This document is comprised of papers presented at a symposium on Adult Development in Women. A paper entitled "Women in the Middle Years" reviews the major findings on adult women, and describes what an adequate theory of women in the middle years should account for. Mental health, effects of marriage, children and work, and the interrelationships of these factors are discussed. In elucidating critical stages, the authors consider a developmental framework focusing on women's role patterns and life stages within the cultural context would be appropriate. The traditional consideration of chronological age, and stereotypes and myths about women, especially the mind-body relationship and the need for marriage and children have impeded model development. Power, and its relationship to a sense of personal control, are central considerations. A paper, "Some Sociological Perspectives on Adult Women" discusses personal roles, multiple roles, and coping and support systems. The conclusion reached is that theories based primarily on data from men do not apply to issues confronting women, and that life tasks, including the "marker events" which trigger a person's concerns with each of these tasks, serve as a focus from which to study the middle years. (KS)
Eastern Psychological Association meetings: April, 1976

Symposium: Will the Real Middle-Aged Woman Please Stand Up?
Toward an Understanding of Adult Development in Women

Chair: Rosalind C. Barnett
Radcliffe Institute

Papers:

Women in the Middle Years: Conceptions and Misconceptions
Rosalind C. Barnett
Grace K. Baruch
Radcliffe Institute
Radcliffe Institute

Some Sociological Perspective on Adult Women
Susan S. Dibner
Radcliffe Institute

Psychological Effects of the Climacteric in Women
Mary Brown Parlee
Barnard College

Discussants:

Rosalind C. Barnett
Radcliffe Institute

Lotte Bailyn
Massachusetts Institute of Technology
It is debatable whether researchers are more handicapped when they work in the absence of theory or with inadequate theories. Those studying the middle years in women have to deal with both situations.

In 1975, Orville Brim and Ronald Abeles, summarizing the activities of the Social Science Research Council's Committee on Work and Personality in the Middle Years, noted that the Middle Years period was a largely unexplored phase of the human life cycle. With respect to the middle years in women, the past year or so has seen the publication of many important and provocative studies, some of which we will discuss, but with the possible exception of work on depression, the findings seem scattered, unrelated, and non-cumulative; probably because of the theoretical shortcomings just referred to. Remedying these shortcomings is crucial because several factors lead us to expect a proliferation of studies about adult women: (a) social changes arising from problems of overpopulation and from the increasing labor force participation by women; (b) the dilemmas, decisions, and conflicts faced by women who are living through these changes, and (c) concern about the rising incidence of depression and other mental health problems in adult women.

In this paper, we will review briefly some of the major findings on adult women and then will indicate what an adequate theory of women in the middle years must account for. The areas we will focus on include mental
health, effects of marriage, children and work, and the interrelationships of these.

Findings of survey-type studies of mental health indicate that women, especially those who are married, show more symptomatology relevant to depression and anxiety than do men. For example, in 1960, Gurin, Veroff, and Feld found women compared with men to be more negative and passive, have a less positive self-concept, feel less adequate as parents, and be more dissatisfied with their marriages. Recent careful re-analyses of mental health data indicate that if one considers all forms of mental illness, such as alcoholism, women are no sicker than men, but they do suffer more from depression, neurotic disorders, and functional psychoses, and these findings are not due to artifacts of reporting nor to women's greater willingness to admit symptoms, nor to biases of mental health professionals (Guttentag, 1976). Depression is of special concern, affecting more women at younger ages than formerly.

Researchers whose primary focus is on aspects of well-being other than symptomatology nevertheless come up with consistent findings. In the 1950's, Weiss and Samuelson asked a sample of adult women, "What are the things you do that make you feel useful or important?" They reported, "A rather substantial proportion of women in the older age groups said that nothing made them feel useful or important" (Weiss & Samuelson, 1958).

Marjorie Lowenthal and her colleagues (Lowenthal, Thurner, & Chiriboga, 1975) studied four groups of men and women selected to represent different life transitions — high-school seniors, newlyweds, so-called "empty nesters", and pre-retirement couples. The middle aged — empty nest — women (note the term "empty nest") stood out from the other seven groups by their distress.
They had poorer self-concepts, were lowest in life satisfaction, most negative toward their spouses, most pessimistic, and highest in existential despair.

As persons facing the empty nest, the women in Lowenthal's study were mostly married, of course, and Gove and Tudor (1973), Radloff (1975), and others also report that it is results for married women that are responsible for findings that women have more problems than men. Thus, one needs to examine the effects of role pattern, that is marital status, children, and work, in order to understand the situation of women. Was Jesse Bernard correct in asserting that marriage and children are a "health hazard" for women (Bernard, 1972)?

