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Identity in Late Adulthood

- How does an aging body affect one's sense of identity in later adulthood years?
- Are cognitive declines inevitable in old age?
- How is identity related to one's resolution of Integrity Versus Despair issues in old age?

I feel that the death of my mother in the year I turned 65 really put me up a generation so that I became superannuated, as it were, officially. I was pleased that I felt ready to move out of paid employment. But I'm also very conscious of the feeling of transition now—this sense of a very large challenge looming ahead, and a sense of preparing for that. The older I get, the more I worry about the constraints of aging and the physical problems that might come up.

—Alison, 67-year-old retired community worker

What will I do to structure my time in the years ahead? There's just never been time to think about it before now. What do I still want to do? How can I make these later years the best of my life? If I hadn't retired when I did, I wonder if I would have been happier these days? Will my children be all right? Will I be remembered at all? How will I be

remembered? Getting back, once you've lost your footing, is so very, very hard. I don't feel old inside, but the mirror tells me otherwise—how did I get to be so old? Memories are surely one's most precious possessions, aren't they? I've been through it all—3 wars, 2 marriages, 15 grandchildren; I'm doing pretty well, don't you think?

The previous questions and statements reflect identity issues important to some old and very old individuals I spoke with in a community facility for various levels of nonassisted and assisted living. Residents, ranging from 67 to 98 years of age, shared these and other thoughts when asked about the kinds of questions that came to mind when they thought about their identities and their relationships in and to the world at the present time. For those younger old adults, many of whom had recently retired themselves or had spouses who had done so, adjusting to new psychosocial roles occupied their current life energies. A changed vocational status seemed not only to generate new questions about how to structure time but also about how to respond to changed social expectations both within the family and community.

Foremost in the minds of many of the very old adults were concerns for their children and grandchildren and hopes for their futures in a world that they themselves would soon be leaving behind. Leaving some impression in the world and finishing unfinished business, in relationships as well as creative projects, were forces giving very old age important meaning for many interviewees. Adjusting to a changing biology and increasing physical limitations was experienced by all during their older years of later adulthood, while reminiscing, bringing memories of past events into present reality was a stabilizing identity task for many.

These concerns of younger old and very old adults still reflect well the intermingling of biological, psychological, and societal considerations described by Erikson as key elements of ego identity. I turn now to the world of later adulthood and some of these key biological, psychological, and social factors that will interact to shape the course of identity over the final stages of the life span. In viewing the years of later adulthood and the increased years of life experienced by many, I will refer to the younger old adult (66–79 years) and the very old adult (80 years and beyond) age groups, for identity issues are often quite different during these two spans of time.

Intersection of Biological, Psychological, and Societal Influences on Identity in Late Adulthood: An Overview

There is growing consensus among gerontologists that with the increasing longevity of many older adults, the later adulthood years are best considered

in at least two separate phases. At present, one might, indeed, find oneself in the time of late adulthood for some 30 to 40 years—longer than any other time of the life span. Although much individual variation remains in both physical and mental ability among both the younger old and the very old, the latter often appear to be coping with newfound identity issues more related to a changed biology than changed psychosocial roles, as was the case with younger old adults.

Again, the interrelationships among biology, psychology, social networks and culture more generally are essential to understanding identity concerns for those in the years of late adulthood. The trend for increasing longevity continues, and the percentage of individuals reaching very old age is greater than in any previous era in the United States (U.S. Bureau of the Census, 2003). Those 65 years and over comprised 12.6 percent of the total population from the 2000 census data. The highest rate of increase in those aged 65 and over is among the oldest old—those aged 85 years and over. Currently those 65 and older comprise at least 15 percent of the total population in many European and Asian countries (U.S. Bureau of the Census, 2003).

At this time of growing numbers of older adults in the general population in many Western nations, however, socially constructed meanings of old age often serve to curb identity expression and potential for many. Stereotypic attitudes toward older adults, the perception that they are feeble-minded at best, senile at worst, may give rise to painful forms of social discrimination having negative identity repercussions for a number of later life individuals. Eisenhandler (1990) has demonstrated the intrinsic value for many older adults of merely holding a valid driver's license, which serves as a social disidentifier of late adulthood and the accompanying stigma of an old age identity. At the same time, the interaction of biological and social factors—of having good physical health, financial security, and supportive family and friendship networks—has been associated with psychological well-being and a satisfying sense of identity during late adulthood years across four continents (Fry et al., 1997).

Biological Processes

By late adulthood, virtually no one can remain oblivious to the physical signs of aging and the identity-related readjustments that such changes demand. As Erikson and colleagues (1986) have noted,

As the overall tonus of the body begins to sag and innumerable inner parts call attention to themselves through their malfunction, the aging body is forced into a new sense of invalidness. . . . The elder is obliged to turn attention from more interesting aspects of life to the demanding requirements of the body. (p. 309)

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Whereas some of these biological changes may be merely annoying, others may be painful, difficult, and sometimes even shame inducing.

Although Erikson has presented a somewhat sobering view regarding the psychological impact of the aging process, it is important to note that in the United States, a substantial proportion of adults over the age of 80 years do function reasonably effectively. Indeed, the majority continue to live in the community, and of these individuals, more than one-third report that their health is good or excellent (Suzman, Harris, Hadley, Kovar, & Weindruch, 1992). Nevertheless, the rates of disease do increase dramatically for those over age 65 years, and the majority of those over age 80 do have some type of physical impairment.

In turning to the course of biological changes in late adulthood, it is important to distinguish normal physical changes of aging from physical changes caused by disease. Reviewed in the following paragraph are some of the normative biological changes of aging holding potential identity implications; discussion of severe illnesses and their threats to identity and physical integrity will be presented in the next chapter.

Changes in body build and composition continue during the years of late adulthood, although much individual variation exists in the rate of such changes. Some bodily systems also decline more rapidly than others. Longitudinal studies have demonstrated a continuing decrease in standing height during late adulthood and some loss of bone tissue in the skeleton (Whitbourne, 1996a). Where loss of bone tissue is severe, osteoporosis (the extensive loss of bone tissue) results and causes individuals to walk with a marked stoop and become particularly vulnerable to bone fractures. In the United States, osteoporosis affects some two-thirds of all women over the age of 60. During late adulthood, weight loss is a frequent experience due to loss of lean body mass in muscle and bone tissue rather than fat reduction in the torso. Thus, very old adults may have very slender arms and legs while retaining fat deposits acquired during middle age in the torso (Whitbourne, 1996a).

