

LIFE BEYOND 80:  
WHAT PROVIDES MEANING AND SATISFACTION



Maureen Margaret Clarke



LIFE BEYOND 80:  
WHAT PROVIDES MEANING AND SATISFACTION

A dissertation submitted to  
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in partial fulfillment of the requirements  
for the degree of  
Doctor of Philosophy in Clinical Social Work

By

MAUREEN MARGARET CLARKE

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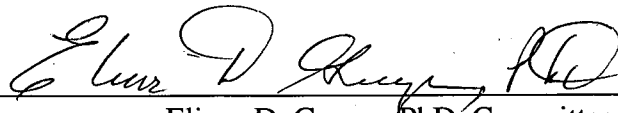
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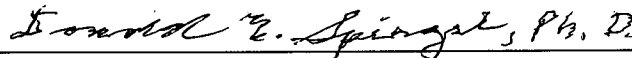
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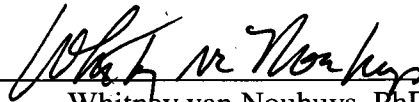
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"Late one night, she dared to look into the abyss  
She stuffed bedclothes down her throat gagging the horror  
All three, mother and children shunned his funeral:  
"he's not in a hole in the ground, he's here with us," she said,  
"forever." Her daughters echoed without comprehension,  
"here with us;" the years passed, they failed to find him

Her two daughters married. Defying probability  
both husbands died by suicide-- one by immolation  
An artist who tinted the world but couldn't get it right  
His wife held watch until the final breath of the charred body

The other husband, part mystic, all gentle spirit  
dubbed himself her son-out-law. When his wife left  
he drove a knife into his heart--violence learned in Vietnam  
The three widows went to his house searching for a clue:  
on his kitchen wall he had painted a rainbow; on the bedroom  
floor, the mattress had an inefaceable bloodstain

One daughter proposed they alter history: reject widowhood  
claim divorce. In their finest family tradition, mirth damped  
down despair, their laughter splashed across "The Days of  
(their) Lives"

(their) Lives”

In time the scenario was perfected, love came to their pocked  
terrain

For all three it was welcomed: mother, daughters, peaceful  
women,

they asked, they answered: Why us...Why not

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## ABSTRACT

### LIFE BEYOND 80: WHAT PROVIDES MEANING AND SATISFACTION

MAUREEN MARGARET CLARKE

This is an exploratory study examining what provides meaning and satisfaction for persons age 80 and older. Meaning is defined as what has value, purpose, and significance. Satisfaction is defined as feeling contented, feeling fulfilled, and experiencing pleasure.

Eight participants were interviewed using open ended questions that focused on physical health, family of origin experiences, religious orientation, economic status, marital relationships, relationships with children and grandchildren, current living situation, and feelings and attitudes about aging and death.

The eight participants in this study were all Caucasians, in relatively good health, economically secure, maintained satisfying relationships with their adult children, continued to enjoy activities, were satisfied with their living situations, were concerned about world events and focused on living in the present. Having lived through two significant socio-cultural events in history, namely the Great Depression and World War II, these participants' individual personalities reflect the qualities of courage, endurance, and resilience. Possessing these qualities enabled them to overcome tragedies and losses, which enhanced their self-esteem.

Meaning and satisfaction for these participants was found in their relationships with their families and friends, continuing to be active and involved in living,

experiencing their sense of self as being contiguous over their life span, and being satisfied with the persons they are.

## DEDICATION

In loving memory of Joseph Patrick Clarke

A life lived well

And to those who continue to go on being:

Margaret Clarke

Sheila Clarke

and Kevin Clarke



## ACKNOWLEDGEMENTS

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## **CHAPTER ONE: INTRODUCTION**

The perception of one as elderly has been evolving over the last several decades. As little as 50 years ago, people in their 70s were considered old. Moreover, 20 years earlier, someone who achieved the age of 60 or 65 was considered old, and middle age began at 40. Our concept of old is radically different today as more people are living well into their 80s and beyond. Therefore, it is important and necessary to examine the perspectives and experiences of this growing population. One aspect of the aging process this dissertation seeks to address is the emotional experiences of persons 80 and older.

The ever-increasing aging population is creating a need for a broader understanding of the aging process and for increased elderly-related services, whether for physical and health, emotional and social, or financial issues. Issues related to quality of life emerge as important topics for study, and the experiences of those 80 years and older provide a rich and invaluable source of information. Therefore, professional clinical social workers need to identify and appreciate the experiences of an aging person to be better able to address his or her challenges, struggles, and strengths. Understanding the aging process and identifying elements that enhance the quality of an individual's last stage of life will assist in providing clinical services for those in or who will soon enter into this phase.

### **The New Frontier of Aging**

My interest in the elderly began when I was in high school and volunteered at a senior housing center, where I visited with seniors on a weekly basis. I was intrigued by their life stories and continued enthusiasm for living, despite what I perceived to be loneliness, infirmity, and isolation. This interest has persisted throughout my social work

career and was highlighted when I was confronted with assisting my aging parents. The experience with my parents opened my eyes to the world of the *aged*.

My maternal grandparents passed away while still living independently in their home and did not endure any prolonged illnesses; rather, they died suddenly in their 70s. My paternal grandfather died when my father was 13, and my paternal grandmother passed away unexpectedly while living with us. I wondered how persons who, living into their 80s and beyond with few or no role models, cope with living beyond their own parents' lives. Unlike previous generations of aging persons, my parents' generation's lifespan was longer due to advances in medicine.

The experiences of aging persons differ from generation to generation. For example, my parents continued to work until they were 70 years old and then enjoyed travel and activities in their retirement years until health concerns limited their actions, whereas my grandparents did not have comparable experiences at similar ages. Furthermore, my grandparents lived in close proximity to their adult children, whereas my parents' adult children all resided out of state. Thus, likewise, I did not experience with my parents what they had experienced with their parents.

Bernice Neugarten, who was a pioneer in the field of gerontology, researched the aging process extensively from her first paper written in 1958 until her last in 1974. She is credited with coining the terms the "young-old" and the "old-old" (D. Neugarten, 1996, p. xi).

As more and more people survive to very advanced age, we must differentiate the generations that now make up the elderly. Gerontologists refer to the segment of

elderly aged 60 to 75 as the “young-old” and to those of 75-plus as the “old-old” (B. Neugarten, 1974).

In addition, as the 85-plus segment increases exponentially, there is a need to further differentiate with the classification “oldest-old” as suggested in 1989 by (Nygren, Norberg, & Lundman, 2007, p. 1060).

It is necessary to categorize the young-old, the old-old, and the oldest-old because as younger cohorts enter these stages of the lifecycle in better health, more educated, and more successful financially than previous generations, the differences among these groups increases (AARP, 1987). (Stafford & Krell, 1992, p. 5)

As a Social Work professional, I am committed to the National Association of Social Worker’s Code of Ethics. I firmly believe in the dignity and worth of each individual person.

The primary mission of the social work profession is to enhance human wellbeing and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession’s focus on individual wellbeing in a social context and the wellbeing of society. Fundamental to social work is attention to the environmental forces that create, contribute to, and address problems in living. (National Association of Social Workers, 2013, Preamble, para. 1)

Social work philosophy emphasizes quality of life; thus, it seems appropriate that I address the end stage of life from the perspective of *quality* of life. Researchers at the

University of Toronto's Quality of Life Research Unit define quality of life as "the degree to which a person enjoys the important possibilities of his or her life" (University of Toronto Quality of Life Research Unit [University of Toronto], 2009, p. 3). Their Quality of Life Model is based on the categories "being," "belonging," and "becoming," which signify, respectively, who one is, how one is connected to one's environment, and whether one achieves one's personal goals, hopes, and aspirations.

### **Relevance and Purpose of the Study**

The question of what provides meaning and satisfaction for persons 80 and older is of particular relevance to "baby boomers," who most likely will be alive well into their 80s, 90s, and older. Therefore, it is fitting to examine what the older generations now, who currently serve as *role models*, are experiencing at this point in their lives.

Persons older than 80 are the fastest growing population in the United States. By 2020, one of every four people will be 65 or older. Subsequently, one of every four Americans will be involved in some aspect of care giving. Eight of 10 of people will be faced with long-term care decisions for themselves and for their spouse, parents, or other family members (Grant, 2010, p. 1.) Given these circumstances, society will be forced to accommodate the relevant changes in support of service needs. Awareness and knowledge of the meta-psychic dynamics of the aging population will be necessary. Therefore, it is important to have an understanding of what elements provide satisfaction and meaning for persons 80 and older.

The purpose of this research is to explore the end stage of life from the perspective of what is positive and meaningful for aging individuals. As I observed and participated in my own parents' aging journeys, I was struck by the amount of losses and

transitions they encountered and often questioned what sustained them and kept them engaged in life.

The ultimate goal of this research is to contribute to the development of a knowledge base concerning the latter stage of life and to understand the complexities and individual variations that persons experience during this period. This knowledge will better inform social work clinical practice with this population, assist in the creation of meaningful relationships with these individuals, and highlight what services are required to improve this population's quality of life, which includes services beyond physical care.

This study will explore what provides meaning for persons aged 80 and older. The findings seek to answer what gives this population pleasure, what impact physical health has on their sense of well-being, and what impact loss and grief have on their lives?

I will use the theoretical framework of Erik Erickson and his wife, Joan, who, in the extended version of their book, *The Life Cycle Completed*, identified a ninth stage of development: despair and disgust versus integrity: wisdom (Erikson & Erikson, 1997, p. 112). Joan Erickson states:

In our final definition of "wisdom", we claim that wisdom rests in the capacity to see, look, and remember, as well as to listen, hear, and remember. Integrity, we maintain, demands tact, contact and touch. This is a serious demand on the senses of elders. It takes a lifetime to learn to be tactful and demands both patience and skill; it is all too easy to become weary and discouraged. (Erikson & Erikson, 1977, p. 112)

Joan Erickson contends that life in a person's 80s and 90s brings new demands and presents daily difficulties in view of one's natural physical decline. She asserts that

even the healthiest individual who has made every effort to maintain their physical well-being most likely will encounter deterioration of the senses due to the natural aging process. She claims that the losses of physical ability are imminent and that when independence and control are challenged, self-esteem and confidence will be weakened.

The Ericksons assert that life in the eighth stage includes a retrospective accounting of one's life to date; how much one embraces life as having been well lived, as opposed to regretting missed opportunities. How one experiences this process will contribute to the degree of disgust and despair one experiences.

“As Erik has reminded us, ‘Despair expresses the feeling that the time is now short, too short for the attempt to start another life and to try out alternate roads’”( Joan M. Erikson, 1997, p. 113) Joan Erickson when writing about the ninth stage states:

In one's eighties and nineties, one may no longer have the luxury of such retrospective despair. Loss of capacities and disintegration may demand almost all of one's attention. One's focus may become thoroughly circumscribed by concerns of daily functioning so that it is enough just to get through a day intact, however satisfied, or dissatisfied one feels about one's previous life history. Of course despair in response to these more immediate and acute events is compounded by earlier self and life evaluations. An elder in his or her eighties or nineties is also apt to have experienced many losses, some of distant relationships and some of more profound and close relationships-parents, partners, and even children. There is much sorrow to cope with plus a clear announcement that death's door is open and not so far away. Should you be living and coping with all these hurdles and losses at ninety or more, you have one firm foothold to depend



on. From the beginning, we are blessed with basic trust. Without it life is impossible, and with it we have endured. As an enduring strength, it has accompanied and bolstered us with hope. Whatever the specific sources of our basic trust may be or have been, and no matter how severely hope has been challenged, it has never abandoned us completely. Life without it is simply unthinkable. If you still are filled with the intensity of being and hope for what may be further grace and enlightenment, then you have reason for living. I am persuaded that if elders can come to terms with the dystonic elements in their life experiences in the ninth stage, they may successfully make headway on the path to gerotranscendence. (Erikson & Erikson, 1977, pp. 113–114)

Joan Erickson quotes Lars Tornstam's definition of the word "gerotranscendence" in *The Life Cycle Completed*, as the following:

Gerotranscendence is a shift in meta perspective, from a materialistic and rational vision to a more cosmic and transcendent one, normally followed by an increase in life satisfaction. As in Jung's theory of the individuation process, gerotranscendence is regarded as the final stage in a natural process towards maturation and wisdom. It defines a reality somewhat different from the normal mid-life reality, which gerontologists tend to project on old age. According to the theory, the gerotranscendent individual experiences a new feeling of cosmic communion with the spirit of the universe, a redefinition of time, space, life, and death, and a redefinition of the self. This individual might also experience a decrease in interest in material things and a greater need for solitary meditation. (Erikson & Erikson, 1977, pp. 123–124).

The Eriksons ask the intriguing question, “What should normal psychic development from maturity to death be?” (Erikson, 1963, p. 269) Each individual uniquely experiences the process of aging. The experience of our sense of time seems predominately focused in the here and now. *Old age* is a time thought of in the distant future until another birthday reflects otherwise. Marc Agronin, a geriatric psychiatrist for the Miami Jewish Health systems, states the following regarding the process of aging

All of us lapse into such mistaken impressions of old age from time to time. It stems in part from an age-centered perspective, in which we view our own age as the most normal of times, the way all life should be. At 18, the 50-year-olds seem ancient, but at 50 we are apt to say the same about the 80-year-olds.

In the end, there is a cost to our myopic view of aging. We imagine the pains of late-life ailments but not the joys of new pursuits; we recoil at the losses and loneliness and fail to embrace the wisdom and meaning that only age can bring. Henry Wadsworth Longfellow captured the sentiment well:

For age is opportunity no less  
 Than youth itself, though in another dress,  
 And as the evening twilight fades away  
 The sky is filled with stars, invisible by day.

(as cited in Agronin, 2010, pp. 1–2)

What is it that enables those 80 and older to see beyond the stars? As their eyesight alters, are there other senses that become active and more sensitive to what may be invisible to younger people? Aging is not really a problem to be understood but, rather, a process to be examined. American culture in the 21st century is obsessed with

remaining *youthful*. Yet, there is value to be gained from examining the thoughts and feelings of persons 80 and older. I question what impact our cultural bias and emphasis on being youthful has on the aged person.

Today's seventy-five year-old may actually live another twenty-five years, but few place much value on those years. Instead we are taught by our culture and our media to devalue and denigrate ageing and the aged, as evidenced by the number of derogatory terms like, "over-the-hill," "geezer," "old coot," and, "old biddy," replete in our language. This bias is ageism—youth is positive, age is negative. And ageism touches every part of our culture. (Matteson, 2007, p. 4).

How we perceive the process of aging and our ultimate exit from life is a topic that, in the United States, is viewed pessimistically. Many elderly persons face negative reactions from the younger generations. These negative reactions can influence the elderly person's sense of value, sense of worth, and feelings of lovability—basic components of self-esteem. Social workers' feelings and thoughts about becoming old can affect how they approach their clinical work with the aged. Therefore, it is important to develop an understanding of the impact that societal attitudes regarding being *old* have on older patients. Equally important for the field of clinical social work is the mission to educate others and illuminate various aspects of the aging process, which may influence current American cultural attitudes regarding the elderly population.

As our life span increases, we will inevitably encounter more losses. These losses can include our own physical health and functioning, employment, and the loss of close friends and relatives.

Judith Viorst writes in her book, *Necessary Losses* (1986):

Old age brings many losses; we shall hear from those who rail against these losses. But there is another, more hopeful point of view. It argues that if we truly mourn the losses of old age, mourning can liberate us, can lead us through to “creative freedoms, further development, joy and the ability to embrace life.” (p. 284)

This dissertation seeks to expand our vision of what it is like living beyond 80 years and what elements give this final stage of life meaning. Meaning can be defined as what has value, purpose, and significance. Satisfaction can be defined as feeling contented, feeling fulfilled, and experiencing pleasure. This research asks the question of what provides meaning and satisfaction for people 80 years and older.

There are a number of factors that may impact quality of life after 80: (a) health status, including mental status, sexual desires, emotional health, and the paradoxical nature of the aging process; (b) spiritual and religious beliefs; (c) living situation, whether living independently or in a facility; (d) connections with others/ family status/sense of community; (e) economic security; (f) culture; (g) ethnic identification and affiliation; and (h) a sense of feeling valuable.

This dissertation is a qualitative research study using grounded theory procedures and techniques. The definition of a grounded theory is “a specific methodology for the purpose of building theory from data,” as developed by Glaser and Strauss (2010, p. 1). A qualitative research study was chosen because it allows the researcher to “get at the inner experience of participants, to determine how meanings are formed through and in culture, and to discover rather than test variables” (Corbin & Strauss, 2008, p. 12).

My participants were persons aged 80 and older. I interviewed between five and eight participants living independently in their own homes or persons living in assisted-living facilities.

### **Statement of the Topic**

The over-80 population is growing. For the first time in modern history, people are living longer without role models or people to teach them how to enjoy and find meaning and satisfaction in their older lives. Much has been written about losses experienced by the elderly population, including the loss of health, income, spouses, and friends, but not much has been written about how one seeks and creates pleasure at the end stage of life.

This study aims to look at that piece of the end stage of life. For the purpose of this study, I interviewed persons 80 and older who live independently, or in assisted-living facilities to explore what it is that contributes to giving them meaning and satisfaction in life. I interviewed individuals who are mentally alert and mobile. By interviewing individuals who are living independently or in assisted-living facilities, this study hopes to address to what extent living situation, among other factors, influences level of satisfaction with life for this age group.

My literature review will encompass three areas of focus: (a) previous research studies that have addressed the topic of meaning and satisfaction in persons 80 and older; (b) psychological theories that address the aging process developmentally, and (c) the aging process, as defined in poetry and fiction.

