

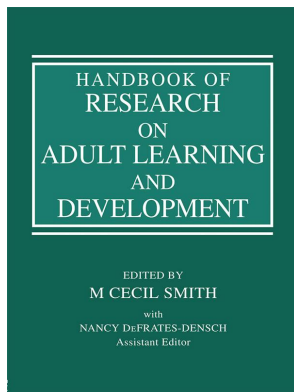
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Publisher: *Routledge*

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## **Handbook of Research on Adult Learning and Development**

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### **The Influence of Family Relationships on Adult Psychological Well-Being and Generativity**

Publication details

<https://www.routledgehandbooks.com/doi/10.4324/9780203887882.ch11>

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**Published online on: 07 Nov 2008**

**How to cite :-** Nadine F. Marks, Emily A. Greenfield. 07 Nov 2008, *The Influence of Family Relationships on Adult Psychological Well-Being and Generativity from: Handbook of Research on Adult Learning and Development* Routledge

Accessed on: 08 Dec 2023

<https://www.routledgehandbooks.com/doi/10.4324/9780203887882.ch11>

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HANDBOOK OF  
RESEARCH  
ON  
ADULT LEARNING  
AND  
DEVELOPMENT

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First published 2009  
by Routledge  
270 Madison Ave, New York, NY 10016

Simultaneously published in the UK  
by Routledge  
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

This edition published in the Taylor & Francis e-Library, 2008.

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*Library of Congress Cataloging in Publication Data*

Handbook of research on adult learning and development / edited by M Cecil Smith with Nancy DeFrates-Densch.

p. cm.

Includes bibliographical references and index.

1. Adult learning—Research—Handbooks, manuals, etc. 2. Adult education—Research—Handbooks, manuals, etc. I. Smith, M Cecil. II, DeFrates-Densch, Nancy.

ISBN 0-203-88788-3 Master e-book ISBN

ISBN 10: 0-8058-5819-9 (hbk)  
ISBN 10: 0-8058-5820-2 (pbk)  
ISBN 10: 0-203-88788-3 (ebk)

ISBN 13: 978-0-8058-5819-8 (hbk)  
ISBN 13: 978-0-8058-5820-4 (pbk)  
ISBN 13: 978-0-203-88788-2 (ebk)

# The Influence of Family Relationships on Adult Psychological Well-Being and Generativity

*Nadine F. Marks and Emily A. Greenfield*

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The happiest moments of my life have been the few which I have passed at home in the bosom of my family.

—Thomas Jefferson

Family love is messy, clinging, and of an annoying and repetitive pattern, like bad wallpaper.

—Friedrich Nietzsche

Happiness is having a large, loving, caring, close-knit family—in another city.

—George Burns

## Introduction

From statesmen to philosophers to entertainers, the role of families in shaping the quality of adults' lives has been the topic of discussion in many domains, including social scientific research. Contemporary scholarship suggests that one way or another, our relationships (or lack of relationships) with family members importantly shape our development in adulthood as well as childhood. As the above ideas together suggest, however, the ways in which families affect development can be myriad and complex. The purpose of this chapter is to present theories and empirical findings that not only demonstrate that families contribute to adult development, but that also advance understanding of the various and nuanced ways in which families do so. This chapter focuses specifically on how families influence adult development in terms of individuals' experiences of psychological well-being and their development of generativity (i.e., caring for and taking responsibility for others).

This chapter first provides a brief overview of theoretical work—specifically, the life course perspective, bioecological systems theory, and structural symbolic interactionism's role-identity theory—that orients attention to how family relationships influence adult development, particularly their psychological well-being and generativity. This chapter then presents current conceptualizations and measurement of psychological well-being and generativity as important domains of adult development. Next, this chapter selectively reviews research related to how family relationships in adulthood—including intimate partnerships, relationships with children, relationships with older parents, and relationships with other kin—influence adult psychological well-being, as well as attitudinal and clinically-rated generativity. We also review empirical studies regarding the psychological effects of family caregiving as a behavioral indicator of generativity in each of the four family relationship areas. We conclude by considering the limitations of this review, as well as offering suggestions for new directions in future research.

## Theoretical and Conceptual Background

There are a number of theoretical perspectives that can guide scholars in considering family relationships as critical factors that help to shape adult developmental outcomes, including psychological well-being and generativity. In particular, we focus here on the life course perspective, bioecological systems theory, and structural symbolic interactionism's role-identity theory.

### *The Life Course Perspective*

The life course perspective is an interdisciplinary perspective drawing insights from across the fields of psychology, sociology, anthropology, history, and biology to help understand human development across the life span (Elder, Johnson, & Crosnoe, 2003; Featherman, 1983; Settersten, 2003). While the life course perspective offers a rich theoretical foundation for considering many factors that can contribute to continuity and discontinuity within and between people's lives, several concepts from the perspective explicitly orient attention to family-related processes. For example, one of the key principles of the life course perspective is the concept of "linked lives" (Elder et al., 2003). Linked lives implies that people in salient relationships with each other, such as family members, occupy mutually influential interlocking developmental trajectories that extend throughout their lives (Elder et al., 2003). Accordingly, important events in the life of one person are posited to have implications for the developmental outcomes of a related person, and vice-versa. For example, adult children who get divorced with young children might have needs that change the developmental trajectories of aging parents who step in to provide support to younger generations. Likewise, when older adult parents become ill, their illness can affect the trajectories of their midlife children, who might need to accommodate their parents' needs for support into their lives.

The life course perspective's attention to linked lives indicates its orientation to processes of reciprocal causality between family relationships and adult development. Reciprocal causality suggests that although family relationships can influence adult developmental outcomes, adult developmental outcomes such as psychological well-being and generativity also can impact family relationships. While we acknowledge this reciprocity of influence, we restrict our focus in this review chapter to the preponderance of studies that emphasize evidence for the influence of family relationships on adult psychological well-being and generativity.

Another concept that has emerged in the literature related to the life course perspective is the idea of life course "convoys" of social support (Kahn & Antonucci, 1980; see also Moen, Kelly, & Maginnis, chapter 13, this volume). This concept suggests that individuals have social networks that move along the life course with them—sometimes for longer and sometimes for shorter periods of time. Family members tend to be convoy members of some of the longest duration periods. For example, siblings are likely to be the most longstanding members of most adults' convoys of support.

The life course perspective further suggests the dynamic and contextual ways in which family members can affect individuals' development. For example, the life course perspective posits the importance of considering the sociohistorical context in which developmental processes occur (Elder et al., 2003). Sociohistorical influences include period effects—which are large-scale, sociohistorical events that are likely to affect groups of individuals who are at diverse points in their lives—as well as cohort effects—which differentiate groups of people who experience sociohistorical influences at similar points

in their lives (Ryder, 1965). Given that family experiences in most contemporary societies are undergoing rapid and significant social change (Bumpass, 1990; Cherlin, 2004; Popenoe, 1993; Stacey, 1990), progressive cohorts of adults are likely to experience family relationships across adulthood in dynamic and often nontraditional ways, such as by remaining single, entering into nonmarital, cohabiting partnerships, being a stepparent, and caregiving for grandchildren. The life course perspective suggests that these changes in family relationships might pattern the ways through which families influence adult development.

In addition to considering large-scale sociohistorical factors as important contextual factors that influence how families affect individuals' development, the life course perspective also directs attention to the effects of time in terms of the micro-histories of specific relationships (Elder et al., 2003). This consideration leads to a recognition that the developmental effects of family relationships are not only a function of the "real time" challenges and rewards of those relationships, but also of the entire history of a given relationship (Wheaton, 1990). For example, the developmental effects of caregiving for a spouse might be contingent on the prior duration and quality of relationship an individual had with that spouse (Kramer, 1993), and likewise, the impact of a divorce might have a different effect on an adult's well-being depending on the prior duration and quality of that marital relationship (Wheaton, 1990).

The life course perspective also has added to theorizing on contexts of development by orienting attention to the potential developmental salience of family members beyond the nuclear group. This focus on the breadth of family relationships marks a noteworthy departure from longstanding developmental theories that largely limited the influence of social relationships to current nuclear family members. Freud (1940/1964), for example, emphasized the family of origin for understanding child development, and family development theory (Duvall, 1962) traditionally discussed adult development as corresponding to stages applying exclusively to one's family of procreation. The life course perspective includes attention to both these family domains, but also adds more attention to intergenerational relationships across multiple generations and horizontal relationships to all kin and at all ages (Bengtson & Allen, 1993; Rossi & Rossi, 1990).

### **Bioecological Systems Theory**

Bronfenbrenner's bioecological systems theory (Bronfenbrenner, 1989; Bronfenbrenner & Morris, 1998) is another open-systems perspective on development, which is very compatible with the life course perspective (Settersten, 2003). Bioecological systems theory emphasizes the importance of person, process, context, and time factors that collectively contribute to lifespan development (Bronfenbrenner & Morris, 1998). Person factors include individual characteristics of the target person—such as their gender, age, genetic inheritance, and relatively enduring personality characteristics—as well as the individual characteristics of the persons that the target person encounters in developmental settings. Process factors draw scholars' attention to actual interaction processes that are expected to influence development, such as attentiveness in interaction and affectual quality in interaction.

Bronfenbrenner's theoretical articulation of the components of context is one of the major contributions of this theory to developmental scholarship. Bronfenbrenner posits a systems model in which developmental processes occurring in proximal settings are shaped by more distal systems of context (and vice versa). The most primary level of context is that of microsystems, which consist of immediate settings where a target

individual interacts with others and their physical environment. An adult's microsystems often include one or more family microsystem settings, including his or her family of origin household(s), the adult family or family of procreation household, and/or other family members' households.

The next systems level posited by Bronfenbrenner is the mesosystem, which consists of interactional relationships across microsystems. For example, the interaction between an adult's parent's household and an adult's own family household can be an important level of context in shaping that individual's development.

The third level is the exosystem, which consists of microsystem settings that do not include the target adult, but that indirectly impact him or her, as well as of larger social contexts within which microsystems are embedded. For example, an adult's exosystem might include their partner's workplace, as well as the neighborhood, social services system, and legal system within which they live.

Finally, the macrosystem refers to the ideology and values of the society of which an individual is part (i.e., the "blueprint" for the culture), which helps determine the structure and processes of the embedded exosystems, mesosystems, and microsystems. For example, in the United States, the values of individualism and democracy potentially affect many levels of developmental influence, from the structure of social institutions to patterns of interactions in interpersonal relationships. Bronfenbrenner has also added that the structuring of life course opportunities and hazards, such as socioeconomic stratification systems, are elements of the macrosystem.

In addition to person, process, and context, Bronfenbrenner's model also includes time—the chronosystem—as a factor that shapes individuals' development. Bronfenbrenner posits multiple systems of time—including within episodes of interaction (microtime), across episodes of an interaction (mesotime), and across personal biography and history (macrotime)—as collectively comprising the chronosystem.

Overall, bioecological systems theory suggests that multiple and embedded levels of context, many of which include structural and interpersonal process family factors, are important for adult development. The chronosystem, in particular, indicates that historical time might change the context in which family relationships are embedded and thereby influence how family relationships affect adult development.

### ***Structural Symbolic Interactionism's Role-Identity Theory***

Structural symbolic interactionism's role-identity theory (Stryker, 1980, 2001; Stryker & Statham, 1985) is one additional complementary theoretical perspective that can enhance understanding of how family relationships are important for adult development. Similar to the life course perspective and bioecological systems theory, symbolic interactionism is a contextualistic perspective that recognizes a dynamic interplay between structural and societal constraints along with individual agency and initiative (LaRossa & Reitzes, 1993). Symbolic interactionism places particular emphasis on the influence of a person's subjective appraisal of meanings and concept of self for a person's behaviors and experiences of well-being (LaRossa & Reitzes, 1993).

Stryker and colleagues' role-identity theory, which developed from structural symbolic interactionism and blends the strengths of traditional structural-functionalist role theory and symbolic interactionism (Stryker, 1980, 2001; Stryker & Stratham, 1985), is particularly relevant when considering how families might influence individuals' development. Drawing from the concept of role as behavioral expectations for an individual occupying a given social position, Stryker has posited that individuals take on roles that

social organizations at any historical time have established. Families typically consist of multiple roles, including marital partner, cohabiting partner, biological parent, stepparent, and adult child. When a person internalizes a role, a role-identity is formed, and the accumulation of role-identities combine to form the person's self.

