

Adult Development

Linda Smolak

ADULT DEVELOPMENT

LINDA SMOLAK

Kenyon College



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*To Jim,
who provides much of the social support
for my adult development*

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Preface

When I graduated from Temple University in 1980, their developmental program was one of the few truly life-span programs in the country. Indeed, people still thought that all the action was in child or adolescent development. Although there was some slight interest in the elderly, the really neglected groups were young and middle-aged adults. There just did not seem to be much going on.

Now, of course, everyone has heard of the mid-life crisis. People routinely wonder why the divorce rate is so high. Dual-career couples wonder whether their work and marriage can survive having a child. And we all wonder whether physical decline is inevitable. There are just a few examples of the burgeoning interest in all phases of adulthood. It has become clear that development can and does continue throughout the life span as adults face new challenges and opportunities.

Adult development is a rapidly growing field of research and theory, and because it is still a young field, there are many unanswered questions. Throughout this book, you may often be frustrated by our ability to describe situations but not explain them. You may also be frustrated by our inability to solve many of the problems that are presented. But I hope you will also be invigorated by the positive accomplishments and outcomes of the study of adult development. Furthermore, I hope you will take the unanswered questions as a challenge for future research you might develop.

As a teacher and student of both child and adult development, I am particularly impressed with the individual differences among adults. It is clear that both genetics and environment contribute to these differences. We must consider environment as broadly as possible, to include not only a person's immediate environment but also broader social forces. You will see that cohort, sex, race, and socioeconomic status all constrain or facilitate development in various ways. Similarly, the decisions people make about marriage, career, children, and life style all have short-term and long-term implications. Individuality embedded within commonality will be, I hope, a source of unending hypotheses for you.

Writing a book of this length takes time. My editors at Prentice Hall have been unrelentingly supportive and patient. I especially wish to thank Susan Brennan and Carol Wada for their pushes when I stalled. My colleagues in the Psychology Department at Kenyon College have been similarly supportive. I extend special thanks to Michael Levine, Art Lecesse, and Sarah Murnen, who not only offered support but provided assistance in gathering material and discussing ideas. Thanks also to John and Amy Macionis for their advice and aid.

I want to thank the following reviewers for their insightful analyses of the rough manuscript: Fredda Blanchard-Fields, Louisiana State University; Victoria J. Molfese, Southern Illinois University at Carbondale; Eugene Thomas, University of Connecticut; Harvey Lesser, Rutgers University; Steven W. Cornelius, Cornell University; Charles W. Johnson, University of Evansville; Mark Byrd, University of Kansas; Janet W. Johnson, University of Maryland; Denise R. Barnes Nacost, University of Carolina at Chapel Hill; and Evan G. DeRenzo, Marymount University.

The students in my adult development classes over the past decade have forced me to clarify my thinking and presentation. Their questions formed much of the organization of this book. I appreciate their help.

Finally, my family, as always, was always supportive. My children—Marlyce, Jesse, and Meghan—kept me going with their praise for how much I'd already completed. They also helped with the index. My husband, Jim, led me to numerous articles in economics that have been important in several of the chapters. For his assistance and his constant support, I am especially grateful.

Linda Smolak

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1 Issues and Models of Adult Development

An actress in her forties recently appeared on a late-night talk show. She had dressed in the style of a popular rock star, who she claimed was her new hero. The talk show host asked the actress if she wasn't a bit old for adoring fan behavior.

Within a few weeks of that interview, an item appeared in gossip columns quoting the teenage daughter of another well-known actress. The daughter said she was often embarrassed by her mother's appearance (which included revealing clothing and unusual hairstyles). She also said that she often tried to curb her mother's spending habits. In reporting these statements, most of the columnists commented on the irony of a teenager being embarrassed by her mother's trendy, sexy appearance and extravagance.

These anecdotes are an appropriate beginning to a text on adult development because they demonstrate our belief in *age roles* (Neugarten, Moore, & Lowe, 1965/1968). We expect that people of different ages will behave differently in terms of how they look, how they spend their free time, how they think (their attitudes and values), and how they speak. It is acceptable for a 14-year-old to dress like a rock star. After all, a 14-year-old *should* be experimenting with styles, values, and attitudes. We expect adolescents to assume the identity of others, including public personalities. But by 40, a person should be less susceptible to such influences. Forty-year-olds should know who they are. Indeed, if they don't, we use the term "mid-life crisis" to explain what we see as their inconsistent and somewhat juvenile behavior.