Aging changes to the skin can result in dramatic alterations to one's appearance. Common during late adulthood are the continuing development of wrinkles, furrows, sagging skin, and loss of resiliency of the skin. The face, always exposed to the elements, may particularly suffer the harmful consequences of sun exposure. The skin loses its firmness and elasticity, leading to areas of sagging such as the double chin (Whitbourne, 2005). In addition, the nose and ears lengthen and broaden, and there is frequently a reduction in the amount of bone in the jaw (Whitbourne, 1996a). Thinning and graying of the hair continue, although there are great individual differences in the degree of hair grayness, largely due to genetic factors.

Declines in the acuity of all five senses are experienced over the life span, with vision and auditory loss often reported to be the most problematic ones by late life adults. Reduced vision may severely restrict an individual's independence as well as pleasure in a number of activities (Rubert, Eisdorfer, & Loewenstein, 1996). About 92 percent of older adults wear glasses to help them cope with problems of decreased lens accommodation, acuity, and depth perception. Hearing loss is experienced by about 50 percent of individuals over 75 years of age. Such loss may greatly impair an older adult's sense of safety and pleasure as well as increase one's sense of social isolation (Rubert et al., 1996).

Motor ability and cardiovascular and respiratory systems also commonly undergo marked changes during the years of late adulthood. There is generally a gradual reduction of speed of walking from midlife (Whitbourne, 2005). Reduction of bone strength as well as strength and flexibility of joints, muscles, ligaments, and tendons may also place an individual in considerable pain; the muscle aches and stiffness of arthritis are frequently ascribed to getting old (Leventhal, 1996). The cardiovascular and respiratory systems also undergo changes that decrease one's capacity for exercise tolerance (Leventhal, 1996).

Reproductive capacities for women have ended in middle adulthood at menopause, when women stop ovulating and the menstrual cycle ceases. After this time, estrogen levels decline, and women become more vulnerable to strokes, coronary artery disease, and osteoporosis. Men do not experience the abrupt change in fertility that women do. In fact, they will be able to produce mature sperm throughout most of their lives, with declines coming only in their seventh and eighth decades (Leventhal, 1996). Indeed, an older person's sense of self-worth and the partner's health status were the best predictors of sexual activity among older adults (Marsiglio & Donnelly, 1991).

Psychological Issues

The majority of younger old adults (66–79 years) in many contemporary Western nations are now enjoying many years of relatively good health, burdened by only minor physical impairments. No longer viewed as responsible for the “maintenance of the world,” many of these individuals will find new roles as providers of experience and wisdom in family, friendship, and community networks without the level of responsibility that came during the years of middle adulthood (Erikson, Erikson, & Kivnick, 1986). The role of grandparent is one that many younger old adults report enjoying, as well as coming into a new relationship with their own children. The loss, for many,

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of paid employment gives rise to a new search for vocational satisfaction. Some individuals will find ways to reintegrate previous identity elements that may have been long neglected, where as others may find this task too daunting and retain a sense of unfulfilled potential throughout their remaining years of adulthood (Erikson et al., 1986).

Among very old adults (aged 80 and above), physical decline is generally much more evident and progresses much more rapidly than for those in the younger years of late adulthood (Suzman et al., 1992). As a result, many of the very old must rely on assistance from family members and institutions, and their sense of a previously defined autonomous identity may be required to undergo significant revision. In the United States, financial concerns are likely to increase for those who have outlived their planned retirement incomes, and fear of financial dependency may also threaten their sense of autonomous functioning and competent identity. And certainly the losses of friends, associates, loved ones, and even important contexts (for example, one's family home or community of residence) through death or relocation bring continual readjustments. Such changes cannot help but challenge that sense of continuity that is so vital to optimal identity functioning.

Erikson (1963) has described the psychosocial task of Integrity Versus Despair as the final challenge to be resolved during these last decades of life. He choose integrity and despair to represent opposite poles producing a key tension in the psyche—the tension felt as older individuals struggle for a sense of wholeness and purpose despite deteriorating physical capacities. Important in this task is one's ability to remember early life events and internal states and to reweave what may have been more disparate identity elements back into some form of coherent whole. Erikson chose *wisdom* to symbolize the key strength that emerges from an optimal resolution to the older individual's struggle for integrity and integration.

The importance of the life review in optimal identity integration has been the subject of much empirical study during the later years of adulthood. The task of Integrity Versus Despair requires considerable time in review of one's life and is the grounding for Kierkegaard's well-known observation that although life must be lived forward, it can only be understood by looking back. Robert Butler (1968) initially proposed that a life review is crucial in old age for optimal psychological functioning, and his proposal has spawned several decades of research efforts into this phenomenon. Some of the findings from these studies are reviewed in a later section of this chapter. Cognitive functioning is critical to the psychological process involved in the life review and in finding some resolution to the tension between ego integrity and ultimate despair.

There has been much debate about the issue of cognitive decline during the years of late adulthood. Earlier studies showing cognitive declines in

inductive reasoning during late adulthood were commonly based on cross-sectional data, but more recent longitudinal work has found only slight declines beginning in the early part of late adulthood (Schaie, 1994). However, enormous variation in cognitive functioning among the very old has also been observed (e.g., Bäckman, Wahlin, Small, Herlitz, Winblad, & Fratiglioni, 2004). From the Heidelberg Centenarian Study (Kliegel, Moor, & Rott, 2004), about half of centenarians (people 100 years of age and older) showed moderate to severe cognitive impairment, but about one-fourth of the same sample suffered little, if any, cognitive impairment. Furthermore, the strong performance of this latter group of individuals was rather stable over one and a half years. Thus, enormous variation in cognitive functioning among the very old has been found, and significant numbers of individuals may reach very old age with few signs of cognitive impairments.