Some important evidence on this point comes from recent, carefully done studies of depression. It appears that the groups most at risk are married women, but specifically those with young children living at home. It adds greatly to the risk also to be a single parent with a small income. (These often occur together.) It also appears that previous assumptions about the association of depression with the empty nest phase are wrong; women whose children no longer live at home are less depressed than are women living with their children (Guttentag, personal communication; Radloff, 1975).

Research that focus on well-being, however defined, rather than on mental illness, also yields similar findings concerning effects of marriage, children, and work. For example, Judith Birnbaum (1975) compared intellectually able middle-aged married women with children who had not worked since the birth of their first child to married professional women with children and to single professional women. The homemakers felt less satisfied and had lower self-esteem than either married or single professionals. They even felt less attractive than the married professionals. Sears and Barbee's (1975) recent
study of Terman's gifted women, who are now in their 60's, also speaks to these points. The most highly satisfied group were those who were both heads of households and income producers -- that is, single, widowed, or divorced women who worked and were economic providers. Childless women were more satisfied with their role pattern than were women with children.

To the surprise of many, especially the researchers themselves, it appears that the best strategy for a woman concerned about her mental health and well-being is to focus her life around work rather than around children, if she has to choose. Gove and Tudor (1973) argue, in their interpretation of mental health data, that having two arenas to function in, work as well as family, is what protects men from mental illness. If one aspect of life is not going well, satisfaction, self-esteem, and gratifications may still be obtainable in the other arena.

However, if one simply divides women into two groups, working and non-working, significant differences in mental health variables often are not found. One must also examine the nature and structure of the work and the woman's attitude toward working or not working. Moreover, it is becoming increasingly clear that there are complex interactions of variables that need to be considered. This point is illustrated by a study of women living in London by George Brown and his colleagues (Brown, et al., 1975). They were interested in factors influencing whether a woman became a "case" or not, that is, showed symptomatology. They looked at such factors as socioeconomic status, number and age of children, work, availability of support systems, and recent stressful life events. There were many interaction effects. They found that there were social class differences in their measure of stressful life events only for women who had children living at home. Stressful life events included,
for example, loss of a loved one, a child in trouble with the police, eviction. And for women who had not faced recent stress, working had no effect upon whether they developed symptoms or not. In the presence of stress, employment did prevent the emergence of symptoms. The best mitigator of stress, however, was support from a confidante, someone with whom the woman had an intimate and close relationship. (Although theoretically another woman could serve this function, in fact all confidants were male, usually a husband.) When one looked only at women with children living at home who had no confidante but had experienced severe stress, employment emerged as a crucial variable -- for such women, 79% of those who did not work developed symptoms, compared with only 14% of those who worked. So these findings illustrate how complex women's lives are, how many components are relevant to their well-being, and how easy it is to miss the crucial ones.

At this point, having reviewed some of the more important studies of women in the middle years, we want to look at three issues relevant to the problem of building a theoretical framework: (a) what must an adequate theory account for, (b) what factors have impeded the development of such a theory; and (c) what is the current status of theory in this area?

An adequate theory concerning adult women would, to summarize briefly, need to account for:

1. Incidence of mental health problems as they vary with marital status, work status, and life stage with respect to children's age and dependency.

2. Variations in satisfaction, self-esteem and other components of well-being in relation to these same patterns.

More specifically, the theory must account for findings on the positive effects of the empty nest, of singleness, of career-commitment, and being an economic provider. Such a theory must of course take into account the social...
context and the culture. For example, it is unlikely that having young children at home would affect a woman similarly regardless of whether she is in an isolated suburban household or a commune.

What has impeded the development of such a theory? One important reason lies in the pervasiveness of stereotypes and myths about women. As Mary Parlee (1975) has shown, certain subtle assumptions about women are widely shared although not always stated — that the mind-body relationship is somehow closer for women than for men, that biological influences are thus stronger for her. Women's lives are too often seen solely in terms of their reproductive role. Hence, Lowenthal and her colleagues labeled the middle-aged sample the "empty nest" women. It is true that these women were selected because they were facing this major transition, but the terminology has certain negative overtones that would not be true of other labels, such as "about-to-be-free" women.

Another consequence of this reproductive emphasis is the common use of the term "menopausal women" and the special attention given to menopause as the central event of the middle years. Neugarten's work (1968) showed some time ago that women who were actually experiencing menopause or who were past it did not see it as a major nor distressing event, and a recent study of English women physicians found that 90% of these busy women reported no problems related to menopause ( ). Of course the assumption, which approaches a national mythology, that marriage and children are necessary for the well-being and functioning of women arises from the same focus on reproductive role and persists despite consistent findings to the contrary. An example of this situation is provided by Lowenthal et al.'s interpretation of the findings for the middle-aged women in her sample. We have already indicated their high level of distress. These women reported to the interviewers that they were looking
forward to the empty nest. The researchers could not accept this self-report as valid and suggest that the women's anxiety and despair about their children leaving home must be so deep it simply could not be tapped even in lengthy interviews. In addition, the distress these women felt was interpreted as potential evidence for Freud's belief that middle-aged women are just worn out developmentally, and that they often suffer from resurgent unresolved Oedipal conflicts. Clearly, the otherwise impressive work by Lowenthal and her colleagues deserves better theoretical tools.