Age roles, like sex roles, are learned behaviors. Society defines *age norms*, which express what behaviors are considered typical (or normative) for normal people of different ages. These norms are indicative of shared cultural values. Most members of a society can define various age groups and describe age-appropriate behavior, but they are not usually aware of

the impact of these expectations on their own daily lives (Neugarten et al., 1965/1968). These norms are also evident in certain *age-graded* events. These events tend to occur at about the same time for most members of a society. Some of these events are biological (like puberty), but many others are “socially programmed . . . associated with specific social expectations, changing roles and task requirements, and altering patterns of privileges and responsibilities” (Hetherington & Baltes, 1988, p. 10). Such events are thought to influence development (Baltes, 1987; Hetherington & Baltes, 1988). Examples include starting school, graduation, and retirement.

Since age norms are socially defined, age roles vary from culture to culture. In Bali, for example, postmenopausal women are expected to be less modest in their dress and language than younger women (Bart, 1971). In Samoa, the elderly are given the best housing and can behave as they wish with no fear of punishment. Younger Samoan men regularly seek out older men for advice and counsel (Cowgill, 1972, cited in Wallace & Wallace, 1985). Such practices and attitudes are markedly inconsistent with American values.

Cultural differences may sometimes contribute to animosity between groups. Ed Magnuson (1990), for example, referred to age roles in explaining tension between black residents and Korean shopkeepers in New York City:

The most common black complaint is that Korean merchants treat them rudely. Some shopkeepers concede that the complaints are often valid but cite cultural conflicts. Black youngsters think nothing of saying “Hey, man!” to store owners accustomed to being treated deferentially in their homeland. Koreans, who highly respect their elders, do not joke back. (Magnuson, 1990, p. 22)

Every society pressures people of various ages into appropriate behavior. Some of the pressure is quite formal, as in mandatory retirement ages. Other pressure is more informal, as in the familiar rebuke “act your age,” or in the expectations of what activities people of different ages will enjoy. In other words, *socialization*, the process by which we acquire socially defined roles and behaviors, continues throughout adulthood. But there are differences between the socialization of children and that of adults (Tischler, Whitten & Hunter, 1983). First, adults are far more aware of their own socialization than children are; in fact, they may actively participate in their own socialization by choosing to go to school or to change careers. Second, adult socialization often involves *resocialization*—exposure to roles, attitudes, and values that conflict with those acquired earlier. Think, for example, of the changes in attitudes toward women in the workforce or the reorientation a full-time homemaker may go through after a divorce.

The purpose of this book is to describe how people's roles change throughout adulthood. We also describe how individual characteristics—physiological, social, emotional, intellectual, and motivational—change. But description alone is inadequate; we also offer explanations for what changes and what does not. Some of the explanations focus on external

factors, others on internal ones. Most, however, suggest a combination of internal and external forces working in conjunction to produce either stability or change. Indeed, internal and external factors are not mutually exclusive. For example, certain personal characteristics might lead an individual to choose a particular environment, which in turn leads to a particular developmental path (Scarr & McCartney, 1983).

Before we look at various developmental phenomena during different periods of adulthood, it is important to place adult development theory and research within a context. Professional interest in adult development is fairly recent, but it is not unrelated to other areas of psychology. Thus, we begin by looking at the historical and philosophical development of the field and then turn to research methodology issues. Only then will we be ready to examine adult development in detail.

SCIENTIFIC INTEREST IN AGING

The existence of age roles indicates that we have always known development continues throughout life. Yet scientific interest in adult development is a relatively recent phenomenon; the National Institute on Aging in the United States was not founded until 1974. This does not mean, however, that there was no interest in adulthood and aging prior to the 1970s; people have long been fascinated by aging.