Researchers have often found it necessary to examine specific types of cognitive capacities, and the ability for older adults to recall information on long-term memory tasks has shown significant declines (Rybash, Roodin, & Hoyer, 1995). This difficulty may, indeed, present some obstacles to the life review process. Also difficult for many late life adults have been declines in free recall; however, the ability to use cognitive supports such as retrieval cues and increased time for task completion have facilitated these memory skills among those in the Swedish Kungsholmen study of cognitive abilities in old age (Bäckman et al., 2004). Other studies conducted with late-life adults have confirmed the slowing of cognitive processing speed, a major mediator of working memory (Baudouin, Vanneste, & Isingrini, 2004). Many individual factors such as education level, social supports, activity levels, and genetic and health-related factors contribute to the variation in cognitive performance in late adulthood, but recent studies have portrayed a somewhat more optimistic picture of cognitive abilities among late-life adults.

Results from the Berlin Aging Study, however, have shown that old age holds more promise than is generally expected (Baltes & Kunzmann, 2004; Baltes & Staudinger, 1993; Lindenberger & Baltes, 1997). Paul Baltes and his colleagues have been asking questions such as “How can one measure wisdom-related knowledge and skills?” and “Which groups of people are likely to show high levels of wisdom-related knowledge and skills?” in studies of the gains and losses of the aging mind. When one looks at more biologically controlled issues of cognitive mechanics (visual and sensory memory, processes of discrimination, categorization, and coordination), aging does indeed seem to take its toll. However, when one examines intellectual problems in which culture-based knowledge and skills are in the foreground, the situation is much different. Certain groups of older individuals perform far better than younger adults with respect to reading and writing skills, language comprehension, and even strategies to manage life’s

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highs and lows—in short, in the skill of wisdom, conceived as expert knowledge. Chronological age alone is not a sufficient condition for wisdom. But age, in conjunction with lack of disease affecting cognitive functioning, openness to new experiences, good mentoring of younger adults, extensive training in certain life contexts, and broad experiences with the human condition are all elements that contribute strongly to the superior performance of older adults on tasks requiring wisdom. Research on wisdom continues in the Berlin Aging Study, and early indicators suggest that many in their last season of life obtain wisdom-related knowledge.

Societal Influences

Americans are growing older and doing so at an accelerating rate. A child born in 1900 could expect to live to about 47.3 years; a child born in 1960 could expect to live to 69.6 years (U.S. Bureau of the Census, 2003). Current total life expectancy statistics in the United States indicate that men and women who were born in 1970 could expect to live to ages 67.1 and 74.7 years, respectively; for those men and women born in 2000, life expectancies are 74.1 and 79.5 years, respectively (U.S. Bureau of the Census, 2003). For those who are 50 in 2000, the average life expectancy was 77.9 years for men, and 81.8 years for women. The rate of acceleration for those entering late adulthood slowed during the 1990s and will do so in the first decade of the new century due to low fertility rates during the Depression. However, the number of those older than 65 years will more than double when the baby boomers enter late adulthood. From population estimates, in the year 2030 there will be as many individuals older than 65 as younger than 18 (about 20 percent of the U.S. population in each age group; U.S. Bureau of the Census, 2003).

This increase in longevity and its accelerating rate will hold enormous implications for social service requirements of older adults in the years ahead. A society must allocate its social resources according to the age structure of its citizens. Such resources come through the tax base provided by industries and individuals employed in public and private sectors. Birth rates and fertility rates have been declining since 1965 at the same time that longevity has been increasing. This situation means that fewer working individuals will be available to support those in late adulthood years, and competition for social services among the elderly will be great. In identity terms, anxiety must exist among those midlife and younger old adults anticipating an increased life expectancy with fewer available community supports and services in the years ahead.

Recent investigations in the United States have also begun to consider how social policy differentially impacts identity issues in all age groups.

Public policy frequently dictates roles, relationships, and access to opportunity. With reference to late life adults, public policies such as Social Security or Medicaid access deeply impact not only the quality of life possible through economic supports, but also the nature of the relationship of late life adults to other members of their families (Hendricks, 2004). Further research into the ways in which entitlements and public policies influence key aspects of one's sense of self and one's worldview are badly needed. Many European countries have public policies and provisions offering strong economic and health supports to those in their years of late adulthood. Comparative research across nations offering varying types of support systems available to older adults is an important area for future research focus in understanding links between identity and context in later life.

The fact that larger percentages of individuals are now living into very old age means that few role models exist for current cohorts of very old adults of how one can cope successfully with the demands of very old age. In their extensive interviews with late life adults, Erikson and colleagues (1986) noted how frequently study participants discussed the important role model for aging that an older relative or friend had provided. However, the study's subjects, aged 75 to 95 years at the time of the last interview, had now outlived many of their previous guides and were having to face problems of physical disability, illness, or just general physical limitations that many of their predecessors had never lived long enough to experience. Finding ways to cope with diminishing capacities without role models has proved a great challenge to those living into very old age today.

Late adulthood women may also expect to outlive their male contemporaries. In 1990, men slightly outnumbered women in all age groups under 35 years, but women greatly outnumbered men by age 65 and above at a ratio of 3:2 (Longino & Mittelmark, 1996). This trend continues today (U.S. Bureau of the Census, 2003). Thus, married women or those in long-term stable relationships may expect to outlive their partners. Adjusting to a single lifestyle in late adulthood is likely to pose difficult identity adjustments, particularly for those coping with the new psychosocial roles of retiree or pensioner in addition to dealing with loss and increased physical limitations.

Social attitudes toward those in late adulthood differ greatly across cultures, and such social attitudes carry important identity implications regarding one's value as a later life adult. In some societies, it is only in later life that positions of full power and authority are attained (Achenbaum, 1993). Such societies are called *gerontocracies*, and in agricultural gerontocracies, for example, control of property most frequently occurs through inheritance. Thus the elders of a village become more powerful in community affairs than junior residents through their ownership of property. In the United States, however, the elderly are often unjustly stereotyped as nonproductive at best

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or incompetent at worst. *Ageism* is a term coined to describe the unjust stereotyping or prejudiced behavior of a society toward its older members. Negative labels such as “feeble,” “old buzzard,” and “old crow” are frequently applied to older men and women, communicating their lack of value. Such negative, repeated messages communicated to many older adults cannot help but erode their sense of identity and self-esteem during the late adulthood years.