Having interviewed persons 80 and older and analyzing their responses to questions related to what provides them meaning and satisfaction in their lives, I examine

how their responses compare to the research that has been written about aging and provide their unique insights to their experiences of aging.

### **Assumptions**

From my experiences interacting with and observing persons in their 80s and 90s, I have made assumptions that some people are unable to find quality in their lives as their physical energy diminishes, medical issues affect their ability to fully participate in previously enjoyed activities, they experience multiple losses, and when they appear depressed, unhappy, isolated, and forgotten. This population's participation in life seems limited. Many persons in this age category struggle with limited mobility and are required to adapt to different situations affecting them emotionally and financially.

It is my belief that although many persons 80 years and older have suffered many losses, either of their own good health or through the loss of significant persons in their lives, most have managed to retain the most important thing: -their sense of self.

### **How will I know?**

How will I know?  
 When I am old  
 Will someone tell me so?  
 Is it my face, my body, my mind?  
 Or is it my soul

Will I look like me?  
 Feel like me  
 Act like me  
 Will I be me?

Who will be with me?  
 Who will hold my hand?  
 Who will comfort me?  
 Will I still be me?



Will I walk?  
Will I be able to talk?  
Will I still see?  
What will happen to me?

Where did the years go?  
What did I do with them?  
Did I do well?  
Did I do right?  
Was I the best I could be?  
Was I really me?  
(Poem by author, 2013)

### **Significance of the Study**

My intention in this dissertation is to explore a particular stage in life, to discover what provides meaning and satisfaction for persons 80 years and older. Furthermore, this study seeks to contribute to the knowledge base of aging, particularly focusing on the dimension of satisfaction, which can lead to a better understanding of this phase of life. If the elements that provide meaning and satisfaction for persons in this population can be more deeply understood, the social work profession will be better informed as to what resources and services may be needed to assist them.

## CHAPTER TWO: REVIEW OF THE LITERATURE

### Introduction

This literature review is divided into three categories: (a) research studies that have addressed the topic of what gives life meaning and satisfaction in persons aged 80 and older, (b) psychological theories that address the aging process developmentally, and (c) the aging process, as defined in non-fiction literature and poetry. There have been several approaches to studying the aging process. This study draws from the theory of self-psychology and narcissism to discuss the emotional and psychological effects of the aging process.

### Life Satisfaction and Meaning in Old Age

#### Erikson, Erikson, and Kivnick

Erik Erikson, Joan Erikson, and Helen Kivnick, in their publication, *Vital Involvement in Old Age* (1986), discuss their participation in a long-term research study initiated in 1928 in Berkeley, California. Originally entitled the Guidance Study, it tracked the life histories of 29 children born in 1928 and the first half of 1929, along with their parents, for more than five decades (Erikson, Erikson, & Kivnick, 1986, p. 7). The authors shared a belief in an “epigenetic theory of the stages of human life as completed in old age” (Erikson et al., 1986, p. 8), and in 1981, 53 years after the study began, they interviewed the original parent participants in an effort to understand the psychosocial process of “vital involvement” in later life.

Erik Erikson had been involved for some time as lead researcher on the Guidance Study, and in the 1940s, he conducted several *play configuration* interviews with all of the children, then in their early teens. He also wrote summaries of the first decades of 50

children and their family milieus. These summaries contained an abstract of the parents' personalities and child-rearing styles, as revealed throughout the years, and provided valuable information when combined with the interviews of some of the same parents in 1981.

As we have pointed out, we later selected for our present study the surviving parents of the fifty children then "summarized," for it is of special interest to see now what, on the basis of the data available in the forties, could be predicted about the life course of the children and, by implication, about the old age of the parents. In 1981, then, we elected to base our study of old age on the twenty-nine extant and locally available parents of this group of fifty children, about whom these summaries had been written. (Erikson et al., 1986, p. 21)

The authors then explored the eight psychosocial themes, as manifested in the lifelong experiences, observations, and insights offered by the elders they interviewed. The authors maintained that each stage in the life cycle involves reintegrating, in new, age-appropriate ways, those psychosocial themes that were ascendant in earlier periods.

At every stage, the individual incorporates these earlier themes in the process of bringing into balance the tension that is now focal. Ranging in age from the early seventies through the late nineties, our informants may all be viewed as moving through the stage of life we refer to as old age. Thus, they may be understood as seeking to bring into balance the tension between a sense of integrity, of enduring comprehensiveness, and an opposing sense of despair, of dread and hopelessness. In addition, these elders are, through a complex of processes that are partly conscious and partly unconscious, attempting to reconcile the earlier psychosocial

themes (generativity and stagnation, intimacy and isolation, identity and identity confusion, and so on) and to integrate them in relation to current, old-age development. (Erikson et al., 1986, pp. 54–55)

They questioned how it was that one individual seemed able to integrate painful conditions of old age into a new form of psychosocial strength, whereas another responded to similar conditions in a way that seemed to inhibit effective integration and healthy, ongoing development. Erikson et al. asserted that it was through the last stage of the life cycle weaving back on itself that may ultimately lead to the ability to integrate maturing forms of hope, will, purpose, competence, fidelity, love, and care: in short, a comprehensive sense of wisdom.

Throughout life, the individual has, on some level, anticipated the finality of old age, experiencing an existential dread of “not-being” along-side an ever-present process of integrating those behaviors and restraints, those choices and rejections, those essential strengths and weaknesses over time that constitute what we have called the sense of “I” in the world. In old age this tension reaches its ascendancy. The elder is challenged to draw on a life cycle that is far more nearly completed than yet to be lived, to consolidate a sense of wisdom with which to live out the future, to place him- or herself in perspective among those generations now living, and to accept his or her place in an infinite historical progression. (Erikson et al., 1986, p. 56)

Unfortunately, the literature reporting this study was written poorly, which made it difficult to follow the sequence and logic of their conclusions. Nonetheless, it is evident that their informants’ responses fluctuated between positive and negative perceptions of

their experiences. However, the authors did emphasize social conditions and generational influences. They maintained that in the past, the elders of a society were the transmitters of tradition and provided continuity for future generations, thus holding positions of esteem (Erikson et al. 1986). Yet, the authors also indicated that the advent of modern culture and technology no longer created an environment where elder knowledge was useful or fundamental to younger generations growing up in a more advanced world, as is evident by the following statement:

With the advent of technology and the impact of the values it represents, not only do elders no longer provide continuity, but they also find themselves out of step with their social milieu. Without the technical knowledge and scientific training of their own children and grandchildren, the experiential knowledge they could convey often seems outdated and even quaint. Feeling retired by society, unneeded, and unproductive, they cast about for some comfortable way to “spend” whatever money and time they have in the twenty or more possible years of aging. (Erikson et al., 1986, p. 294)

Erikson et al.’s study was conducted in the United States, a country that takes pride in independence and emphasizes youthfulness. According to the authors, this cultural attitude toward all things old leads to a climate where ageism is socially accepted and poses a problem for all older people. This claim is exemplified by the following statement:

Young is beautiful. Old is ugly. This attitude stems from a stereotyping deeply ingrained in our culture and in our economy. After all, we throw old things away- they are too difficult to mend. New ones are more desirable and up-to-date,

incorporating the latest know-how. Old things are obsolete, valueless, and disposable. (Erikson et al., 1986, p. 301)

The authors found that elders were vulnerable to this valueless stereotype, which left them feeling unattractive, dull, and, quite often, unlovable. The participants provided varying responses to this stereotype (Erikson et al., 1986). One response was to avoid looking or acting their own age at all costs. Another response was to let go of social life, renouncing even rewarding interests and pleasures as inappropriate. Another response, which was the most difficult, involved accepting who and what these individuals were with active compliance. This latter response encompassed a process of mature appraisal, where the elder individual finds solace with being in the position he or she is in the life cycle and an appreciation of that position. Erikson et al. maintained that an injustice was done to people when they were given a negative vision of what lies ahead in their lives and when not shown how they may more optimally and optimistically plot their course.

Some conclusions that the authors did come to were that (a) involvement was important for elderly individuals, whether in the community at large or in their relationships with their children and grandchildren, and (b) persons in their 50s should plan for old age and remain aware of the long life stages that lie ahead (Erikson et al. 1986).

In developing their theories, the authors found that their own lifespan was much longer than anticipated, giving them reasons to speculate on whether they should try to identify additional developmental stages (Erikson et al.). They wondered whether there was anything different in one's adaptation to this extended lifespan. Their struggle can be seen in the following statement:



The life cycle . . . does more than extend itself into the next generation. It curves back on the life of the individual, allowing, as we have indicated, a re-experiencing of earlier stages in a new form. This retracing might be described as a growth toward death, if that did not ring false as a metaphor. (Erikson et al., 1986, p. 327)

It is interesting to speculate whether the authors' phrase "a growth toward death" might be received differently today than when it was written, almost 30 years earlier. Whereas the metaphor is still stretched, this idea may not ring as falsely to contemporary ears because of advances in science and expanded psychological understanding. As Erikson et al. have acknowledged, times change and life expectancy has increased overall; thus, the realities of people's lives are different from when their study was conducted. Like good researchers, they question whether it would be appropriate to revisit their conception of the earlier stages in the life cycle, particularly because people's lives are longer:

We have already faced the question of whether a universal old age of significantly greater duration suggests the addition to our cycle of a ninth stage of development with its own quality of experience, including, perhaps, some sense of premonition of immortality. A decisive fact, however, has remained unchanged for all the earlier stages, namely, that they are all significantly evoked by biological and evolutionary development necessary for any organism and its psychosocial matrix. This also means that each stage, in turn, must surrender its dominance to the next stage, when its time has come. Thus, the developmental ages for the pre-adult life stages decisively remain the same, although the interrelation of all the stages depends somewhat on the emerging personality and the psychosocial

identity of each individual in a given historical setting and time perspective.

(Erikson et al., 1986, pp. 336–337)

### **Bernice Neugarten**

Another eminent researcher in the field of aging is Bernice Neugarten (1986), who identified a growing trend among older people to pursue more active lives. She began conducting research on the topic of aging at the University of Chicago in the 1940s. Her research methodology was both quantitative as well as qualitative. She coined terms such as “the fluid life cycle,” “the young-old and the old-old,” “the age-integrated society,” and “age-irrelevance” (D. Neugarten, 1996, p. xi). B. Neugarten researched the field of adult development and aging, focusing on changes in personality over the adult lifespan and the social and psychological patterns of aging.

B. Neugarten concluded that it was “the study of lives-their continuities and discontinuities- that was the proper domain for research and theory building in the field of human development” (D. Neugarten, 1996, p. xii). Additional conclusions she came to were that adulthood, middle age, and old age have their unique developmental tasks, and development does not end when a man or woman enters any of these life periods. Middle and old age are significant periods in the life cycle, although they are not separate or disjunctive times. For B. Neugarten, aging was normal not pathological. From her research, she concluded that throughout the life course, there are expected and unexpected life events, but when and how they occur makes their impacts different; men and women differ in their coping strategies, and personality develops only through interactions between individuals and their social environments.

B. Neugarten believed that there are strong relationships between biological, psychological, and social factors and that persons were not separated from their social contexts. Her research found that people need to create coherence in their lives; thus, they construct and reconstruct their autobiographies. In addition, she concluded that people rehearse their futures to prepare for significant life events. For Neugarten, there was no single pattern of successful aging. The patterns of aging were many, and a person's satisfaction with his or her life was contingent upon many interrelated variables.

Neugarten stated that age norms exist, and they serve to socialize people with respect to *age-appropriate behavior*. These norms change over time. She concluded that chronological age in adulthood was not a measure of functional capacity, economic status, intellectual ability, or social values. She strongly believed that stereotypes of the elderly should be abolished and that there was tremendous diversity among middle- and old-aged people, as seen in the following statement:

Lives "fan out"; the older one becomes, the more different one is from others.

Although there may never be a totally "age-irrelevant" society, constructive social policies will reflect a more thoughtful balance of age with need. The "aging society" brings with it many challenges and opportunities for both aging persons and for the society at large. (D. Neugarten, 1996, p. xii–xiii)

### **Robert Butler**

Another well-known researcher in the field of aging was Robert Butler. He was a physician, gerontologist, and psychiatrist, as well as the first director of the National Institute on Aging. He is known for his work on the social needs and rights of the elderly and for his research on healthy aging and the dementias. One of his research studies,

which took place in 1955 and concluded in 1957, used a multidisciplinary approach and sought to examine the effects of chronological aging, minimizing the effects of sickness, institutionalization, and social adversity. His study population was healthy men, aged 65 and older (D. Neugarten, 1996, p. 235).

Another one of Dr. Butler's contributions to the field of aging was his identification of the value of the life-review process. He asserted that the tendency to identify reminiscence in the elderly as a symptom of psychological dysfunction was not correct. However, Butler did acknowledge that this process could lead to regret, anxiety, guilt, despair, and depression. He believed that life review was a "naturally occurring, universally mental process characterized by the progressive return to consciousness of past experiences, and particularly, the resurgence of unresolved conflicts; simultaneously, and normally, these revived experiences and conflicts can be surveyed and reintegrated" (as cited in D. Neugarten, 1996, p. 487). He contended that reviewing one's life might be a general response to crises of various types, one of which was imminent death. Thus, the life-review process could occur at any age, given the circumstances of the individual.

In general, Dr. Butler believed that the life-review process in the aged afforded the opportunity to reintegrate unresolved conflicts of the past and considered this process to be a naturally occurring, universal mental process. His research studies focused on the positive aspects of the life-review process and the many factors associated with aging. Dr. Butler's research challenged the idea that senility was inherent in the aging process, asserting, rather, that it was a result of arteriosclerosis.

## **MacArthur Foundation**

In 1984, the MacArthur Foundation funded a long-term research study conducted by a group of scholars from disciplines relevant to aging to examine what constituted *successful aging*. The study focused on positive aspects, identifying the factors that permitted individuals to continue to function effectively, physically and mentally, in old age. The 16 researchers were from the fields of biology, neuroscience, neuropsychology, epidemiology, sociology, genetics, psychology, neurology, physiology, and geriatric medicine. They studied more than a thousand high-functioning older people for eight years to determine the factors that predicted successful physical and mental aging; the researchers also conducted detailed studies of hundreds of pairs of Swedish twins to determine the genetic and lifestyle contributions to aging. They further performed laboratory-based studies of the response of older persons to stress. Finally, they conducted nearly a dozen studies of brain aging in humans and animals (Rowe & Kahn, 1998, p. xii).

Their research concluded that successful aging consisted of three key behaviors or characteristics that older individuals maintain: a low risk for disease and disease-related disability, a high level of mental and physical functioning, and an active engagement with life (Rowe & Kahn, 1998, p. 38).

## **Lars Tornstam**

Lars Tornstam, a Swedish social gerontologist, developed the theory of gerotranscendence. He wrote the first Swedish doctoral thesis within the field of gerontological sociology in 1973. In his book, *Gerotranscendence* (2005), he makes the following statement:

The perpetual mismatch between theory and certain empirical data is one of the things that has led us to believe that we sometimes erroneously project midlife values, activity patterns, and expectations onto old age, and then define these values, patterns, and expectations as successful aging. Maybe our projections are not only rooted in midlife, but also in Western culture and White middle-class hopes for “success” to continue into old age. (Tornstam, 2005, p. 3)

Tornstam claims that successful aging is exemplified in Western-cultured, White, middle-aged, middle-class, and successful people with an emphasis on activity, productivity, efficiency, individuality, independence, wealth, health, and sociability. His theory of gerotranscendence questions this belief. Tornstam suggests that there is a continuous development into old age.

Tornstam conducted a qualitative study, interviewing 50 people who attended a lecture about his theory of gerotranscendence. After the lecture, he asked if there was anyone in the audience who might recognize one or more of the ideas presented as being part of their own personal development and if they would be willing to be interviewed about their developmental experiences. The 50 people who volunteered to be interviewed were between 52 and 97 years of age. A collaborating psychologist, using a semi-structured interview process, conducted the interviews in 1991. The interviews were between one and three hours in length, tape-recorded, and transcribed.

From the interview data analysis, Tornstam identified three main dimensions of gerotranscendental change: (a) the cosmic dimension, (b) the dimension of the self, and (c) the dimension of social and personal relationships (Tornstam, 2005). The elements of these three main dimensions were identified as follows:

- The cosmic dimension involves “time and childhood, connection to earlier generations, life and death, mystery in life, and rejoicing.”
- The dimension of the self involves “self-confrontation, decrease of self-centeredness, development of body-transcendence, self-transcendence, and ego-integrity.”
- The dimension of social and personal relationships involves “changed meaning and importance of relations, role playing, emancipated innocence, modern asceticism, and everyday wisdom.” (Tornstam, 2005, pp. 73–74).

Tornstam’s (2005) theory of gerotranscendence questions the assumption that good aging is the same as continuing the midlife pattern indefinitely, suggesting, instead, that growing into old age has its very own meaning and character. He suggests that there is a continuous development into old age. This development is in contrast to much of the thinking within gerontology, where continuity and stability, rather than change and development, are key concepts (Tornstam).

Tornstam also described myths within the field of gerontology: (a) the “misery myth,” which expects to find elderly persons feeling miserable; (b) the myth that the processes of industrialization and urbanization distanced older people and their children from each other; and (c) the “retirement trauma” myth (Tornstam, 2005).

