved cognitive functioning in older adults, especially in the area of executive control processes such as decision making, problem solving, and emotional regulation (Kramer & Willis, 2002).

Redirection of energy to new roles in later adulthood requires a degree of flexibility and resilience that often goes unnoticed in observations of older adults. Try to imagine what life might be like for you 30 or 40 years from now. Will you be prepared to embrace the technology, lifestyle, or age -role expectations that you will encounter during your own later adulthood? We are impressed by how readily most older adults adapt to new roles, especially those of retiree and widow, for which there is little early preparation or social reward.

FURTHER REFLECTION: Describe some of the challenges a person might face in redirecting energy to new roles in later adulthood. What might prevent a person from giving up earlier identities or engaging in new activities?

Speculate about the relationship between life satisfaction and redirecting energy to new roles. If you are satisfied with your life, why would you want to redirect energy to new roles? If you experience significant role loss, will it undermine life satisfaction?

Developing a Point of View About Death

OBJECTIVE 4. Summarize the development of a point of view about death.

During later adulthood, it is inevitable that serious, possibly frightening, preoccupations about death will fill the individual's thought uals thoughts. In middle adulthood, most people experience the death of their parents. During later adulthood, one's peers, including sitting including siblings and spouses, may die. These deaths are sources of psychological stress and require the emotional process of grief and mourning and the cognitive strain of trying to accept any analysis to accept or understand them. At the same time, these deaths stimulate a result of the same time, these deaths stimulate a result of the same time, these deaths stimulate a result of the same time, these deaths stimulate a result of the same time, these deaths stimulate a result of the same time, these deaths stimulates a result of the same time, th stimulate a more immediate recognition of one's own mortality.

Changing Perspectives About Death

The development of a perspective on death is a continuous process that begins in childhood and is not fully resolved until later adult. til later adulthood. The earliest concern with death, which occurs during toddlerhood, reflects an inability to conceive of an irreversible of an irreversible state of lifelessness. Toddlers are likely to think that to think that a person may be dead at one moment and "undeaded" the "undeaded" the next. By middle school age, children have a rather realistic a rather realistic concept of death, but they are unlikely to relate that concept relate that concept to themselves or to others close to them (Kastenbaum, 2006) (Kastenbaum, 2000). Thoughts about one's death and the formulation of formulation of a conceptualization of death become increasingly well arrical and a conceptualization of death become ingly well articulated from early through later adolescence (Noppe & Noppe 1 and 1 a (Noppe & Noppe, 1997). In the process of forming a personal identity your sonal identity, young people ask new questions about mortality, the meaning of the ity, the meaning of life, and the possibility of life after death.

During middle, and the possibility of life after that they

During middle adulthood, people recognize that they ve already lived. have already lived more than half of their lives. There is more time in the pact of time in the past than in the future. The issue of death becomes increasing. comes increasingly concrete as parents and older relatives die. At the same time die. At the same time, adults begin to have a larger impact on their families on their families and communities. Increased feelings of effectiveness and are the effectiveness and vitality lessen the threat of death. The degree to which indicate the state of death. gree to which individuals gain satisfaction from their own contributions to fee contributions to future generations determines the extent of their anxiety about their anxiety about death during this stage. The achievement of a sense of generations of a sense of generativity usually allows adults to accept that their impact will accept that their impact will continue to be felt even after death.

Ideally, during later adulthood, ego concerns about crease. Individuals decrease. Individuals come to accept their own lives as they have lived them and the have lived them and begin to see death as a natural part of the life span. Death the life span. Death no longer poses a threat to personal

value, the potential for accomplishment, or the desire to influence the lives of others. As a result of having accepted one's life, one can accept its end without discouragement. As the case of Morrie Schwartz suggests, coming to terms with death does not imply a desire for, but an acceptance of the fact of death. Along with this acceptance may come a greater appreciation for life itself. It takes great courage to face the fact of one's own death and, at the same time, to live out the days of one's life with optimism and enthusiasm. Older adults who achieve this degree of acceptance of their death appreciate that the usefulness of their contributions does not necessarily depend on their physical presence (Kübler-Ross, 1969, 1972).

The notion that one's understanding of the concept of death changes with development is complemented by the idea that people go through a process in coming to terms with their own death. In the 1960s, Elisabeth Kübler-Ross engaged in groundbreaking work to understand the thoughts, feelings, and needs of patients who were dying. Through her interviews with more than 400 patients, she began to clarify a process of coping with one's death. She identified five stages that are likely to occur between the awareness of a terminal illness and ultimate acceptance of one's death: denial; anger and resentment; bargaining for a reprieve; depression and mourning one's death; and acceptance or a willingness to face the reality of one's death. She also discovered how eager most people were to have someone who would listen to their thoughts and how grateful they were to interact with someone about their death rather than have it treated as a taboo or unmentionable topic (Kübler-Ross, 1969/1997 reprint edition, 1981/1997 reprint edition).

Subsequent research has suggested that there is no single, typical path in the dying process. Some people alternate between accepting and denying their death. They understand their situation, yet fall into periods of disbelief. Some people are able to bring what they view as an acceptable close to their life, saying good-bye to family and friends, and finding comfort in the support of others. Others die while still in a state of fear or denial (Kastenbaum, 1985, 2012). Kübler-Ross's stages are neither a universal nor fixed sequence, but they do serve as a useful model for considering the dynamic ego processes that are engaged as one faces death. The capacilly to ity to confront the reality of death can be seen as a profound occasion for new insight.

CASE STUDY

MORRIE SCHWARTZ REFLECTS ON HIS **VIEWS ABOUT DEATH**

Mitch Albom, in his 40s, rediscovered his former college professor Morrie Schwartz, who was dying from amyotrophic lateral sclerosis (ALS), a progressive neurological disease that attacks body muscles and leaves one increasingly paralyzed. Mitch and Morrie met every Tuesday for the last 4 months of Morrie's life.

"Everyone knows they're going to die," he said again, "but nobody believes it. If we did, we would do things differently."