A Historical Overview

Historically, there has always been great interest in reversing the aging process. In the Greek myth of Aurora and Tithonus, Aurora wished for eternal life for her husband, Tithonus, and Zeus granted her wish. But Aurora neglected to ask for eternal youth for Tithonus, so he suffered all the physical and psychological declines of aging, but could not die (Hamilton, 1942). In a similar vein, the Spaniard Ponce de León, searching for the fountain of youth, instead discovered Florida in 1513. Sir Francis Bacon (1561–1626) argued that the study of aging would help to uncover its causes. He personally believed that poor hygiene was the major reason for aging. Sir Francis Galton (1822–1911), a cousin of [Charles Darwin], also studied aging. By observing over nine thousand people aged 5 to 80, he demonstrated many age-related changes in such characteristics as grip strength, hearing, and vision (Birren & Clayton, 1975).

Modern scientific interest in aging began in the 1920s. In psychology, G. Stanley Hall's (1922) *Senescence, the Second Half of Life* was a landmark contribution. He first reported the now widely documented finding that the elderly do not fear death as much as young people do (see Chapter 17). During the same period, the Russian Ivan Pavlov, discoverer of classical conditioning, reported age-related changes in ease of training people to form associations by means of classical conditioning (Birren & Clayton, 1975).

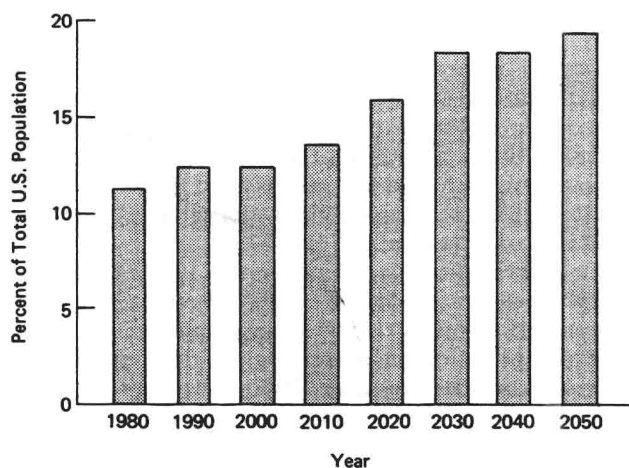
Despite this interest, research and theorizing on adulthood and aging

made very slow progress. This was at least partially because of Freud's suggestion that **personality was basically formed by about age 5** (Gould, 1972; Labouvie, 1982). Indeed, when Roger Gould presented his theory of adult personality development in 1972, he lamented the lack of scientific interest in adult development. Of course, several important works had already been published, notably Erik Erikson's (1963) theory of life-span development, Bernice Neugarten's (1964; 1966) research on personality development, and K. Warner Schaie's (1970) work on intellectual changes. It was, in fact, during the 1960s and 1970s that interest in adult development began to grow dramatically (Birren & Clayton, 1975). But scientists were not the only people with an increasing interest in adult development. Demographic changes have increased the percentage of our population that is elderly, necessitating a greater understanding of adult development.

The Graying of America

Increased longevity, lower fertility, and the coming of age of the "baby boomers" have combined to produce an effect popularly known as the *graying of America*. Simply put, this means that the percentage of the American population that is elderly is **growing more rapidly than other age groups** (see Figure 1-1). In 1980, people 65 years and older constituted 11 percent of the American population. In raw numbers, this translates to about 25 million elderly Americans. By 2030, about 59 million Americans will be at least 65 years old. If fertility rates continue at their current level, with the average American woman giving birth to two children, the elderly will make up about 19 percent of the American population in 2030. Of course, if

FIGURE 1-1: Projected Proportion of Persons Aged 65 and Over in the U.S. Population, 1980–2050.



Source: Based on data from Bouvier, L. (1980). America's baby boom: The fateful bulge. *Population Bulletin*, 35, 29.

women start having more children, the percentage of the population that is elderly will be smaller, but actual numbers of elderly will still be more than double what they were in 1980 (Bouvier, 1980).

Longevity: A person born in the United States in 1900 could expect to live to be 47.3 years old (World Almanac, 1981). In 1988, an American newborn had a life expectancy of 74.8 years old (*Statistical Abstract*, 1990). In general, women can expect to live longer than men, and white life expectancy is longer than black (see Table 1-1). There is also evidence that people of higher social classes have historically outlived poorer people (Friedlander, Schellekens, Ben-Moshe, & Keyser, 1985; Pamuk, 1985).