Akerman (1981) carried out a historical research project among elderly persons in a depopulated parish in northern Sweden. He had expected to find abandoned and lonely old people, but instead, he found well-integrated old people having a rich social life and

in good contact with their children. His expectations did not correspond with the reality he encountered. In the conclusion of his study, he wrote the following:

Our study has shown that the isolation and the fairly pitiable situation that is often conjured up in the press and on the radio and TV by no means seems to afflict all elderly people, even in a depopulated village contacts between the generations in our area of investigation have been unusually many and have been unusually intensive. On the whole, there seems to be reason to vigorously retouch the picture of pensioners as a marginalized group in society. (Tornstam, 2005, p. 13)

In developing his theory, Tornstam (2005) examined empirical data from other theories of gerontology. Namely, he questioned the disengagement theory, which was generated from three types of hypotheses. The first hypothesis stated that all societies, in one way or another, push the aging individual away. The second hypothesis stated that the individual, motivated by intrinsic forces, disengaged from society both socially and psychologically. Psychological disengagement means the reduction of ego, social, and emotional involvement in other people and society, and in its place, the individual disengages and turns inwards. The third hypothesis assumed that the individual, despite social and psychological disengagement, continued to experience a high degree of life satisfaction, happiness, and contentedness. Tornstam stated that the third hypothesis also indirectly implied a decrease in satisfaction if the natural process of disengagement was violated and old people were forced into various activities. The main premise of the activity theory—that activity leads to satisfaction and contentment—was disputed by the disengagement theory.



These three hypotheses have been the focus of research for gerontologists for some time. There has been agreement that Western societies generally reject old people.

This agreement is also the only indisputable support for the disengagement theory. The second hypothesis, which states that the individual disengages socially and psychologically, has been dismissed by almost every gerontologist. Most gerontologists, including the author of this book, agreed that individual disengagement was non-existent, and even if some disengagement behavior existed, it was dependent on something other than an intrinsic drive to disengage. (Tornstam, 2005, p. 33)

Tornstam, from his qualitative study, stated the following:

The development towards gerotranscendence cannot be regarded as any uniform development that characterizes all aging individuals. We should rather talk about it as a developmental possibility, where the precise form of the gerotranscendence can differ from individual to individual. Also, there are several pathways to gerotranscendence. It may be that the seed of gerotranscendence is within us all, but needs proper watering to grow. In today's society, we probably lack much of the proper watering, which also means that the proportion of individuals who reach high degrees of gerotranscendence is quite small. (Tornstam, 2005, pp. 74–75)

### **Umea University Study**

In 2007, three Swedish researchers at Umea University conducted a qualitative study that addressed the inner strength of the *oldest-old* (Nygren et al., 2007). The three researchers, Bjorn Nygren, Astrid Norberg, and Berit Lundman, used a

phenomenological hermeneutical method to analyze interviews from 11 women and seven men, aged 85 and 90 years old, living in a county in northern Sweden. Their participants were persons who scored high on scales measuring phenomena related to inner strength.

The purpose of this study was to delve into the meaning of inner strength among the oldest-old (Nygren et al., 2007). The authors of this study developed an operational definition of inner strength. Inner strength, thus defined operationally, was described as looking back on one's life with pride, knowing that one has overcome most of the challenges encountered. In other words, this concept included relying on one's body, meeting the challenges of life with faith in oneself, being determined but not too stubborn, and being aware that one can ask for and receive help if it is needed. The ability to accept and adjust to a situation, to forgive others, and to see that something positive comes from the negative was also part of this concept, as was the idea of learning from life. Being an oldest-old person with inner strength meant feeling needed, enjoying life, taking one day at a time but still looking forward, and being aware of one's limitations and possible future difficulties. Individuals with inner strength connect with the people of today and with those of the past by thinking back over experiences (Nygren et al., 2007, p. 1063).

From their study, they identified the following themes and sub-themes. The four themes identified were as follows: (a) feeling competent in oneself yet having faith in others; (b) looking on the bright side of life without hiding from the dark; (c) feeling eased and being active; and (d) living in a connected present and in the past and future. They identified 17 sub-themes. The sub-themes they identified were knowing one's own

strength, finding help and strength from others, trusting in God, struggling as part of life, looking for and finding a positive aspect, dying as part of life, working as part of life, putting one's foot down and fighting, taking the days as they come, feeling an inner peace and being proud about life, feeling as before, change is a part of life, adjusting to new circumstances, being close is strengthening, being alone is important but feeling lonely is dangerous, living on in memories, and being part of a greater whole (Nygren et al., 2007, p. 1063).

They researchers concluded that being an oldest-old person who possessed inner strength allowed the individual to move effortlessly through life being open to what comes and managing any issues or events in the future at a pace they deem appropriate and through connections with past and present people and situations (Nygren et al., 2007). The authors further asserted that this type of life “means that life goes on: living it all, still ‘working’ full-time, helping and being helped, finding new tasks and assignments to fill up the time, and passing a heritage on to the future” (Nygren et al., 2007, p. 1072).

## **Conclusion**

Research studies focusing on the positive aspects of aging are continuing to evolve as the lifespan of society continues to increase. These studies have challenged long-held beliefs, assumptions, biases, and myths purporting that the process of aging was one of decline, despair, and disengagement from society. Most importantly, these studies have sought to identify factors that contribute to a meaningful and satisfactory old age.

Universally, all of these researchers cited Erikson and Erikson's developmental model, emphasizing the importance of the eighth stage (ego integrity versus despair) and moving into the ninth stage of gerotranscendence.

One of the distinguishing factors among these research studies, conducted in both the United States and Sweden, was that the U.S. studies focused on dispelling the negative stereotypes of the aging process, whereas the Swedish studies focused primarily on identifying positive aspects of the aging process. This discrepancy in intention could be because of differences in socio-cultural factors and in the health care delivery systems.

### **Aging as a Developmental Process**

This section will focus on psychological theories that address the aging process. The theorists discussed in this section are Erik Erikson, Lars Tornstam, Robert Peck, Lawrence Lazarus, and Carl Jung.

#### **Erik and Joan Erikson**

One of the most prominent theorists cited in aging literature is Erik Erikson. His original work provided eight developmental stages of life: trust versus mistrust, autonomy versus shame and doubt, initiative versus guilt, industry versus inferiority, identity versus identity confusion, intimacy versus isolation, generativity versus stagnation, and integrity versus despair and disgust (Erikson & Erikson, 1997, p. 56). The subtitles for the eight stages are hope, will, purpose, competence, fidelity, love, care, and wisdom.

However, in recent years, the work of Erikson and his wife, Joan, focused on an additional stage of development regarding aging. Their work theorizes that aging is its own developmental stage with particular issues of identity, as opposed to being merely an

extension of an earlier stage. The Eriksons propose a ninth stage of development. This stage is the final stage in one's life and deals with the aging process, which the Eriksons differentiate from the other stages of the life process.

In the first eight stages, the authors pose the syntonic element, which supports growth and expansion and offers goals, as opposed to the dystonic element, which poses challenges; e.g., in the first position (trust vs. mistrust). However, in the ninth stage, they have placed the dystonic element first and the syntonic element second (e.g., basic mistrust vs. trust, shame and doubt vs. autonomy). These choices are explained by the following statement:

Syntonic qualities sustain us as we are challenged by the more dystonic elements with which life confronts us all. We should recognize the fact that circumstances may place the dystonic in a more dominant position. Old age is inevitably such a circumstance. In writing "The Ninth Stage," I have therefore placed the dystonic element first in order to underscore its prominence and potency. In either case, it is important to remember that conflict and tension are sources of growth, strength, and commitment. (Erikson & Erikson, 1997, p. 106)

The Eriksons' original eight stages did not cite age specifications because other than the infant's arrival date, they found too much variety in the timing of human development. However, in the ninth stage, they found it useful to delineate a timeframe to focus on the experience and crises of that period. The eighth and ninth decades of life bring new demands and new challenges, as even the best cared-for bodies begin to weaken and not function as they previously did. The Eriksons found that they could only adequately discuss these new challenges by designating a new ninth stage and specifying

an age for this stage. In designating this ninth stage, they contended that in this final stage, one's body continues to lose its autonomy.

The Eriksons proclaimed that each stage in the life cycle involves reintegrating, in new, age-appropriate ways, the psychosocial themes that were ascendant in earlier periods. "At every stage, the individual incorporates these earlier themes in the process of bringing into balance the tension that is now focal" (Erikson et al., 1986, p. 54).

From the interviews conducted with their participants in the Guidance Study, these authors concluded that in the last stage, the life cycle weaves back on itself in its entirety, ultimately integrating maturing forms of hope, will, purpose, competence, fidelity, love, and care, into a comprehensive sense of wisdom.

Throughout life, the individual has, on some level, anticipated the finality of old age, experiencing an existential dread of "not-being" along-side an ever-present process of integrating those behaviors and restraints, those choices and rejections, those essential strengths and weaknesses over time that constitute what we have called the sense of "I" in the world. In old age this tension reaches its ascendancy. The elder is challenged to draw on a life cycle that is far more nearly completed than yet to be lived, to consolidate a sense of wisdom with which to live out the future, to place him- or herself in perspective among those generations now living, and to accept his or her place in an infinite historical progression. (Erikson et al., 1986, p. 56)

The Eriksons maintained that in the ninth stage, despair is experienced differently than it is in the eighth stage. Whereas in the eighth stage, which includes a retrospective accounting of one's life, how much one embraces life as having been well lived, as

opposed to regretting missed opportunities, contributes to one's sense of disgust and despair. Despair expresses the feeling that the time is too short for one to attempt to start a new life and make alternative choices.

Joan Erikson states, "I am persuaded that if elders can come to terms with the dystonic elements in their life experiences in the ninth stage, they may successfully make headway on the path leading to gerotranscendence" (Erikson & Erikson, 1997, p. 114; see the section on Tornstam).

The Eriksons' theory of developmental life stages provides a framework for one's psychological evolution. The authors particularly stress the psychosocial aspects of development, emphasizing the importance of societal influences on an individual's formation. In addition, they acknowledge, in the ninth stage, the inevitable biological aspects of aging, including the inevitability of death. Furthermore, in their book, *The Life Cycle Completed* (1997), they address the importance of creating programs to incorporate elders into society rather than isolating them in their own communities, which, in their opinion, does not offer society the opportunity to learn from these possible role models how to prepare for the end of life. I wholeheartedly support their opinion because it seems incongruous that our lives up until the end of life, which have been greatly influenced by the larger society in which we have lived, should end in isolation.

### **Lars Tornstam**

Tornstam formulated his theory of gerotranscendence by taking Erik Erikson's theory further. He described his deviation from Erikson's theory in the following way:

An important difference between Erikson's eighth stage and gerotranscendence is that in Erikson's theory the individual is looking back at the life lived, from

within the same paradigm, while gerotranscendence implies more of looking forward and outward, with a new view of the self and the world. (Tornstam, 1999, p. 11)

Tornstam claimed that gerotranscendence is the final stage in a natural process moving toward maturation and wisdom. This concept implies a construction of a new reality, which is somewhat different from the view held in midlife, that he believes gerontologists and practitioners tend to project onto old age. According to the theory of gerotranscendence, the “gerotranscendent individual experiences a new feeling of cosmic communion with the spirit of the universe, a redefinition of time, space, life, and death, and a redefinition of the self” (Tornstam, 1999, p. 11).

His theory suggests that through living and aging, the degree of transcendence increases. Tornstam believed that this is an intrinsic process modified by specific cultural patterns and generated by normal living. He believes that the movement toward gerotranscendence is continuous. However, the process may be accelerated or blocked. Tornstam stated that the movement toward gerotranscendence can be accelerated by a life crisis, after which the individual restructures his or her view of the world instead of returning to the view held before. However, this process may be impeded by elements in our culture.

Simply put, gerotranscendence is a shift in meta perspective, from a materialistic and rational vision to a more cosmic and transcendent one, normally followed by an increase in life satisfaction. According to the theory, the gerotranscendent individual experiences a new feeling of cosmic communion with the spirit of the universe, a redefinition of time, space, life and death, and a redefinition of the



self. This individual might also experience a decrease in interest in material things and a greater need for solitary meditation. (Tornstam, 1993, p. 123)

### **Robert Peck**

As is true of many theorists writing after the Eriksons, Robert Peck (1956) specifically used the Eriksons' model as a base for his thinking. Peck, a psychologist, wrote in the 1950s before the Eriksons developed their ninth stage. He subdivided the Eriksons' eighth stage of the life cycle into *middle age* and *old age*. It should be noted that Peck stated that these stages may occur at different time sequences for different individuals.

Peck identified three stages in old age. Each of these stages present different psychological learning and adjustment. The three stages were as follows: (a) ego differentiation versus work-role preoccupation, (b) body transcendence versus body preoccupation, and (c) ego transcendence versus ego preoccupation (Peck, 1956).

In the first stage, ego differentiation versus work-role preoccupation, the central issue to be addressed is one's sense of self-worth separate from one's vocational role (Peck). Peck wrote before the women's movement. Consequently, he identified different roles for each gender. For example, vocation for men meant work, and for women, their role was mother. This separation of gender roles is further expressed in the following statement:

For most men, the ability to find a sense of self-worth in activities beyond the "job" seems to make the most difference between a despairing loss of meaning in life, and a continued, vital interest in living. For many women, this stage may arrive when their "vocational" role as mother is removed by the departure of the

grown children. In that case, this crisis-stage might well come in middle age, for many women. (Peck, 1956, p. 90)

Peck stated that one critical requisite for successful adaptation to old age was the establishment of a varied set of valued activities and self-attributes so that any one of several alternatives can be pursued with a sense of satisfaction. This idea is what he meant by *ego-differentiation*.

In the second stage, body transcendence versus body preoccupation, Peck (1956) addressed the issue of physical decline and the way in which the individual copes with this development. For people for whom pleasure and comfort are defined by physical well-being, dealing with any amount of physical decline will be a difficult endeavor. These people become preoccupied with bodily aches and pains and the declining state of their bodies. Life becomes miserable. For other individuals also experiencing the same physical decline of their bodies, life can continue to be enjoyed as they have learned to define *comfort* and *happiness* in terms of satisfying human relationships or creative mental activities. For these people, social and mental sources of pleasure transcend physical comfort.

In Peck's (1956) third stage, ego transcendence versus ego preoccupation, the individual is becoming more aware of his or her impending death. In this stage, Peck emphasizes the need for a more spiritual and philosophical perspective on life. For one to be successful in this stage, Peck asserted the following:

[. . .] One is concerned with enduring significance beyond the limit of one's own life; i.e., the only knowable perception of life after death. Such an adaptation

requires deep active effort to make life more secure, more meaningful or happier for the people who go on afterward after one dies. (Peck, 1956, p. 91)

Thus, Peck sees ego transcendence as being thoughtful about how one lives on after they die.

### **Lawrence Lazarus**

Lawrence Lazarus wrote in the late 1980s. However, it is difficult to ascertain Lazarus' own thinking in regard to aging because he often reviews the thinking of other authors. However, he did assert that, "One of the basic developmental tasks facing the aging individual is to maintain self-esteem and a sense of bodily and emotional cohesiveness in the wake of the inevitable biological psychological, and social stresses and losses in late life" (Lazarus, 1988, p. 135).

Lazarus (1988) drew upon the writings of Erikson et al...Meissner (1986), Kohut (1978), and various other authors writing in the broad field of self-psychology. He understood the aging process as a series of narcissistic losses and injuries, making it difficult for the individual to maintain a sense of self-esteem. His understanding is from the perspective of the self-psychology theory. Lazarus recommended brief or time-limited psychotherapy when the loss of an important person or failing health deregulated the individual. In this instance, he saw the therapeutic function of an empathic self-object as a way for the individual to regain a sense of psychological equilibrium (Lazarus, 1988).

### **Carl Jung**

Carl Jung also understood old age as its own special time requiring special adaptation. His perspective on aging was philosophical and involved recognition of what

he called a collective unconscious. Jung, a Swiss psychologist and psychiatrist, founded analytical psychology. He stated that there was a discrepancy between meaning and activities experienced in old age and those of midlife (Tornstam, 1999, p. 11). He believed that becoming acquainted with and socialized to society were the focuses of the first part of life, whereas in old age, the focus became getting acquainted with oneself and one's collective unconscious (Tornstam, 1999, p. 11).

Jung offered a positive, life-enhancing approach to aging in which psychological and spiritual development was possible across the lifespan. In the second half of life, people could work toward the possibility of continuing creativity and fulfillment, which deepens spiritually. For Jung, the key was to turn inward during the second half of life. This part of life was a journey of self-exploration and discovery that he called "individuation" (Farmer, 2012).

Jung considered individuation, the psychological process of integrating the opposites, including the conscious with the unconscious while still maintaining their relative autonomy, to be the central process of human development. Specifically, individuation is a process of transformation whereby the personal and collective unconscious are brought into consciousness. This is done by means of dreams or free association and is a natural process necessary for the integration of the psyche. Individuation has a holistic healing effect on the person, both mentally and physically (Jung, 1961, pp. 346-347).

Jung saw the two halves of life as embracing very different perspectives. The first half focused on marriage, family, and career. The second half afforded the opportunity to continue to grow and learn, leading to a new sense of meaning and purpose in

individuals' lives. The process of looking inward can provide new ways of thinking about life and the past and lead to the formulation of new values and goals that can provide vitality and energy as people age. "We can be open to conscious grieving and let go of goals that we did not achieve earlier in life. We can refocus our energy on those things that we can still achieve during the second half of life" (Farmer, 2012, p. 1).

In summary, Jung's philosophy of aging follows: "For the ageing person it is a duty and a necessity to devote serious attention to himself. The afternoon of human life must also have a significance of its own and cannot merely be a pitiful appendage to life's morning." (Farmer, 2012, p. 2) Jung described the first half of life as the *morning life* and the second half as *its afternoon*. For him, both the first and the second halves of life had meaning and purpose, only the meaning and purpose were different. He emphasized the opportunities the second half of life held for developing a deeper understanding of oneself.