"So we kid ourselves about death," I said.

"Yes. But there's a better approach. To know you're going to die, and to be prepared for it at any time. That's better. That wav you can actually be more involved in your life while you're living."

"How can you ever be prepared to die?"

"Do what the Buddhists do. Every day, have a little bird on your shoulder that asks, 'Is today the day? Am I ready? Am I doing all I need to do? Am I being the person I want to be?" He turned his head to his shoulder as if the bird were there now.

"Is today the day I die?" he said....

"The truth is, Mitch," he said, "once you learn how to die, you learn how to live." I nodded.

"I'm going to say it again," he said. "Once you learn how to die. you learn how to live." He smiled, and I realized what he was doing. He was making sure I absorbed this point, without embarrassing me by asking. It was part of what made him a good teacher.

"Did you think much about death before you got sick?" I asked.

"No." Morrie smiled. "I was like everyone else. I once told a friend of mine, in a moment of exuberance, 'I'm gonna be the healthiest old man you ever met!"

"How old were you?"

"In my sixties."

"So you were optimistic."

"Why not? Like I said, no one really believes they're going

"But everyone knows someone who has died," I said. "Why is it so hard to think about dying?"

"Because," Morrie continued, "most of us all walk around as if we're sleepwalking. We really don't experience the world fully, because we're half-asleep, doing things we automatically think we have to do."...

"Mitch. Can I tell you something?"

"Of course," I said.

"You might not like it."

"Why not?"

"Well, the truth is, if you really listen to that bird on your shoulder, if you accept that you can die at any time—then you might not be as ambitious as you are." I forced a small grin. "The things you spend so much time on—all the work you do—might not seem as important. You might have to make room for some more spiritual things."

"Spiritual things?"

"You hate that word, don't you? 'Spiritual.' You think it's touchyfeely stuff."

"Well," I said.

He tried to wink, a bad try, and I broke down and laughed. "Mitch," he said, laughing along, "even I don't know what 'spiritual development' really means. But I do know we're deficient in some way. We are too involved in materialistic things, and they don't satisfy us. The loving relationships we have, the universe around us, we take these things for granted."

He nodded toward the window with the sunshine streaming in. "You see that? You can go out there, outside, anytime. You can run up and down the block and go crazy. I can't do that. I can't go out. I can't run. I can't be out there without fear of getting sick. But you know what? I appreciate that window more than you do."

Source: From *Tuesdays with Morrie*: An Old Man, a Young Man, and Life's Greatest Lessons, by Mitch Albom, pp. 81–84. Copyright © 1997 Doubleday.

CASE ANALYSIS Using What You Know

- Summarize the point of view about life and death that Morrie is developing.
- 2. Analyze what this conversation suggests about Morrie's psychosocial development, including how issues of intimacy, generativity, and integrity are reflected in this dialogue.
- 3. Hypothesize how the conditions of Morrie's illness might influence his outlook on death.
- Describe the issues you would want to discuss if you had a mentor like Morrie who was willing to help you learn about living and dying.

The formulation of a **point of view about death** requires the capacity to absorb the loss of one's close relatives and friends and to accept one's own death. The former task may be even more difficult than the latter, in that the death of peers begins to destroy one's social group. Losing one's friends and relatives means losing daily companionship, a shared world of memories and plans and a source of support for values and social norms. The circumstances surrounding the deaths of others may also be very frightening. Older adults observe their peers suffering through long illnesses, dying abruptly in the midst of a thriving and vigorous life, or dying in absurd, meaningless accidents. After each death, the surviving adults must ask themselves about the value of these lives and subsequently about the value of their own life.

Death Anxiety

Fear of personal death, or **death anxiety**, is natural and normal. Death may be feared for a variety of reasons, some of which relate to the actual process of dying and others to the consequences of it. Concerns about the process of dying include fears of being alone, being in pain, having others see one suffering, or losing control of one's mind and body. Concerns about the consequences of dying include fears of the unknown, loss of identity ("People will forget about me"), the grief that others will feel, the decomposition of the body, and punishment or pain in the hereafter (Tomer & Eliason, 2000).

Several researchers have considered the sources of personal anxiety about death and the changes in preoccupation with death at various ages. Although older adults seem to think about death more frequently than do young adults, they do not appear to feel more threatened by it. In comparison to middle-aged adults, older adults experience lower death anxiety (Sinoff, Iosipovici, Almog, & Barnett-Greens, 2008). Among the elderly, it appears that those who have higher levels of self-worth and sense of mastery also have lower levels

of death anxiety (Ron, 2010). In comparison to those in early or middle adulthood, those in later adulthood know more people who have died and are more likely to have visited a cemetery or attended a funeral. Those in later adulthood are more likely to have made some specific arrangements related to their death, including purchasing cemetery space, writing a will, or making plans for their funeral. Their concrete experiences with the events of death, coupled with their own sense of mastery in preparing for their death, may allow them to cope more effectively with their fears (Cicirelli, 2001).

What factors help older people cope with fears about death? Several resources have been identified. Psychosocial theory predicts that through acts of generativity, people experience satisfaction in guiding and nurturing future generations. Achieving a positive resolution to the psychosocial crisis of generativity versus stagnation should help reduce death anxiety. One study designed to test this hypothesis found that the relationship of generativity to the fear of death was mediated by ego integrity, the positive pole of the crisis of later adulthood. Among those who were described as generative, the older adults who also had high levels of ego integrity had the least fear of death, supporting the theoretical notion of a progressive integration of ego strengths from one stage of life to the next (Bringle, 2007).

In addition to the achievement of a generative orientation, people who describe themselves as religious, those who have a strong social support system, and those who have a strong sense of self-worth are less likely to be preoccupied with the fear of death (Tomer & Eliason, 2000). Frey (2003) extended this perspective by focusing on the relationship of self-beliefs to death anxiety. Older adults who have a positive sense of self-efficacy have less fear of the unknown following death and less fear of the pain and suffering associated with dying. In particular, the sense of spiritual self-efficacy—one's perceived ability to generate spiritually based faith and inner strength—was strongly associated with low levels of death anxiety (Figure 13.11).