Improved medical care and a better understanding of what causes disease are probably the major factors in the increased life expectancy of Americans. We are now more likely to survive heart attacks and accidents. For example, the rate of death from heart diseases in 1960 was about 286 per 100,000 Americans over 15 years old. By 1988, this figure had dropped to 167 per 100,000 (U.S. Department of Commerce, 1990). At the same time, we have learned more about how to prevent such diseases; we now know, for example, the risks of cigarette smoking and we have substantially altered our lifestyles to avoid them.

Vaccinations against many killer diseases, such as smallpox, whooping cough, and polio, have also contributed to increased life expectancy by dramatically improving the chances of surviving beyond childhood. This raises an important point about life expectancy figures. The higher the death rate in childhood, the lower life expectancy will be. Thus, a life expectancy of 47 years old in 1900 does not mean that no one lived to be 50 or 60. There have always been old people. What is new is the number of Americans who are living to be old. In colonial America, for example, only about 2 percent of the population was 65 or older (Spencer, 1985) compared to about 11 percent in 1980.

TABLE 1-1: Expectation of Life in Years by Sex and Race

Age in 1986	Total	WHITE		BLACK	
		Male	Female	Male	Female
Newborn	74.8	72.0	78.8	65.2	73.5
1	74.6	71.7	78.4	65.5	73.7
10	65.8	62.9	69.6	56.8	65.0
20	56.2	53.4	59.9	47.3	55.3
40	37.4	34.9	40.5	30.3	36.6
60	20.4	18.2	22.6	16.1	20.3
80	8.1	6.9	8.8	6.8	8.5

Expectation of life in years means number of years a person of this age can expect to live. Thus, 80-year-old white women, on the average, can expect to live another 8.8 years, to almost 89 years.

Source: Adapted from U.S. *Statistical Abstract*, 1990, p. 74. Washington, D.C.: Government Printing Office.

Greater numbers and increased longevity have not only contributed to the growing interest in aging; as more and more people live to be older, age roles may change. The result may be that 40-year-olds in the 1990s may behave differently from 40-year-olds in the 1930s. More middle-aged women, for example, are returning to the workforce after their children are grown, partly because they have so much time ahead of them. Such differences are known as *cohort effects*. In certain types of research designs, these can be mistaken for age differences (see Chapter 2).

Longevity may also affect the norms defining stages of life. As more and more people live to be 80 or 90, 60 may no longer seem "old." In addition, differences in life expectancy from culture to culture (see Table 1-2) may make it difficult to attach universally applicable ages to stages of adult development. In societies where people live fewer years, the age markers for middle and old age may differ from our own.

Increased longevity also carries social implications. As the number of elderly increases, we will need to provide more medical care, housing, and financial support to older Americans. Consider, for example, the impact of providing care for victims of Alzheimer's disease. Recent estimates indicate that the prevalence rate of Alzheimer's in community dwelling samples aged 65 to 74 is about 3 percent. But for those aged 75 to 84, the prevalence rate is 18.7; and for those 85 and older, the rate may be 47.2 percent (Evans et al., 1989) (see Chapter 12). If population projections are correct, the number of very old people (over 80) will increase to about 21 million by the year 2040, compared to about 5 million in 1970 (Bouvier, 1980). This huge growth in the elderly population is partially due to the maturation of the baby boomers.

TABLE 1-2: Life Expectancy at Birth (in Years) for Males and Females in Various Countries

Country	Years Reported	Male	Female
Uruguay	1985-90	67.8	74.4
Vietnam	1988	59.4	63.8
Swaziland	1985-90	53.7	57.3
Phillipines	1988	61.8	65.5
Sweden	1987	74.2	80.2
Jordan	1986	65.0	68.8
Hungary	1987	65.7	73.7
Egypt	1986	59.0	62.1
Costa Rica	1985-90	72.4	77.0
China	1988	68.1	71.0
Bangladesh	1988	51.3	50.6
Afghanistan	1987	40.6	41.6
USSR	1987	65.1	73.8

Source: Based on data from Daume, D. (1990). *Britannica Book of the Year*, pp. 754-755. Chicago, IL: Encyclopaedia Britannica.