### **Summary**

In conclusion, the above-mentioned theories of aging portray the aging process as affording one the opportunity to achieve a more integrated ego and be creative in a new dimension while maintaining a sense of purpose and meaning. The theorists presented offer a positive perspective of growing older, diminishing the negative aspects of the aging process.

### **Aging in Non-Fiction Literature**

Non-fiction literature provides a rich landscape to explore the topic of aging. Because of the abundance of texts that treat the subject of aging in a variety of ways and genres, it is beyond on the scope of this dissertation to review all or even a significant

sampling of the field. Therefore, five representational pieces have been selected and are discussed below.

### **The View From 80**

Malcolm Cowley's *The View From 80* (1980) is an autobiographical essay that describes his and others' living experiences in their 80s. He characterizes an 80th birthday celebration as a "belated bar mitzvah," comparing the 80-year-old to a Jewish adolescent who is entering a new stage of life that should be celebrated with toasts and a cantor. He also likens becoming 80 to entering a new, unknown country.

The title of his book describes it most adequately. He articulates the many subtle and not-so-subtle aspects of aging and does so with humor. For example, he describes a long list of experiences that signals to an individual that he or she is old:

When it becomes an achievement to do thoughtfully, step by step, what he once did instinctively, when year by year his feet seem farther from his hands, when he decides not to drive at night, when he hesitates on the landing before walking down a flight of stairs, and when it becomes harder to bear in mind two things at once. (Cowley, 1980, pp. 3–4)

His book is peppered with short poems and quotes from literature. Overall, this is a book describing experiences of age awareness. In writing his book, Cowley (1980) looked to other books to see what had been written about the problems of aging. He found that very few people had written about this particular topic. One exception he found was Florida Scott-Mawell, who was a playwright, author, and psychologist. The last book she wrote was entitled, *The Measure of My Days* (1968), which was an account of her 83rd year. Cowley quoted Scott-Mawell as saying, "I want to tell people

approaching and perhaps fearing age that it is a time of discovery. If they say-‘Of what?’ I can only answer, ‘We must find out for ourselves, otherwise it won’t be discovery’” (Cowley, 1980, p. 46).

### **Necessary Losses**

Judith Viorst, a psychoanalyst and a poet, published her book *Necessary Losses* in 1986. She used the works of Erickson and Tornstam in her work, agreeing that old age is a different stage in life requiring different skills and should be seen as a developmental phase. The central premise of her book is that one grows by losing, leaving, and letting go. She claims that people become fully developed human beings by working through losses, as exemplified in the following statement:

Throughout our lives we grow by giving up. We give up some of our deepest attachments to others. We give up certain cherished parts of ourselves. We must confront, in the dreams we dream, as well as in our intimate relationship, all that we never will have and never will be. (Viorst, 1986, p. 16)

Viorst (1986) emphasized that it may be easier to grow old if people are not bored or boring. It is important to have people and projects to care about and, at the same time, be open and flexible enough to submit to whatever losses are encountered. She espouses the idea of ego transcendence, which enables people to connect to the future through people or ideas while surpassing personal limits by means of some legacy left to the next generation. Viorst claimed that to leave a legacy, whether it be intellectual, spiritual, or material, is a constructive way of dealing with the grief felt over the loss of ourselves:

But although our present is shaped by our past, personality changes are possible, even unto the seventh, eighth, ninth decade. We are never a “finished product”-

we refine and we rearrange and we revise. Normal development doesn't end, and over the course of our life, important new tasks-or crises-will arise. We can change in old age because every stage of our life, including our last one, affords new opportunities for change. (Viorst, 1986, p. 299)

Viorst acknowledged that earlier life history is important in determining one's capacity to change and grow into old age. She strongly believed that age itself may also bring new strengths and new capabilities that were not available at previous stages. There may be more wisdom, freedom, and perspective and toughness in old age, but there may also be more candor with others and more self-honesty, as well as a shift in the way people perceive the hard times in life—what she called a shift from *tragedy* to *irony*. This shift in perception from tragedy to irony, according to Viorst, is the special gift received in the latter years, helping people to deal with their accumulating losses and helping them to grow. For Viorst, aging is an opportunity for growth.

### **Way of Transition**

As his title *Way of Transition* (2001) implies, William Bridges focused on transitions in life. He defined transition as the process of letting go of the way things used to be and taking hold of the way they subsequently become. Bridges maintained that a transition is a three-phase process involving an ending, a chaotic but potentially creative *neutral zone*, and a beginning again.

In a chapter entitled “Transition and Elderhood,” he applied his model of transition to aging (Bridges, 2001). He views the years after 50 as problematic because the elderly in our society are not respected as they are in cultures that are more traditional. He stated that our culture is youth-oriented and has been for a couple of



centuries. In more traditional societies, the elder members grew up and old in a society that recognized and celebrated the phases of the year and the stages of life. These elders went through rituals that reenacted the three-phase pattern of ending, the neutral zone, and beginning over again. Bridges stated that American elders lack the familiarity and understanding of transition because they have grown old without consciously going through meaningful transitions. He acknowledged that their lives have been full of change, but our society has not prepared them to let go of an old life and to grow a new one.

Bridges (2001) asserted that society's focus on change has provided the power to remake the world. However, he asserted that society has not developed effective ways of dealing with the human dimensions of change. He argued that society has shortchanged the elderly and itself because every society needs to have models of how to renew at the individual level. He argued that going through a transition provides meaning in one's life, which he explained with the following statement:

Most of today's efforts to reaffirm the societal and personal value of age and aging are simply spitting into the wind, for these efforts do not build on any ground where the old have a real advantage over the young. To establish the value to the society of its elders, they must be shown to possess something that the society needs. Here is where transition represents something that has both personal and societal values, for it is the dynamic by which people develop and gain access to the world of the sacred. If people can recognize that as they age, they will not only find their own lives more meaningful, but will also become the resource to younger people that they are not now. (Bridges, 2001, p. 182)

## The Denial of Death

A seminal work written by Ernest Becker, *The Denial of Death* (1973), is not pertinent to the study of aging per se; however, Becker's point is that our lives and psychoanalytic theory are crippled by our denial of death. The central premise of his book is that of all the things that move man, one of the principal ones is his fear of death. Simply stated, as long as death is feared and denied, aging becomes terrifying and something to be avoided.

Becker (1973) received a Ph.D. in cultural anthropology and taught at various universities. In 1967, he began to develop a thesis that conscious and unconscious reactions to death anxiety could function as a unifying principle for the social sciences. His work was theoretical rather than clinical. Becker built on the works of Otto Rank, Soren Kierkegaard, Wilhelm Reich, Norman O. Brown, Erich Fromm, Hegel, and Sigmund Freud.

As the title of his book implies Becker's (1973) work deals with the American propensity and the analytic world's propensity to deny death. In denying death and denying one's fear of death, in bold contrast to the prominent Freudian school of thought, Becker tackled the vital lie—man's refusal to acknowledge his own mortality. The primary motivation for Becker's work was to understand human nature and human evil. He was interested in developing a clear understanding of human beings.

Becker (1973) believed that the basic motivation for human behavior was our biological need to control our basic anxiety and deny the terror of death. He thought that human beings were naturally anxious because they are helpless and abandoned in a world where they are fated to die (pp. 22-23).

Becker (1973) came to believe that individuals' characters are essentially formed around the process of denying their own mortality. This denial was necessary for people to function in the world, but this character armor (denying death) prevented them from achieving genuine self-knowledge (pp. 55-56).

Furthermore, Becker (1973) suggested that people defend against their helplessness by creating a hero system that enables them to transcend death by participating in something of lasting worth. In other words, a person is able to become immortal by becoming a hero. However, the heroic projects that are created, which provide a means to gain self-esteem and deny death, ultimately end up bringing more evil into the world. He references war, genocide, and the mass killing of Jews by Hitler as an example of these phenomena (pp. 139-140).

Becker advises individuals to cultivate an "awareness of our death" and follow a path of self-analysis, rejecting the standardized heroics of mass culture in favor of "cosmic heroism"—to become a member of the earth's household, forming compassionate communities rather than individual heroics (Becker, 1973, p. xv).

### **How We Age**

Marc Agronin, a geriatric psychiatrist practicing in the Miami Jewish Health Systems, wrote *How We Age* in 2011. His purpose in writing this book was to talk about his experiences treating aging persons in a nursing home and to humanize the aging experience. He stated that nearly every concept he learned in medical school about aging was negative, that aging equaled death and dementia (p.7)

Agronin (2011) asked himself, "How does a doctor — how does anyone, for that matter — maintain a positive regard toward aging while simultaneously having to witness

the loss, suffering, and utter degradation that it brings?” (p. 10). What he found by meeting with residents of a nursing home in Miami was that people living with the infirmities of aging and approaching death could still enjoy most of the same human experiences they enjoyed in their younger years. He contended that people often fail to see positive elements in the lives of the elderly because we are so focused on the physical or mental decline of aging. He acknowledges that,

The body will certainly reach its limits, with death beyond our ability to predict or control. But the true failure here is not old age; rather, it is the failure of our own creativity and willingness to conceive that life up until its last moments has its own ways and meanings. (Agronin, 2011, p. 11)

Agronin (2011) relates his experiences working with patients whose average age was 90 and who were Holocaust survivors and Cuban exiles. From this work, he maintained that aging equals vitality, wisdom, creativity, spirit, and hope (p.12).

What intrigued Agronin (2011) was his son’s comprehension, at the age of 4, that there were age differences between people. When his son asked him if he liked working with old people and then asked if they were just waiting to die, Agronin was stuck by the realization that his son had absorbed the notion that aging equaled death (p.29).

Agronin (2011) questioned Dr. Gene Cohen, also a geriatric psychiatrist, who served as the head of the Center for Aging and Humanities at George Washington University, regarding his son's observations of old people waiting to die. Cohen stated,

Aging, of course, has two paths, there’s the process and there’s the people. The process tells us how and why we age and is limited by laws of physics and biology. The people, however, show us how to age, and the limits are more

variable. On the one hand, the experience of aging is circumscribed by physical health, personal resources, cultural norms, and historical events that are often out of our control. On the other hand, our own efforts can bring change and meaning to the aging process that can transcend these forces in ways that biology can't. (as cited in Agronin, 2011, p. 31)

### **CHAPTER THREE: METHODS AND PROCEDURES**

The purpose of this study was to explore how persons, aged 80 and older, living either independently or in an assisted-living facility without obvious signs of dementia, experience meaningful and satisfying lives. Specifically, I was concerned with what provided them pleasure and kept them engaged in living. I was interested in how their physical health impacted their sense of well-being and whether there were elements that could be identified to have contributed to them enjoying the final stage of life. This chapter outlines the methods and procedures used in this qualitative research study.

#### **Design**

The focus of this study was to explore what provided meaning and satisfaction for persons aged 80 and older. A qualitative research approach was used to conduct this study based on the understanding of the approach as an “inquiry aimed at describing and clarifying human experience as it appears in people’s lives. Researchers using qualitative methods gather data that serve as evidence for their distilled descriptions” (Polkinghorne, 2005, p. 137). Because this study sought to understand the inner experiences of the participants, a qualitative approach in research methodology was appropriate. As Corbin and Strauss (2008, p. 12) stated, “Qualitative research allows researchers to get at the inner experience of participants, to determine how meanings are formed through and in culture, and to discover rather than test variables.”

Qualitative research is a broad term encompassing a variety of methods that involve the use of language data. Of these methods, the grounded theory is the method this study used. “Grounded theory is a specific methodology developed by Glaser and Strauss (1967) for the purpose of building theory from data” (Corbin & Strauss, 2008, p.

1). Ultimately, the type of research method chosen and procedures and techniques used to conduct the study should be based on the nature of the proposed research question. This study, as previously stated, sought to explore what gives life meaning and satisfaction for persons aged 80 and older. Polkinghorne (2005) stated the following:

The area to be studied should determine the inquiry methods. The experiential life of people is that area qualitative methods are designed to study. Qualitative methods are specifically constructed to take account of the particular characteristics of human experience and to facilitate the investigation of experience. (p. 138)

According to Strauss and Corbin (1990), sociologists Glaser and Strauss originally developed grounded theory as a methodology. The grounded theory approach to research involves using a “systematic set of procedures to develop an inductively derived grounded theory about a phenomenon” (Strauss & Corbin, 1990, p. 24). The purpose of the grounded theory method is to build a theory that illuminates the area under investigation. An underlying assumption to qualitative research is that all of the concepts pertaining to a given phenomenon have yet to be identified (Strauss & Corbin, 1990, p.23).

Grounded theory involves using inductive analysis, which discovers patterns, themes, and categories in one’s data. The findings emerge from the data through the researcher’s interactions with the data. The researcher methodically organizes the data into categories from which concepts and themes emerge (Strauss & Corbin, 1990, p.23).

## **Participants**

Qualitative researchers typically only study a small sample of participants at a time (Polkinghorne, 2005, p. 140). The individuals selected should be persons capable of providing relevant responses to the area of study. Merriam gives the following advice to qualitative researchers: “Instead, since qualitative inquiry seeks to understand the meaning of a phenomenon from the perspectives of the participants, it is important to select a sample from which much can be learned” (as cited in Polkinghorne, 2005, p. 140). Therefore, participants should be chosen in a purposeful way so the sought information can be obtained.

The participants in this study were persons 80 years and older living either independently or in an assisted-living facility and not demonstrating obvious signs of dementia. The participants included two women who resided independently, one woman who was living in an assisted-living facility, one man would was living independently, one married couple who resided in an independent-living facility, and one married couple who resided in their own home.

Variation in the participants’ living situations, gender, marital status, and physical health was sought to enhance the data collection process. “Data collection in qualitative research is not a static process. As the information is explored, new categories and concepts emerge, and new questions are generated” (Levine, 2009, p. 34). The data collection process is circular and continues until the research reaches the point of saturation. The concepts identified should be defined and explained. Saturation is usually explained in terms of “when no new data are emerging” (Corbin & Strauss, 2008, p. 143). Saturation means that no new data is revealed as it denotes the development of categories



in terms of their properties, including variation and the delineating of relationships between concepts.

According to Strauss and Corbin (1990), theoretical saturation of each category is reached when the following three things occur:

(1) no new or relevant data seem to emerge regarding a category; (2) the category development is dense; insofar as all the paradigm elements are accounted for, along with variation and process; (3) the relationships between categories are well established and validated. Theoretical saturation is of great importance. Unless you strive for this saturation, your theory will be conceptually inadequate.

(Strauss & Corbin, 1990, p. 188)

### **Recruitment**

Participants were recruited by referrals from my colleagues and friends. I had sent out a letter (see Appendix A) that informed about the nature of the research study and participant qualifications. After receiving the potential participants' names, I contacted each participant by phone and described the focus and methods of the research project (see Appendix B). At the time of the initial call, I informed them that I would need their written consent to proceed with the interview process (see Appendix C).

All of the potential participants, with the exception of one, gave verbal permission to participate in the research study and signed the written consent form. The one participant who chose not to participate indicated she did not feel well enough to be interviewed.

### **Data Collection: The Interview**

The purpose of the interview is to gather the participants' experiences with the topic under study. The interview is a frequently used technique for generating qualitative data (Polkinghorne, 2005, p. 142), and open-ended semi-structured interviews are an effective way of attaining dense data because, as Corbin and Morse asserted, "they are not dictated by any pre-determined set of questions" (as cited in Corbin & Strauss, 2008, p. 27). This study used open-ended semi-structured interviews to gather the data, as well as an interview guide that captured the data areas I wished to pursue with each participant (see Appendix D).

The interview guide provided a basic framework for asking the appropriate questions to be able to understand and capture the viewpoints of the participants. I sought to understand the world as seen through the participants' eyes.

The interviews were audio taped and then transcribed to assure accurate recording of the data. I also took written notes to capture other nonverbal behavior of the participants' reactions to the questioning process. This action was taken because, as Polkinghorne (2005) asserted, nonverbal cues, such as body language, facial expressions, and physical gestures, may help to illuminate deeper meaning in the participants' oral responses. He recommends that observational data be written, either during the interview or immediately after, and attached to the interview transcriptions as part of the text to be analyzed.

According to Corbin and Strauss (2008), Patton warns of the possible misinterpretation of nonverbal data, especially among different cultures, and the need to

follow up with the participant to disseminate the behaviors appropriately. Patton suggests the following concerning nonverbal data collections:

Whenever possible and appropriate, having observed what appear to be significant nonverbal behaviors, some effort should be made to follow up with those involved to find out directly from them what the nonverbal behaviors really meant. (as cited in Corbin & Strauss, 2008, p. 30)

Polkinghorne (2005) discusses the use of observational data as an additional data source to be used in connection with interviewing the participant. He stated that “the participants’ behaviors, facial expressions, gestures, bodily tone, clothing, and other nonverbal indications can be used to shed light on the meaning of a participant’s oral comments” (p. 143). He recommends that observational data be written either during the interview or immediately after. The written observational notes should be attached to the interview transcriptions as part of the text to be analyzed.

To ensure confidentiality before beginning the transcription process, each participant’s recording was assigned a number, and his or her name was not included. The interviews were transcribed verbatim to serve as raw data. Any identifying information was excluded, and the audio tapes were destroyed after transcription. A professional transcription service was used to transcribe the recordings.

### **Data Analysis**

I began the data analysis process by reading the transcribed interview data. I then identified, coded, and categorized the primary patterns in the data. Coding involves breaking down the data and conceptualizing it so that themes and concepts may be identified (Strauss & Corbin, 1990). Simply stated, coding is the process of analyzing the

data. When using the grounded theory, there are three major types of coding used for data analysis: (a) open coding, (b) axial coding, and (c) selective coding (Strauss & Corbin, 1990, p. 58). The lines between these types of coding are artificial and do not take place in stages; rather, the researcher moves among them.