Indeed, Tougas, Lagacé, Sablonnière, and Kocum (2004) in Canada have found that negative views regarding older workers in the workforce have increased. These researchers investigated how negative attitudes (ageism) that 149 older workers had experienced in the workplace impacted their senses of self-esteem and life satisfaction during retirement. Results from their study showed that end-of-career experiences had a strong impact on the identities of new retirees. Feelings of personal discrimination were damaging to one’s personal sense of identity. However, internalizing the negative feelings of one’s work group did not impact self-esteem directly; it was when one internalized the negative feelings of one’s coworkers and also felt a sense of deprivation in comparing one’s own circumstances with younger workers that the self-esteem of older workers was negatively affected. Furthermore, one’s self-esteem upon leaving the workforce was strongly correlated with one’s sense of self-esteem in retirement. Comments offered by participants at the end of the study conveyed a sense of struggle in finding their place in society.

Erikson (1997) noted that our culture lacks a viable ideal of old age and thus, the whole of life. As a result, our society does not know how to integrate its elders into its vital functioning. And so, adults in later life are often overlooked and regarded negatively rather than as bearers of wisdom, according to Erikson.

Section Summary and Implications

Rates of disease do increase for those over age 65, and the majority of those over age 80 do have some type of physical impairment.

Among younger old adults (66–79 years), the majority will experience relatively good health and find new roles as providers of experience and wisdom in family and community roles without the level of responsibility held by those in their middle adult years.

Americans are growing older and at an accelerating rate. Living into very old age (80 years and older) now means that many will have few if any role models for how to cope with the identity adjustments and other demands of aging.

The Course of Identity in Late Adulthood

I know who I've been, but who am I now?

—70-year-old female retired teacher

By contrast to the volume of research on identity development during adolescence and young and middle adulthood, far less work has been undertaken on the process of identity development during the late adulthood years. Within an Eriksonian framework, Vaillant (2002) has reinterviewed participants from three major longitudinal studies conducted in the United States. Participants were primarily in their eighth and ninth decades of life at the time of follow-up. Among the many surprising findings from this large body of interviews was the fact that individual lifestyle choices played a far greater role than genetics, wealth, and ethnicity in predicting life satisfaction during very old age. Furthermore, objective good health was less important to life satisfaction among the very old than was subjective good health; in other words, how one felt about one's health was more important to life satisfaction than what objective evidence from medical reports indicated. More important than one's level of retirement income to life satisfaction (and one's subsequent feelings of integrity) were learning to play and create as well as gaining and maintaining friendships with younger adults as older friends were lost. Alcohol abuse consistently predicted unsuccessful aging, in large measure because it destroyed real and potential social supports.

Indeed Vaillant's (2002) findings for graceful aging reflect many of the concepts Erikson used to define ego integrity. Vaillant found that graceful aging involves the ability to remain open to new ideas, care about others, and accept the past and take sustenance from past accomplishments. Additionally, successful aging involved the ability to enjoy life and retain a sense of humor, to cheerfully accept the indignities of old age, to be graceful about dependency issues, to take care of the self, to cultivate relationships with both old and new friends, and to maintain positive resolutions to earlier Eriksonian psychosocial tasks.

Recently, I have undertaken a small, exploratory study to identify several identity revision as well as maintenance processes for both the younger old and the very old during late adulthood (Kroger, 2002). Among the younger old (defined in this study as age 65–75 years), important identity revision processes included reintegrating important identity elements from younger years before time ran out, rebalancing relationships and other roles, and readjusting to loss and diminished physical capacities. Among the older old, narrowing boundaries of physical and social worlds, finding life meanings, and readjusting following physical or social loss were often important

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identity processes. Important identity maintenance processes among the younger old included establishing visible forms of identity continuity, “typing up the package” (producing a single creative product that brings together important themes and events of their entire life cycles), and retaining important identity elements through loss. Among the older old, identity-maintenance processes included living in the present, maintaining visible forms of continuity (via important possessions), retaining important identity elements through loss, and maintaining a predictable, daily life structure.

Whitbourne (2005) suggests that both past and present life experiences are linked to one’s identity through processes of *assimilation* and *accommodation* (concepts she draws from Piaget but links to Erikson’s psychosocial identity construct). She defines adult identity as one’s representations of oneself with regard to physical appearance and functioning, cognitive capacities, personality features, relationships with others, and in undertaking various social roles. Identity assimilation refers to the interpretation of life events relevant to one’s current sense of identity—those cognitive and affective schemata that are presently held about the self. The forms that identity assimilation can take all involve, to some extent, distortion of facts that are inconsistent with one’s current sense of identity. Identity accommodation, on the other hand, refers to some change in those cognitive and affective schemata so that one’s sense of identity actually changes. A realistic appraisal of one’s identity and life experiences is involved in the process of identity accommodation. The individual seeks a kind of identity homeostasis, in which experiences and identity are consistent or in balance. However, adjustments become necessary when one’s identity does not match an experience. Hence identity assimilation and accommodation processes come into play.

Both identity assimilation and accommodation can take a variety of forms. Forms of identity assimilation give the individual positive information about the self, even if this information is inaccurate. Identity assimilation often involves twisting (distorting) one’s perceptions of experiences so as not to have to change one’s views of the self. Self-justification, identity projection (seeing one’s own unacceptable feelings in others), defensive rigidity, and lack of insight are all forms of identity assimilation that protect positive self-attributions. For example, by using self-justification, an elderly person may refuse to acknowledge physical limitations and undertake highly stressful physical activity. From studies of aging and well-being reported by Whitbourne (2002), it seems that self-justification may be a common assimilation process for those who live into their late adulthood years.

The process of identity accommodation involves trying to arrive at a realistic appraisal of the self in relation to experiences; this process may

ultimately result in changes to one's sense of identity. Identity accommodation often involves acknowledging areas of personal weakness and responding to them. Changes in identity commitments, self-doubts, looking at alternatives, and being responsive to external influences are all mechanisms of identity accommodation. For example, those who are highly susceptible to external influence are most affected by aging stereotypes of society. Whitbourne's model may assist in analyzing the ways in which the younger old and the very old adapt to new circumstances and life experiences.

The Contents of Identity in Late Adulthood

I actually think I value my sense of self more importantly than my family or relationships or health or wealth or wisdom. I do see myself as being on my own, ultimately, you know, and that means you have to be comfortable with that person. Statistics certainly show that older women are likely to end up being alone, so I really do value my own self when it comes right down to things in the end.