FIGURE 13.11 The ritual of a graveside service helps mourners separate from their loved one before the burial. Many elements of a traditional funeral are depicted here: the flowers, the tombstone, and the mourners gathered and supporting each other in a tree-lined cemeters.

Charles Mistral/Alamy

FURTHER REFLECTION: Developing a point of view about death may be one of the most universal tasks across cultures. What are the societal resources that help people address their mortality? What are the most helpful ideas you have encountered in your life so far that will aid you in dealing with the challenges of this task?

The Psychosocial Crisis: Integrity Versus Despair

OBJECTIVE 5. Define and explain the psychosocial crisis of integrity versus despair, the central process of introspection, the prime adaptive ego quality of wisdom, and the core pathology of disdain.

On entering later adulthood, adults draw on the competence and creativity attained during middle adulthood to invent solutions to their changing conditions. As life progresses, motivation for achievement and power may give way to a desire for understanding and experimenting with new roles and relationships. The toddler's need to know why and the later adolescent's need to challenge and experiment with life roles provide earlier models for the coping skills required in later life. The individual continues to be confronted with essential problems of definition and explanation during later adulthood. At this stage, adults apply the wealth of their life experiences, their perspective on time, and their adaptation to life crises to construct personally satisfying answers to the questions of life's meaning.

The conflict of integrity versus despair is resolved through a dynamic process of life review, introspection, and selfevaluation. Contemporary factors, such as health, family relational lationships, and role loss or role transitions, are integrated with With an assessment of one's past aspirations and accomplishment. ments. Thoughts of the past may be fleeting or a constant obsession. Memories may be altered to fit contemporary events, or contemporary events may be reinterpreted to fit memories. The achievement of integrity is the culmination of a life of psychosocial growth. Psychologically speaking, it is the is the peak of the pyramid in that it addresses the ultimate question, "How do I find meaning in life given the ultimate reality of death?" Achievement of integrity in later adulthood inspires younger age groups to continue to struggle with the challenges of their own life stages.

Integrity

The term integrity, as it is used in psychosocial theory, refers to the ability to accept the facts of one's life and face death death without great fear. As people get older, they need to story the story to accept the facts of ones. to step back and find a way to integrate or reconcile the events of their life with the hopes and dreams they may have had in their early or middle adulthood. This process of

meaning making involves an assessment of one's life and the extent to which worthwhile goals were sought and achieved. In a search for life's meaning, a person looks for a way to assemble a coherent story of order, purpose, and value out of the complex puzzle pieces of a life (Krause, 2004; Reker, 1997). The attainment of integrity is ultimately a result of the balance of all the psychosocial crises that have come earlier, accompanied by all the ego strengths and core pathologies that have accumulated along the way. Integrity comes only after some considerable thought about the meaning of one's life. Older adults who have achieved a sense of integrity view their past in an existential light. They appreciate that their lives and individuality are due to an accumulation of personal satisfactions and crises. Integrity is not so much a quality of honesty and trustworthiness—as the term is used in daily speech—as it is an ability to integrate one's past history with one's present circumstances and to feel content with the outcome.

Most people have some regrets. One may look back and wish that one had taken advantage of certain opportunities, been smarter about saving or investing money, or spent more time with one's children while they were young. The challenge in achieving integrity is to face the decisions and experiences of the past with acceptance. In this process, a person seeks to find an integrative thread that makes sense of the life one has led without belaboring past mistakes. The concept of sense of coherence has been linked to integrity and well-being in later life (Antonovsky, 1987; Wiesmann & Hannich, 2011). People who view their lives as understandable, manageable, and meaningful are thought to benefit from this sense of coherence. It is a construct that combines a cognitive ability to make sense of life experiences, an emotional optimism that things will, by and large, work out favorably, and a behavioral component that involves taking steps to achieve desired goals (Eriksson & Lindstrom, 2005).

Given the abstract and subjective construct of integrity, how can it be measured? One approach was devised by Neil Krause (2007) who created a four-dimensional measure of meaning in life. These dimensions included (1) having a system of values, (2) having a sense of purpose, (3) having goals to strive for, and (4) reflecting on the past to reconcile one's accomplishments with one's goals. Taken together, these four dimensions comprised a meaning in life scale. In a longitudinal study of older adults, Krause examined how various forms of social support as well as anticipated social support related to meaning in life over a 4-year period. Those older adults who received high levels of emotional support had higher meaning in life, but those who received tangible social support had lower meaning in life. Anticipated support, that is believing that you could call upon close family and friends for help if it were needed, was the strongest predictor of meaning in life. Over time, anticipated support was also a significant predictor of changes in a person's sense of meaning.

When older adults are confident that they will be able to count on others for help in the future, their sense of meaning in life is bolstered. This finding speaks to the role of the radius of significant relationships in predicting and sustaining a sense of integrity in later adulthood. It also suggests a continuing role for trust and hope, the very earliest psychosocial concepts of infancy, in fostering integrity in late life.

In addition, new research suggests a link between generativity and integrity. Older adults who have made meaningful contributions to the quality of life for future generations can draw on these experiences to find meaning in their own lives. As suggested by the data on volunteerism, for many adults generative action continues into later adulthood and extends beyond care for one's immediate family to concern about the larger community (Ehlman & Ligon, 2012; Schoklitsch & Baumann, 2012).

Despair

The opposite pole of integrity is **despair**. It is much more likely that adults will resolve the crisis of integrity versus despair in the negative direction than that infants will resolve the crisis of trust versus mistrust in the negative direction. For infants to experience trust, they rely on the benevolence of a responsible caregiver who will meet their essential needs. In most cases, this caregiver is present, and the infant learns to count on others. In order to experience integrity, however, older adults must incorporate into their self-image a lifelong record of conflicts, failures, and disappointments, along with accomplishments. They must confront what is sometimes referred to as the "death of dreams"—a realization that some of their most cherished hopes for themselves or their children cannot be accomplished in their lifetime (Oates, 1997).