This study's coding process involved naming and categorizing phenomena through a close examination of the data. Strauss and Corbin (1990) describe the benefit of this method:

During open coding the data are broken down into discrete parts, closely examined, compared for similarities and differences, and questions are asked about the phenomena as reflected in the data. Through this process, one's own and others' assumptions about phenomena are questioned or explored, leading to new discoveries. (p. 62)

Two analytic procedures are basic to the coding process. The first pertains to the making of comparisons, and the second pertains to the asking of questions. These procedures are referred to by Glaser and Strauss as "the constant comparative method of analysis" (as cited in Strauss & Corbin, 1990, p. 62) As the data are collected, the researcher asks questions about the meanings of individual words or statements used by the participants and begins to create categories to better understand the data.

A category is "a classification of concepts" (Strauss & Corbin, 1990, p. 61). Concepts are grouped together when they are compared with each other and appear to pertain to certain like phenomena. These concepts then become categories. Through the coding process, categories are developed in terms of their properties, which can then be dimensionalized. Recognizing properties and dimensions enables the researcher to make

decisions about the relationships between categories and subcategories because “properties are the characteristics or attributes of a category, and dimensions represent locations of a property along a continuum” (Strauss & Corbin, 1990, p. 69).

Through use of the comparative method—comparing categories and integrating categories and their properties—a theory will develop.

As the theory develops, various delimiting features of the constant comparative method begin to curb what could otherwise become an overwhelming task.

Delimiting occurs at two levels: the theory and the categories. First, the theory solidifies, in the sense that major modifications become fewer and fewer as the analyst compares the next incidents of a category to its properties. Later modifications are mainly on the order of clarifying the logic, taking out non-relevant properties, integrating elaborating details of properties into the major outline of interrelated categories and –most important–reduction. (Glaser & Strauss, 2010, pp. 109–110)

### **Presentation of the Data**

The data will be presented in Chapter Four, which will consist of the participants’ responses to the interview guide questions (disguised to protect anonymity) and the categories and subcategories that emerged from the data collected. Chapter Four will present the overall findings from the research study. Chapter Four will discuss the limitations of the study and the potential significance of the research and integrate the research question, the literature reviewed, and the analysis of the data.

### Limitations of the Study

The primary limitation of this study is the number of the participants interviewed. The sample size is small and therefore the findings may not be generalized to a larger population. Another limitation is the reproducibility of the study, as this study deals with the individual experiences of each participant, and no two participants' experiences are the same. Furthermore, researcher bias can be considered a limitation of this study because the question chosen for the study implies that there are elements of meaning and satisfaction in the lives of persons 80 and older.

Reliability and validity are terms used to evaluate research studies. They speak to the design and methods used, as well as the findings that resulted. In evaluating qualitative research studies, Patton stated the following:

The validity and reliability of qualitative data depend to a great extent on the methodological skill, sensitivity, and integrity of the researcher. Systematic and rigorous observation involves far more than just being present and looking around. Skillful interviewing involves much more than just asking questions. (1990, p. 11)

Corbin and Strauss (2008) refer to Hammersley's 1987 work regarding the subject of *validity*, as it applies to qualitative research. Hammersley considers qualitative research valid if "it represents accurately those features of the phenomena that it is intended to describe, explain, or theorize" (as cited in Corbin & Strauss, 2008, p. 298). Corbin and Strauss equate validity with a kind of *truth*. They argue that the various strategies outlined by other researchers, such as Silverman, Morse, Barret, Mayan, Olson, and Spiers, for evaluating qualitative research address the scientific aspects of doing

research but leave out the notion of creativity, which they strongly believe is involved in the research process (Corbin & Strauss, 2008, p. 299).

Corbin and Strauss stated that Glaser and Strauss “were on to something” when they addressed the issue of research findings being “credible” in theory-building research. Glaser and Strauss stated that research findings were credible if they were believable and applicable (Corbin & Strauss, 2008, p. 301), as is expressed in the following statement:

The criteria for applicability include a theory should “fit” the area from which it was derived and in which it will be used, a theory should be readily “understandable” by laymen as well as professionals, a theory should be sufficiently “general” to be applicable to diverse situations and populations, and finally, a theory should provide the user with sufficient control to bring about change in situations. (Corbin & Strauss, 2008, pp. 301-302)

## **CHAPTER FOUR: FINDINGS**

### **Introduction and Overview**

This chapter presents the findings of interviews conducted with persons aged 80 and older who explored their thoughts and feelings regarding what provides them meaning and satisfaction at this stage of their lives. A description of the participants who participated in the study, including demographic data, is followed by the data collected. The data are divided into five general categories that address the following topics: (1) lives lived, (2) attitudes toward life, (3) losses, (4) adaptations, and (5) courage, endurance, and resilience. These five general categories were further divided into specific subcategories.

To protect the participants' confidentiality, each individual was assigned a different first name for citation purposes. The assigned name denotes the quotes from the individual participants.

### **Interviews**

Each interview was audiotaped and conducted in the participants' own dwellings. The interview began with a brief overview of the research topic and consisted of the questions developed in the interview guide. Additionally, I took brief written notes during the interview to assure that I would capture accurate demographic information and any nonverbal reactions to the questions asked. The average length of the interviews was 90 minutes, although the interviews with married couples were considerably longer. All of the interviews were professionally transcribed.



## Participants

The participants in this study ranged in age from 82 years to 98 years old. Eight persons were interviewed. Three of the participants were men, and the other five were women. The participants included two married couples. One couple resided in assisted living, and the other couple resided in their own residence. Of the other individuals interviewed, two women resided in a senior living community in their own apartments, and one man resided in his own home. One female participant resided in an assisted-living facility.

All of the participants had been married at least once during their lives. The couple residing in the assisted-living facility had been married 64 years and was the only married couple in the facility. One of the male participants residing in his own residence had been married for 64 years, as well. The couple who resided in their own residence had both been widowed prior to their marriage and have been married for 30 years to each other. Two of the female participants had been divorced and are now widowed. The other female participant has been widowed for 27 years.

All of the participants were Caucasian of various ethnic backgrounds and resided in the Midwest and the West Coast. All stated they were financially stable, and all had living adult children. One participant lost her adult son four years ago; however, she still had one adult daughter. Only three of the participants did not have grandchildren.

Most of the participants described themselves in relatively good physical health, and only two were in need of substantial physical assistance. Four participants needed assistive mobile devices, and five participants acknowledged having some impairment of memory. The five participants that did experience memory issues were along a

continuum, varying from difficulty with word retrieval to one participant stating she experienced memory gaps. None of the participants demonstrated symptoms of Alzheimer's disease.

All but three of the participants were college graduates, and four had completed advanced degrees. During their lifetimes, all of the participants were gainfully employed and were now retired. The participants expressed satisfaction with their respective employment experiences, with five of them having been accomplished in their professional activities. Three of the participants initially retired but returned to work afterward. Their professions included two teachers, a clinical social worker, a systems engineer, a poet, a playwright, a state employee, and a clerk. Four of the participants had published their work.

Of particular note was that none of the participants currently resided in the city or country of their birth. All of the participants had resided in a number of different cities within the United States, and one had lived abroad during their lives. These moves either were for professional reasons or because their spouse's employer had transferred them.

The name of the participant, current age, marital status, and living arrangement are provided for the reader's reference and clarity when reading the Data Analysis section. The names of the eight participants (disguised) are as follows: (a) Marjorie, age 92, divorced and now widowed, resides in her own apartment in a senior living community; (b) Judith, age 98, a widow, resides in her own apartment in a senior living community; (c) Marie, age 96, divorced, resides in an assisted-living facility; (d) Mark, age 84, married, resides in his own residence; (e) Paul, age 84, married, resides in an assisted-living facility; (f) Lily, age 82, married, resides in an assisted-living facility; (g)

Harry, age 97, widowed and now married, resides in his own home; and (h) Leslie, age 93, widowed and now married, resides in her own home.

### **Data Analysis**

Upon completion of the interviews and their transcription, I listened to the voice recordings numerous times in addition to reading the transcribed interviews, marking sections of the interviews that appeared to be similar and different. As I reviewed the data, themes emerged. From these themes, I used the open-coding process to identify primary categories. Within the primary categories, I developed several subcategories. I also reviewed the data to identify commonalities and differences.

Once the primary categories were identified and the subcategories developed, I then proceeded to color code each participant's interview according to the categories and subcategories. The categories and subcategories speak to the research question of what provides meaning and satisfaction for persons 80 and older.

### **Lives Lived**

One's life experience is affected by the cultural, economic, social, political, familial, and historical context in which they were raised. The participants in this study were born in the years ranging from 1915 to 1931. All but one of the participants was born in the United States.

The oldest participant lived through 17 United States presidencies, whereas the youngest participant lived through only 14. During their lifetimes, these participants were witnesses to the Great Depression, World War II, the Holocaust, the dropping of the atom bomb, the Cold War, the Korean War, the Civil Rights Movement, the Space Age, the Vietnam War, Watergate, the Persian Gulf War, the 9/11 terrorist attacks, the Iraq War,

and the reliance on computer technology. All of these world events can influence what provides meaning and satisfaction for one during their lives.

During childhood, whether or not a person was reared in a formal religion, the economic status of their family and their parents' parenting styles are important factors that influence the formation of an individual's personality and the way in which he or she interact with the world. Other influences that contribute to an individual's character development include how much education they received and where they attended college. Additionally, getting married can affect one's life satisfaction.

### **Time They Grew Up in and Lived**

As stated above, the eight participants lived through numerous significant events during their lifetimes. Four participants mentioned some of these events in their lives. Marjorie remarked, "My father was a stock broker and lost all his and a friend's money when the market crashed ... he never could recover from that." Marie spoke more personally about her experiences in World War II while she was living in Ireland:

The war years were difficult because there was a shortage of food ... you had to rely on just what you grew on the land. And you couldn't have a light on at night; you'd have to go and pull down the blackout curtains or else the planes could see the lights and know where to bomb.

Harry was part of the invasion of North Africa in December 1942. He said, "It was not like Normandy; there was no opposition, basically." Harry and Leslie were both members of the Communist party. Harry's membership prevented him from resuming his pre-war job as a jeweler. In relation to this fact, he said, "I figured the FBI would certainly look at every jewelry shop. So, I became a printer."

## **Growing Up Experiences**

One's experience of growing up, including his or her socio-economic situation, parents' styles of parenting, family culture, and religious orientation can influence what one finds meaningful and satisfying in life.

### **Socio-Economic Status**

Three of the participants spoke directly about their families being poor. Marjorie recalled, "As the depression came along, we rented, and my mother wanted to live near the school where she taught. We moved many times in the summertime to someplace where it would be cooler." She said this left her feeling that she was not really *anyplace*.

Marie said, "When I was growing up, we were not wealthy at all. We were very poor, really. But we were very happy." Similarly, Judith said, "We were never poor, we might have looked it, but there was no money for any extras. It was the depression." One of the participant's (Harry) father was a fruit peddler in New York City and had immigrated to the United States from Austria. Lily's father emigrated from Poland to Chicago and was a carpenter. It is doubtful that those manual labor jobs provided much income for their families.

### **Styles of Parenting**

How one is parented affects how one develops as an individual—biologically, psychologically, and socially. Where one is raised, how, and by who are fundamental to the development of one's personality.

Marjorie was born an only child in Glendale, California. She recalled struggling to feel connected to her mother growing up:

My first memory is of my mother scolding me. I got spanked an awful lot as a kid ... I took Latin in school for my mother. Ugh ... I was trying to be good for her so she would think I was a good person because I had always been ... a tom-boy.

Heck, I ran away from home when I was four years old; I didn't really like it at home [so] I ran away.

Conversely, Marjorie recalled her father fondly. She described her experience of going to Occidental College for the first year and being sick all the time. Her parents had wanted her to come home every weekend because it was close, but she did not want to. Marjorie recalled her father coming to her one day, saying, "I have been in touch with Occi, and also with Stanford and Berkeley. Now you can go to either Stanford or Berkeley...Which one would you like to go to?" Marjorie said she felt that her father's comments signified that he knew she wanted to get away from home.

Judith related how she was determined to go to nursing school. "When I was ready for college, it was the depression. In '32, there was no money for college, there was six kids." She said her mother had a way of asking questions, rather than saying no. "I remember my mother asking, 'Why do you want to empty bed pans?' They never said 'No, you can't.'" Judith would later meet a social worker, her brother's friend, and choose to become a social worker.

Marie, who grew up on a farm in Ireland, vividly recalled, "I think my first picture was [of] when I stole the donkey from the barnyard, and we went riding around the fence until my mother finally found me. I think I was about three." She said her mother had a great sense of humor and would always say, "I'm going to do the best I can.' That was just her way." Marie described her father as being more "explosive, losing

his temper, and raising his voice”; however, he was also “the kind that wouldn’t hurt a cat.”

Harry credited his father and mother’s love of vaudeville and theater for his coming to love it, as well. He said during the winter, when his father could not work as a fruit peddler, he would put on his only suit and go to the theater.

Mark and Paul described having estranged relationships with their fathers. Mark recalled an experience with his father taking him to visit his ailing mother in the Tuberculosis Sanitarium:

I remember my father driving me down to Colorado with him, and I remember for some odd reason we were taking pigeons ... I remember it was pigeons for some reason, I don’t know why ... but somehow we were taking pigeons to the hospital for her to eat ... to be cooked and eaten. I am not sure it is pigeons now, but that is about all ... and then I remember waving to her out the window, just a very thin, frail person. TB was no fun.

Mark’s mother died when he was three years old. He said, “Well, I guess she must’ve raised me for a little bit of time ... And also, I had an uncle that lived in a town near us and I stayed with them for a while.” Mark’s father remarried one year after his mother died.

Paul’s father left his mother when Paul was 16 and moved to Chicago, taking only Paul with him. He left Paul’s sister and brother with their mother in Baltimore. Paul did not elaborate on the move, only saying that he did not get along with his father. His father also remarried.

Lily spoke very lovingly about her family. She made special mention of her parents taking her and her brother downtown in Chicago to see the Christmas windows at Marshall Field's department store.

Leslie, whose ability to recall the past was limited, did recall reading her father's love poems to her mother from World War I. She believes this was the beginning of her interest in writing poetry and becoming a poet. She continues to write poetry now.

### **Religion and Culture**

One's religion and culture can provide meaning and satisfaction in life. Specific questions regarding religious affiliation and ethnicity were asked of each participant. The responses to these two questions were interesting. Six of the participants identified as being Jewish and indicated this as their ethnicity, as well. Upon further clarification of the question of ethnicity, four participants indicated that their parents had come to the United States from eastern Europe; however, they made no mention of identifying with the particular country's customs.

Of the six participants who were Jewish, only two continued to attend services. Two participants indicated that finances prohibited them from joining a synagogue. One participant stated he was an atheist and did not believe in religion, and the other stated she was an agnostic.

One of the participants, who was Episcopalian, acknowledged being grateful for being brought up in her faith; however, this person no longer believed in the teachings of the church. She attributed this change to reading and talking to people as she grew older. The other participant, who was Roman Catholic, continued to practice her faith and expressed frustration at not being able to attend Mass because she was confined to bed.



She was the only participant that maintained an allegiance to her ethnicity, and she was the only one that was foreign born.

### **Formal Education**

Four participants described their college years as being rewarding. One participant described her time at Berkeley as the first time in her life she felt free to be herself. Attending Berkeley enabled her to be away from home and her punitive mother. Marjorie said, "I talked about it and knew that they really couldn't afford Stanford, so I said 'Berkeley,' and I loved Berkeley. It was just heaven. I just adored it."

Two of the participants met their spouses while attending college, which they described as meaningful events in their lives. Mark said, "We met at the University of Colorado. I was getting my Master's Degree in applied mathematics, and she was just finishing her last semester of college. We got married just after she graduated."

Judith went to undergraduate at William and Mary, which she said was "the second oldest college in the country." She explained that she attended her first year of graduate school at the University of Pennsylvania and then got married in-between her first and second years of graduate school:

We moved to Pittsburg because that's where my husband had gotten a job that made...that we could afford it. We could afford to get married, but we lived in a settlement house and worked. Then I finished my second year at the University of Pittsburg.

Additionally, for these two participants, who also obtained Master's degrees, they derived a great deal of satisfaction in their professional careers.

Attending college allowed another participant to escape poverty and life on a farm to become a nurse, which led to being able to support her two children after her divorce. Three participants did not attend college, but they did complete high school. Two of these participants were able to enjoy success in their professional endeavors. The third high school graduate worked as a clerk and was primarily a homemaker.

### **Marriages**

Making a decision to marry is a significant life choice. Whom one chooses to marry, and why, can affect one's level of satisfaction in life. How the marital relationship develops and evolves can provide either pleasure and joy or heartache and misery. If the marriage is healthy, an individual's sense of self may be enhanced, and the marriage can provide a vehicle for growth. A kind and loving spouse can encourage, support, and console their partner through difficult and challenging life experiences, as well as share joyful and pleasurable events. Conversely, if the marriage is unhealthy, an individual may feel demeaned, controlled, oppressed, and undermined. However, even a *bad* marriage can afford an opportunity for personal growth. Relationships provide a vital source of meaning and satisfaction for most people.

For the eight participants in this study, their marriages were meaningful experiences whether or not they remained together. Two of the participants chose to divorce their spouses because they were not satisfied with their relationship and made a conscious choice to move on with their lives. One participant, Marjorie, described how after her children were grown and out of the house, she felt alone, for the most part, because her husband traveled for work. She further stated that their time together was often spent independently working on their individual work. She said, "that's not my life

... this is not for me ... I want to do a lot of things, and the first thing I am going to do is divorce you.”