The relation between role-identities and individuals' well-being constitutes a classic theme of social philosophy (Thomas & Biddle, 1966). Emile Durkheim, one of the principal founders of modern sociology and anthropology, wrote extensively in the 19th century on roles as a mechanism through which society and social groups promote individuals' mental and physical health (Durkheim, 1897/1951). Likewise, Turner (1978) considered competently performing within roles to be a germinal process through which people validate their self and gain esteem. Thoits (1983) and Burton (1998) further postulated that role-identities from social roles give structure and meaning to life, thereby helping persons to avoid negative mental health and disorganized behavior. Other theoretical work has suggested how negative experiences in social roles—such as through role overload and conflict—can jeopardize individuals' optimal well-being (e.g., Goode, 1960).

In sum, when considering that families are a primary social institution through which adults can derive salient role-identities, structural symbolic interactionism's role-identity theory suggests how family relationships importantly contribute to adult development, particularly in terms of their psychological well-being.

### ***Psychological Well-Being: A Multidimensional Construct***

Psychological well-being is an important component of adult development. Research on linkages between family relations and psychological well-being have focused most consistently on psychological well-being in terms of negative affect, which is often operationalized as depressive symptoms (e.g., Radloff, 1977). However, dating back to Bradburn (1969), scholars have increasingly recognized that positive and negative moods and emotions are not two ends of a linear, bipolar continuum; rather, they can be activated simultaneously or independently by a single stimulus. Drawing on this idea of the multidimensionality of affect, Diener, Suh, Lucas, and Smith (1999) have posited the concept of subjective well-being, which includes the dimensions of negative affect, positive affect (often measured as global happiness), and life satisfaction. In addition, scholars have sometimes considered constructs like self-esteem and self-efficacy as aspects of psychological well being that address how an individual evaluates his or her self (Bryant & Veroff, 1982).

Further developing the idea that psychological well-being is a multidimensional construct, Ryff drew from theoretical insights of Maslow (1968), Rogers (1961), Jung (1933), Allport (1961), Buhler (1935), Neugarten (1968), Jahoda (1958), and Erikson (1950) regarding positive psychological functioning and adults' highest potential to develop and validate six new constructs and scales of psychological well-being (Ryff, 1989; Ryff & Keyes, 1995). Specifically, the Ryff Psychological Well-Being Scales assess autonomy (sense of self-determination), environmental mastery (the capacity to manage effectively one's life and surrounding world), purpose in life (the belief that one's life is purposeful and meaningful), positive relations with others (having quality relations with others), personal growth (feelings of continued growth and development as a person), and self-acceptance (positive evaluations of oneself and one's past life). Keyes, Shmotkin, and Ryff (2002) more recently synthesized theoretical and measurement work in this area and provided additional empirical evidence lending support for distinguishing between



evaluations of subjective well-being, self-esteem, and self-efficacy from assessments of Ryff's six well-being scales.

The concept of subjective well-being, in conjunction with Ryff's psychological well-being constructs, has formed the basis for making an empirically validated distinction between hedonic and eudaimonic approaches to conceptualizing psychological well-being (Ryan & Deci, 2001). Hedonic approaches consider well-being to be a state in which individuals experience maximum amounts of pleasure and minimal levels of pain (Kahneman, Diener, & Schwartz, 1999), whereas eudaimonic approaches conceptualize well-being as the actualization of human potentials and optimal psychosocial functioning and engagement with life (Waterman, 1993).

In this review, we focus on dimensions of hedonic-based subjective psychological well-being (positive affect, negative affect, and life satisfaction), as well as eudaimonic-based psychological well-being (personal growth, self-acceptance, environmental mastery, positive relations with others, purpose in life, autonomy, self-esteem, and self-efficacy). Because of space constraints, we do not review work focusing on severe mental illnesses and pathology.

### **Generativity**

The concept of "generativity" was first introduced in Erikson's (1950) psychosocial theory of development. Erikson posited an eight-stage lifespan theory in which an individual's healthy development resulted from overcoming a series of psychosocial challenges (i.e., trust versus mistrust, autonomy versus shame and doubt, initiative versus guilt, industry versus inferiority, identity versus role confusion, intimacy versus isolation, generativity versus stagnation, ego-integrity versus despair). Erikson posited "generativity versus stagnation" as the seventh critical period for human development. This seventh critical period was posited to occur during middle adulthood—an unclearly defined age period of the life course, but roughly occurring between the ages of 40 to 60 (Brim, Ryff, & Kessler, 2004).

In Erikson's (1950) initial exposition regarding generativity, the focal aspect was the development of care, concern, and commitment to the next generation. This developmental "task" could, and often does, include the bearing and care for one's own children, but Erikson also suggested that generativity could include care of many types, including care in a broader societal sense. In fact, in his book on Gandhi, Erikson (1969) articulated a generative story about a broader, more inclusive type of care for others and the generations to come that went greatly beyond taking care of one's own children. Erikson characterized stagnation, by contrast, as a focus solely on self and self-indulgence. Stagnation was posited to sometimes include pseudo-intimacy or mutual self-indulgence with a partner, but nonetheless without an expansion of personhood to authentic caring and taking responsibility for others, particularly the next generation (Erikson, 1950).

Erikson's concept of generativity remained relatively unexplored empirically until a new generation of scholars studying adult development brought new interest to it (e.g., Browning, 1975; Kotre, 1984; McAdams, 1985; Peterson and Stewart, 1990). The most major resurgence of interest in generativity has come with the work of McAdams and his colleagues (de St. Aubin, McAdams, & Kim, 2004; McAdams 2001, 2006; McAdams & de St. Aubin, 1992; McAdams, Hart, & Maruna, 1998). McAdams has contributed to the field by developing a more expansive conceptual model for generativity and by developing a scale measure of generative concern, the Loyola Generativity Scale (LGS).

McAdams' theoretical formulation (McAdams & de St. Aubin, 1992; McAdams et al.,

1998; McAdams, 2001) draws from Erikson's writings as well as that of Becker (1973), Browning (1975), Kotre (1984), McAdams (1985), and Peterson and Stewart (1990). McAdams and de St. Aubin (1992) conceptualize generativity as a "configuration of seven psychosocial features constellated around the personal (individual) and cultural (societal) goal of providing for the next generation" (p. 1004). *Cultural demand* and *inner desire* are posited as motivational sources for generativity. These two factors then combine to promote a conscious *concern* for the next generation. If grounded in a supportive *belief* in the goodness of the human species, concern might stimulate generative *commitment*, or an internal striving toward generativity. Generative *action* might be motivated directly by cultural demand or inner desire, but also can be derived from the adult's commitments to generative activities and goals. Generative action—which includes the behaviors of creating, maintaining, and offering to others—might reciprocally influence later generative commitments. Finally, the meaning of the complex relations among all these features is determined by the person's *narration* of generativity.

Contemporary scholars have differed as to whether the development of generativity is particularly important for adults in midlife (versus other periods of the life course). McAdams and de St. Aubin explicitly reject a stage model of development (and generativity), such as that proposed by Erikson (1950). They posit that although generativity is typically more expected in adulthood than childhood, in part due to certain cultural demands associated with adulthood, it is not expected to be exclusively a feature of any particular age period. Stewart and Vandewater (1998), on the other hand, have suggested a model for how different forms of generativity might become more or less salient across adulthood based on their developmental studies. They posit that: (a) generative desires peak in early adulthood and decline in middle and later age, (b) felt capacity for generativity rises from early to middle adulthood and then shows some bit of decline, and (c) a sense of generative accomplishment might rise across adulthood and peak in old age. Middle age might then include relatively high levels of all three forms, but capacity for generativity is likely to be greater during this period than during earlier and later periods of the life course.

In addition to developing a conceptual model of generativity, McAdams and de St. Aubin (1992) also have advanced studies on generativity by developing the LGS. This scale primarily assesses individual differences in generative concern, with items about passing on knowledge and skills, especially to the next generation; concern with making significant contributions to improving one's community; doing things that will be remembered for a long time and have lasting impact; being creative; and caring for and taking responsibility for other people. To avoid bias for persons without children, the scale does not include items about caring for children, except for one item about adopting children.

In many cases, families serve as a primary context in which generativity as "caring for and taking responsibility for others" occurs. Accordingly, this chapter examines how family relationships are associated with clinical ratings of generativity and attitudinal generativity, assessed most typically by the McAdams and de St. Aubin (1992) Loyola Generativity Scale of generative concern. Additionally, we describe how family caregiving as one specific type of family-related behavioral generativity is associated with adult psychological well-being. In considering caregiving across multiple family relationships, we are explicitly expanding the conceptualization of generativity to include caring for others regardless of their age or generational standing relative to the focal individual.

Scholars have not yet often explored family caregiving as a manifestation of generativity (Keyes & Ryff, 1998, McAdams, 2001). Clearly, however, caring for a person who is

unable to take total care of themselves due to a mental or physical condition or disability is a form of taking care and responsibility for others. Because of several recent changes in individual and family life, such as increasing longevity and smaller family size (Biegel, Sales, & Schulz, 1991), the prevalence and salience of family caregiving beyond the routine care for children has mushroomed in the years since Erikson developed his theory. A U.S. national sample study in 2003 estimated there were 44.4 million U.S. caregivers aged 18 and older, or 21% of the population at these ages, providing unpaid care to one or more adults who needed help due to some level of functional limitation (Caregiving in the U.S., 2004). The vast majority of caregivers (83%) indicated their primary caregiving was done in the context of a family relationship, and 4 out of 10 caregivers were men. These prevalence rates suggest the importance of family caregiving as an increasingly important manifestation of behavioral generativity to take into account in adult development.

In addition to the increasing prevalence of the caregiving role, another reason for the importance of considering caregiving within discussions on family relations and generativity is the relatively large body of research on how family caregiving influences individual well-being. This literature adds understanding to the complex ways in which generativity—as one dimension of adult development—is associated with individuals' psychological well-being—as another dimension of adult development. While levels of attitudinal and clinically-rated generativity have been generally linked to better psychological well-being (McAdams, de St. Aubin, & Logan, 1993; McAdams, 2001), considerable research indicates that family caregiving is associated with increased psychological distress, lower positive affect, and a decreased sense of self-adequacy (Biegel et al., 1991; Chappell, 1990; Gallagher-Thompson et al., 1998; Horowitz, 1985; Pinquart & Sorensen, 2003; ; Schulz, O'Brien, Bookwala, & Fleissner, 1995; Schulz, Visitainer, & Williamson, 1990), particularly if it includes care for a family member with cognitive impairment (Ory, Hoffman, Yee, Tennstedt, & Schulz, 1999; Schulz et al., 1995). Yet there are also indications that when studies include measures that capture more eudaimonic dimensions of psychological well-being, such as feelings of purpose in life and experiences of positive relations with others, findings suggest that caregiving also can be associated with psychological and developmental gains (Kramer, 1997; Lawton, Rajagopal, Brody, & Kleban, 1992; Marks, 1998; Marks, Lambert, & Choi, 2002). In this chapter, we review studies on the implications of family caregiving across multiple relationships for caregivers' well-being to illustrate how behavioral generativity can intersect with other dimensions of adult development, such as psychological well-being.

## **Partner Relationships, Psychological Well-Being, and Generativity**

### ***Partnership and Psychological Well-Being***

The consequences of intimate partnerships for mental health has been the most frequently studied topic related to the effects of family relationships on adults' psychological well-being. Given major transformations in the social institution of marriage during the last 50 years—such as individuals marrying at later ages, increasing rates of marital dissolution, ideological changes regarding the purpose of marriage, changes in gendered partner/marriage role expectations, and a greater number of individuals living in open same-gender partnerships (Bumpass, 1990; Cherlin, 2004; Kurdek, 2004; Seltzer, 2004)—scholars have been particularly active in tracking how the association between marriage and psychological well-being might be staying the same or changing for both women and men. In this section, we first consider the literature on linkages between marital status (i.e., being married versus being never married or previously married)

and psychological well-being, and we then review studies that draw attention to subgroup differences among single and partnered adults and studies that have examined the psychological well-being of adults in nonmarital cohabiting relationships (versus being married). We then note suggestions for future research to advance this relatively large and longstanding literature on intimate partnerships and adult psychological well-being.