Older adults may also face some degree of **ageism**—devaluation and even hostility from the social community. The negative attitudes expressed by family members, colleagues, and younger people toward the perceived lack of competence, dependence, or old-fashioned ways of older people may lead many of them to feel discouraged about their self-worth. The gradual deterioration or loss of certain physical capacities—particularly hearing, vision, and motor agility—contribute to an older person's frustration and discouragement. Older adults recognize that they cannot perform certain tasks as well as they did in the past or that their domains of independent functioning and mastery have diminished.

Furthermore, there is a general cultural sentiment that the death of an older person—in contrast, for example, with the death of a child or youth—though sad, is not a great loss to society, because that person had already contributed to society and lived a full life. Thus, older adults may perceive that society is already letting go of them, even before they are ready to let go of life (Jecker & Schneiderman, 1994).

All of these factors are likely to create a feeling of regret about one's past and a continuous, haunting desire to be able to do things differently, or of bitterness over how one's life has turned out. People who resolve the crisis of later adulthood in the direction of despair cannot resist speculating about how things might have been or what actions might have been taken if conditions had only been different. They are preoccupied with the if-onlys of their past, disrupting a calm acceptance of death. Despairing individuals either seek death as a way of ending a miserable existence or desperately fear death because it makes impossible any hope of compensating for past failures.

Depression

The theme of **depression** has been treated in several sections of this text. Given the close link between the concepts of depression and despair, it should come as no surprise that depression has been a topic of research in the study of adulthood and aging. Nearly 8% of persons aged 12 years and older (6% of males and 10% of females) report current depression. Females have higher rates of depression than males in every age group. Males aged 40–59 years have higher rates of depression (7%) than males aged 60 years and older (5%). Females aged 40–59 years have higher rates of depression (12%) than females aged 60 years and older (7%) (Centers for Disease Control and Prevention, 2012c).

Many of the same factors that are associated with depression in younger age groups are also associated with depression in older age groups: poverty, poor physical health, lack of social involvement, and being single, divorced, or widowed. The risk of depression in later life cannot be attributed to the aging process itself. The negative physiological changes associated with aging—such as high blood pressure. reduced breathing capacity, reduced muscle strength, slower reaction time, memory loss, and loss of visual or auditory acuity—are not associated with depression in and of themselves (Hinrichsen & Clougherty, 2006). Older adults who have a clear sense of coherence about life, those who view their situation as comprehensible, manageable, and meaningful, are more likely to be resilient in the face of chronic physical illness than those who view their lives as chaotic and out of their control. Thus, depression as a complex affective and cognitive syndrome does not automatically come with the territory of aging, but it occurs in a subset of older adults. It is especially likely among those who have experienced a decreased activity level; have reduced access to a significant, close, confiding relationship; and have accumulated physical health problems that limit their independence and dampen the sense of enthusiasm for pleasant activities (Wiesmann & Hannich, 2013).

The Central Process: Introspection

In order to achieve a sense of integrity, a person must engage in **introspection**, a deliberate process of private, personal reflection and self-evaluation. The final achievement of a sense of integrity requires the ability to introspect about

the gradual evolution of life events and to appreciate their significance in the formation of the adult personality. This state can be reached only through individual effort. It may even require temporary isolation, shutting out the influences of potentially competitive or resentful associates. One mode for engaging in self-evaluation is reminiscence.

Reminiscence is the recollection of past experiences and the recalling or retelling of memories from long ago. This process of nostalgic remembering allows adults to recapture some of the memorable events in their life histories. Reminiscence may be a playful recalling of a life adventure or a painful review of some personal or family crisis. The process of simple reminiscence has been described as comprising four elements: the selection of an event or story to retell or review; immersion in the details of the story, including the strong emotions linked to the event; withdrawal from the past by distancing oneself from the event or comparing past and present; and bringing closure to the memory by summing up, finding some lesson, or making a general observation. Through this kind of process, a person builds a mental and emotional bridge between the past and the present (Meacham, 1995) (Figure 13.12).



FIGURE 13.12 The process of nostalgic remembering allows adults to recapture some of the memorable people and events in their life histories.

Reminiscence is linked to positive adjustment in later life, especially better health, a more positive outlook, and a better ability to cope with the challenges of daily life (Kunz & Soltys, 2007). However, not all forms of reminiscence are of equal benefit. In particular, reminiscences of the integrative or instrumental type tend to be associated with high levels of well-being, whereas obsessive reminiscences are not. Integrative reminiscence involves reviewing one's past in order to find meaning or to reconcile one's current and prior feelings about certain life events. Instrumental reminiscence focuses on the past, on accomplishments, efforts to overcome difficulties, and experiences to help cope with current difficulties. Obsessive reminiscence suggests an inability to resolve or accept certain past events and a persistent guilt or despair about them (Korte, Cappeliez, Bohlmeijer, & Westerhof, 2012; Wong & Watt, 1991). Contrast the following two narratives:

When I was a teenager, my parents broke up and both remarried. I was very resentful because they did not seem to care about my feelings or needs. But as I grow older and look back, I understand that they were really not compatible with each other. They had suffered for many years before their divorce. [Integrative reminiscence)

My husband died when I was away for two days visiting my friends in the West. He fell in the bathtub and eventually died because there was no one there to help him. It has been years now, but I still cannot forgive myself for leaving him home alone for two days. [Obsessive reminiscence] (Wong & Watt, 1991, p. 276)

Reminiscence appears to lend continuity to older adults' self-concepts. They can trace the path of their own development through time and identify moments that were of central importance in the crystallization of their personal philosophies. Through reminiscence, older adults can revise the meaning of past events by using current wisdom to understand or accept what took place in the past. For example, reminiscence was encouraged in a group of veterans who had been involved in the Normandy invasion at the end of World War II. The veterans retold their experiences of loss, grief, and shock and how those experiences influenced their lives over the subsequent 50-year period. Formulating their experiences in a story-like format and retelling their stories to others provided a means of coping with the stressors of this past experience (Harvey, Stein, & Scott, 1995).