Another participant, Judith, who has been a widow for 27 years, said she initially did not intend to marry because she was raised in a large family and preferred to pursue a career. However, her husband convinced her she could have both. She described his support of her pursuing psychoanalytic training, saying, “that was the kind of guy [he was, who, through] all of our life together, said, ‘If you want to do something, Honey ... do it.’”

Three participants were married for 64 years and described meeting and marrying their spouse as one of the most satisfying aspects of their lives. While interviewing them, their devotion to their spouses was evident in their facial expressions and by the manner in which they described first meeting them.

The two participants that were married to each other for 30 years had both lost spouses. They described painful memories of their spouses’ deaths: one by a tragic accident and another from cancer. They indicated that they were grateful for having met and married each other. They both spoke of enjoying each other’s company and sharing mutual interests.

The other participant that had divorced her husband did not offer any details as to why she had done so, only that she did not have any contact with him except through a lawyer because he had tried to take her children from her.

### **Attitudes Towards Life**

An attitude can be described as a decided feeling or idea about a particular subject. An attitude can be defined as one’s manner or disposition. One of the striking

features of all of the participants' interviews was their attitudes toward life. I would characterize their attitudes as being practical, focused on living in the present, and being actively engaged in the world around them. One's attitude can influence the amount of satisfaction experienced in life and speak to the way in which he or she approaches living.

### **Living in the Present**

*Living in the present* involves being actively involved in living one's life every day. All of the participants spoke of looking forward to the next day, expressing anticipation of what would occur that day. Seven of the participants had various activities they would partake in on a daily basis. One of the participants, the one that was most physically impaired and, therefore, limited in what activities she could participate in, also expressed a positive attitude in anticipating what the next day would bring.

Marjorie described herself as being someone who anticipates the next day, stating that she was not one to sit around. She is an avid reader, goes dancing with her friends, loves to dine out, exercises three times a week, and is in a book club.

Judith described herself as always being positive and determined, doing whatever she wanted to do if she wanted it enough. She leads a very active life, leading a book club, taking two courses, going to the theater, going out to dinner, and going to exercise class. She has maintained a philosophy of "what is going to be is going to be." She especially emphasized the importance of accepting what is by stating that her intention is "to take things as they are and not go back to things you wished they were."

Harry and Leslie spoke of the importance of reading and attending the theater once a week to listen to the Metropolitan Opera. They also made it a point to eat out at

least once a week and explore new types of food. Both spoke of intellectual stimulation as a source of pleasure and meaning for them.

The other married couple interviewed, Paul and Lily, who resided in an assisted-living facility, were somewhat limited in their ability to venture out of the facility. They did, however, indicate that they participate in the activities within the facility, which include music night and having entertainers come from outside the facility. Their collective attitude is “just live one day at a time.”

One of the male participants, Mark, wondered how he ever had time to work because there were so many things to do each day. He walks daily, takes a Shakespeare class, is involved in exercise/dance class three times a week, and meets with former colleagues once a week for lunch. He reads the *LA Times* and *New York Times* daily on the Internet and works on his computer trying to develop some of his ideas. His attitude is “I just get up every day.”

### **Engagement in the World**

*Engagement in the world* can be defined as the level of one’s interest in the world in which they live. This would imply that individuals focus their attentions outward toward the events occurring in their society, community, or country and the degree to which they are concerned about them.

Six of the eight participants expressed concern about events occurring in their residential cities, the political situation within the United States, or the Middle East peace crisis. Furthermore, although this question was not asked of the participants, five of them stated their political preferences. Five of the eight participants indicated they were liberal Democrats.

Marjorie described her experiences volunteering as a counselor at a homeless shelter. She worked with alcoholic, drug-addicted men and passionately talked about their struggles and lack of male role models. She said, "They just didn't have any parenting." She indicated that her ability to connect with these men was one of the most meaningful experiences of her life.

Another participant described the political situation in the United States as being "horrible" and was a source of stress for him. He said he was worried about all the people that hated the United States, referencing the Boston bombing and, more recently, his daughter being at Los Angeles International Airport when a shooter went on a rampage.

Three participants were very concerned with the ongoing Middle East peace situation and hoped that the State of Israel would survive. One of these participants spoke of his hatred for war and destruction, mentioning the atomic bomb and the Holocaust. This participant actively read articles about economics and politics on the Internet.

One participant was politically active and was concerned about the chemical weapon attack in Syria. She was intent on calling her congressional representative to express her viewpoint. All but one of the participants was aware of daily events, and this person only lacked awareness because she suffered from gaps in her memory.

### **Losses**

The very nature of the life cycle is one of gains and losses. As we develop as human beings, our gains in development imply a loss; for example, we crawl before we can walk and coo before we can speak; thus, at the age of 80 and older, it would be impossible to not have experienced some form of loss. The participants in this study all had suffered some type of loss during their lives, either by sustaining a trauma,

encountering a tragedy, experiencing a loss of physical functioning, or feeling regretful about their lives.

### **Traumas and Tragedies**

Six of the eight participants reported having sustained a trauma or tragedy. Five participants had experienced the death of a person very close to them in their lives. The spouse of one of the participants was diagnosed with dementia six years ago and is becoming increasingly impaired in her ability to function. Now, she barely speaks and is difficult to understand when she does.

Judith related, "My middle son's wife died six years ago: 49 of cancer. My youngest son is a widower ... he lost his wife a year ago: again, cancer, at 51." Leslie said, "Both of my daughter's husbands killed themselves: one set himself on fire, and the other stabbed himself to death." Both of these participants also lost their spouses unexpectedly. In describing the death of her spouse, Leslie said, "Well, it was a Sunday, like any other, and he had gone hiking with two of his students up in the mountains ... he slipped and fell on a patch of ice, and that was it. He was dead." When discussing the day her husband died, Judith said the following:

And why on Earth I had to tell him at eight o'clock in the morning that I changed plans for that night, I'll never know. I walked down the hall and he was in the bathroom with the door shut. I knocked on the door and said, 'Honey, I forgot to tell you something.' He said, 'Just a minute, Honey.' And when I opened the door, one eye was already closed ... but the shock was too much for me. And he was 68 when he died, which from where I sit now, seems awfully young.

Harry emotionally recalled witnessing his wife being resuscitated despite his objections, which he described as “just terrible what they did to her.” After she died, he decided to join the Hemlock Society.

Marie, who lost her son to cancer, said, “These last four years have been particularly confusing to me since John died. Such a strong and healthy individual: it’s truly amazing what really can happen.”

After Marjorie divorced her husband, she lived with a woman for a number of years. They worked together as teachers in Chicago, and upon retirement, they both moved to Sedona, Arizona. She expressed how she also outlived this woman:

... Then she didn’t feel very well and we moved to well ... just north of San Diego, so we lived there, and then ... her illness became more pronounced, so we moved here, and in two years, she died. I’ve been alone now for nine years.

Two of the participants had suffered significant physical traumas during their lifetimes. Judith related a major accident she had as a young woman:

I was in a terrible accident when I was 22. I had gone to the theater one night with a date. I walked toward the ladies’ room, and inside the theater in the dark was an open fire escape. I went down 15 steps. I had broken anything you could break. I cracked my face, my jaw, both my arms ... I was in the hospital for months, and months, and months.

Harry related that he was “about 50” when he became very sick. He was diagnosed with an *exotic disease* affecting the pituitary gland. His doctor at the Veteran’s Affairs clinic in Los Angeles told him there was nothing more he could do to help him



but referred him to a clinical trial in San Francisco, which worked. "I was one of the lucky 10%." Only two participants reported not experiencing a trauma or tragedy.

### **Physical Functioning**

Six of the eight participants related experiencing a decline in some aspect of physical functioning. The changes in physical functioning included a loss of mobility, loss of vision, and loss of memory. One participant, Mary, experiences gaps in her memory and is severely restricted in her mobility. Two participants, Mark and Paul, experienced no decline in their levels of physical functioning.

Lily, who experiences mobility issues, suffered a stroke one year ago. Harry stated he had "bad knees" and a "hip replacement," which made it difficult for him to get around. Despite these impediments, both of these participants use a walker to ambulate so they are able to be somewhat mobile. Marie is essentially bed bound; however, she, too, verbalized a hope that she would be able to use a walker to assist her with ambulation. Similarly, Judith is experiencing difficulty with her vision, but she indicated, "It's not anything that stops me, really."

The one area of loss in physical functioning that three participants were most bothered by was the loss of memory. Both Leslie and Marie expressed difficulty in relating details of their stories because of issues with their memories. Likewise, Marjorie had a difficult time talking about her son in Denver, which was the first time she had experienced difficulty relaying that information. She stated, "It's getting worse and worse, and I am furious, but I can't do ... heck about it."

## **Regrets**

Six of the eight participants expressed regret about some aspect of their lives, and the regrets encompassed their perceived failing as a mother, not accomplishing or achieving a professional goal, not being present for the death of their parents or child, and not having any grandchildren. The remaining two participants indicated they did not have any regrets about their lives.

Only one of the six participants spoke of not having reconciled her regret. In explaining this, Marjorie made the following statement:

It always bothers me that I was not a better mother, I didn't know how to be a mother. I really didn't know what to do. He got involved with drugs. And of course, what did we do? We sent him to a shrink! Did we go? Who should have gone? We should have gone! No. We were stupid.

## **Adaptations**

How an individual adapts to the world in which he or she lives has implications for how much meaning and satisfaction he or she will derive in their life. Adaptations involve making conscious choices regarding the course of action one takes when changing life circumstances. Adaptations can include making decisions on where and how one lives his or her life, how one copes with changes in physical functioning, and how one behaves in response to changes in relationships with family and friends. One's ability to adapt to the above life situations contributes to his or her sense of self and individual identity and affords an opportunity for growth.

## Continuity of Self

*Continuity of self* refers to a person's sense of who they are along a continuum of time. An individual's sense of self is his or her ego identity. Continuity of self involves biological, psychological, and social aspects of one's essential being. It is the core sense of one's essence.

Seven of the eight participants reported experiencing their sense of self as being contiguous throughout their lifetime. Judith stated, "I am pretty much today as I have always been, very determined to what I want to do, and Thank God, I still can." She went on to say the only difference for her now was that she was living with a "bunch of people." Lily said, "Well you know, I still am like I was before I had the stroke, only now, I can't get around like I used to, but it's still me." Leslie stated, "I have always been a fighter, a doer, a thinker, and I am the same today." She elaborated more and said she feels comfortable with herself and enjoys being alive.

Paul remarked, "I am the same guy I have always been, maybe a little older now, but still the same guy." Likewise, Harry stated, "I've done a lot of different things in my life, moved around, always been an active person but, basically, I still feel the same, I am just me, I have adapted." Mark said, "When I think about it, I've always been more or less the same, I like talking to people, trying to help them out, making them laugh ... yes, I have always been the same."

Marie shared a similar view with the following statement:

I am still the same, really, I see me getting older, a very much older me, but it is what I expected; it is not a surprise. I think I am fortunate to have lived this number of years and to see everybody doing okay ... but I am still the same

person: talkative, funny, always wanting to do different things. I think I am as much the same as I always was.

Marjorie was the only participant that indicated that she felt she was different now than she had been when she was younger:

Oh, I think I have grown a great deal. I didn't have enough confidence in myself, and it was no wonder: it was my childhood, now that I look back on it. I was a great worrier, and I always had friends and a good time. Thank goodness I have not stayed scared of everything, you know. I always felt less than. And, every time when I became an adult I felt as good as or good about myself, it was a red-letter day. Then, it eventually got so that I always felt good about myself, and I still do.

### **Current Family Relationships**

Relationships with one's family members can provide satisfaction, add meaning, provide comfort and support, or may be a source of conflict, regret, and angst. All participants mentioned their relationships with their children, and three mentioned relationships with their siblings.

All of the eight participants had at least one of their adult children living in close proximity to where they resided. Relationships with adult children were said to have been very satisfying. Five of the participants also mentioned that their relationships with their grandchildren were also a source of satisfaction. Three participants did not have any grandchildren; although, they indicated that they had hoped they would have had some, but it was beyond their control.

Marie has one living daughter, and her son passed away four years ago. Her daughter lives very close to her and visits nearly every day. Marie indicated that her daughter is a great source of emotional support and makes her laugh. She said she felt sorry for her daughter because of the loss of her brother four years ago, with whom she had been close. Marie described their relationship in the following way: "He was forever picking on her and she was forever picking on him. They got along very well. I'm sure she misses him an awful lot." The death of her son was also a source of pain for her, and she stated, "There are times that I can't believe that he's gone." Although she expressed satisfaction with her relationship with her daughter, it was also a source of distress because she felt her limited abilities in what she could do for herself made her a burden for her daughter.

Judith has three sons, two of which reside out of state and call frequently. She also has five grandchildren, and two of them are married. One grandchild is expecting his first baby. She said, "I am going to be a great-grandmother, God willing, in November ... my first one." She said she tries to see her sons who live out of state as often as possible, "and we try to get together at least once a year ... the whole crowd of us." All of these relationships provide a source of satisfaction for Judith.

Paul and Lily have two sons, both of which are married. One of the son's wives passed away. The son that lives closest to them visits every week, and the other son who is further away calls often. Both of their sons married women who were much older than they were; therefore, they have no grandchildren. They said, "We always wanted grandchildren, but we have accepted that we do not and have moved on." They indicated

that they were happy that the son who was widowed was involved with someone he loved, and they liked her, too.

Leslie has two daughters and two grandchildren. Only one daughter resided near her in the same state and visited several times a year. The other daughter resided quite a distance away but did call her on the phone. She has two grandchildren, who also live at quite a distance. Leslie said she gets to see them occasionally, but also expressed sadness at that it was not more frequent.

Harry has one son who lives nearby and calls or visits often. He has one grandson who also lives locally. He does maintain contact with his grandson. Harry and Leslie's children came from their first marriages; however, having been married to each other for 30 years, they consider all the children as their own.

Mark has a son and a daughter, who are both married. Mark's son lives on the east coast, and his daughter resides nearby. He has two grandchildren, who are both attending college in different areas of the country. He said, "I'm happy with talking to our grandchildren. They now [get] around to calling me once a week. They didn't use to. My son only called once a week ... but now that they are in college, they call us every week." In addition to receiving calls from his grandchildren, Mark now receives visits at least twice a year. Mark also expressed a fondness for his son-in-law, who helps him around the house, and his daughter-in-law, who visits every year for Passover.

Marjorie has two sons who are both married. One son lives nearby, and one son lives in the western part of the United States. She indicated that she is close to both of her sons, expressing pleasure in spending time with each of them. Marjorie indicated that she derives satisfaction from "being with my son and daughter-in-law, being with my

grandson, being with my children, or visiting John in Boulder, which I have just done recently.” She expressed joy about the upcoming wedding of her grandson the following month.

The three participants that mentioned their sibling relationships all remarked that they had outlived their siblings and were the only ones left. A specific question regarding relationships with siblings was not asked of the participants.

### **Decisions About Where and How to Live**

Where and how one lives influences the level of satisfaction in their lives. All of the participants in this study had moved from another residence to their current living situation. The three participants who are now residing in assisted living situations made this choice when they encountered health conditions that no longer allowed them to live independently. The two participants that reside in a senior living community made the choice to do so to enable them to be closer to a family member. The remaining three participants are residing in their own homes. Mark, one of those who has stayed in his home, said, “Oh, the area is wonderful because the library is two blocks away; there are restaurants, there are drug stores ... it’s very nice here.”

Paul and Lily moved to their assisted-living facility one year ago after Lily suffered a stroke. Their primary care physician told them that Paul needed help caring for Lily. They indicated that their son had located this facility, which was near where he lived, and they moved in. They said, “We have everything we need here, and we are the only married couple. We feel very comfortable here; they have good food, activities, parties, and transportation. The people are very nice. What else can you need?”

Marie said that her daughter had located the assisted-living facility she resides in, and she is “quite satisfied with my surroundings. I have a lovely room with all of my favorite things and everything I need here.” These participants expressed satisfaction with their current living situations and were content with their surroundings.

The two participants now residing in a senior living community made their choices because they wanted to be closer to one of their children. Marjorie made her choice after the woman she was living with became ill, and she needed help caring for her. They decided to move back to the Midwest because Marjorie’s son could assist in caring for her friend, and they both had friends in the area from the years they had taught there. Judith’s decision to move was prompted by the death the last of her close friends:

I had a house and I had loads of friends. And the kids would visit, you know? But all of a sudden, my friends were gone. Either I outlived them or they were moving to be closer to children. It took me about a year, but I got to thinking, ‘You know, there really is nothing left here for me except my work. And if I want to work, I can do it anywhere. I want to be near the kids.’ Every now and then I would have such times ... A grandkid would call me and say, ‘Oh, Grammy, I’m going to be in Peter Pan. Gee, I wish you could see me.’ And I thought, ‘You know, you’re crazy ... You’re missing out.’ [...] I didn’t tell the kids what I was doing, but I went to visit each one ... I went to each city and looked at different places. One place I could never afford, and the other I would have to drive all over. I came here and I took my daughter-in-law’s car, looked through the telephone book, and I took a map. I found this one. And from the day I first put my foot in this building, I loved it.



### **Dealing With Changes/Needing Assistance**

How one copes with changes in their life affects the meaning and satisfaction he or she experiences. The change may occur because of an external event, such as having to care for an ailing spouse, or initiated by the individuals to respond to a personal change, such as a change in a physical ability. Additionally, how one responds to needing assistance can influence life satisfaction. The participants in this study experienced changes caused by external events and those in which they initiated.