*Married versus Single.* Jessie Bernard fired up scholarly debate in 1972 with the publication of *The Future of Marriage*, in which she proposed that there were actually two marriages taking place within every union—“his” and “hers.” “His” marriage included the traditional narrative about how marriage was a sacrifice of much-prized male freedom, but a long-desired arrangement among women. “Her” marriage included the traditional narrative that all women wanted to marry and become mothers, making marriage their most natural and desired adult status. Yet empirical evidence from that era cited by Bernard suggested that when compared with single men, married men benefited greatly from marriage physically, socially, and psychologically, whereas married women were more likely to exhibit higher rates of mental distress and illness than single women. Bernard hypothesized that the traditional housewife role, with its frustrations and devaluation, was part of what was making women psychologically suffer.

Gove and Tudor (Gove, 1972; Gove & Tudor, 1973), as well as Radloff (1975), brought forward additional evidence that marriage provided greater mental health benefits for men than women in terms of rates of psychological dysfunction. Yet work from the later 1970s through the present has been relatively consistent in providing evidence of less psychological distress for both married men and women in contrast to their unmarried peers (Booth & Amato, 1991; Gore & Mangione, 1983; Gove, Hughes, & Style, 1983; Horwitz, White, & Howell-White, 1996; Marks, 1996a; Marks & Lambert, 1998; Menaghan & Lieberman, 1986; Mirowsky & Ross, 1989; Pearlin & Johnson, 1977; Simon 2002; Williams, 2003).

Overall, the debate about the relative benefits of marriage for women in contrast to men is inconclusive. There has been evidence in both directions, as well as for similarity, across studies depending on the sample, age group, design comparison, and measures used. For example, there has been some evidence that partnership dissolutions (versus remaining married) are associated with more depression for women than men (Aseltine & Kessler, 1993; Marks & Lambert, 1998; Simon, 2002; Willitts, Benzevel, & Stansfeld, 2004). On the other hand, considering marital status differences at middle age and older ages (Earle, Smith, Harris, & Longino, 1998; Gove & Shin, 1989; Peters & Liefbroer, 1997; Willitts et al., 2004), there is also evidence that unmarried men have poorer psychological well-being than unmarried women. A number of recent studies and reviews have concluded that, overall, there are more gender similarities than differences in marital status and marital transition effects (Bierman, Fazio, & Milkie, 2006; Mastekaasa, 1994; Simon, 2002; Strohschein, McDonough, Monette, & Shao, 2005; Waite, 1995, 2000; Waite & Gallagher, 2000; Williams, 2003). This conclusion suggests that marital status today, if not in 1972, has relatively equal importance for the well-being of men and women, although scholars have noted that the effects might work through different mechanisms for men and women. For example, Waite (2000) has suggested that marriage might promote women’s psychological well-being by providing them better economic security, whereas for men, marriage might promote psychological well-being through the provision of social support and regulation of health behaviors.

In addition to these studies’ focus on associations between marital status and psychological distress among men and women, other studies have considered linkages

between marital status and global happiness, particularly over historical time. Earlier studies in this area found that married men and women indicated a happiness advantage in comparison to their nonmarried peers (Glenn, 1975; Glenn & Weaver, 1979, 1988; Lee, Seccombe, & Shehan, 1991). U.S. national trend data from the General Social Survey spanning the 1970s and the 1980s, however, revealed a narrowing of the happiness gap between married and never married adults. This trend was noted particularly for men and for younger adults (ages 25–39). There was a significant increase in the proportion of never married men who indicated that they were “very happy” between 1972 and 1982, as well as a significant decrease in the proportion of younger married women during this period who indicated high levels of positive well-being (Glenn & Weaver, 1988). Waite (2000) did additional analyses of marital status over historical time using national General Social Survey data by examining trends in reported happiness (on a 3-point scale) from 1972 to 1996. She found that adjusting for age, education, race, health, and income, never married and previously married men and women all reported somewhat less happiness than their married peers. She found no evidence for a marital status by year of study interaction, and she concluded that, overall, the association between marital status and happiness had not significantly changed over these years.

In addition to these studies that draw on U.S. national data, evidence for the psychological advantages of being married in contrast to being single has been found in studies drawing on data from numerous countries. For example, Stack and Eshleman (1998) found evidence that being married (versus single) was associated with happiness across 17 industrialized nations. The strength of association did not vary from the United States in 14 of the 17 nations studied. Mastekaasa (1994) also examined marital status and various indicators of well-being across 19 countries, including several non-Western ones. He found evidence of differences in psychological well-being favoring the currently married in contrast to the previously married and never married in nearly all countries.

*Differences across Singles.* Increasingly, research on marriage and well-being has moved from examining a simple unmarried versus married dichotomy to examining more subgroup differences. One important subgroup difference is with respect to individuals’ specific type of single status. Dating back to the 1970s, scholars who evaluated outcomes across marital status groups found that the unmarried were not all equally distressed; formerly married persons were found to report more distress than never married persons (Pearlin & Johnson, 1977).

Additionally, studies have found that among the formerly married, divorced and widowed individuals sometimes differ. For example, using data from a U.S. national sample interviewed in the mid-1970s, Gove and Shin (1989) found that the psychological well-being of divorced males, divorced females, and widowed females was roughly comparable and better than the psychological well-being of widowed men. Each group was considerably lower than respective married peers on all but self-esteem; the widowed and divorced were also more disadvantaged than never married persons on happiness, life satisfaction, psychological distress, feeling trapped, meaninglessness, and home life satisfaction. No major gender differences were found among divorced individuals, but gender differences were found among the widowed, with men doing poorer than women.

Numerous studies from the 1980s through the present have continued to confirm that divorced persons, compared with married individuals, report lower levels of psychological well-being, including lower happiness, more symptoms of psychological distress, and poorer self evaluations (Davies, Avison, & McAlpine, 1997; Demo & Acock, 1996;

Doherty, Su, & Needle, 1989; Kitson, 1992; Lorenz et al., 1997; Marks, 1996a; Mastekaasa, 1994, 1995; Menaghan & Lieberman, 1986; Robins & Regier, 1991; Ross, 1995; Shapiro, 1996; Simon, 1998, 2002; Simon & Marcussen, 1999; Umberson & Williams, 1993; White, 1992). Longitudinal studies have also provided evidence that the transition to divorce (in contrast to remaining married) is associated with greater psychological distress and less happiness, mastery, and self-confidence (Aseltine & Kessler, 1993; Booth & Amato, 1991; Hope, Power, & Rodgers, 1999; Johnson & Wu, 2002; Marks & Lambert, 1998; Simon, 2002; Wade & Pevalin, 2004). The transition to widowhood (in contrast to remaining married) has been similarly linked to increased psychological distress (Carnelley, Wortman, & Kessler, 1999; Simon, 2002; Stroebe & Stroebe, 1987; Turner, Killian, & Cain, 2004; Turvey, Carney, Arndt, Wallace, & Herzog, 1999; Wade & Pevalin, 2004; Wilcox et al., 2003; Wortman, Silver, & Kessler, 1993).

In addition to examining subgroup differences among single adults in terms of their specific type of single status, researchers also have examined subgroup differences among adults occupying the same type of single status. For example, recent research suggests that the psychological disadvantage of being previously married is lessened if the marriage that terminated was conflictual or problematic (Aseltine & Kessler, 1993; Carr et al., 2000; Futterman, Gallagher, Thompson, Lovett, & Gilewski, 1990; O'Connor, Cheng, Dunn, & Golding, 2005; Wheaton, 1990; Williams, 2003). For example, Williams (2003) used three waves of national data from 1986 to 1994 and found that as pre-loss marital quality declined, increases in depression and decreases in life satisfaction diminished for people transitioning to divorce, separation, or widowhood (versus remaining married). She found no evidence of gender differences in these associations.

*Differences across the Married.* Even the married are not a homogeneous group—some individuals are first married and some are remarried, and some individuals perceive being in high quality partnerships, whereas others do not. Regarding subgroup differences among partnered adults in terms of diverse marital histories, Weingarten (1985) was one of the first to evaluate differences between first-married, currently divorced, and remarried adults using national survey data from 1976. She found that remarried adults were similar to first married adults on happiness, self-acceptance, self-esteem, personal control, zest, worry, and anxiety. However, other studies since have found that persons continuing in first marriages have better psychological well-being than the remarried (Bierman et al., 2006; Demo & Acock, 1996; Marks, 1995; Shapiro, 1996).

Adopting a life course approach, Barrett (2000) and Peters and Liefbroer (1997) provide further evidence indicating that higher order marriages might be associated with fewer benefits for mental health than first marriages. Barrett's study did not find major differences across currently remarried adults' psychological well-being by the previous type of marital loss (i.e., divorce or widowhood). However, among single adults who were formerly married, multiple divorces (two losses versus one loss) were associated with more depression, and multiple transitions to widowhood (two losses versus one loss) were associated with more anxiety and substance use. Additionally, Peters and Liefbroer (1997), using life history data from older adults in the Netherlands, found that more lifetime dissolutions predicted more loneliness among singles.

There is some evidence to suggest that a history of divorce and separation can have longstanding influences on well-being. Using data from 2,085 participants in the British National Survey of Health and Development (who were born in 1946 and were 43 years old at the time of the study), Richards, Hardy, and Wadsworth (1997) reported that a history of divorce and separation (versus remaining in one's first marriage) was associated

with greater anxiety, depression, and risk of alcohol abuse. Adjusting for many childhood and demographic factors, including early vulnerability and current stressors, time since first separation or divorce did not moderate associations between having ever divorced or separated (versus remaining in a first marriage) and mental health outcomes, even though half of the divorced or separated were remarried or reunited with spouses at the time of analysis. These results suggest the possible significant long-term impact of divorce and separation on psychological well-being.

In addition to examining subgroup differences among married adults in terms of variations in their marital histories, scholars also have examined differences in individuals' reports of the quality of their partnerships. Marital quality has been found to be among the strongest correlates of psychological well-being. In a study by Gove and colleagues (1983), marital happiness explained more of the variation in well-being among married persons than income, education, race, age, or family background. When studies have taken marital quality into account, findings suggest that married persons in low quality marriages report lower levels of psychological well-being in comparison to single persons (Gove et al., 1983; Williams, 2003). There is consistent evidence that marital dissatisfaction is associated with higher levels of depressive symptoms (Whisman, 2001). The evidence from longitudinal studies is generally congruent with findings from cross-sectional studies (e.g., Beach, Katz, Kim, & Brody, 2003; Fincham, Beach, Harold, & Osborne, 1997; Kurdek, 1998; Whisman & Bruce, 1999). For example, Beach and colleagues (2003) found that higher levels of marital discord reported by either spouse predicted more depressive symptoms among married couples. Vega, Kolody, and Valle (1988) likewise found that more marital strains were associated with more depressive symptoms among a sample of non-Hispanics from Chicago, as well as among a sample of Mexican-American women in San Diego.

Regarding gender differences in the influence of marital quality on well-being, the results are inconsistent. For example, Acitelli and Antonucci (1994) found that in a sample of older married couples, more social support in marriage was associated with better general well-being and greater marital satisfaction; these associations were stronger among wives than husbands. This evidence is also congruent with an early finding by Gove and colleagues (1983) that suggested that marital quality matters more for women's than men's well-being. Yet Williams (2003) used three waves of U.S. national data from 1986 to 1994 to provide evidence that lower marital harmony and greater marital stress were associated to a similar extent with greater depression and less life satisfaction over time for both men and women.

Given these findings regarding marital quality, the continuing evidence of a well-being advantage among the married in contrast to the single (when marital quality is not taken into account) may be a reflection of the fact that most married people today report high marital quality. This trend has remained relatively stable over recent decades (Waite, 2000), during which time flexible divorce laws have allowed a significant proportion of unhappy marriages to terminate.

**Cohabitation.** Research on cohabitation as an alternative partnership status has boomed during the last decade. Although there is some limited evidence that cohabitators might experience somewhat better well-being than noncohabiting singles (Kurdek, 1991), overall, research suggests that cohabitators do not experience the psychological gains that married persons do (Brown, 2000; Kim & McKenry, 2002; Marcussen, 2005; Stack & Eshleman, 1998; Waite, 2000). For example, Brown (2000) reported that cohabiting men and women reported higher levels of depression and lower levels of life satisfaction than

married men and women, mainly because they viewed their relationships as less stable. Cohabitors reported rates of relationship instability about 25% higher than marrieds, and higher levels of relationship instability were found to be especially detrimental for cohabitators who had been in long-standing unions. Longitudinal analyses correcting for selection bias also confirmed that lower levels of well-being of cohabitators were not due to selection of types of people who choose to cohabit.