Reminiscence serves as an integrating process that has positive value in an eventual attainment of integrity. In a review of 20 studies with older adults who suffered from depression, guided reminiscence was found to be as effective as drug treatment or psychotherapy for alleviating depressive symptoms (Bohlmeijer, Smit, & Cuijpers, 2003). In excess, however, reminiscence can dominate reality, taking over the time and energy that might be directed toward more appropriate active social involvement. Some adults tend to dwell

on sad events and allow earlier disappointments to preoccupy their current thoughts. In that case, their past lives take precedence over their current circumstances. No new events can compete successfully with past memories for their attention.

The benefit of introspection for well-being and the sense of integrity depends on the person's ability to cope with the material that was called up from the past. Two effective coping strategies that have been linked to mental health in older adults are assimilative and accommodative coping. In assimilative coping, the person recognizes the significance of past events and their links to important life goals. This provides a positive sense of continuity, affirming the focus and meaning of life events, even if the past events were troubling. In accommodative coping, the person recognizes the need to revise their appraisal of the situation. The person realizes how the difficult events of the past led to the modification of goals which, in turn, created a new and valued sense of meaning (Cappeliez & O'Rourke, 2002; Cappeliez & Robitaille, 2010).

The Prime Adaptive Ego **Quality and the Core Pathology**

Wisdom

Erikson identified wisdom as the prime adaptive ego quality of later adulthood in that it reflects a detached concern for life and a desire to learn and communicate essential lessons from experience in the face of impending death (Erikson et al., 1986).

Wisdom has been characterized by five basic features (Ardelt, 2004; Baltes, Smith, & Staudinger, 1992, p. 272; Kramer, 2003; Staudinger, Dorner, & Mickler, 2005):

- 1. Factual knowledge about fundamental life matters, such as general knowledge about the human condition and specific knowledge about life events, their age-related occurrence, and their expected and unexpected course.
- 2. Procedural knowledge, composed of strategies for approaching the management and interpretation of life matters, including linking past, present, and future.
- 3. Life-span contextualism, approaching problems with the realization that events are embedded in a multidimensional context—including age-related, culturally defined, role-related, and sociohistorical frameworks and that events take their meaning from certain distinct domains, especially family, work, and leisure.
- 4. Relativism of values and life goals, allowing the person to appreciate differences among individuals and societies with respect to the priorities they place on certain values, as well as the ability to preserve a certain core of universal values.

5. Recognition and management of uncertainty, incorporating the realization that the future cannot be totally predicted and that many aspects of the past and present are not fully known, plus an ability to manage and cope with this uncertainty.

One of the concepts that helps link the idea of intelligence in later adulthood with the ego strength of wisdom is expertise. With age, individuals who focus their intelligence in intensive study, training, and repeated opportunities for problem solving within a domain become experts. A variety of intellectual processes support expertise, including deductive reasoning, a rich and complex working memory, and the ability to organize large amounts of information for storage and subsequent recall. We rely on experts to help inform in portant and difficult decisions. In that sense, we come to see experts as having wisdom in their particular specialization. Although we may be inclined to look to experts in one field to help we all to help us solve a wide range of problems, the assumption behind expertise is that it is discipline specific. In that sense, expertise and wisdom are not identical (Horn & Masunaga, 2000; Masunaga & Horn, 2001).

Not all people who live to old age function at a high level of wisdom. However, studies that compare younger and older of the first studies that compare younger and older adults find that there are contexts in which older adults demonstrate a greater degree of insight and problem-solving chill year solving skill. When asked to analyze situations involving intergroup as 1. intergroup and interpersonal conflicts, older adults made greater up of the conflicts. greater use of advanced reasoning, multiple perspectives, and the need for and the need for compromise than younger adults. They also more readily also more readily acknowledged the limits of their knowledge and the party account edge and the need to take the specific context into account when prediction of when predicting the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the situation (Grossmann, Na, Varnums of the outcome of the o Na, Varnuma et al., 2010). Evidence suggests that there is a path toward income. path toward increasing wisdom among certain individuals who are especially all who are especially able to find insights about life from their daily experiences (1) daily experiences (Ardelt, 2010; Choi & Landeros, 2011) (Figure 13 13) (Figure 13.13).

Three dimensions that have been hypothesized to prote wisdom are (1) mote wisdom are (1) opportunities to experience a wide variety of life singuiriety of life situations and circumstances; (2) encouragement by a mentor or mild. by a mentor or guide to expand one's capacity for thinking about problems for about problems from a multidimensional, psychohistorical perspective; and (2) perspective; and (3) a strong generative orientation or desire to continue to gain to continue to gain insight into how people meet the challenges of life (Ralter S. 2) lenges of life (Baltes & Smith, 1990).

Disdain

Wisdom reflects flexibility of thought, openness to new interpretations, and a complexity of terpretations, and a willingness to accept the complexity of life. In contrast life. In contrast, **disdain** refers to feelings of contempt for ideas or people who ideas or people who are viewed as inferior or unworthy. dain conveys rejection dain conveys rejection and scorn for ideas and persons and arrogance that include an arrogance that implies one's own opinions and views are superior. It can be used to superior. It can be understood as a defensive response to the



FIGURE 13.13 Joseph looks forward to these quiet talks with his father. He knows he will always come away With new insight about planning, managing, or understanding the challenges he is facing in his own life.

repulsion for one's physical self and failed past. Disdain for others may be a mechanism to enhance one's own status and Prestige. Rather than becoming more patient, more compassional. sionate, more forgiving, and less critical in their later life, older adults who develop disdain are more likely to disparage others and detach from the world around them (Erikson et al., 1986).

FURTHER REFLECTION: Explain how reminiscence and intro-Spection contribute to the resolution of the psychosocial crisis of integrity versus despair. What experiences from earlier stages might contribute to a person's ability to reflect upon and evaluate the meaning of her or his life?