Leslie and Harry, both widowers, met through a mutual friend that was involved in an activity both of them enjoyed a great deal. Married for 30 years, they derive a great deal of satisfaction from their relationship.

Mark retired when he was 65 years old because the company he worked for at the time let him go:

[They] decided let's get rid of a lot of people and give them something for us getting rid of them, so it seemed like an appropriate thing to do. They had some deal with the government where they tried to find jobs for the people, so I went and filled out the forms. Then about a year later, a headhunter calls me and says they have a job for you back East. So, we wound up going back there and working for another couple of years.

Mark's wife who recently encountered a setback with her illness, said he was "doing all right" managing her care at home and was looking into getting his first smart phone so he could use some applications with her.

Marjorie has experienced three bad falls over the past three years and believes they have affected her memory. She said, "My memory is getting worse. I'll tell ya, I've

been going through books, and I've been using my memory all morning trying to work on it." She had the following to say about how she has coped with her changing circumstances:

For some unknown reason, when I got to be 90, I said to my son, I think that maybe I should stop driving. Every day I am annoyed that I don't have my car. I can't seem to get over that, and actually my book club—they are such wonderful women—meet here every month in my apartment because I have no car ... it's wonderful.

Judith described having recently learned that she has lost her peripheral vision in her right eye and her depth perception. She said this resulted in her not being able to tell if she is stepping off a curb or going down an escalator because she cannot tell when to get off:

So, it's a nuisance. But, fortunately, you walk to the end of the block and you know there is, like, a cut off to go into the street, so I don't worry. When I go outside to walk, I take a cane. What it does for me is I can put the cane ahead to see if there is a split in the sidewalk because the sidewalk is not always even.

Marie, whose health has been steadily declining over the past four years and memory is impaired, said her condition is hard to deal with at times:

It is embarrassing sometimes because I have cousins that are living near here, and I will forget the names of their wives or their children. So, I have to be very careful when I ask the question 'How is your family?' because I don't want to say how is Jane or how is Mary or how is ... because it might not be the right family.

Marie also requires a significant amount of physical assistance but fears she is becoming a burden to others. She expressed this feeling in the following statement:

I try not to feel [like] a burden. I try not to show it. But when you lose your independence and you can't do everything for yourself, it is a big change—the biggest in your life, really—it is just that you resent yourself from being so independent. I know it is not my fault, but that doesn't help.

### **Courage, Endurance, and Resilience**

Courage speaks to one's ability to confront adversity, danger, and pain without fear. Endurance is one's ability to bear pain and hardships and continue forward. Resilience is one's ability to recover from adversity, illness, or other negative situations. All of the participants in this study possessed these qualities. Having lived for more than 80 years, each of these participants endured some aspect of adversity and continued living. Through their interviews, the participants showed how they lived their lives in the present being aware of their mortality and engaging in the process of living.

### **Current States of Mind Including Views on Death**

Judith described that she recently learned of her last sister-in-law's death. She said it was expected and that she was ninety-four, then realized that she was the last one, out of her five siblings alive. Her acceptance of this fact was exemplified when she stated, "Well, if you live long enough. I have been blessed really. Except for the death of my husband, a lot of good things happened, along with the bad." She then indicated that she never thinks of age except when it relates to her children. She said, "The only time age crosses my mind is when I am thinking about something of relation to my children and I realize that if they wanted to, all three of my children are old enough for a

retirement home. But age never really crosses my mind any more than death really does.” She said she knows she is going to die and has made all the arrangements to avoid her children having to do so when the time comes.

Mark related that he thinks he is a good father and a good husband. He thinks he is “reasonably smart” and has a “sense of humor” and does not feel 84 years old. He said, “Yeah, I feel younger than that, I guess. Yeah ... it’s hard for me. But then I stop and think that my son [is] 65 ... my god! I thought 65 was old.” Mark acknowledged that he does think about dying, saying, “Yeah. I am going to die someday. I’d like it to be very swift and no long suffering or anything.”

Leslie indicated that she is not getting old but, rather, she is “old and has arrived.” She said she does not dwell on death. Harry also indicated that he knows he will die but does not think about it much. He expressed a desire to continue writing and maybe collaborating with Leslie on a play.

Paul and Lily also indicated that they do not feel themselves to be old. Paul said he feels in good health and does not think about it much. Both stated they do not think about dying either, believing it is “all in the good Lord’s hands.”

Marie and Marjorie, unlike the other participants, indicated they think about death. Marie said her thoughts are not negative or fearful:

Yes, I think about dying, but not in the worst kind of way. I hate to think of going from here, but I also think of the people I hoped to meet at the other end of the journey. My parents, my family, and my friends. It’s funny because you don’t really know what to think; you have to just hope ... hope that it is going to be okay.

Marjorie responded to thinking about dying by saying she had given it a great deal of thought:

I really wonder what happens after we die. I think our being cannot be destroyed; our body can be, but our being cannot be destroyed ... at least I don't think so. I wonder where we go next. I think it is just fun to think about that. Are we called upon to grow more? Was this just a way station to grow and become something more than we were than when we got here ... and is the next step something more that we can't even imagine? To be realized elsewhere ... That's what I think about when I think of dying. I also wish I would die. I am ready to die. I am absolutely ready to die. I have lived a long life. I have had hard times and good times. I have not used myself to the degree I should have, but maybe in the next life I can do better.

### **Going On Being**

The participants in this study shared common themes of confronting each adversity with courage, enduring difficult economic hardships growing up, experiencing a continuity of pleasure in activities they enjoy, finding satisfaction and meaning in their relationships with their families and friends, continuing to have interest in the world around them, and an acceptance of their circumstances. These participants lived each day as it came. They did not seek to control the world in which they lived but, rather, respond by living their lives as they felt they were able to do.

An illustration of Leslie's resilience is exemplified in the following poem she wrote:

Late one night, she dared to look into the abyss

She stuffed bedclothes down her throat gagging the horror

All three, mother and children shunned his funeral:

“he’s not in a hole in the ground, he’s here with,” she said,

“forever.” Her daughters echoed without comprehension,

“here with us;” the years passed, they failed to find him

Her two daughters married. Defying probability

both husbands died by suicide--one by immolation

An artist who tinted the world but couldn’t get it right

His wife held watch until the final breath of the charred body

The other husband, part mystic, all gentle spirit

dubbed himself her son-out-law. When his wife left

he drove a knife into his heart--violence learned in Vietnam

The three widows went to his house searching for a clue:

on his kitchen wall he had painted a rainbow; on the bedroom

floor, the mattress had an ineffaceable bloodstain

One daughter proposed they alter history: reject widowhood

claim divorce. In their finest family tradition, mirth damped

down despair, their laughter splashed across “The Days of

(their) Lives”

In time the scenario was perfected, love came to their pocked terrain

For all three it was welcomed: mother, daughters, peaceful women,

they asked, they answered: Why us... Why not (Hara, 2011, p. 16)

When asked how they wished to be remembered, all participants responded by using the qualifier of “good.” Marjorie said, “I suppose as being a good person—a good friend. You know, a really good friend.” Judith, likewise, said, “Well, as someone who was a good person, who cared about and loved people and wanted the best for them.” Harry wants to be remembered as a “good father, a decent person, someone who tried to entertain and amuse people with his work,” whereas Marie simply said she wanted people to think of her as “a good friend.”

## CHAPTER FIVE: DISCUSSION

### Introduction

The meaning of life is felt through relationship...  
 Relationship with others and with one's own self  
 From what it is birth to whom we become as a child,  
 Adult, parent, grandparent and ultimately, as ancestor  
 The meaning of life flowers through relationship...  
 Parenting teaching servicing creating.  
 Learning from nature, the sages, our peers,  
 From our emerging selves in a state of becoming.

Jonas Salk (1988, n. p.)

The question of what provides meaning and satisfaction for persons age 80 and beyond is one that a growing number of persons will have the opportunity to ask themselves as our life span is extended. This exploratory, qualitative research study asked this question of eight participants residing in two large metropolitan cities in the United States. Their responses to this question produced categories that reflect the time and circumstances in which they grew up, specific experiences they had during their lifetimes, qualities they possess, their attitudes towards life and death, how they coped with trauma, tragedy and loss, and their relationships to their family members.

In this chapter I present a summary of the results of this study divided into five categories with some references to the reviewed literature, an interpretation of the results, assumptions made prior to the undertaking of the study, a discussion of the limitations of this study, and suggestions for future research.

### Summary of the Results

One of the commonalities the participants in this study shared was that they grew up experiencing two very significant socio-cultural events in history. These were the "Great Depression" and World War II. The impact of these events on the formation of



their individual personalities in addition to how these events directly impacted their lives was evident in six of the participant's interviews.

One participant, a veteran of World War II was able to participate in a clinical trial through the Veterans Administration which resulted in saving his life from a rare and serious disease. One participant's family was able to sustain themselves through the War years by raising cows on their farm which enabled them to have enough milk to drink so that they would not be hungry due to the shortage of food during that time. One participant was able to complete college due to the enactment of the "G.I. Bill." One participant who was too young to serve in the military during World War II indicated he was proud to do his part to assist the military with using his education in applied mathematics to help find submarines and work on other government intelligence programs.

One participant believed that one contributing factor to her feelings of being "less than" were attributable to her own parents being "poor" and her other relatives being "well-off." Another participant spoke of how the Depression nearly prohibited her from achieving her goal of attending college. These participants' responses were consistent with Erik Erikson's theory that an individual's life cycle could not be adequately understood apart for the social context in which they lived. The participants in this study were influenced by the social, economic and the ethos of the United States during this time period. The years during the War were marked by patriotism and unity. There was a collective sense of national identity against a common enemy. Having survived the Depression and War, being exposed to uncertainty, death and destruction, the participants in this study demonstrated both identities of "I" and of "we."

As a result of their exposure to these events, they developed attitudes towards life that enabled them to derive meaning and satisfaction in their older years. They were able to survive these events and having done so, seemed to cherish each new day that they were alive. Two participants who resided in the assisted living facility said we “just live one day at a time.” Another participant said, “I just get up every day, I have so much to do.” Another participant remarked, “I am always anxious to get up and get going.”

In the years, following the War, the United States experienced a surge in economic growth and development. Five of the participants in this study completed a college degree and four completed advanced degrees. Their educational achievements enabled them to pursue their professional interests. Their choice of profession which they indicated provided them a great deal of satisfaction also provided them financial stability. The participants that only completed high school were also able to achieve a level of economic success, which was obtainable during the time following World War II. The ability to pursue their interests and experience a level of success in doing so speaks to their sense of agency.

The fact that the participants in this study reported feeling financially secure was a contributing factor to their feeling satisfied with their lives in their elder years. Their comfortable financial status enabled them to make choices about how and where they lived without being burdened by the anxiety that can accompany having a limited income. One participant was able to choose a retirement community near where one of her sons resided which afforded her the opportunity to continue to live in the manner in which she wanted. Another participant who chose to move to be closer to her son also expressed a great deal of satisfaction with her choice. The couple that resided in the

assisted living facility their son chose for them was very satisfied with their living arrangements. In addition, having sufficient financial resources enabled them to remain independent and not dependent on their children or government assistance for housing.

Being financially secure enabled these participants' ability to continue to partake of activities that they had enjoyed during their lives. One participant was able to take a Shakespeare class, attend exercise classes, continue to meet his colleagues for lunch, and afford a live-in care-taker for his ailing wife, thus relieving him of the entire burden. One couple continued to attend the theater once a week, an activity both found very satisfying. Another, who is financially secure, was the only participant whose ability to continue to enjoy activities she found pleasurable was curtailed, but this was due to her severe physical limitations. One component of satisfaction was financial stability.

Furthermore, the times in which these participants lived experienced tremendous advances in the field of medicine that enabled the participants in this study to enjoy relatively good health. Four of the participants had sustained significant illnesses or an injury which they were not only able to survive but overcome with little residual impairments. Without the advances in medical technology, one's high blood pressure would not be controlled, another's hernia surgery at the age of 96 would not have occurred, Another, would have most likely died from her stroke and another would died at the age of 50 when he developed a rare disease. With the exception of one of the participants, who is 93 years old, the three other participants are in good health. Thus, another component of satisfaction lies in societal developments in this case, medical advances.

A question regarding the participants religious affiliation was asked as I thought this may provide a source of meaning and satisfaction for persons age 80 and older. Only two participants in this study indicated that their religious beliefs were a source of comfort and meaning for them. These two participants were raised in nuclear families that were committed to religious practices and traditions. These two participants continued to attend weekly church services. While all of the participants had been raised in a formal religion, four of the participants, having left their nuclear families, no longer felt that organized religion was of value to them. It can be speculated that as they developed autonomy, they no longer believed in the religion in which they were raised. The two other participants, one who saw herself as an atheist and another who stated he was an agnostic, these beliefs were a result tragic life experiences.

This finding surprised me since conventional wisdom holds that as one nears the end of life, a belief in something greater than oneself lends itself to an easier acceptance of finality. Only one participant's religious beliefs were related to her thoughts about death. She indicated that upon death, she believed she would be united with the people she loved who preceded her in death.

Only two of the participants considered themselves to be "old." The other six participants remarked that they rarely gave their age any thought unless it was in relation to the age of their adult children. When one participant was asked: "do you feel old in relation to the other people who attend the theatre when you go?" She responded by saying, "Oh NO, I never think about age. It just does not enter my mind." None of the participants in this study related having feelings of being useless or discarded by society, even the two who said they felt "old," continued to feel a sense a purpose. Their

responses dispel the theory of ageism which holds that as a society we value youth over age.

Butler coined the term “ageism” in 1969, to describe discriminatory and prejudicial attitudes towards older people. Ageism in the United States is seen in employment, the provision of healthcare services, segregated housing communities, and “senior discounts.” We make the assumption that older people have little value due to their lack of productivity in the workforce, are incapable of participating in strenuous physical activities leading to special age categories for sporting competitions, and the proliferation of age-reducing beauty products to name a few. These societal attitudes can impact an older person’s level of self-esteem and behaviors. The participants in this study were not affected by these societal attitudes and their sense of self worth was strong enough so that they did not devalue themselves. In fact, one of the participants rejoiced at being able to enjoy the “senior discounts.”

This phenomenon of feeling one’s age was described by Bernice Neugarten, (1996) when she said that one thinks of oneself in the present in terms of where one has been and what one has become. She believed that the individual has a “built-in” dimension of thought as to what is present, relative to the past. (p. 125)

The responses of my participants support Neugarten’s theory as they described their lives as flowing from one day to the next and on experience to the next. They experienced themselves as living in the present acknowledging where they had been at previous times in their lives.

Judith Viorst, the author of *Necessary Losses*, (1986) stated that one grows by working through their losses and letting go of them. That is certainly true of the participants in this study. Every one of the participants had sustained a personal loss yet was able to move beyond the loss and continue to embrace living. None of them gave up or withdrew but continued on. This quality of resilience is one they shared. One woman, devastated by the tragic death of her husband continued to write poetry. Another, whose husband died of a sudden heart attack continued to work and live in the house they shared until she chose to move closer to her son. One participant, who experienced the death of his first wife, decided to join the Hemlock Society after her death.

One of the losses however that three of the participants did struggle with the most was memory loss. However, that did not prevent them from continuing to engage in life. This loss was more bothersome than the loss of mobility even for the participants who experienced mobility issues. Marc Agronin writes in his book, *How we Age*, (2011) that changes in the brain are the most demoralizing aspects of aging (p. 37). This indeed was true for the three participants who experienced memory loss.

Erikson and Erikson (1997) maintained that at each stage of the life cycle an individual reintegrates in new age-appropriate ways the psychosocial themes from the previous period. They indicated that part of this process entails a review of one's life having lived thus far. They contend that an important aspect of this process is coming to terms with choices that one has made in their life. Erikson's theory implies that one may have made choices that lead to regret and that part of the aging process entails a conscious acceptance of those choices. The participants in this study did not experience themselves as having to come to terms with their choices rather they simply made choices

in the course of living. Furthermore, seven of the eight participants expressed feelings of acceptance and satisfaction with the choices that they had made and only one participant expressed a feeling of regret that she had not been a better mother.

Disengagement theory, formulated in 1961 by Cumming and Henry, holds that as one ages it is inevitable that one will withdraw from many of the relationships between them and other members of the society in which they live. Furthermore, disengagement theory states that in old age there is a reduction in life's activities and ego energy. The process of disengagement is said to begin when an older person realizes that their life span is limited (Tornstram, 2005, p.35). Every participant in this study refuted this theory. The participants in this study were actively involved in and found satisfaction in daily activities. They all acknowledged the finality of their life however did not withdraw from living.

One participant continued to write poetry, two others were active on the Internet reading and communicating with others, another two were taking classes and involved in a book club, another two were attending activities in their assisted living facility and another was very engaged in her relationships with her family and friends. These aged persons were aware of and concerned about the world in which they lived.

Another quality that these participants of this study shared was their ability to adapt to different life situations. All of the participants in this study had moved, some multiple times throughout the United States. One was an immigrant to the U.S. and she too had resided in several different locations within the United States. They were able to adapt to different cities in different parts of the country without difficulty. Successful

adaptation to varying life situations provides satisfaction in older life as one is able to cope with change more readily.

### **Psychological Theories of Aging**

The psychological theorists of aging reviewed for this study and discussed in Chapter Two, namely Erikson, Tornstam, Peck, Lazarus, and Jung, all agree that aging, or “old age” presents another opportunity for psychological development. All speak to an individual having suffered significant physical abilities and the need to reconcile these losses in an effort to move towards a stage of enlightenment and maintain self cohesion. The two theories that describe the participants of this study are those of Erikson (1997) and Tornstam (2005).