—69-year-old female retiree

Erikson (1997) has identified a number of identity components that require a readjustment in psychosocial roles during the younger and older years of late adulthood. These identity adjustments include developing a new lifestyle following retirement, continuing to evolve a meaningful set of ideological values, assuming new roles within the family and other social networks, adjusting to many forms of loss, and coming to terms with one's own death. Certainly, one great adjustment that many will make during their younger years of late adulthood is establishing new interests following retirement.

Current patterns of employment indicate that alongside the trend toward earlier retirement has also come the trend for increasing numbers of younger old adults to retain some level of part-time employment. In addition, there are some distinctive patterns of employment (e.g., alternating periods of unemployment and employment that may characterize some specific populations; U.S. Bureau of the Census, 2003). Certainly, changes in federal law (e.g., the Age Discrimination in Employment Act) enable older individuals to continue working beyond age 65 where age has no impact on job performance; indeed, older workers, considered as a percentage of the total workforce, have been steadily increasing since 1980 and currently constitute about 3 percent of the labor force (U.S. Bureau of the Census, 2003). Mandatory retirement has been banned for all but a few professions where safety or

work performance is an issue, and firing older workers with seniority in cost-cutting efforts on the part of an employer is prohibited now in the United States. The meaning of work for both older men and women has been strongly linked to social contact, personal satisfaction, financial needs, and the need for generativity; some ethnic differences have been found, however, in areas regarded as most important to one's identity (Mor-Barak, 1995). Among those who do fully retire, a considerable realignment of role relationships is involved, as an important piece of one's identity is altered.

This is a very traumatic time for me in retirement. When I finished school, I went to sea and drifted for awhile. But then I joined the fire department and that was a 24-hour-a-day job. The job mattered a lot to me—I really committed myself to it. In fact, it was the job that was more important than money. Then all of a sudden that's gone. People keep telling you that you're retired and keep saying "Now you can enjoy your new life." But as far as I'm concerned, you're on the last train. Your career is finished, your kids are brought up, and you're in the doldrums. You just don't know what you're going to do.

—66-year-old retired male fire department administrator

Identity-crisis and identity-continuity orientations to retirement have been proposed in the gerontology literature as means of understanding the impact of retirement on one's sense of ego identity. There are, however, many factors that may influence both one's adjustment to retirement as well as one's sense of identity in the period of time following this change. Issues such as the reasons for retirement, the conditions of one's health, personality factors, and one's financial circumstances upon leaving the workforce will all impact one's sense of self following this transition. Indeed, those who believe they will undertake this transition smoothly (holding a high degree of retirement self-efficacy) actually experience lower levels of anxiety following the transition than those with lower levels of retirement self-efficacy (Carter & Cook, 1995).

One of the most extensive studies of the retirement experiences of men and women is the Cornell Retirement and Well-Being Study (Quick & Moen, 1998). This study was based on the retirement experiences of men and women aged 50 to 72 years. Women's work lives were less continuous than those of men in this study. Generally, the longer that men worked, the lower their retirement satisfaction. However, the higher the level of advanced planning for retirement among men, the higher was their life satisfaction following retirement. By contrast, among women, higher retirement

satisfaction was found among those with more continuous work histories. These gender differences were found even when factors such as income, one's health status, reason for retiring, and type of employment were controlled.

The single largest impact of retirement is generally a reduction of income, which may bring about additional role readjustments. Furthermore, the best predictor of life satisfaction and self-esteem after retirement is life satisfaction and self-esteem before leaving the workforce (Reitzes, Mutran, & Fernandez, 1996b). Such results suggest continuity, in identity terms, and that our life satisfaction may be less a function of ties to specific roles than it is to the attitudes and values we bring to various life circumstances.

The development of moral reasoning during the late years of adulthood has been a further identity domain receiving some research attention. Michael Pratt and his colleagues (Hunter & Pratt, 1988; Pratt, Diessner, Pratt, Hunsberger, & Pancer, 1996) have been extending Kohlberg's (1984) stage approach to moral reasoning to study the years of late adulthood.

Pratt and colleagues' (1996) longitudinal work involving older (64–80 years) and middle-aged (35–54 years) adults has examined relationships between the development of moral reasoning, integrative complexity of social reasoning, and perspective-taking levels over a four-year time period. Older adults, but not the middle-aged, showed significant declines in their levels of moral reasoning about issues of justice. Older adults also showed lower complexity of social reasoning scores than the middle-aged group. Furthermore, a lower reported level of social support was a predictor of decline in all three areas of reasoning for these older adults; greater opportunities for social interaction might be expected to stimulate older adults into thinking about moral and social issues in more sophisticated ways. Hunter and Pratt (1988) suggest that whereas older adults appear to be no longer evolving toward a higher stage of moral reasoning regarding issues of justice, they may, however, be better than younger adults at articulating the highest stage of moral reasoning that they are capable of understanding.

Relationships mark a further important element of one's sense of identity and well-being as an older adult. How do important relationships contribute to the process of self-definition among late life individuals? Numerous studies of actual and perceived social support have been conducted with older adults in relation to such factors as continuity in the sense of self (e.g., Troll & Skaff, 1997), life history perceptions (e.g., Rennemark & Hagberg, 1997), physical functioning (e.g., McIntosh, Kaplan, Kubena, & Landman, 1993), quality of life (e.g., Newsom & Schulz, 1996), and feelings of well-being (e.g., Gupta & Korte, 1994). Having at least one confidante as well as a peer group is positively related to one's sense of well-being and a stable sense of

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self in late adulthood; having a confidante alone has not been associated with the highest levels of well-being (Gupta & Korte, 1994).

The value of diverse relationships, each having a specialized provision, appears to be important to subjective experiences of well-being and one's sense of identity in old age. Different relationships fill different needs, particularly for those in late adulthood. Some of these relationships will be primarily for practical assistance; others may be for providing a sense of continuity via shared past experiences; others may fill specific emotional needs and provide intimacy, whereas still others will provide companionship in shared activities. Relationships with younger generations may exist to provide outlets for generativity, whereas relations with those of even older cohorts may provide models for aging or give new insights and experiences for the aging individual. The absence of any of these types of relationships may affect the subjective well-being and sense of self in later life (Gupta & Korte, 1994).

Identity and Integrity in Late Adulthood

I've seen many things in my life, both joyous and tragic, and I've been stretched in directions that I never would have imagined possible when I started out in my 20s. But what I think I value most in life now is a sense of integrity. "To thine own self, be true."