Dush and Amato (2005) used longitudinal U.S. national data and found that married individuals reported higher levels of subjective well-being than cohabitators, even when statistically controlling for relationship happiness. Their longitudinal analysis suggested that shifting into more committed relationships led to improvements in subjective well-being, and they, too, found little support for the idea that people with high well-being select into more committed relationships.

Willitts, Benzevel, and Stansfeld (2004) reported a somewhat more mixed pattern of findings. They used nine waves of British Household Panel Survey data and found that among women, being in a first marriage (though not in a first cohabiting partnership) led to a significantly better age-standardized mental health score (as measured by the General Health Questionnaire) than the mean mental health score for all women. However, among men, being in a first cohabiting partnership (though not in a first marriage) led to a better age-standardized mental health score than the mean mental health score for all men.

**Suggestions for Future Research.** Contemporary research on linkages between partner relationships and psychological well-being has largely addressed several major methodological and conceptual limitations of previous studies. For example, historically, many of the empirical findings noting differences in levels of psychological well-being between married versus single adults have been based on studies with cross-sectional designs. Cross-sectional studies do not allow scholars to disentangle processes of causation (i.e., partnership status leading to well-being) from selection (i.e., well-being leading to partnership status).

As might be expected from a systems perspective positing processes of reciprocal causality, whereby individuals' psychological well-being and likelihood to marry and remain married are mutually reinforcing, more recent studies employing longitudinal designs have generated evidence for both directions of causation (see Booth & Amato, 1991; Mastekaasa, 1992; Simon, 2002, for some evidence for selection effects). However, there is considerable evidence now for social causation, particularly in the instance of gaining a marital partner as opposed to remaining single (Simon, 2002; Waite, 2000; Waite & Gallagher, 2000). Longitudinal data analyses that include assessments of individuals' partnership status, partnership quality, and psychological well-being across multiple times points are necessary to further decouple processes of causation from selection and to better understand the dynamic nature of linkages between partnership processes and individuals' psychological well-being over time.

Furthermore, although research studies on associations between partnerships and psychological well-being have increasingly recognized important subgroup differences among both single and married adults, there are likely many other dimensions of subgroup differences that can pattern how the marital domain influences adults' psychological well-being. First, although there is a sizeable and growing number of same-gender partnerships (Kurdek, 2004), there is not much evidence yet about same-gender partnerships and psychological well-being. One exception is Grossman, D'Augelli, and Hershberger (2000) who studied the social support networks of 416 lesbian, gay, and



bisexual adults aged 60–91. Those living with domestic partners were less lonely and rated their physical and mental health more positively than those who lived alone.

Second, given that individuals with lower incomes are less likely to be married, more research is needed to evaluate if marriage is as beneficial for the well-being of poorer persons. Evidence suggests that individuals with low income still aspire to marriage, but only if it includes economic security and maturity, which might be challenging to attain in disadvantaged environments (Edin, Kefalas, & Reed, 2004). The decoupling of marriage and parenthood (Ventura & Bachrach, 2000), particularly among the socioeconomically disadvantaged, might be changing its meaning and influence on psychological well-being and development. Nevertheless, an empirical basis for evaluating whether such is the case is currently not available.

Third, understanding of linkages between marriage and well-being in different racial-ethnic and cultural contexts is also necessary. Individuals within particular ethnic groups, such as Latinos, have been found to be more committed to marriage than other racial-ethnic groups in the United States, but this greater commitment might differ depending on the acculturation status of a Latino individual and their family (Oropesa & Landale, 2004).

Fourth, it would be valuable for more research on partnership and well-being to explore potential age differences in the effects of partner relationships and psychological well-being and connect them to adult developmental theory in a more explicit way. For example, the idea that being never married is associated with fewer disadvantages in psychological well-being among younger men (as opposed to younger women) received some additional support by more recent evidence from a U.S. national 1995 study (Marks, Bumpass, & Jun, 2004). Analyses revealed that never married younger men (ages 25–39) reported less dysphoria than never married middle-aged men (ages 40–59). By contrast, middle-aged never married women reported no more dysphoria than their first married counterparts, yet younger never married women reported significantly more dysphoria than middle-aged never married women. These results suggest an interesting gender difference where never married status might be more problematic for younger women than younger men—possibly due to “biological clock” issues (i.e., the desire to have children with a partner at younger ages).

Additionally, some research has suggested that marital transitions to divorce or widowhood are less detrimental for the psychological well-being of midlife men and women than younger men and women (Marks & Lambert, 1998), and that remarriage, cohabitation, and divorced/widowed statuses are less problematic for psychological wellness (as measured by a composite measure of Ryff’s psychological well-being scales) among midlife women than younger women (Marks, Bumpass, & Jun, 2004). Greater developmental gains in self-management, resilience, and capacity to deal with nontraditional role-identities acquired by midlife (cf. Brim, 1992) might help to explain these differences.

Finally, results from a limited number of studies suggest that different patterns of associations between partnership status and psychological well-being can emerge when considering diverse dimensions of psychological well-being. For example, despite findings that single adults often report higher levels of distress than their married peers, separated or divorced adults also have been found to report higher levels of autonomy and personal growth (Kitson, 1992; Marks, 1996a), and divorced women interviewed in depth have reported gains in their sense of control and personal confidence (Riessmann, 1990). Future studies including diverse and multiple measures of psychological well-being would contribute to a more complete understanding of the linkages between partnerships and adults’ total experiences of psychological well-being.

### **Partnership and Generativity**

Scholarship on the linkage between marriage or partnership and generativity is limited. In an early study of the correlates of generativity, Vaillant and Milofsky (1980) found that among college-educated men at age 47, as well as among same-aged men from working-class inner city backgrounds, enjoyment of first marriage was a correlate of achieving higher levels of clinically-assessed generativity.

Building on Vaillant and Milofsky's (1980) study, Snarey, Son, Kuchne, Hauser, and Vaillant (1987) reexamined longitudinal data from ever-married men in the same working-class sample of men to further examine differences in generativity by subgroups who had also experienced challenges with infertility (or not) in their first marriage. They found that for the group of men who experienced infertility challenges and subsequently divorced, none had achieved clinically-rated generativity by age 47. For men who experienced infertility challenges and remained married "without enjoyment," 18% were rated as having achieved generativity, whereas among men who experienced fertility challenges and enjoyed their marriage, 52% had achieved generativity. Among the men who had not had challenges with infertility, only 14% of divorced men and 18% of the unhappily married, yet 53% of the happily married were rated as having achieved generativity.

Furthermore, Westermeyer (2004) investigated longitudinal data from 96 college graduate men first studied at age 21 and found that having a successful long-term marriage helped predict clinical ratings of generativity by age 53. Additionally, using data from a U.S. national sample in 1995 and controlling for parental status, Marks, Bumpass, and Jun (2004) found evidence that midlife remarried women reported even more generativity (assessed by an adapted version of the LGS) than first married women. This study also revealed trend-level evidence that never married midlife men reported less generativity than first married men.

Overall, the existing literature suggests that marriage, particularly a high quality marriage, is associated with greater generativity in adulthood. This association might be due to the fact that the role-identity expectations for marriage and partnership include expectations of caring for and taking responsibility for one's partner, and that opportunities to enact this role-identity can lead to more evidence of behavioral care and perception of self as a caring person. Yet the empirical base is limited in this area, and more research is needed to establish linkages, consider issues of causal direction, rule out the potential confounding association with the parenting role (which is not adjusted for in most of the studies reviewed), and develop understanding of the possible mechanisms underlying associations.

### **Spouse/Partner Caregiving and Psychological Well-Being**

Cantor (1979) suggested that there is a normative "hierarchy of succession" in the United States for who should provide caregiving for a person with functional limitations; according to this hierarchy an individual's spouse (if available) is "first in line" to assume that role. In the national Caregiving in the U.S. survey conducted in 2003 (Caregiving in the U.S., 2004), 6% of caregivers responded they were currently providing care to a spouse.

The literature on spousal caregivers is relatively consistent in suggesting that spousal caregiving is associated with increased psychological distress (Biegel et al., 1991; George & Gwyther, 1986; Harper & Lund, 1990; Hoyert & Seltzer, 1992; Marks et al., 2002; Seltzer & Li, 1996; 2000; Young & Kahana, 1989). Caregiving for a spouse, when compared with filial caregiving, usually has been found to be more problematic for psychological

well-being (Biegel et al., 1991). This is likely due to the high salience of the spousal role and relationship (making negative health-related changes in this role-relationship particularly distressing), the greater likelihood for spousal caregiving to occur in-household and be very time-intensive, and the greater likelihood that spousal caregiving might include even more demanding personal care tasks.

A life course approach to caregiving is now becoming more typical in the literature, with scholars studying different transitions in the caregiving career and recognizing that different periods of caregiving might have different effects on well-being (Pearlin & Aneshensel, 1994). For example, Seltzer and Li (2000) longitudinally studied the transition to spousal caregiving and found that wives experienced increased psychological distress and a trend toward lower mastery, but bereavement after caregiving was accompanied by an increase in personal growth.

Although the majority of family caregivers are women, a sizeable proportion of spousal caregivers are men (Marks, 1996b; Stone et al., 1987). Men who are spousal caregivers might face unique challenges from assuming this role, given that husbands are the oldest subgroup of caregivers, report spending the greatest number of extra hours in providing caregiving, and are more likely to provide care for partners diagnosed with dementia (Fitting, Rabins, Lucas, & Eastham, 1986; Stone et al., 1987). Early studies of spousal caregiving often failed to include men, but contemporary research is increasingly filling this gap (Kramer & Lambert, 1999; Kramer & Thompson, 2002). For example, examining U.S. national data, Kramer and Lambert (1999) found that husbands 60 years and older who transitioned to caregiving for their spouse reported a greater increase in depression and a greater decrease in happiness than their noncaregiving men peers.

*Links between Empirical Findings and Theory.* The multiple literatures on linkages between partner relations and adult psychological well-being and generativity reflect principles from the three major theoretical perspectives reviewed in this chapter. For example, the research linking partnership status to adults' psychological well-being and generativity provides support for structural symbolic interaction's role-identity theory, which directs attention to the psychological benefits of occupying social positions and enacting well-defined role-identities. Furthermore, studies that have focused on individuals' marital histories—as opposed to single marital statuses—are congruent with the life course perspective's attention to how cumulative experiences in a role can influence the psychological impact of that role. Additionally, the literature on spousal caregiving suggests support for the “linked lives” tenet of the life course perspective; the health-related needs of a partner and the demand characteristics set up by these needs have an important influence on an individual's well-being. Finally, research on how day-to-day quality of interactions in partnerships (as reflected in partnership quality assessments) are associated with well-being is congruent with bioecological systems theory's attention to marital partners as potentially important process components of the family microsystem, which can influence adult development.

## **Parenthood, Psychological Well-Being, and Generativity**

### ***Parenthood Status and Psychological Well-Being***

Although one might anticipate declining rates of parenthood among U.S. adults given recent social changes—e.g., advances in birth control, women's greater participation in the labor force, and a growing number of adults who remain single throughout the child-bearing years—parenthood still remains a normative role during the adult life course.

About 90% of midlife and older adults report having biological, adopted, or stepchildren (Marks, Bumpass, & Jun, 2004). What has changed, however, is that with greater fluidity in marital-partnership status in recent decades, more adults are experiencing the developmental challenges and rewards of parenting in new role-relationships, such as by serving as stepparents and parents of children in cohabiting and same-gender unions (Marks, 1996c; Seltzer, 2004).