What is your own definition of wisdom? Where do you seek wisdom? where do you seek wisdom? dom? What wisdoms would you want to pass along to others that might be a sense might help them cope with life's uncertainties and achieve a sense of well. of well-being?

The psychosocial perspective assumes that new growth takes place at every stage of life. Summarize the new directions for growth in later adulthood.

APPLIED TOPIC Retirement

OBJECTIVE 6. Apply theory and research to ret Understanding the process of adjustment to retirement.

Retirement is a societal and psychological construct that has a variety of retirement is that a variety of definitions. One definition of retirement is that the population of the the Person works less than full-time year round and receives income a income from a retirement pension earned during earlier periods of employment. Some people define retirement as the time at which people begin to receive social security or other pension benefits, regardless of their employment status. However, retirement also refers to a psychosocial transition involving role loss and role gain—a time for redirecting energy to new roles, new opportunities to promote intellectual vigor, and new sources of life satisfaction. As one withdraws from the formal structure of work and alters one's occupational identity, the transition brings increased time for reflection about the meaning and purpose of one's life. To the extent that work has provided a basic structure for one's lifestyle, withdrawal from the structure and significance of paid employment can be replaced by other activities, new relationships, and a new sense of purpose.

Of course, some people never retire; some die before they reach retirement age; and others continue to work on a parttime schedule. Some people of retirement age leave their primary job and take another full-time or part-time job in a related field or in a totally different one. Many adults who are self-employed or whose work involves creative skills, such as acting, music, painting, or writing, simply continue to work into their late adulthood.

Projections from the U.S. Bureau of Labor Statistics indicate that in the coming years there will be an increasing involvement of older adults in the labor force. Table 13.2 shows the percentage of men and women at two ages, 65 to 74 and 75 and older, who were in the labor force in 1988, 1998, and 2008 as well as projections for 2018. The rate of labor force participation was relatively stable for those in later adulthood and elderhood between 1988 and 1998. However, by 2008, rates increased substantially, especially for women, and by 2018 about one third of men and close

TABLE 13.2 Civilian Labor Force Participation Rates by Age and Sex for 1988, 1998, 2008, and Projections for 2018

	1988		1998		2008		2018	
District of Column 1922 Married Street	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN	MEN	WOMEN
65–74 75+	21.3% 7.4%	11.9% 2.4%	22.6%	13.7%	29.7%	21.1%	34.4%	27.1%
,0	2.4/0	7.5%	2.9%	10.4%	5.2%	13.9%	7.7%	

Source: U.S. Bureau of Labor Statistics. (2009a). Table 3.3. Civilian labor force participation rates by age, sex, race and ethnicity, 1988, 1998, 2008, and projected 2018. Retrieved August 24, 2010, from http://www.bls.gov/emp/ep_table_303.htm.

to 30% of women in later adulthood will be working. Thus, although retirement will still be normative in later life, a growing segment of the older population will be working (U.S. Bureau of Labor Statistics, 2009a).

Income Loss

Much of the information about retirement planning and the decision to retire focuses on financial considerations (USA. gov, 2013). If one works from the ages of 25 to 65, there are another 25–30 years of life ahead. Think about what is required to support 30 years of retirement during 40 years of paid employment. Most financial planners suggest that there is about a 25% to 30% reduction in income after retirement, which is somewhat greater for those who retire before age 65. Although work-related expenses, taxes, and child care expenses may decrease, health and recreational expenses may

increase. In addition to reduced income, not all the sources of income are adjusted to keep pace with inflation. Thus, the value of retirees' fixed income declines over time (USA .gov, 2013).

Older householders' annual income is derived from five primary sources: social security, property and other assets, pensions, earnings, and supplemental security income (Fisher & Trenkamp, 2010) (see Figure 13.14). Access to these various resources varies by race and ethnicity, with older Whites having greater access to personal assets and pensions, and Asian Americans and Hispanics drawing more on supplemental security income due to their poverty status. In 2010, the median income for households headed by someone 66 years old and older was \$31,461. This can be compared to a median household income of \$62,342 for a household headed by someone ages 45 to 54. About 9% of individuals 66 years and older had incomes below the poverty level.

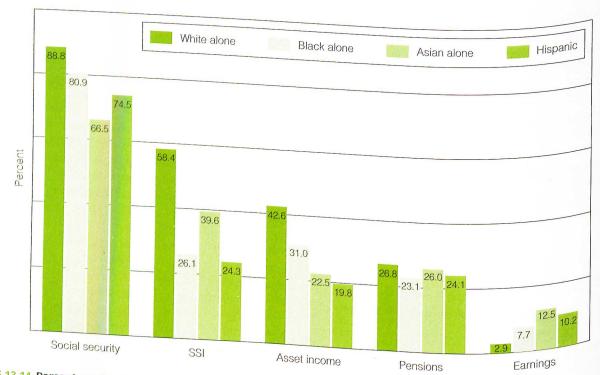


FIGURE 13.14 Percentage Receiving Income from Major Sources, by Race and Hispanic Origin, 2008 Source: Social Security Administration, 2010.

Poverty is greater for older minorities and older adults who live alone (DeNavas-Walt, Proctor, and Smith, 2012).

Economic factors are an important part of the explanation for why people are staying in the labor market for a longer time. The age at which one can receive full Social Security benefits has increased to an older age for more recent cohorts, and there is no penalty for continuing to work after the normal retirement age. Employer-provided retirement benefits have shifted from guaranteed pension plans to defined contribution plans, so that workers can continue to contribute to their retirement fund for every year they work. Employer-sponsored health care benefits after retirement have decreased, so there is an incentive to continue working until one reaches the age at which Medicare benefits are available (Mermin, Johnson, & Murphy, 2007). The recent economic downturn and the slow recovery have resulted in the increased need to support adult children.