Joan Erikson, in *The Life Cycle Completed* (1997), describes a ninth stage of development. While the eight stage involves a retrospective accounting of one’s life with the result being whether the person feels their life has been lived well or they experience despair, the ninth stage offers one the opportunity for enlightenment which she believes leads to gerotranscendence (Erikson & Erikson, 1997, p. 114). She explains that since the beginning we are “blessed” with basic trust, which has enabled us to endure. This basic trust is an enduring strength that bolsters us with hope, without which life would have been unthinkable. Therefore, if one is still filled with “the intensity of being and hope for what may be further grace and enlightenment, then you have reason for living,” in your eighties or nineties (Erikson & Erikson, 1997, p. 113).

My research was at variance with Joan Eriksons ninth stage in that seven of the eight participants did not experience old age as a new developmental stage. Instead, they experienced themselves on a continuous journey living year after year. One participant



acknowledged that she thought old age was another stage in life however did not believe it involved an opportunity for growth per say, rather an acceptance of the totality of her life experiences.

Eriksons first eight stages focus on the syntonik element of the stage first, for instance, trust versus distrust, autonomy versus shame and doubt, etc. In the ninth stage however Joan Erikson places the dystonic element before the syntonik. She does so because she believes old age is a stage in which one is faces inevitable losses of independence, physical abilities and that self-esteem and confidence are weakened (Erikson & Erikson, 1997, p. 106). This implies that one must overcome, adapt and accept the negative aspects of aging in order to achieve satisfaction in the last stage of life. This was not true of the participants in this study. The participants in this study did not experience a loss of confidence or self-esteem; they in fact reported feeling an enhanced sense of self-esteem and confidence having felt that they had lead meaningful lives. They were very satisfied with the persons that they had become over the course of their lifetimes. They did not identify their adaptations to changes as a separate focus of living rather they adjusted to the changes in their lives as a part of living their lives.

Tornstam who developed the term gerotranscendence, postulates that living into old age includes a potential to shift one's perspective from a materialist and rational view of the world to a more cosmic and transcendent one which he believes is accompanied by an increase in life satisfaction (The Social Gerontology Group, 2010, p. 1).

One participant had achieved the stage of gerontranscendence. This is evident in her comments about death.

I really wonder what happens after we die. I think our being cannot be destroyed;

our body can be-but our being cannot be destroyed...at least I don't think so. I wonder where we go next? Are we called upon to grow more? Was this just a way station to grow and become something more than we were than when we got here...and is the next step something more that we can't even imagine? To be realized elsewhere?

### **Assumptions**

Prior to embarking on this study, I had several pre-conceived notions of what constituted the quality of one's life beyond 80. Some were obtained from my personal experiences with persons 80 and older either from my immediate family experiences or from professional experiences. My ideas about aging stemmed from my own fears of dependency, feelings about being worthless and being unable to be a productive member of society due to physical or mental deficits. This does imply my own value of worth being defined as a contributing member of society which is a byproduct of the socio-cultural environment in which I was raised. I often wondered how and why an "old" person would want to continue living if they could no longer enjoy their life as they had before. I was curious as to what kept older persons going on living.

As I am a "Baby Boomer" and was responsible for placing both of my parents in an assisted living facility several thousand miles from where I live, my thoughts turned to what my own experience of "aging" would be. I was fearful and despairing of the prospect of being put somewhere, not of my own choosing.

I assumed that people 80 and older had limited physical energy, had suffered significant losses that were distressing to them, had medical issues that impacted their ability to enjoy life, that they were incapable to adapting to changes in their elder years,

that younger people intimidated them and that they felt they had no control over their lives and could not accommodate to changes in the world.

### **Limitations of the Research**

One limitation of this research study is that the number of participants that were interviewed was small and, therefore one could not generalize to a larger population of people over 80. The homogeneity of the participants is another limitation of this study as it makes it difficult to compare their responses to those of other racial and ethnic backgrounds. The fact that all of the participants in this study reported being economically stable is another limitation of this study as many persons 80 and older who do not have this type of economic stability.

Another limitation of this study is that all of the participants resided in large metropolitan cities which offered cultural opportunities and public transportation that people living in rural areas and in small towns may not have. Also, living in a large metropolitan city offers health care resource that are readily available which also may not be true for persons living in other areas. Therefore, the satisfaction obtained from attending cultural events which this study's participants enjoyed may not be the same for those residing in other areas.

Furthermore, the fact that this study's participants resided in close proximity to one family member greatly impacted their level of satisfaction. This may not be true of many of those living beyond 80 years. There may be people who have no close relatives or people who have not had children which could impact their level of satisfaction.

Additionally, all but one of the participants in this study enjoyed relatively good health and was mobile enough to venture out of their residences to partake in activities in

the community. Thus, poor health, being confined and not being able to participate in activities can also affect one's level of satisfaction.

Also, all of the participants in this study chose to participate. This may imply that the participants wished to present themselves in the best possible way. Furthermore, this study was limited to persons residing in their own homes, in a senior community and in an assisted living facility. The study did not address those persons who are living with their children or in nursing homes. This study was restricted to individuals who did not demonstrate obvious symptoms of dementia.

### **Suggestions for Further Study**

Suggestions for further study include: (a) a larger sample size; b) a more diverse ethnic and racial population; c) inclusion of people from lower socio-economic positions; d) inclusion of persons residing outside of large cities; e) persons who are experiencing chronic health conditions; f) persons from religious faiths other than Judeo-Christian; g) persons without any living relatives; h) persons who identify as gay, lesbian and transgender; i) persons residing in nursing facilities or with their children.

Another suggestion for further study would be how one's level of satisfaction is impacted by the knowledge of one's impending death. For example, it might be interesting to query persons in a Hospice program as to what meaning and satisfaction they experience.

An additional suggestion for further research might address how the use of technology impacts an older person's ability to maintain connections with others and whether or not the use of technology has impacted their level of satisfaction.

## Conclusion

The topic of what provides meaning and satisfaction for person 80 and older is intriguing to many of us. This interest in the aging process is driven by our curiosity, fear, biases, and experiences with other aging persons. We anticipate that at one point in time, we will be "old." It is therefore natural to want to know what we can expect. One's sense of one's own being is time specific. Meaning, we experience ourselves to be in the present. Indeed, we have memories of ourselves at younger ages, but how can we know how we will feel in the future?

As previously stated, the participants in this study came of age during a very turbulent and unpredictable period on the history of the United States. One can speculate as to whether that impacted the decisions that they made during their lives. For example, one participant, a devout Irish Catholic chose to divorce her husband. All of the participants married during their early twenties. Two participants, who were estranged from their fathers, chose to marry women their parents did not like. One participant chose to ask her husband for a divorce and then chose to live with a woman. Were they defying convention, asserting themselves or empowered by the social context in which they lived to do what they wanted? I believe that these participants possessed sufficient self-esteem to do what they felt they needed to do to satisfy themselves. They made their own decisions and moved on, with only one participant expressing regret about her parenting abilities.

What is evident to me is that a person is a complex organism, with interacting biological, psychological, social and emotional parts whose lives are shaped by their genes, their families, the culture, and the historical time in which they live; in addition to

the character they develop. The above factors influence, shape and mold the inner life force that each of us is born with. They help us become who we are. These factors converge over the life span. And in the last stage of life, they coalesce.

All of the participants interviewed for this study perceived themselves to be younger than their actual age. None of the participants felt themselves as old as the numbers indicated. Could it be that we, at any stage of our lives we do not actually feel our age? How does one actually know what it feels like to be 80 if they have not been 80 before?

The consistent theme that emerged from my research was that the participants self experience were one of continuity. Their sense of self and their feelings about themselves was contiguous throughout their life span. They were comfortable with the person they had become.

What provided meaning and satisfaction for this group of participants was that they felt they were good people, good parents, and a good friend. In essence, they felt they had lived their lives the best way that they could. These participants felt that their lives had been rich with both good and bad experiences which enhanced their sense of themselves. The greatest source of meaning and satisfaction was their relationships with their families and friends.

I was particularly struck by a comment one of the participants said as we concluded our interview, "without hope we die." One of the most effective tools we have as clinicians is our ability to offer our patients hope, we believe and practice that with our clinical knowledge and expertise and the desire of the patient to work through their

emotional difficulties that they will experience themselves to feel more whole and integrated as individuals.

### A Life Well Lived

When I was a child  
I knew not where life would take me  
I was not sure what road to take  
But knew for sure, hills as well as valleys lie ahead

There were no guarantees of good health  
Happiness, Love and Comfort were elusive  
But I was certain of this  
I wanted to make a difference  
To be remembered as someone who was kind  
Generous, good and honest

What are the qualities I need to possess?  
Honestly, endurance, courage, perseverance?

The years rolled by one by one  
The face in the mirror very familiar,  
Subtle changes I saw but yet did not feel

My heart had expanded with capacity  
To love and appreciate what had meaning  
My family, my friends, being the most important

I was now able to see the world thru a boarder lens  
Unlike my narrow childhood view

I had grown and expanded through experience  
The good times, the bad times  
Some trials and tribulations  
I made changes and decisions throughout my life  
Which I think had contributed

To a feeling of living  
A Life well Lived  
(Poem by author, 2014)

**APPENDIX A: LETTER TO COLLEAGUES**

Dear

I am writing to ask your help-finding participants for an exploratory study focusing on what provides meaning and satisfaction for persons age 80 and over. This research is for a doctoral dissertation under the supervision of Dr. Elinor Grayer at the Sanville Institute.

I am seeking persons who are 80 years and older of either sex who may be single, widowed, divorced or married. The participants may or may not have physical disabilities however should not demonstrate obvious symptoms of dementia. They may reside either independently or in an assisted living facility.

If you know anyone who might like to participate in this study and meets the above qualifications, please contact me at (818) 416-4610. Thank you for your help.

Sincerely,

Maureen Clarke, LCSW



**APPENDIX B: LETTER TO POTENTIAL PARTICIPANT**

Dear

\_\_\_\_\_ has referred you to me as a potential participant in my doctoral research.

This research is an exploratory study focusing on what provides meaning and satisfaction for persons age 80 and over.

I am conducting this research for my doctoral dissertation under the supervision of Dr. Elinor Grayer at the Sanville Institute.

Your participation would involve participating in an interview of 60 to 90 minutes, which would be audio-recorded. The time and location of the interview will be arranged at your convenience. Interviews will be transcribed and coded to determine the central theme of this topic. All interviews will be confidential. You may also request a copy of the dissertation when completed.

I have enclosed the Informed Consent Form for this study in case you decide to participate. Please review the contents of this Form because if you become a participant in the study you will be required to sign it prior to the interview. I will contact you in a few days to determine whether you would like to be a participant in the study.

Thank you in advance for your consideration and interest in participating in this study. If you have any further questions regarding the study or the procedures I will be using, please contact me at (818) 416-4610.

Sincerely,

Maureen Clarke, LCSW

**APPENDIX C: INFORMED CONSENT FORM**

I, \_\_\_\_\_, hereby willingly consent to participate in a research study regarding what provides meaning and satisfaction in my life. I am over 80 years old and am single, married, widowed, partnered or divorced. I have not, to my knowledge, been diagnosed with dementia. I presently reside in my own residence or in an assisted living facility.

Maureen Clarke, Licensed Clinical Social Worker, is conducting this research as a doctoral dissertation under the direction of Elinor Grayer, Ph.D., principle investigator and faculty member, under the auspices of the Sanville Institute.

Dr. Elinor Grayer can be reached by contacting the Sanville Institute at (866-848-8430). The Institute office is located at 2198 Sixth St., Berkeley, CA 94710.

Maureen Clarke, L.C.S.W., can be reached at (818-416-4610).

The research procedures Ms. Clarke will utilize have been approved by the Sanville Institute Dissertation Committee.

I understand my participation in this study will involve the following:

A confidential interview with Maureen Clarke, L.C.S.W., which will be between 60 to 90 minutes in duration and will be conducted at a convenient setting arranged between Ms. Clarke and myself.

My participation in this interview is completely voluntary. I may answer questions as I choose and I may refuse to answer a question, or to end the interview at any time.

The interview will be tape recorded to help with the analysis of the information provided. The recording will be kept confidential and will only be available for data analysis to the researcher.

Any notes, tape recordings, or records of this interview will be used for data analysis and will not include my name or any identifying information. Any tapes, notes, and records of the interview will be destroyed after the interview material has been analyzed.

If information from the interview is disclosed in the dissertation to illustrate findings, care will be taken so that neither I nor any other person is identified.

I will be asked questions about what provides satisfaction and meaning for me at the present time. These questions will include discussing my feelings about my life and what is important to me at this stage of my life.

I am aware that there are some potential risks involved in the study: The risks of my participation are that I may experience emotional discomfort, uneasiness, and feeling vulnerable. I may experience feelings of sadness, anxiety, or depression.

The benefit of participation in this study would be my contributing to identification of knowledge about what provides meaning and satisfaction for persons 80 years old and beyond.

Provision to be made in case of emotional discomfort:

I may refuse to answer any questions, or may refuse to continue the interview at any time. I may withdraw from participation in the study after the interview has been completed. Any identifying information will be removed to protect my anonymity. If I continue to feel emotional discomfort following participation in the study, I may contact Ms. Clarke by phone for a consultation. Should I continue to experience any emotional discomfort, Ms. Clarke will provide two additional individual counseling sessions at no cost to me should I request them.

I understand that I may withdraw from the study at any time. I understand that this study may be published and that my anonymity and confidentiality will be protected- that is, any information I provide that is used in the study will not be associated with my name or identity.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you would like a copy of the results of this study, please provide your name and address:

Name \_\_\_\_\_

Address \_\_\_\_\_

## **APPENDIX D: INTERVIEW GUIDE**

This study seeks to understand what provides meaning and satisfaction for persons age 80 and older. I am seeking to understand what is satisfying and what is not at this stage of the participants. Listed below are some of the questions that I will be using as my guide to elicit responses that I hope will prompt the participants to tell their own stories.

This is an interview guide, not a series of precise questions to be asked. It is intended to as a guide to the progression of questions to be asked of the participants.

The interview will begin with general demographic questions about the participants.

### **Demographic Questions**

How old are you?  
What is your marital status?  
Have you ever been married?  
Do you have any children or grandchildren?  
What is your current living situation? (Independent, assisted)  
Do you live alone?  
Do you feel comfortable financially?  
What is your ethnic background?  
Do you have a religious affiliation?

### **Satisfaction**

What in your life provides you with satisfaction now?  
Is this different from other times in your life?  
What makes you happy?  
What provides pleasure for you?  
What activities do you enjoy participating in?  
Are these activities different now than before?  
Have you experienced changes in your physical abilities?  
How do you cope with your physical limitations?  
Do your physical difficulties interfere with your enjoyment of your life?  
Does anything keep you awake at night?  
What causes you stress?  
What makes you get up in the morning?  
Whom do you see when you look in the mirror?  
Please describe yourself to me?  
Has your sense of self changed over the years?  
What are you most proud of?  
How do you feel about who you are now?  
Is it different then how you used to feel about yourself?  
Are you satisfied with who you are?

What brings a smile to your face?

### **Meaning**

Could you tell me about one of the most meaningful experiences of your life?

I wonder if there is anything in your life that feels unfinished?

What are the priorities in your life now?

How have noticed your priorities have changed?

How old do you feel?

Many people have dreams of what they want to do or accomplish in their lives, what were yours?

Are there other things you feel are unfinished or incomplete in your life?

What has been the most meaningful experience in your life to date?

Do you have a purpose in life now?

How would you like to be remembered?

What matters to you the most?

Do you think about dying?

What kind of thoughts do you have about your own death?

What do you think people will say about you after your die?

Would you agree with them?

Do you hold any beliefs that guide your life?

Are they things about yourself that you are especially proud of?

Is there something that is important to you or that you have passion about?

Do you ever wonder about what the purpose of your life is?

Some developmental psychologists see aging as another developmental stage, what do you think?

Do you experience yourself as a valuable member of our society, has this changed?

## APPENDIX E: PROTECTION OF RESEARCH PARTICIPANTS'

## APPROVAL

THE SANVILLE INSTITUTE  
PROTECTION OF RESEARCH PARTICIPANTS APPLICATION

Title of Research Project LIFE BEYOND 80: WHAT PROVIDES MEANING  
 Principal Investigator: ELINOR D. GRAYER, PH.D. <sup>AND</sup>  
 (print name and degree) <sup>SATISFACTION</sup>  
 Investigator: MAUREEN M. CLARKE, L.C.S.W.  
 (print name)

I have read the *Guidelines, Ethics, & Standards Governing Participation & Protection of Research Participants* in research projects of this Institute (in Appendix D of the Student and Faculty Handbook), and I will comply with their letter and spirit in execution of the enclosed research proposal. In accordance with these standards and my best professional judgment, the participants in this study (check one)

           Are not "at risk."

X May be considered to be "at risk," and all proper and prudent precautions will be taken in accordance with the Institute protocols to protect their civil and human rights.

I further agree to report any changes in the procedure and to obtain written approval before making such procedural changes.

Elinor D. Grayer, PhD ELINOR D. GRAYER, June 23, 2013  
 (signature of principal investigator/date)

Maureen M. Clarke, L.C.S.W.  
 (signature of investigator/date)

Action by the Committee on the Protection of Research Participants:

Approved            Approved with Modifications X Rejected           

Mary M. Coomb, Ph.D. Date 7/22/2013  
 Signature of representative of the Committee on the Protection of Research Participants/date

John A. Norris, Ph.D. 8/7/2013  
 (signature of dean & date)

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MAUREEN M. CLARKE Ph.D. 2014