Results from studies comparing all adults who are not parents to adults who have ever had children have been inconsistent, suggesting either no difference across these groups (Aneshensel, Frerichs, & Clark, 1981) or suggesting that parents overall report greater psychological distress than nonparents (Evenson & Simon, 2005). In exploring the associations between parenthood and psychological well-being, scholarship has evolved to recognize that exploring this linkage is most helpfully undertaken by taking into account subgroup differences among parents and nonparents. These next subsections focus on studies examining how parenthood is associated with adult psychological well-being in the context of voluntary versus involuntary childlessness, children's developmental characteristics, parents' marital status, social structural conditions surrounding parenthood, and parents' role identity and role quality. We then note suggestions for future research to advance this relatively large literature on parenthood and adult psychological well-being.

*Voluntary versus Involuntary Childlessness.* Given recent advances in birth control and greater cultural social acceptance of voluntarily childfree adults in contemporary society, an important issue that has emerged within the literature on parenting and well-being is the distinction between voluntary and involuntary childlessness (Letherby, 2002). Overall, it appears that adults who are involuntarily childless are at a greater risk for poorer psychological well-being than are parents. In an early study, Beckman and Houser (1982) compared voluntary childlessness, involuntary childlessness, and semivoluntary childlessness (i.e., respondents who gave neither reason for childlessness). Their results indicated no group differences on morale, depression, or social isolation. However, Connidis and McMullin (1993) compared levels of happiness, depression, and life satisfaction among men and women over age 55 in groups of parents with close ties to children, parents with distant ties to children, voluntarily childless men and women, and involuntarily childless men and women. Their results suggested that parents with close ties and the voluntarily childless had the highest levels of well-being with no differences in levels of happiness between these groups. The lowest ratings of happiness and satisfaction with life and highest depression scores were experienced by the involuntarily childless. Jeffries and Konnert (2002) similarly found differences in psychological well-being between voluntarily and involuntarily childless women and mothers. They found that compared to involuntarily childless women, voluntarily childless women reported higher levels of overall well-being and reported themselves as having more autonomy, more environmental mastery, more purpose in life, as well as smaller present/ideal self discrepancy on autonomy and self-acceptance. In this small study, mothers reported scores on well-being that were in between and not significantly different from those of either of the two groups of childless women.

*Children's Developmental Characteristics.* Given that parent-child relationships typically extend across children's childhoods and much of their adulthoods, several studies have examined whether associations between parenthood and psychological well-being are contingent upon the child's developmental characteristics, including their age and

sociodevelopmental progress. For example, when childless parents are compared with parents of minor children, parenthood is often associated with poorer psychological well-being (Evenson & Simon, 2005; McLanahan & Adams, 1987, 1989; Umberson & Gove, 1989). But when childless adults have been compared to parents of older children, especially widowed parents and parents of relatively independent adult children, evidence suggests that parenthood is associated with higher levels of well-being (Aneshensel et al., 1981; Glenn, 1975; Marks et al., 2004; Ross & Mirowsky, 1988; Umberson & Gove, 1989).

Using U.S. national data from 1995, Marks and colleagues (2004) similarly studied whether children's ages patterned differences among associations between parental status and psychological well-being; this study also took into consideration parents' age and gender. Results from this study indicated that among midlife women ages 40 to 59, having a youngest child ages 5 years old or younger was associated with more dysphoria than having no children, but this effect was significantly reduced for women aged 25 to 39. The authors suggested that this difference might be due to the fact that having young children is more developmentally expected between the ages of 25 and 39. Furthermore, among men, having older adult children was associated with less dysphoria than having no children, and men reported more psychological wellness than women whether parenting young, school-aged, or only adult children. These findings suggest the potentially greater benefits of the parenting role for psychological well-being among men in contrast to women.

Other studies have investigated parents' psychological well-being as a function of their children's developmental transitions. For example, Silverberg (1996) studied 129 two-parent families with a firstborn target child between ages 10 and 15 at the first time of interview. Their aim was to examine linkages between changes among adolescents and parents' well-being. Daughters' pubertal maturation was associated with more midlife concerns for mothers, and sons' pubertal maturation was associated with declines in self-esteem for mothers. Adolescents' higher levels of dating behavior and involvement in mixed-sex activities were associated with parents' poorer psychological well-being, such as their greater midlife identity concerns, lower self-esteem, lower life satisfaction, and more frequent psychological symptoms—but only among parents not strongly invested in a paid-work role. Moreover, emotional autonomy of sons reduced levels of life satisfaction among fathers, particularly among blue-collar fathers.

Also examining associations between children's developmental transitions and parents' psychological well-being, Ryff, Lee, Essex, and Schmutte (1994) studied 215 midlife parents to evaluate the extent to which their feelings about how adult children had "turned out" would influence their psychological well-being. Perceived adjustment (though not accomplishment) of children predicted parents' scores on six of seven psychological well-being outcomes (Ryff's six well-being scales and depression). Furthermore, parents who saw their children as being better adjusted than themselves as young adults had lower well-being. Similar to the study by Ryff and colleagues (1994), other studies focusing on the psychological well-being of parents of adult children have found that adult children's problems are associated with parents' poorer well-being (Greenberg & Becker, 1988; Greenfield & Marks, 2006; Pillemer & Sutor, 1991).

*Parents' Marital Status and Family Structure.* In addition to considering developmental processes set in motion by parents' children, studies also have considered parents' relationships (or lack of relationships) with intimate partners as another factor that can influence associations between parenthood and psychological well-being. Studies that have

examined marital status interactions have usually found single parenting to be more distressing than parenting with a partner (Aneshensel et al., 1981; Evenson & Simon, 2005; McLanahan & Adams, 1989; Menaghan, 1989a, 1989b; Umberson & Gove, 1989). Stepparenting (versus parenting biological and/or adopted children) has also sometimes been associated with greater distress (Ihinger-Tallman, 1988; White & Booth, 1985).

Some studies have considered additional subgroup differences among parents occupying particular marital status groups. For example, Zhang and Hayward (2001), using data from a U.S. nationally representative sample of adults aged 70 and older, found patterns of gender differences in the associations between parental status, marital status, and psychological well-being. Findings suggested overall that childlessness did not increase the prevalence of loneliness and depression among parents at these ages, net of other factors. However, childlessness did increase loneliness and depression for divorced, widowed, and never married older adults. Divorced, widowed, and never married men who were childless had significantly higher rates of loneliness compared with women in comparable circumstances; divorced and widowed men who were childless also had significantly higher rates of depression than divorced and widowed women. Patterns for adults with stepchildren did not differ greatly from those with biological children.

Using U.S. national data from 1987 to 1988, Evenson and Simon (2005) examined whether differences in levels of psychological well-being among childless adults, parents of stepchildren, and parents of biological children were patterned by whether parents were “empty nest” parents (i.e., had no children at home), “full nest” parents (i.e., had children under ages 19 at home), or parents with adult children at home. Results indicated that in comparison to the well-being of nonparents, elevated levels of psychological distress were reported among parents with minor children at home, noncustodial parents, and parents with nonresidential adult stepchildren, but not among parents with adult children at home or parents with minor stepchildren at home. In comparison to the well-being of “full nest” parents, noncustodial parents, parents with adult children at home and parents with nonresidential adult stepchildren reported higher levels of distress. But contrary to expectation, parents with minor stepchildren at home were no different than other “full nest” parents. These results suggest that associations between parenthood and psychological well-being are likely contingent upon a complex array of family structural arrangements under which parenting occurs.

*Parental Role Identity and Role Quality.* Much of the work related to parenting and adult psychological well-being has focused on whether or not adults occupy the parent role itself; a much more limited amount of research has addressed role identity and role quality differences in parenting and their associations with adults’ psychological well-being. One study that has contributed to understanding linkages between parental role identity and role quality and adults’ psychological well-being is that of Simon (1992). Findings from this study indicated that parental identity was more salient for women’s self-conceptions than men’s self-conceptions, and women, compared to men, reported higher levels of parental strains. This study did not, however, find evidence that parental strains more strongly jeopardized women’s psychological well-being than men’s. Instead, there was evidence that the relationship between parental strains and distress was stronger among fathers than among mothers.

In another study of parent role quality using data from 180 full-time employed dual-earner couples, and controlling for many demographic and marital quality characteristics, Barnett, Brennan, and Marshall (1994) found that greater satisfaction as a parent was associated with less overall psychological distress to a similar degree among both

men and women. The authors discussed their findings as providing evidence that family roles are beginning to have similar psychological significance for men and women (Barnett, 1993; Pleck 1993; Thoits, 1991, 1992).

Other studies have focused on how characteristics of parent-child relationships pattern associations between parenthood and adult psychological well-being. For example, in Silverberg's (1996) study of parents of young adolescent children, mother-daughter conflict was associated with adults' lower self-esteem and life satisfaction and more psychological distress symptoms, and mother-son conflict was also associated with lower levels of life satisfaction. Longitudinally, more reports of challenge/distancing in parent-child relationships over time were associated with more psychological symptoms among mothers of daughters and less life satisfaction among most parents.

Umberson (1992) explored the influence of relationships with adult children on their parents' psychological distress. Overall, more negative aspects of parent-child relationships—such as greater relationship strain with children and parental dissatisfaction—were predictive of psychological distress of parents, particularly among parents with lower levels of education. Other important subgroup differences in the associations emerged. For example, frequency of contact with children was found to be associated with more beneficial psychological functioning among divorced parents in contrast to married parents, but frequency of contact was associated with higher depression among widowed parents in contrast to married parents. Furthermore, social support from adult children was associated with better psychological functioning among parents who had adult children living at home in contrast to parents whose adult children lived elsewhere.

A few additional studies have focused on social exchange given to and received from adult children and its impact on midlife or older adults' psychological well-being. The results have suggested that at least for U.S. midlife and older adults, overall, being able to give to adult children, whether reciprocated or not, is associated with better psychological well-being than being overbenefitted in exchanges with adult children (Davey & Eggebeen, 1998; Marks, 1995; Mutran & Reitzes, 1984; Rook, 1984; Stoller, 1985). However, Davey and Eggebeen's (1998) contingency theory of intergenerational exchange adds an additional empirically validated perspective: In certain transitional periods—such as during a parent's transition to widowhood, decline in health, significant drop in income, transition out of employment, and birth of a grandchild—greater support received from adult children among older parents leads to increases in their psychological well-being.

*Suggestions for Future Research.* Similar to studies on partnerships and psychological well-being, the literature on parenthood and psychological well-being has increasingly recognized potentially important subgroup differences among parents and nonparents; however, many other dimensions of subgroup differences have yet to be explored. For example, few studies have addressed the experiences of gay and lesbian parents (Ross, 2005). It also would be valuable to explore the psychological well-being consequences of parenthood resulting from new types of conception. For example, findings from a study of 42 surrogacy families compared with 51 egg-donation families and 80 natural conception families suggested the psychological well-being and adaptation to parenthood was better among the surrogacy and egg-donation parents than that of mothers and fathers of children born by natural conception methods (Golombok, Murray, Jadva, MacCallum, & Lycett, 2004).

The empirical literature on parenthood and psychological well-being can also be advanced by drawing on theoretical advances in scholarship on parent-child relationships. For example, focusing primarily on relationships between parents and adult

children, Leuscher and Pillemer (1998) have drawn attention to the issue of intergenerational ambivalence. With respect to parents' experiences, ambivalence can be conceptualized as perceiving contradictory expectations for behavior as a parent of an adult child, as well as having simultaneously negative and positive feelings toward an adult child. This concept can contribute to moving the examination of linkages between parenthood and psychological well-being beyond investigations of parents' feelings and behaviors of solidarity or conflict.

Additionally, within contemporary theorizing on parenthood and adult development, there continues to be speculation that the social role of parenthood has both emotional benefits and emotional costs. Nevertheless, scholars continue to assess the costs much more frequently than the potential rewards. By adding more eudaimonic-based measures of psychological well-being—such as purpose in life, self-acceptance, positive relations with others, and personal growth—future empirical studies will be better able to capture how and when parenthood promotes individuals' optimal psychological well-being.

Finally, guided by a life course perspective and bioecological systems theory, we expect it would be very valuable for more scholarship on parenthood and developmental outcomes to adopt a more macrohistorical and ecological lens on the role of parenting. The social context of parenting is likely to pattern how parenthood affects adults' well-being. For example, because of decreasing levels of societal support for parenting and less societal-wide valuing of the parental role over the last half century (Evenson & Simon, 2005; Hewlett, Rankin, & West, 2002; Hewlett & West, 1998), we might anticipate that parenting will be associated with greater stresses and fewer rewards, thereby leading to poorer well-being among contemporary cohorts of parents.