—80-year-old retired female teacher

Integrity Versus Despair is Erikson's eighth and final psychosocial stage in the human life cycle. Erikson (1997) has detailed some of the issues involved in this task by pointing to the struggle for finding a sense of integration in one's identity through the various situations and events that have helped to shape one's life. This integration occurs through such means as reviewing one's life to find threads of continuity and discontinuity and attempting to reintegrate or reconcile those elements that may have long been denied or abandoned. It also involves finding some kind of existential meaning in one's life cycle and coming to terms with the many changes and losses that any life is likely to encounter. Integrity's ultimate demand is facing death, ideally with some level of acceptance, peace, and sense of completion. In addition, Joan Erikson has recently described a ninth life cycle stage, to mark an extension of Integrity Versus Despair issues into very old age. In very old age, issues of despair arise in full force, as independence, control, and self-esteem are threatened by the physical declines of this ninth stage. However, as in all preceding stages, conflict is the source of growth, challenge, and potency even for the very old.

As we passed through the years of generativity, it had never felt as though the end of the road were here and now. We had still taken years ahead for granted. At 90 the vistas changed; the view ahead became limited and unclear. Death's door, which we always knew was expectable but had taken in stride, now seemed just down the block.

—Joan Erikson, cited in Erikson, 1997, p. 4

It is only in recent years that social science researchers have begun to explore and refine some of the constructs elucidated by Erikson in the final stage of Integrity Versus Despair. Indeed, this stage is perhaps the least researched of all stages in Erikson's life cycle scheme. Researchers have now attempted to test Erikson's assumptions about Integrity Versus Despair as a primary focus of late adulthood. Sheldon and Kasser (2001) indeed found that among their cross-sectional sample of Midwestern participants (ranging from a university age group to late life adults) that generativity and integrity strivings did increase with age, while identity strivings generally decreased; however, only the integrity strivings evidenced a pronounced positive skew across the four age groups studied. Thus strivings for integrity as well as psychosocial maturity occurred with increasing frequency across the adult life span; however, strivings for intimacy remained equally salient across this time span.

Among other phenomena that have been attracting research attention are ways of assessing Integrity Versus Despair, existential concerns in the stage of Integrity Versus Despair, the role and function of the life review, the phenomenon of wisdom, issues of identity continuity and discontinuity in very old age, general life satisfaction and well-being, dealing with losses and physical decline, and coming to terms with death. Examples of some of the directions research has taken in these areas are presented in the next paragraph, although a more thorough discussion of identity readjustments following serious illness and in the face of death will be addressed as special topics in Chapter 9.

Several measures of Integrity Versus Despair have been developed. These include the Inventory of Psychosocial Balance (which assesses degree of resolution to all of Erikson's psychosocial stages; Domino & Affonso, 1990), the Integrity subscale of the Modified Eriksonian Psychosocial Inventory (Darling-Fisher & Leidy, 1988), the Ego Integrity Status Interview (Walaskay, Whitbourne, & Nehrke, 1983–84), and the Self Examination Interview (Hearn, Glenham, Strayer, Koopman, & Marcia, 2006). The latter two instruments adopt a status approach, again reconceptualizing Erikson's bipolar task as one involving alternative styles of resolution.

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One promising instrument developed by Hearn and colleagues (2006) has operationalized two dimensions of ego integrity inferred from Erikson's writings: *Perspective* (detachment, or the capacity to put aside personal views and self-interest in the service of a broader outlook) and *Connectedness* (vital involvement, deep and meaningful engagement with family, friends, and community). On the basis of these two dimensions, four integrity statuses have been postulated:

- *Integrated*—People who are knowledgeably committed to actions, values, and ideals, with a sense of continuity in their lives, present, past and future; they are deeply connected with significant others.
- *Nonexploratory*—People who are partially integrated, committed to a narrow scope of activities but not particularly knowledgeable regarding alternatives; there is little self-examination or deviation from the values by which they were raised, though they are generally content.
- *Pseudointegrated*—People who are also partially integrated but lack a depth of commitment to actions, ideals, and values as well as to others; there is an underlying sense of discontent with a life lived according to platitudes rather than according to genuine, deeply felt personal beliefs and values.
- *Despairing*—People who are not committed to current viable courses of action, ideals, or values and have little life satisfaction; they convey a sense of bitterness or regret about opportunities lost with little affirmation of their own or others' lives.

Initial steps have been undertaken to assess reliability of interview ratings and to validate these integrity statuses with measures of openness to experience, competence, geriatric depression, and the Integrity scale from the Modified Eriksonian Psychosocial Inventory.

Integrated people were found to be competent, open, likable, curious, and very much involved with the world, displaying qualities Erikson has associated with integrity. *Nonexploratory* individuals were generally extroverted and contented, although not open to new experiences, with concerns primarily centered on the family and immediate social group. They were resistant to introspection. *Pseudointegrated* individuals were often angry, preoccupied with interpersonal problems, and/or isolated in social relationships. They were less satisfied with life than individuals in the preceding two groups, and at the same time, more neurotic and less socially responsible. The *despairing* in this study, though too small in number for adequate analysis, were low on openness and high on depression measures, indicating little general life satisfaction.

What is the relationship between identity and integrity in late adulthood? When a subgroup of individuals assessed according to the previously

mentioned integrity statuses were given Marcia and colleagues' (1993) Identity Status Interview by interviewers unaware of participants' integrity status assessments, some interesting links were found. Predictably, those who had achieved a sense of identity were also rated integrated, whereas those who were foreclosed in identity were typically rated as only partially integrated. Small numbers precluded any conclusions regarding the identity diffuse and their integrity status (Glenham & Strayer, 1994). Thus, preliminary evidence suggests that achieving a sense of ego identity is associated with attaining ego integrity in late adulthood. Several studies have also attempted to predict ego integrity from resolutions to earlier Eriksonian stages. Hannah, Domino, Figueredo, and Hendrickson (1996) have also found, for example, that adequate resolution of psychosocial tasks in earlier life phases to be a prerequisite for optimal resolution of ego integrity in old age.