Adjustment to Retirement

Adjustment during the retirement transition is an individual process. Although we tend to think of retirement as an event, it is really a long period of time in which people have to clarify their sense of purpose and meaning, and redefine the nature of their daily activities. Adjustment to retirement is expected to change with time. Atchley (2001) proposed phases of anticipation, transition, and eventual adaptation. Four markers in this process include (1) a honeymoon period - learning or letriod, which is busy and positive; (2) a disenchantment or letdown phase, in which the meaning and structure of work are missed; (3) a reorientation phase, in which a more realistic lifestyle is created; and (4) a stable period, which may last 10 or 15 years until changes in health, financial resources, or one's social support system require a significant revision.

Most older adults cope effectively with the changes associated with retirement, viewing it as a desired transition. In retrospect, however, they often realize that preparation for retirement should have included more emphasis on the psychosometric featuring so exchosocial aspects of this change rather than focusing so exclusively on its financial impact. Nancy Schlossberg (2009) talks at talks about this as assembling a "Psychological Portfolio" in Which Which a person articulates and clarifies aspects of identity, relationships, and sense of purpose that will serve as resources during the post-retirement years. In her research, she characterized terized seven paths through retirement and beyond that capture differences in how people shape their future lives:

1. Continuers: They maintain their former identity, but in a modified way. They stay connected to their former Work and work-related identities while expanding in new directions.

2. Adventurers: They pursue an unrealized dream or try something new.

3. Easy-gliders: They take each day as it comes; no agenda and no pressures.

- 4. Involved spectators: They are still psychologically involved in their former life but are no longer active in it.
- 5. Searchers: They are looking for their special niche, exploring, and then moving on.
- 6. Retreaters: They are stepping back, taking a break to decide what to do next.
- 7. Disengaged: They are depressed, uninvolved, and unable to find a path forward.

Benefits of Retirement

What do people look forward to in retirement? Weiss (1997) described a longitudinal study of men and women who were over age 63 and intended to retire in the coming year or had recently retired. Most anticipated that retirement would bring a reduction in stress, especially in coping with the challenges and crises of the workplace. Workplace conditions such as lack of challenge, reorganization, and downsizing (with its accompanying increased demands on the remaining employees) are stressors that workers are glad to leave behind when they retire (Henkens & Tazelaar, 1997). In a study of young retirees ages 51 to 59, the most commonly mentioned positive aspects of retirement were the lack of pressure, more time with their spouse, and the ability to relax (National Academy on an Aging Society, 2001).

People who come to the point of retirement from a context of lifelong well-being are likely to adapt well to this transition. They have had experiences of goal attainment, management of their time, effective social support, and invigorating intellectual stimulation which provide continuing resources after retirement. We can imagine that they will fit into one of the positive pathways described above, and find a satisfying direction (Halleröd, Örestig, & Stattin, 2013) (Figure 13.15).

Difficulties with Retirement

In contrast to those who are adjusting easily, a subset of retirees report declines in life satisfaction, especially those who experience significant income loss, poor health, or death of a spouse, events that are age-related and may not be attributed specifically to retirement. Approximately one third of adults report significant difficulty during this process (Pinquart & Schindler, 2007).

Perceptions of retirement involve a person's enthusiasm, positive anticipation, or resentment about it. This is linked to the important ways in which work structures one's lifestyle throughout early and middle adulthood. In addition to the obvious functions of paid employment—especially income and social status—a number of latent functions provide important psychological benefits (Jahoda, 1982; Lo & Brown, 1999). Work provides a structure for the use of time; a context for social contact; a content for self-identity; regular, predictable activities into which one can channel intellectual, physical, and emotional energy; and a sense of participation in a collective effort. Retirement may be perceived as

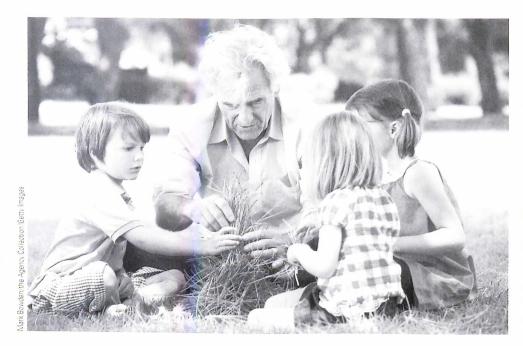


FIGURE 13.15 Grandpa Victor, using his knowledge of camping and exploration of the out-of-doors, teaches his grandchildren how to build a fire from gathered twigs, bark, and small branches. Victor loves being with his grandchildren and now that he is retired, he spends as much time as possible with them.

resulting in deprivation in each of these areas and therefore presents a threat to psychological well-being.

Several measures have been devised to assess the stresses associated with retirement and the anxiety people feel as they anticipate it. Sharpley (1997) found that when retirees reflected on factors that caused them stress in everyday living, three areas emerged: missing work, problems with personal health, and relationship issues. The concept of retirement anxiety refers to apprehensions that adults have as they anticipate retirement (Fletcher and Hansson, 1991). It illustrates how people come to rely on work as a primary social structure and highlights the difficulties they face as they confront the transition to retirement. For those who suffered from retirement anxiety, two factors were especially troubling. First, people who had high levels of retirement anxiety worried about the loss of structured social involvement and connection. This concern was linked to worry about losing friendships, being lonely, and having little in common with former coworkers after retirement. Second, people worried about having to be assertive or proactive in finding new relationships and activities that would meet their needs. This concern was linked to a general difficulty in handling life transitions, a high level of uncertainty about the future, and a general feeling of loss of identity. Although one might think that people who have high levels of retirement anxiety would use services that help people plan for retirement, this was not the case. They may try to deny this transition by avoiding planning and counseling sessions.

In addition to worries about being unable to meet social needs following retirement, some adults find the transition difficult because they feel a lack of control. People have expectations about how long they plan to work and at what

age they will retire. When people perceive that they are working or not working by their own choice and that they determine how much work to do, they have higher levels of health and well-being. However, when they perceive that their level of involvement in work is being decided by someone else and have little say in it, they are likely to have more difficulty adjusting to retirement, more health problems, and a greater incidence of depression (Gall, Evans, & Howard, 1997; Schultz, Morton, & Weckerle, 1998). Especially for men, those who expect to work on into their late 60s and are forced into retirement, this lack of control over exiting from the workplace is predictive of lower well-being and reduced life satisfaction (Clarke, Marshall, & Weir, 2013).