Generating empirical support for this idea, Bird (1997) explored associations between U.S. parents' number of children under age 18 and their psychological distress. Although having a greater number of children was associated with higher levels of distress, this effect was mediated by social and economic burdens associated with having more children, including more perceived economic hardship, difficulty arranging child care, and lower quality of marriage. The author suggests that if these factors were ameliorated, having children would lead to less psychological distress for women and eliminate differences in psychological distress for men. By contrast, in a country that provides child allowance and state-subsidized childcare—Finland—evidence suggests that children have no negative effect on the psychological well-being of Finnish women and a positive effect on Finnish men (Savolainen et al., 2001).

### ***Parenthood and Generativity***

Parenthood constitutes the family role most typically considered within studies on family relationships and generativity. This fact comes of little surprise given the traditional conceptualization of generativity as “caring for and contributing to the next generation.” Overall, the literature suggests that being a parent is conducive to engendering generativity, but that the quality of one's parenting role also influences generativity.

One of the earliest studies examining the link between parenthood and generativity was Vaillant and Milofsky's (1980) study. They assessed Eriksonian life stage at age 47 from two different samples of men (varying by socioeconomic status) and found that achieving generativity was correlated with emotional closeness to adolescent children. As noted previously, building on the Vaillant and Milofsky (1980) study, Snarey and colleagues (1987) examined data from the 343 married men in the working-class sample study with an interest in the influence of infertility problems on men's generativity. Overall, ranking of



generativity rates by fertility status suggested generativity was highest among the infertile adoptive fathers, followed by the initially infertile fathers who eventually became birth fathers, then fertile birth fathers, and finally infertile men who remained childless.

McAdams and de St. Aubin (1992) explored associations between parenting and generativity in an adult sample ages 19–68. They found that having children, as opposed to not having children, was significantly associated with higher scores on the LGS, and an additional significant interaction suggested this effect was greater among men than women.

Results reported by Marks, Bumpass, and Jun (2004) are also consistent with this suggestion of a gender difference in the association between parenthood and generativity. They used U.S. national data and controlled for marital status and other demographic characteristics, and employed a modified version of the LGS. Findings indicated two gender differences in the influence of parenthood on generativity. Men with adult children reported significantly more generativity than women with adult children, and men with preschool children showed a trend toward more generativity than women with preschool children. Men (but not women) consistently reported more generativity when they had children; the only exception was young men with school-aged children whose predicted scores were lower than for young men without children.

It is possible that the role-identities of women and men remain sufficiently gendered such that women are encouraged to adopt caring and nurturing attitudes and behaviors in all roles (e.g., Gilligan, 1982), thereby leading them to have relatively similar levels of reported generativity whether they are childfree or parents. In contrast, the parenting role-identity for men might be the most important major role-identity to bring a particular emphasis on caring for and taking responsibility for others, and, as such, the parent role-identity might be the role-identity most closely linked to men's development of generativity. Palkovitz and colleagues' (2001) in-depth interviews with fathers provides additional empirical support for the proposition that the transition to fatherhood provides an important "jolt" to men to become more generative by being less self-centered, more giving, and more involved in taking care of the next generation.

A few studies have specifically explored the types of child involvement activities that promote generativity. Snarey (1993) studied different types of child care involvement among fathers to evaluate their relative influence on men's societal generativity. Results indicated that the strongest catalyst for the development of societal generativity among fathers was their involvement in activities that promoted the social and emotional development of their children. Building on this work, McKeering and Pakenham (2000) studied 134 White Australian parents and found that childcare activities promoting children's social-emotional development were related to fathers' societal generativity, whereas activities promoting academic-intellectual development for children were related to mothers' societal generativity. Bailey (1992) studied White middle-class fathers and found that fathers' social interaction in play with their children was weakly associated with self-reports of generativity; however, men's higher levels of providing routine childcare were not associated with scores on generativity. Finally, focusing on college-educated women in their 40s and using a personal characteristic cluster-based measure of generativity, Peterson and Klohnen (1995) found that the correlates of generativity included being a parent, felt adequacy in the motherhood role, health concerns for children or partner, agreement that motherhood promotes own growth, and having fewer problems with children.

Two studies have valuably extended the study of generativity to other racial-ethnic-national groups of parents. Hart, McAdams, Hirsch, and Bauer (2001) studied 253

adults, ages 34 to 65, about evenly split between African American and White parents. They found that among both African American and White parents, assessments of generativity (as measured by the Loyola Generativity Scale) were associated with emphasizing prosocial values and viewing oneself as a role model and source of wisdom for one's children. Nevertheless, African American adults scored higher than Whites on the measure of generative concern and generative acts, as well as on indices of parenting as a role model and source of wisdom. Extending the study of generativity to an Asian cultural context, Kim and Youn (2002) found that among Korean women, reports of better quality within one's parenting role and, interestingly, more childcare stress were associated with higher scores on the LGS.

Although many of the previous studies provide evidence for linkages between parenting/parenthood and generativity, several major methodological limitations indicate the critical need for additional studies to further investigate these linkages. First, more longitudinal work in this area can help to establish a better understanding of causal processes. Cross-sectional studies that assess parental status and generativity at the same time cannot decouple processes through which earlier levels of generativity heighten individuals' likelihood of becoming a parent from processes through which becoming a parent leads to increased levels of generativity. Additionally, more work that seeks to unconfound the effects of the marital role and the parental role on generativity would be helpful in better understanding the extent to which different family relationships influence adults' development of generativity.

### ***Caregiving for a Child with a Disability and Psychological Well-Being***

Parents providing care for a child with a disability sometimes have been found to experience the highest levels of stress in comparison to other types of caregivers (Biegel et al., 1991). The evidence on this issue is mixed, however, likely due to variation in ages, duration of care, and illness types included in different caregiving studies involving children with disabilities (Neal, Chapman, Ingersoll-Dayton, & Emlen, 1993). Mash and Johnson (1983) reviewed studies on parents of children with physical and mental disorders and concluded that findings overall revealed that mothers with children who have conditions such as hyperactivity, cerebral palsy, epilepsy, and developmental delay have interactions with young children that are more stressful and that can be experienced as less rewarding than do mothers of children without disability.

Caregiving for a child with special needs is not limited, however, to special care in childhood. Some disabilities are lifelong (e.g., mental retardation, cerebral palsy, and developmental delay) and others only occur in adulthood (e.g., schizophrenia and disabilities due to an accident or onset of a health condition). The psychological effects of being a parent of an adult child with special needs also appear to depend on the child's type of condition. For example, studies have indicated few differences in levels of psychological well-being among predominantly European-American midlife and later life mothers parenting adult children with mental retardation compared to samples of other-caregiver and noncaregiver age peers (Ramey, Krauss, & Simeonsson, 1989; Seltzer & Krauss, 1989; Seltzer, Krauss, Choi et al., 1996). Parents of adult children with a serious mental health problem, however, have been found to demonstrate elevated levels of depression and alcohol symptoms at midlife in comparison to parents who do not report having an adult child with mental health problems (Seltzer & Greenberg, 2001), possibly due to the greater unpredictability of behaviors associated with serious mental illnesses like schizophrenia, in contrast to mental retardation.

Important subgroup differences might exist even among parents of children with similar conditions. In a valuable comparison study, Blacher, Lopez, Shapiro, and Fusco (1997) reported that Latina mothers with a child with mental retardation experienced more depression in contrast to Latina mothers who did not have a child with mental retardation. The authors suggested that the poorer well-being of Latina mothers of children with mental retardation might be due to their poorer access to interpersonal support (particularly spousal support) when they had a child with this particular disability. This report of more depression among Latina mothers of children with mental retardation contrasts with the finding of few negative effects noted previously based on studies of primarily European-American mothers of children with a similar condition (Ramey, Krauss, & Simeonsson, 1989; Seltzer & Krauss, 1989; Seltzer, Krauss, Choi et al., 1996), and highlights the importance of considering diversity in social contexts (as emphasized in the life course perspective, bioecological systems theory, and structural symbolic interactionism) in more comprehensively understanding the effects of family factors on adult developmental outcomes.

*Links between Empirical Findings and Theory.* Similar to the research on partner relations and adults' psychological well-being and generativity, studies on the extent to which being a parent influences adult developmental outcomes demonstrate several of the core ideas from the life course perspective, bioecological systems theory, and structural symbolic interactionism's role-identity theory. Overall, consistent with structural symbolic interactionism's role-identity theory, research on parenthood and well-being suggests that having the role-identity of parent—as a position that typically carries with it expectations for taking responsibility and caring for children—can promote meaning in adults' lives and foster their development of generativity. Additionally, congruent with bioecological systems theory's attention to interpersonal relations within the family microsystem, the literature suggests that the interactional demands of parenting and caregiving for a child with certain health conditions can be distressing, but that this distress is moderated by other factors in the family microsystem (such as by the presence of a partner, the characteristics of the child and their health condition, and the quality of relationship with the child). The influence of relationships with adult children on parents' well-being provides additional support for the life course perspective's emphasis on linked lives across time.

## **Relationships with Parents in Adulthood, Psychological Well-Being, and Generativity**

### ***Experiences in the Adult Child Role and Psychological Well-Being***

An important part of adult life is now spent in relationships with parents who are still alive across individuals' adulthood. Today, more men and women reach adulthood with both parents alive than in the early 20th century, and men and women from contemporary adult birth cohorts are likely to spend more years with one or more parents aged 65 and older than they are to spend with children under age 18 (Watkins, Mencken, & Bongarts, 1987). Despite these demographic trends, relatively little family research outside of work on filial caregiving has focused on adults in their adult child role vis-à-vis their aging parents and how this adult child role might be related to adults' well-being. In this section, we review the few studies that have examined linkages between being an adult child and psychological well-being, as well as studies on the psychological effects of losing one's role as an adult child through the experience of parent death.

*Adult-Child Parent Relationship Quality and Adult Child's Psychological Well-Being.* Influenced by Freudian theory, Parsonian family theory from the 1940s and 1950s emphasized the need for adult children to “disconnect” from their parents after adolescence and to focus almost exclusively on their own adult nuclear family formed by marriage (Parsons, 1943). Nevertheless, family research in the United States over the last 40 years has confirmed that ties between adult children and their midlife and aging parents remain considerable (Bengtson, Rosenthal, & Burton, 1990; Cooney & Uhlenberg, 1992; Eggebeen & Hogan, 1990; Rossi & Rossi, 1990; Shanas et al., 1968; Spitze & Logan, 1992), and that early life relationships with parents help shape later life relationships with parents (Rossi & Rossi, 1990). Indeed, as family structures become more vertical (i.e., more typically comprised of persons from three or more generations) and less horizontal (i.e., more typically comprised of fewer persons from the same generation, such as siblings and cousins), continuing relations across generations and interdependency across generations become even more common and important to adults (Bengtson, 2001; Bengtson et al., 1990; Cooney & Uhlenberg, 1992; Eggebeen & Hogan, 1990; Rossi & Rossi, 1990).

Only a few scholars have studied adult-child parent relationship quality and its impact on adult children's well-being. Barnett, Marshall, and Pleck (1992) reported that adult sons with sisters who had better quality relationships with mothers, as well as better quality relationships with fathers, reported less psychological distress. When relationships with both mothers and fathers were included in statistical models, quality of relationship with fathers was less strongly associated with men's psychological distress than relationship quality with mothers. Additionally, associations were stronger for younger sons and fathers, as well as for sons with less education.

Barnett, Kibria, Baruch, and Pleck (1991) also examined associations between the quality of adults' relationships with their parents and psychological well-being by examining levels of subjective well-being and psychological distress among adult daughters. They found that, overall, having a positive relationship with a parent was associated with daughters' reports of higher well-being and lower distress. Associations between the quality of relationship with parents and psychological well-being were particularly robust for younger and single childless women, as well as when considering women's relationship with their mothers. Results did not vary by adults' race/ethnicity or socioeconomic status.

Umberson (1992) explored the influence of functional and affectual aspects of adult child-parent relationships on adult children's psychological distress. Overall, more negative aspects of parent-child relationships, including greater relationship strain with mothers and fathers, were predictive of greater psychological distress among adult children. Furthermore, the receipt of more social support from mothers and greater frequency of contact with mothers was associated with adult children's lower levels of psychological distress.