General, existential questions of older adults has also been a focus of recent research attention, as individuals begin to understand the place of their own lives in broader contexts. Late adulthood holds a number of existential challenges, such as coming to terms with the transitory nature of life and its approaching end, dealing with questions of the meanings of one's life and ultimate religious or spiritual questions, and enduring possible illness, suffering, loss of significant relationships, and loneliness. Researchers in Graz, Austria, conducted several surveys with older and younger adults to show that the previous issues were important preoccupations among both younger and older adults as they considered their lives in old age (Längle, 2004). However, from these same surveys, late adulthood was also a time for greater tranquility, wisdom, maturity, independence, and special relationships, for example with grandchildren.

How is reminiscing related to ego integrity in old age? In recent years there has been a good deal of research focused on the role of reminiscence and the life review to identity consolidation and integrity in late adulthood. Research involving the life review and continuity of the self through time has been undertaken with older adults in relation to Erikson's concept of ego integrity. Boylin, Gordon, and Nehrke (1976) found high reminiscing frequency and affect to be positively correlated with a measure of ego integrity. Taft and Nehrke (1990) found reminiscence for the purpose of life review to be positively correlated with high ego integrity scores in a sample of elderly nursing home residents. While no relationship was found between reminiscing and life satisfaction in a sample of nursing home residents (Cook, 1991), group reminiscence did facilitate social interaction. Reminiscence may be an important process involved in the attainment of ego integrity.

Ego integrity has also been studied directly in relation to many other life adjustment issues, such as one's fear of death and continuity of identity over

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time. Older adults appear better able to face issues of mortality than younger or middle-aged adults, particularly those older individuals who have attained some resolution to Integrity Versus Despair (Goebel & Boeck, 1986). This finding may result from the greater likelihood that older people will have confronted the death of significant others more frequently than younger individuals; those finding greater acceptance of their own mortality were more likely to have achieved a sense of ego integrity. Fishman (1992) also found, when controlling for age and sex, that the higher the level of ego integrity, the lower the level of death anxiety among older adults.

What kinds of factors are associated with general life satisfaction and quality of life experienced among older adults? Life satisfaction and quality of life experiences are important indicators of resolution to Erikson's task of Integrity Versus Despair in late adulthood and a growing area of research focus. One's subjective experience of one's age has appeared as a more important predictor of physical and psychological well-being than actual chronological age. In general, people feel relatively younger as they get older, and age identity is closely linked to well-being (Kaufman & Elder, 2002); from this same work, old age was perceived to begin around age 74. Negative affect generally decreases as people age (Charles, Reynolds, & Gatz, 2001). In Great Britain, research has shown that quality of life, at least in the early years of late adulthood, seems very much influenced by current contextual factors and serious health problems; disadvantage from earlier childhood and adulthood years does not preclude a good quality of life at least in the early years of old age (Blane, Higgs, Hyde, & Wiggins, 2004). From the Berlin Aging Study, which assessed more than 200 people between 70 and 103 years, some three-quarters of all participants added new domains of hope (primarily self-improvement) to their future self images; indeed, far from disengagement in the future, these older adults demonstrated active involvement in both the present and future, even as length of time left to live became increasingly reduced. In sum, it appears that if current contextual circumstances are satisfying and one has relatively good health, then one is likely to experience high life satisfaction; furthermore, even very old adults have expressed interest in self-improvement as they think about possible future selves.

Contexts Affecting Identity in Late Adulthood

It is only in very recent decades that the oldest old have been available for study, so much remains to be learned about the impact of social context on late life adults. The study of aging has generated little of its own theory, apart from ideas regarding *disengagement* in which Cumming and Henry

(1961) argued that there was an inherent process of mutual withdrawal between the elderly and their societies. This framework for viewing the aging process was set up at a time in the United States when successful aging was viewed as remaining as much like a middle-aged person as possible (Coleman, 1995). Unfortunately, this perspective on aging was used as the basis for social policy that advocated no more than custodial practices in residential care facilities; furthermore, such facilities were usually placed on the outskirts of towns and cities.

In response to this theory of disengagement, a number of gerontologists through the 1970s advocated that there should be no social or cultural expectations of how older adults should live and behave; rather, they should create their own norms and values for living in later years themselves (e.g., Rosow, 1974). This view, however, proved equally detrimental, for it seemed that both society and the elderly needed some kind of framework as a basis for both social policy and individual adjustment during the later years of adulthood (Coleman, 1995). Thus, Erikson's contributions (Erikson, 1963; Erikson, Erikson, & Kivnick, 1986) have provided a valuable resource for practitioners as well as researchers and policy makers by illustrating how old age must be understood as an integral part of the life span. As a result, practitioners have been encouraged to consider an individual's strengths, which may have emerged over the course of a life span, rather than exaggerating disability (Coleman, 1995). Each of the general social contexts that follow plays an important role in helping to shape individual identity during the years of later life.

The Family/Social Network

Family structure and functioning, social network activity, and formal and informal supports all play an important role in successful identity adaptation to changes in physical and intellectual capacities resulting from the aging process. Some gender differences have appeared in the structures and functions of social networks and their associations with life history evaluations among the elderly (Rennemark & Hagberg, 1997). For women, social anchorage has been an important function of social networks, while among men, social influence was more important. However, social participation and social support are important issues for both men and women. Additionally, one's sense of personal coherence in later years is partly influencing the relationship between social network patterns and life history evaluations for both genders.

One important family-related issue that many in their late adulthood years will experience is becoming a widow or widower. Nearly half of all women over age 65 in the United States are widows, while only about

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14 percent of men are widowers (U.S. Bureau of the Census, 2003). Women in the late adult years are far less likely to remarry than are men. The majority of widows live alone. In fact, the percentage of older women over age 75 living alone in the United States has been increasing to the extent that they are now the norm among elderly women (U.S. Bureau of the Census, 2003). Adjusting to widowhood and a new (often single) life is a key identity task of late adulthood for many older women.

How does widowhood affect identity in late adult life? As will be described in the next chapter, loss of a partner through death is one of the most stressful life events one may experience. Among other things, widowhood involves the loss of a shared reality that may have provided an important identity anchor. Widowhood may, however, bring new levels of identity integration, at least for some. Identity adjustments to widowhood have been examined by Thomas, DiGiulio, and Sheehan (1988). Using Marcia's (1966) Identity Status Interview, the researchers found the majority of older individuals in the sample to be identity achieved some five years following loss of a partner. Little support was found for the pathological cast often given to widowhood. Rather, the data best fit a developmental model of crisis resolution. However, the oldest age group (55–74 years) did report the highest percentage of negative as well as positive self-perceived changes following widowhood compared with midlife and young adult age groups.