The Baby Boomers: Following World War II, and especially between 1950 and 1962, an unusually high number of children were born in the United States. This demographic phenomenon is commonly referred to as the *baby boom*. At every point in their lives, these baby boomers have had a major impact on American society. In the 1950s and 1960s, for example, the educational system was strained by too many children and too few schools and teachers. The baby boomers are now middle-aged, creating a large demand for housing and jobs (Bouvier, 1980).

The impact of the baby boom on the number of elderly in the United States will begin to be felt by 2010. A large percentage of these people will live to be quite old, which will raise numerous social policy issues. In fact, it is partially in response to the aging of the baby boom that Congress raised the eligibility age for Social Security (see Chapter 16). Some policymakers have suggested that without careful planning, the burden on young workers for providing Social Security and other services to aged baby boomers may be excessive (Bouvier, 1980).

To find out what services these elderly people will need, as well as their potential contributions to society, we need to better understand adult development and functioning. We need to know, for example, when memory and intellectual functioning start to decline (if they do), and we also need to know what factors in earlier adult development affect functioning in old age. The need for such information has spurred the growth of adult development as a field of study and helped to define the central issues.

THE GOALS OF LIFE-SPAN DEVELOPMENTAL PSYCHOLOGY

During the last three or four decades, the study of development has been extended beyond childhood and adolescence into adulthood, in a new field often called *life-span developmental psychology*. In some cases, the extension simply involves applying concepts from child and adolescent work. Other theorists and researchers have offered new propositions about the nature of development to better suit the needs of a truly life-span approach (Hetherington & Baltes, 1988). Some of these new propositions are summarized in Table 1-3.

Describing Change

Development as Change: One goal of life-span developmental psychology is to describe the constancy and change in behavior that is related to age. Notice there is no claim here that age actually causes the changes. We cannot even make this claim when discussing biological changes, because different people show varying rates of physiological change. The age range for menopause, for example, is from about 45 to 55 and is influenced by factors ranging from genetics to weight to cigarette smoking (see Chapter 8). In fact, Paul Baltes and Sherry Willis (1977) have argued that age may not be the best way to conceptualize or monitor time-related change. They

TABLE 1-3: Summary of Family of Theoretical Propositions Characteristic of Life-Span Developmental Psychology

Concepts	Propositions
Life-span development	Ontogenetic development is a life-long process. No age period holds primacy in regulating the nature of development. During development and at all stages of the life-span, both continuous (cumulative) and discontinuous (innovative) processes are at work.
Development as gain/loss	The process of development in any given class of behavior is complex, and not a simple movement toward efficacy such as incremental growth. Rather, throughout life development is always constituted by the joint occurrence of gain (growth) and loss (decline).
Multidirectionality	The direction of change varies by categories of behavior. In addition, during the same developmental periods, some systems of behavior show increases, whereas others evince decreases in level of functioning.
Plasticity	Much intra-individual plasticity (within-person modifiability) is found in psychological development. Depending on the life conditions and experiences by a given individual, his or her developmental course can take many forms.
Historical embeddedness	Ontogenetic development can also vary substantially in accordance with historical-cultural conditions. How ontogenetic (age-related) development proceeds is markedly influenced by the kind of sociocultural conditions existing in a given historical period, and by how these evolve over time.
Contextualism as paradigm	Any particular course of individual development can be understood as the outcome of the interactions (dialectics) among three systems of developmental influences: age-graded, history-graded, and nonnormative. These systems also show interindividual differentiation in conjunction with biological and social structure.
Field of development as multidisciplinary	Psychological development needs to be seen in the interdisciplinary context provided by other disciplines (e.g., anthropology, biology, sociology) concerned with human development. The openness of the life-span perspective to interdisciplinary posture implies that a "purist" psychological view offers but a partial representation of behavioral development from conception to death.

Source: Hetherington, E. M., & Baltes, P. B. (1988). Child psychology and life-span development. In E. Hetherington, R. Lerner, & M. Perlmutter (eds.). *Child development in a life-span perspective*, p. 4. Hillsdale, NJ: Erlbaum.