Amato and Afifi (2006) explored another dimension of adult children's experience of their parent-child relationship—feeling caught between two parents. This outcome was assessed as being involved in parents' conflicts, feeling it difficult to be more close to one parent without being less close to the other, and feeling parents are competing for the adult child's affection. As hypothesized, adult children experiencing higher levels of feeling caught between parents reported lower scores on a composite measure of psychological well-being. Interestingly, feeling caught between two parents was not associated with parental divorce—which had taken place, on average, about 11 years in the past among study participants who experienced this event—but it was associated with parents' high-conflict continuing marriage.

*Death of Parents.* Very few scholars have examined parent loss and adult well-being, but the little work that has been done in this area does suggest that parent loss in adulthood is associated with some negative effects on psychological well-being. Most of this literature is clinically-based, utilizing small nonrepresentative samples of persons who are recruited for study only after a parent loss has occurred. The clinical literature that has examined this issue has suggested that grief reactions after a parent's death can lead to depression, thoughts of suicide, and other psychiatric problems (Birtchnell, 1975; Horowitz et al., 1981; McHorney & Mor, 1988; Sanders, 1979–80).

Scharlach (1991) examined initial and residual grief reactions among a convenience sample of 220 adults, ages 36 to 60 who experienced the death of a parent within the last five years. Results from this study indicated that bereaved adult children reported a wide range of initial symptoms related to parent death, including difficulties sleeping and working and getting along with certain people, as well as residual reactions including becoming upset when thinking about the parent, finding it painful to recall the parent's memory, being unable to avoid thinking about the parent, and crying when thinking about the parent. Scharlach did not find differences in initial or residual grief reactions to the loss of mothers in contrast to fathers.

Moss and colleagues (1993) evaluated responses from 102 daughters ages 40 to 65 who had recently experienced the death of a mother. They found substantial evidence of depression, grief, and somatic reactions, but they also noted considerable heterogeneity in responses that was associated with differential characteristics of the daughter, their deceased mother, and the quality of their relationship. In additional research, Moss and colleagues (1997) examined gender differences in response to the death of a last surviving parent and found that, overall, daughters reported being more upset and experiencing more somatic symptoms in response to parent death than sons.

A prospective, population study of psychological and physical health outcomes associated with parent death was undertaken by Umberson and Chen (1994) by using a 1986–1989 U.S. national sample study to examine parent loss over a 3-year survey interval. The researchers found that loss of a mother, in contrast to no such loss, was associated with a greater increase in psychological distress over time for daughters and sons, although additional moderator analyses suggested this effect applied to only particular subgroups. Sons who lost functionally impaired mothers to death experienced more distress than sons who lost unimpaired mothers, while daughters whose unimpaired mothers died experienced greater increases in distress than daughters who lost impaired mothers to death. Sons who recalled mental health problems of fathers in childhood also reported a greater increase in psychological distress upon the death of a father than did other sons or daughters.

Umberson (2003) also followed up this quantitative research with qualitative interviews of persons who had experienced the loss of a parent. These interviews provide even more striking evidence of the major life change that a parental loss can provoke. Most of the people interviewed spoke about the dramatic changes that their parents' death had created and how those who had not experienced parent death yet did not understand what they were going through. Respondents remarked on how little place had been made for filial bereavement in contemporary American society. Themes from the qualitative analyses of these interviews also revealed how the general societal underestimation of the impact of filial bereavement can also lead to marital misunderstanding and marital problems, which has been confirmed by quantitative analyses on this topic (e.g., Umberson, 1995).

Marks, Bumpass, and Jun (2004) explored linkages between adult child status and

parental well-being using data from a 1995 U.S. national survey of midlife adults. Results suggested women with a sole-surviving unhealthy mother reported more dysphoria than women peers who had two healthy parents. Furthermore, Marks, Jun, and Song (2001) also prospectively examined parental death and adult children's well-being using longitudinal U.S. national data. Results indicated that compared to matched-gender peers who continued to have two parents alive over a 5-year period, men and women who reported the death of their father and/or mother reported more problematic changes in psychological well-being.

### ***The Adult Child Role and Generativity***

There is very limited work considering how adult child status might be linked to adult generativity—probably due to the fact that generativity has been most typically conceptualized as involving attitudes and behaviors directed toward subsequent and not prior generations. One exception is a study by Peterson (2002) that looked at this linkage prospectively by using a California Adult Q-sort (CAQ) measure of psychosocial generativity among a sample of educated midlife women to examine social relationship factors 10 years later. This study found that CAQ scores at age 43 predicted greater investment 10 years later in intergenerational roles (e.g., daughter and mother) but not in nongenerational roles (e.g., sister and friend). More generative women reported less subjective burden caring for aging parents and more knowledge about community elder care programs. Marks, Bumpass, and Jun (2004) also explored the associations between having living parent(s) alive and/or having parents in poor health and attitudinal generativity. Findings indicated no significant associations across subgroups by adult child status. Additional quantitative studies, as well as qualitative work, in this area would enhance understanding of the ways in which experiences as an adult child can foster the development of generativity.

### ***Filial Caregiving and Psychological Well-Being***

Caregiving for parents is the most common type of family caregiving (Hirst, 2005; Marks, 1996b; Stone, Cafferata, & Sangl, 1987). The 2004 Caregiving in the U.S. Study (2004) found that 28% of caregivers in their national sample mentioned giving care to a mother, 8% to a father, and 7% to a mother-in-law. Caregiving for parents tends to be particularly common among midlife adults. Using U.S. national data collected in 1987 to 1988, Marks (1996b) found that about one in 10 U.S. adults between the ages of 35 and 64 reported providing some level of care for a parent either in-household or out-of-household during the previous 12 months. These estimates suggest that for many older parents, adult children are important members of their life course convoy of social support.

Most studies examining filial caregiving have concluded that filial caregiving (in contrast to no caregiving) is associated with an increased sense of burden and psychological distress (e.g., Brody, 1990; George & Gwyther, 1986; Horowitz, 1985; Hoyert & Seltzer, 1992; Marks et al., 2002; Schulz et al., 1990; Schulz & Williamson, 1991; Stephens & Townsend, 1997; Strawbridge, Wallhagen, Shema, & Kaplan, 1997; Young & Kahana, 1989). However, as scholars increasingly examine caregiving as a dynamic life course role, as well as subgroup differences among adult child caregivers and parent care recipients, a more nuanced understanding of the associations between filial caregiving and psychological well-being has emerged.

First, regarding filial caregiving as a dynamic life course role, a number of recent studies have focused specifically on the transition to filial caregiving using a prospective research design. Seltzer and Li (2000) examined data from a representative sample of adult daughters caring for older adults in Wisconsin and found that entry into filial caregiving was associated with a decline in personal mastery. Similarly, Turner, Killian, and Cain (2004) examined the transition to caregiving for parents using data from 952 women ages 50 to 59 participating in the 1992 and 2000 Health and Retirement Study. They found that the transition to a caregiving role for a parent was associated with increases in depressive symptoms. Lawton and colleagues (2000) also prospectively examined the transition to caregiving among a relatively small sample of daughters and daughters-in-law and found no evidence of negative mental health effects. Marks and colleagues (2002), using U.S. national data, found that transitioning into filial caregiving both in-household and out-of-household was associated with negative effects on a number of dimensions of mental health for both women and men; however, out-of-household caregiving was also associated with higher levels of purpose in life among women. Overall, in-household filial caregiving was more problematic for women's than men's psychological well-being, but out-of-household filial caregiving was more problematic for men's than women's psychological well-being. Finally, Hirst (2005) conducted a prospective investigation of becoming a caregiver, continuing caregiving, and multiple types of exiting caregiving using data from 3,000 would-be caregivers, 2,900 former caregivers, and 11,100 noncaregivers participating in the British Household Panel Survey during the 1990s. Results of this study indicated that the onset of caregiving for a parent or parent-in-law living in another household (in contrast to no caregiving) was associated with higher odds of problematic levels of distress for both men and women. Onset of care and the end of care (in contrast to no caregiving) were found to be the most distressing periods of the caregiving career.

In addition to examining subgroup differences among filial caregivers by gender and the stage of their caregiving career, other subgroup differences in the associations between filial caregiving and psychological well-being have been explored. For example, Li, Seltzer, and Greenberg (1999) found that levels of mastery remained high when the caregiving role was shared with a sibling, and levels of mastery decreased if the daughter had other caregiving responsibilities and the parent care recipient had elevated behavior problems.

A few studies have considered subgroup differences among caregivers in terms of whether they provide care to a parent versus a parent-in-law. Overall, results from these studies have generated inconsistent results. Spitze, Logan, Joseph, and Lee (1994) found that adult children reported more distress when caring for a biological parent than caring for a parent-in-law; however, Ingersoll-Dayton, Starrels, and Dowler (1996) found no role relationship differences in caregiver stress. Peters-Davis, Moss, and Pruchno (1999) found few well-being differences between coresident caregiving daughters and daughters-in-law and their husbands. Furthermore, Marks, Lambert, and Choi (2002) found no negative effects on psychological well-being among caregivers for parents-in-law compared to noncaregiver peers.

*Links between Empirical Findings and Theory.* Studies on experiences as an adult child further demonstrate primary insights from the life course perspective, bioecological systems theory, and structural symbolic interactionism's role-identity theory. For example, the literature linking the adult child role to adult well-being provides evidence that this relationship is typically experienced as a life course relationship; in other words, the effects of this relationship are not limited to the time when the target person is a child. Also,

research on the psychological effects of parent death is congruent with attention from the life course perspective and structural symbolic interactionism's role-identity theory on how family transitions and changes in family roles can influence individuals' development. Furthermore, consideration of linkages between adult-child parent relationship quality and psychological well-being is fitting with bioecological systems theory's emphasis on interactional processes as influencing individuals' development.

## **Relationships with Other Kin in Adulthood, Psychological Well-Being, and Generativity**

### ***Relationships with Other Kin and Psychological Well-Being***

While there are sizeable empirical literatures on linkages between adults' partnership and parenthood relationships and their psychological well-being, as well as a smaller literature on the psychological implications of being an adult child, there is much less research examining linkages between other types of kin relationships and adult psychological well-being. In this section, we review the limited research available on linkages between sibling relationships and psychological well-being, as well as grandparent-grandchild relationships and psychological well-being.

**Siblings.** The sibling relationship is for most adults the most longstanding family relationship across the life course. Jackson (1997) reported that having a sibling (in contrast to being a singleton) is associated with better mental health among adults from a variety of ethnic groups, including non-Hispanic Whites, African Americans, and Mexicans (though not Puerto Ricans) (Jackson, 1997).

Studies also have indicated that characteristics of individuals' sibling relationships are associated with adults' psychological well-being. Riggio (2000) developed a new measure of sibling relationships, the Lifespan Sibling Relationship Scale (LSRS), to attempt to address the dearth of studies on sibling relationships in adulthood. Scale factors include frequency of positive behavior toward siblings, affect toward siblings, and beliefs about siblings and sibling relationships. Using this measure, Riggio found that more satisfactory sibling relationships were associated with better psychological well-being (Riggio, 2000). Furthermore, Milevsky (2005) found that more sibling support was associated with adults' lower levels of loneliness and depression, as well as higher levels of self-esteem and life satisfaction. Also, more sibling support was associated with adults' better outcomes by compensating for some of the psychological disadvantages of receiving lower levels of support from parents and peers. Stocker, Lanthier, and Furman (1997) also found that more warmth, less conflict, and less rivalry within sibling relationships in young adulthood were associated with siblings' better mental health.

Siblings of persons with disabilities have unique experiences in sibling relationships, in part, because they participate in a family where special attention is often focused on a particular sibling, and also because parents often make it clear to a healthy sibling that they might be "next in line" to provide care to the affected sibling. Seltzer, Greenberg, Krauss, and colleagues (1997) studied siblings of adults with mental retardation and compared them with siblings of adults with mental illness. They found that siblings of adults with mental retardation had higher scores on a composite measure of Ryff's psychological well-being subscales than siblings of adults with mental illness. Moreover, among siblings of adults with mental retardation, more emotional closeness with their affected sibling was associated with higher levels of psychological well-being, whereas among siblings of adults with mental illness, perceiving a less pervasive impact of the affected sibling on their life was associated with higher levels of psychological well-being.