How do one's connections with others relate to life satisfaction in late adulthood? Research on well-being and elders' social networks have generally focused on two important functions: social support and social comparison. Social support has been a demonstrated mediator in reported quality of life; lower reported social support is an important reason for decreases in life satisfaction and increases in depressive symptoms found among older populations (Newsom & Schulz, 1996). Social comparison processes have been shown to be important means by which the elderly maintain or enhance their feelings of well-being in the face of impairment, illness, and loss. More frequent social comparisons have been associated with lower physical health status, but more positive social comparisons have been linked to better mental health outcomes (Heidrich & Ryff, 1993).

Carstensen (1995) and Lang and Carstensen (2002) have provided an overview of some ways by which later life adults actively structure their social environments to maximize opportunities for positive emotional experiences and minimize negative ones. Whereas gerontology researchers have long noted that peoples' social contacts decrease with age, Carstensen (1995) has demonstrated that the frequency of emotionally meaningful contacts actually increases during the years of late adulthood. Relative to younger people, older adults are less motivated to engage in emotionally meaningless

social contact. At the same time, late life adults are less likely to seek social interaction for purposes of gaining new information by contrast to those in early adulthood. In Germany, for example, Lang and Carstensen (2002) found that older individuals perceived their time as more limited than younger adults and thus prioritized emotionally meaningful goals such as being with close friends and family, rather than meeting new people.

The Broader Community

If I knew tomorrow that I had only six months to live, what would I do? I would complete writing the history of my tribal origins. I would work to strengthen the economic base of my people. I would have time with my family. I would do a little sailing. And while I was physically capable, I would give as much loving as I possibly could.

—70-year-old male community tribal elder

Erikson and colleagues (1986) have argued that late-life adults are generally concerned with what will happen to their society after they die. The community, for some, has offered confirmation of one's ethnic identity and a chance to shape the future of one's ethnic group, as illustrated by the previous quote. For others, the community has offered recognition of other elements of ego identity as well as a focus for some forms of generativity. At the same time, however, one's society may have changed in the values once deemed important by an elder so that acceptance may be extremely difficult, and optimally balancing integrity with despair may be a formidable task. It is likely to be harder to die in a society holding values at some distance from those by which one was raised (Coleman, 1995).

What are the effects of living arrangements and of residential location and relocation on ego identity during the late adulthood years? From the 2000 census in the United States, nearly 22 percent of all householders were aged 65 and older (U.S. Bureau of the Census, 2003). Living arrangements for most people change markedly after age 75, however, with the younger old living predominantly in family households with a partner whereas nearly 60 percent of the very old live either alone or with people other than a spouse (U.S. Bureau of the Census, 2003). Of those living alone, women outnumber men by nearly two to one in the years of late adulthood (U.S. Bureau of the Census, 2003). Surveys have shown that the majority of older individuals in our society wish to live in their own homes and never move as they grow older (Rybash et al., 1995). Such desires to "age in place" may indicate the importance to one's identity in late adulthood of having a

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physical sense of continuity with the past while facing an unknown future. Through stability in living arrangements, older adults may also feel a greater sense of security in familiar places and life routines that they have created through identity-related interests.

Johnson and Barer (1993) have shown how boundaries around physical and social environments are often narrowed by those older than 85 as one of several adaptive strategies to cope with increasing physical impairments. However, not all are able to “age in place” as they grow older, and residential relocation has been shown to present a real challenge to personal identity for some (Elias & Iniu, 1993; Ryff & Essex, 1992). It seems that home may hold far greater meaning and identity-related links for older, compared with younger adults. For those who do have to cope with relocation, feelings of well-being are strongly linked to the congruence between personal needs and what the new setting provides (Ryff & Essex, 1992).

Section Summary and Implications

One important identity-related issue of late adulthood is the increased likelihood of becoming a widow or widower. Women are far less likely to remarry than men. Learning new skills to cope with a single lifestyle is a key identity task for many women in their late adult years. Involvement with family, a significant other, and the community have been linked with higher levels of life satisfaction for both men and women in late adulthood.

Many in their late adult years desire to “age in place.” Stability of living arrangements for the very old is often not possible, and residential relocation may present very real identity challenges for some.

Back to the Beginning

Three questions and Alison’s words introduced this chapter on identity in the late adulthood years. At age 67, Alison feels she is in another identity transition, as she reflects back over the past two years and the many changes that have come to her life. The death of her remaining parent at age 65 made her aware that she was now in the oldest generation of her family. Although Alison felt ready to leave paid employment, she now feels very much in transition, with another challenge yet ahead. Alison does not indicate what this challenge is, but she does express fears of physical decline in the years to come. It may be that the challenge Alison feels is that of finding an optimal

balance between Integrity Versus Despair. Finding continued sources of identity expression despite the constraints that aging may bring and being at peace with the life lived while preparing for its end are some of the many tasks that this chapter has overviewed in its discussion of identity during the years of late adulthood.

Answers to Chapter Questions

◆ **How does an aging body affect one's sense of identity in late adulthood years?**

Among the younger old, many will lead active lives, although rates of disease increase dramatically. The majority of those over age 80 do have some physical impairment, however, such as hearing or visual loss. One's ability to enjoy previous roles and activities in modified form has been associated with a sense of well-being in late adulthood.

◆ **Are cognitive declines inevitable in old age?**

Some abilities, like visual and sensory memory, do decline in old age. However, Baltes found that wisdom is superior among some groups of older adults compared to those in early and middle adulthood. A breadth of life experiences may contribute to the greater likelihood of wisdom in old age.

◆ **How is identity related to one's resolution of Integrity Versus Despair issues in old age?**

Preliminary research suggests that attaining ego integrity is associated with achieving a sense of ego identity. Those foreclosed in identity in late adulthood have been found to be only partly integrated.



As we had passed through the years of generativity, it had never felt as though the end of the road were here and now. We had still taken years ahead for granted. At ninety the vistas changed; the view ahead became limited and unclear. Death's door, which we always knew was expectable but had taken in stride, now seemed just down the block.

—Joan Erikson, cited in Erikson, 1997, p. 4