CASE STUDY

ANNA QUINDLEN WRITES ABOUT RETIRING AS "STEPPING ASIDE" FOR THE NEXT GENERATION OF WRITERS

Anna Quindlen, who wrote "the last word" for Newsweek for 9 years, explains why it's time for her to move on.

The baby-boom generation has created an interesting conundrum for this country. Born between 1946 and 1964, boomers take up more room than any other generation in American History. They now account for about a quarter of the population. And so, inevitably, they have created a kind of bottleneck, in the work world, in politics, in power. The frustration this poses for the young and

talented should be obvious. In my personal life it was reflected powerfully on the day when, talking of the unwillingness of my friends to retire, my eldest child noted, "You guys just won't go." ...

Today we have an entire generation of Americans who seem dedicated to the proposition that they will fight aging to the death. Ouite literally. And that means staying front and center professionally. The unspoken synonym for "emeritus" is "old." And old is a word we don't even use anymore in polite conversation, a modern obscenity....

I believe that many of our old ways of doing things are out of date, including some of our old ways of looking at, and reporting on, the world around us. Since the day he delivered his Inaugural Address, when I was 8 years old, people have been quoting the youthful John F. Kennedy saying that the torch had been passed to a new generation. But torches don't really get passed very much because people love to hold on to them....

If I had any lingering doubts about giving it up after almost nine years, they were quelled by those binders on my desk, full of exemplary work by reporters young enough to be my children. Flipping through their pages, reading such essential and beautifully rendered accounts of life in America and around the world, I felt certain of the future of the news business in some form or another. But between the lines I read another message, delivered without rancor or contempt, the same one I once heard from my own son: It's our turn. Step aside. And now I will.

Source: Quindlen, 2009.

CASE ANALYSIS Using What You Know

- 1. Explain how the developmental tasks of later adulthood are reflected in this narrative.
- 2. Evaluate the accuracy of Ms. Quindlen's analysis about the reluctance of the baby boom generation to retire. Discuss the factors that might account for the baby boom cohort's approach to retirement.
- 3. Summarize the ways the psychosocial crises of generativity versus stagnation and integrity versus despair are related to Ms. Qundlen's decision to retire.

Retirement for Couples

From a systems perspective, it makes sense to think about adaptation to retirement in the context of the other life roles one is playing. One of the most relevant is the marital relationship. With the large number of married women in the labor market, it is important to consider the impact of retirement for a couple as well as for the individual. Retirement transitions can involve one partner remaining in the labor market when the other retires, both partners retiring at about the same time, and one or both partners retiring from their primary work and becoming involved in secondary work after retirement. These configurations can have consequences for the couple's marital satisfaction because the change in work status affects their relationship.

The Cornell Retirement and Well-Being Study focused on workers and retirees ages 50 to 72. Participants were interviewed once in 1994–1995 and again in 1996–1997. Among the people in this sample, 25% were not yet retired and their

spouses were also not yet retired. For another 36%, both the respondent and the respondent's spouse were retired. In the remainder, one spouse was working and the other spouse was retired. Several observations were made about marital quality during this transition. First, both men and women reported decreases in marital quality when they moved from work to retirement. The role transition from work to retirement appears to have a short-term negative impact on the marriage. Second, if one spouse remains in the labor market and the other retires, the retired partner reports more marital conflict. In this case, the stress of the role transition from work to retirement seems to be compounded by the lack of synchrony between the partners in the structure of their daily lives (Moen, Kim, & Hofmeister, 2001). The greatest satisfaction with retirement was reported by couples where both partners were retired, and the wives said that their husbands did not influence their decision to retire (Smith & Moen, 2004).

In an AARP national survey of individuals who were married (or living as married) and were retired or had a partner who was retired, couples where both spouses were retired were happier than couples where one partner was still in the labor force. Although the retirement decision is often treated as an individual one, in about one third of cases where one partner retired first, that person encouraged the other partner to retire. There was also some evidence that dissatisfaction with retirement tended to spill into the marital relationship. Individuals who were dissatisfied with retirement also said their relationship with their partner was weaker. This lack of satisfaction could be a product of another underlying issue such as sense of lack of control or purpose. In general, among these couples, retirement was positively associated with more travel, more exercise, volunteering, and involvement in hobbies (Kopper, 2008).

The Future of Retirement

A combination of demographic, economic, and organizational changes are contributing to more varied, flexible alternatives to full retirement. Certain social forces are influencing continuing involvement in the labor market after age 65. An increasing number of businesses are eliminating a mandatory retirement age. In 2000, the earnings limit for receiving full social security benefits after age 65 was lifted. Finally, the age for full eligibility for social security retirement benefits will be rising to 67 for those born in 1960 or later. At the same time, movements toward reducing labor force participation for older workers include the development of early retirement plans, phased retirement, part-time work, and reduced or redefined job expectations. Innovation in retirement options seems to be taking two directions at the same time: how to retain older workers in meaningful work roles and how to permit more flexible earlier retirement programs (AARP, 2000).

Several long-range concerns suggest a need to reexamine the right to retirement concept. First, prospects for a longer, goal domains, 530 goal orientation, 530 goal-related activities, 530 grandparenthood, 540 integrity, 553 intellectual vigor, 534 intergenerational solidarity, 541 introspection, 553 life satisfaction, 529 long-term memory, 536 memory, 534

neuroticism, 532
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CASEBOOK

For additional case material related to this chapter, see the case of "Lola," in *Life Span Development: A Case Book*, by Barbara and Philip Newman, Laura Landry-Meyer, and Brenda J. Lohman, pp. 209–212. This case focuses on the

role of reminiscence in resolving the psychosocial crisis of integrity versus despair and the opportunity for earlier expertise to be used in redirecting energy to new roles.