*Grandparents and Grandchildren.* The grandparent role is another common role of midlife and older adults, yet relatively little research has emerged specifically examining how this role is associated with grandparents' psychological well-being outside of more recent research on custodial grandparenting (see caregiving for other kin section below). One of the only studies available in this area is by Reitzes and Mutran (2004), who found that having more positive grandparent role identity meanings were associated with greater self-esteem and less depression among grandparents. In addition to the necessity of additional studies on linkages between grandparenting and psychological well-being, there is also a need for research exploring how being an adult grandchild can influence adult developmental outcomes, including psychological well-being and generativity.

The need for this research is particularly critical given demographic changes in grandparent-grandchild relationships, which render it increasingly likely that being an adult grandchild and having an adult grandchild has developmental consequences. First, with greater longevity and greater family emphasis on intergenerational relations extending across at least three, if not four, generations, a growing number of adults are experiencing multiple levels of intergenerational relationships (Bengtson, 2001). Additionally, as more grandparents assume primary caregiving responsibilities for grandchildren (Fuller-Thomson, Minkler, & Driver, 1997), it also might be expected that the relationships between grandchildren and grandparents are becoming increasingly salient in the 21st century. Also, grandchildren are more commonly becoming caregivers for aging grandparents. The 2003 Caregiving in the U.S. Study found that 9% of adult caregivers in that study mentioned a grandparent as the main person for whom they provided care (Caregiving in the U.S., 2004). These trends suggest the importance of examining the potentially reciprocal developmental influences across this important relationship throughout the life course.

### **Other Kin and Generativity**

Relatively little has been written about how relationships with other kin can promote generativity, with the exception of some suggestive work related to childless women. These studies have found that women without children often report very rich family lives that include major generative connections to siblings, nieces, nephews, and other kin (Allen, 1989; Rubinstein, 1996). For example, Rubinstein (1996) reported on in-depth interviews with 109 childless older women in older age. Many of the participants reported having attempted to create ties with siblings' children or developing family-like ties with younger nonrelatives. Never married childless women were quite generative through family-like relationships, as well as through the creation of a social legacy through careers in supportive professions like teaching, nursing, and being a secretary. Overall, these women indicated a strong urge to pass on a legacy, and those who felt there was no one or no purpose for doing this expressed sadness and sometimes despair.

Another interesting, innovative study related to this issue is that of Milardo (2005), who explored uncle-nephew relationships using in-depth interviews in New Zealand and the northeastern U.S. (Maine). He explicitly used dimensions of generativity—including mentoring, doing the family work of serving as mediators of intergenerational disputes and differences, meaning keeping (of family history), and serving as fellow travelers (in friendship)—to code and understand the narratives of his respondents. Considerable evidence emerged that for study participants, nephew-uncle relationships were non-trivial, often of longstanding duration, and very important to the development of both uncles and nephews.

### **Caregiving for Other Kin and Psychological Well-Being**

Overall, there has been much less scholarship exploring individuals' experiences of caregiving for kin other than spouses, parents, and children (for exceptions, see Gerstel & Gallagher, 1993; Marks, 1998; Mui & Morrow-Howell, 1993). Nevertheless, there has been considerable research during the past decade regarding the dynamics and impact of one increasingly recognized family arrangement—grandparents providing major custodial caregiving for grandchildren. In the 2000 U.S. Census, 2.4 million adults (two-thirds women) identified themselves as “grandparent caregivers” for grandchildren younger than 18 years of age, representing about 8.6% of all U.S. households (Simmons & Dye, 2003). Additionally, more than one in 10 American grandparents reported raising a grandchild for at least six months, with most of these grandparents providing care for three years or more (Fuller-Thomson et al., 1997).

A growing body of literature has documented the deleterious psychological effects of assuming full-time care for grandchildren. Comparisons of adults with and without this responsibility have shown that grandparent caregivers are almost twice as likely as their peers to report clinically relevant levels of depression (Fuller-Thomson & Minkler, 2000), and those most at risk are younger, women, in poor health, and new caregivers (Minkler, Fuller-Thomson, Miller, & Driver, 1997). Smaller homogeneous samples also provide evidence that some grandmothers raising grandchildren experience lower levels of psychological well-being (e.g., Burton, 1992; Giarrusso, Feng, Wang, & Silverstein, 1996; Jendrek, 1993; Kelley, 1993; Minkler & Roe, 1993; Minkler, Roe, & Price, 1992; Shore & Hayslip, 1994; Strawbridge et al., 1997).

As in the studies on the psychological effects of filial caregiving, research on grandparents providing full-time care for children also has recognized the potentially dynamic nature of this role. In a study of transitions into and out of grandparent-grandchild coresidence, with the implicit expectation that this arrangement indicated caregiving by the grandparent, Szinovacz, DeViney, and Atkinson (1999) used U.S. national data across all adult ages and found that grandchildren moving into the household increased depressive symptoms among grandmothers. Grandchildren's transitions into the household also decreased happiness for both grandmothers and grandfathers. Interestingly, grandchildren leaving the household also led to reduced well-being among grandfathers. The finding that custodial care for grandchildren is somewhat less detrimental for the psychological well-being of grandfathers than grandmothers is supported by another study that matched grandfathers and grandmothers on care for grandchildren (Kolomer & McCallion, 2005). This study found lower levels of depression among grandfathers than grandmothers, but no gender differences in mastery. These gender differences might be explained by considering the typically gendered nature of family carework (see Horowitz, 1985, for a discussion). For example, grandmothers might suffer more because they take on even more responsibility for children's custodial care than grandfathers, engage in even more challenging personal care tasks (e.g., change diapers, bathe, and interact with schools about behavioral challenges and medical authorities about health challenges), and provide care with less social support from others (e.g., a spouse or other adult children).

A study by Blustein, Chan, and Guanais (2004) suggests that in addition to gender, other characteristics of grandparents can make them more or less vulnerable to experiencing higher levels of psychological distress. This study drew on U.S. national data from grandparents ages 53 to 63 and tracked the movement of grandchildren into and out of grandparents' homes between 1994 and 2000. Overall, grandparents had a greater probability of elevated depressive symptoms with grandchildren in their home, but single grandparents—particularly single women of color—and those without coresident adult

children experienced the greatest probability of elevation in depressive symptoms when a grandchild was in residence.

Pruchno and McKenney (2002) drew on data from 867 grandmothers raising a child without the child's parent present to further explore race/ethnicity as a contextual factor for the associations between custodial grandparenthood and psychological well-being. Results revealed similar patterns of variables predicting positive and negative affect among Black and White grandparents, although findings also indicated that the caregiving role was of greater centrality among Black grandmothers, and the quality of relationship with grandchild's parents was related to caregiving satisfaction for White grandmothers, but not Black grandmothers.

Examining differences within ethnic groups in associations between custodial grandparenthood and psychological well-being, Goodman and Silverstein (2005) found that among Latina custodial grandmothers, higher levels of acculturation were associated with more positive affect, and lower levels of acculturation were associated with lower negative affect. Nevertheless, less acculturation was associated with higher life satisfaction. Differences favoring the more acculturated mothers were explained by the finding that more acculturated grandmothers were likely to have more social resources, be married, and have the grandchild's parent at home; furthermore, fewer of the more acculturated grandmothers were assuming care because of the parent's substance abuse problems. The difference favoring less acculturated mothers in terms of life satisfaction might reflect the fact that less acculturated Latina grandmothers might perceive caregiving for a grandchild as more part of a traditional woman's role, whereas more acculturated Latina grandmothers might view custodial grandparenting to be more in conflict with other desired activities.

Results from Szinovacz and Davey's (2006) study on grandchild care and grandparents' retirement status present an additional contextual factor that can pattern associations between caring for grandchildren and adults' psychological well-being. Using data from the U.S. Health and Retirement Study, they found that retirement moderated the influence of grandchild care obligations on depressive symptoms, although the nature of this interaction differed somewhat for men and women. Among retired men, not having (versus having) grandchild care obligations was associated with heightened well-being, whereas among women, continued employment protected against the potential negative effects of having extensive grandchild care obligations on well-being.

*Links between Empirical Findings and Theory.* Overall, the research linking relationships with other kin beyond spouse, parent, and adult children to well-being and generativity is further suggestive of the life course perspective, bioecological systems theory, and structural symbolic interactionism's role-identity theory. Congruent with the life course perspective and bioecological systems theory, findings suggest the importance of considering the developmental implications, as well as the cultural and role contexts, of family relationships beyond the nuclear family. Additionally, structural symbolic interactionism's role-identity theory indicates the promise of deepening understanding of how being a grandchild, grandparent, aunt, and uncle—as roles rooted within family structures—can influence adult psychological well-being and generativity.

### **Caveats and Conclusions**

This chapter has provided an overview of broad theoretical perspectives that encourage attention to how family relationships can impact the adult development in terms

of psychological well-being and generativity. It also has selectively reviewed the current literature related to family relationships and psychological well-being, family relationships and generativity, and generative family caregiving and well-being. Despite the strengths of this review—including the breadth of family relationships that it addresses, its inclusion of both psychological well-being and generativity as important developmental outcomes, and its tracking of historical trends within several areas of the literature—important limitations remain.

First, this review includes many studies with the shared limitation of using self-report data on family relationships, psychological well-being, and generativity. Because this methodological feature might bias the veridity of associations reported, additional work that includes other types of data offers potentially important contributions to this area of research. For example, future studies might gather observational data on the quality of interactions among adult family members and test for linkages with individuals' self-reported psychological well-being. Additionally, this review must be considered as culturally and historically delimited; it emphasizes literature from mainly the U.S., Canada, the United Kingdom, and occasionally European countries across the last 20 years. Both a life course perspective and bioecological systems perspective would predict that there are likely differences in developmental outcomes across national and subgroup cultural contexts that we have not been able to access and address here. Additionally, within the literature on family relationships and well-being, there are numerous additional studies that examine important issues of how family roles (including caregiving roles for family members), employment roles and characteristics, and other community roles interact to impact well-being. Given limitations of space and comprehensiveness, we were not able to include attention to the literature that addresses these important contextual interactions.

Nonetheless, the literature reviewed here provides ample evidence supporting the propositions of the life course perspective, bioecological systems theory, and structural interactionism's role-identity theory. These perspectives provide rationale and suggest mechanisms whereby family relationships can influence adult development—for better or for worse, and sometimes at the same time. Yet many gaps remain for future research to fill. First, future empirical studies, guided by contextual principles of the life course perspective and bioecological systems theory, might further consider developmental consequences of the growing diversity in family relationships, such as being a partner and a parent in cohabiting relationships, remarriages, two household relationships, and same-gender relationships. Similarly, research on caregiving might fruitfully address the experiences of caregiving in a greater variety of family roles, such as caring for a grandparent, sibling, or niece/nephew. Second, guided by the life course perspective's proposition that it is important to consider cumulative effects and role trajectories over time, life histories in roles as partner, parent, adult child, sibling, grandparent, uncle, aunt, "fictive" kin, and other family relationships warrant further exploration for their cumulative impact on psychological well-being and generativity. Third, it would be valuable for future research to continue to move beyond assessments of negative and positive affect to explore a larger array of psychological well-being outcomes that represent more explicitly developmental outcomes (e.g., personal growth, meaning in life, positive relations with others, self-acceptance, environmental mastery, autonomy, as well as generativity). Attention to these dimensions would better inform our understanding of ways in which interlocking family members influence trajectories of adult development. Fourth, subgroup differences within and between adults' experiences of particular family roles merit additional scholarly attention. For example, the importance of socioeconomic and cultural context for

shaping potential differences in developmental outcomes needs further exploration in almost all areas of the literature covered in this chapter. Fifth, given the changing role expectations for both men and women in family life, continued explicit attention to gender differences remains in order, notwithstanding evidence of gender convergence in the effects of family roles on well-being. Finally, additional attention to age differences in family influence also would help to inform a more developmentally nuanced understanding of how family relationships shape individuals' life course trajectories.

Despite these critical directions for future research, current research on family relations and adult development overall suggest that family relationships (or lack of family relationships) help pattern profiles of adults' psychological well-being and generativity. By drawing on well-developed theories of individual and family life, as well by orienting empirical attention to gaps identified from previous decades of research, scholars can enhance the depth and breadth of understanding important familial contexts for adult development.

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