Are there newer, more appropriate theories in the wings that fit the findings we have cited? Not to our knowledge. Consider two recent theories of adult development, those of Erikson (1959) and Levinson (1974). These share two characteristics -- they are constructed by men, primarily about men, and they focus on chronological age, that is, age progression in personality issues. Erikson, for example, associates the issue of identity with late adolescence and early adulthood; he deals with women by suggesting that the resolution of their crisis occurs after choice of a mate. Not only are they thus deviants from the male pattern, but not marrying implies never resolving one's identity. Furthermore, it appears that questions of personal identity are in fact of special relevance to women whose children are becoming independent, e.g., the late 30's or early 40's, although again this depends upon social conditions and the particular woman.

Similar problems of fit occur with respect to Levinson's theory. He views one's twenties as a time for entering marriage and the world of work; the 30's are identified with establishing oneself. Toward 40 there is reconsideration of one's commitments and often an attempt to free oneself from a previously central mentor, the famous BOOM, or becoming one's own man. It is hard to know how to think of women within this theory -- a woman may not enter the world of work until her late 30's, she seldom has had a mentor, and even
women with life-long career commitments rarely are in a position to reassess their commitment pattern by age 40.

It is certainly true that men and women share certain biological universals. Near 40, both may have a sense of time running out and may have to deal with adolescent children and elderly parents. Yet if one begins with a consideration of the realities and variations of women's lives, it is unlikely that chronological age would be seen as the central variable. We think it fair to say that Levinson's current interest is in finding associations between particular ages and particular personality issues that would apply to women, thus keeping age as the central variable (Levinson, personal communication, 1976). We believe it is more fruitful to focus on women's role patterns and life stages; indeed, Lowenthal found that age differences in the four groups facing transitions were much less significant than sex differences, and were particularly minor for women.

It is probably premature to aim directly at deriving a grand and comprehensive theory of adult development for women. Rather, the state of present knowledge suggests the wisdom of identifying fruitful new concepts and approaches that could ultimately contribute toward better theory. The next paper focuses on these, for example, stress, coping, support systems and other often overlooked aspects of the social context. Here we will briefly point to one other area and will follow Brim (1975) in labeling it the sense of personal control.

This central concept refers to whether one believes outcomes are a consequence of or independent of one's own behavior and includes such related concepts as attributions, locus of control (Rotter, 1966), and learned helplessness (Seligman, 1974). Researchers on depression suggest that many women are socialized to adopt a passive stance which contributes to the sense of hopelessness and
helplessness characteristic of depression. Conversely, a strong sense of personal control is related to a sense of competence, to self-esteem, to taking credit for one's successes and seeing ways to overcome failure. The sense of control cannot develop in isolation from reality however! In discussing what gives one a sense of the self as competent, M. Brewster-Smith (1968) cites opportunity, respect, and power, and sees power as central because it can ensure opportunity and respect. Power that the self recognizes as legitimate is obviously a protection against helplessness and may also improve resources for coping, including support from others, and access to satisfying work. No adequate theory of women in the middle years can ignore the issue of power.


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Psychological issues are, of course, embedded in societal values, norms and roles and these are frequently different for adult men and women. One reason a developmental model such as Levinson's is not generalizable to adult women is that critical stages for men are those primarily in the area of work while critical stages for women are in terms of bearing and rearing children. There are two additional reasons why models developed on men are not applicable to women. First, they assume that important life events such as marriage and occupational commitment occur in a linear progression. Second, they assume that these life events occur at approximately the same age.

As more adult women pattern their lives to combine careers with motherhood, the linear progression through major life stages becomes variable and complex. Some women marry early, bear children early, and start working in their 20's. Others remain at home until the children enter school and begin work in their 30's; other stay home until the children are independent, entering the labor market in their 40's or 50's; still others do not marry or bear children until after their careers have been established, thus working in their 20's and becoming new mothers in their 30's. Some never marry; others have no children. In light of the varying social calendars and clocks of adult women, age theories are not explanatory.

In fact, the assumption that major life events occur at approximately the same chronological age leads quickly into the difficulties of labeling.
Individuals who vary from the most frequent role pattern are seen as deviant--for example, women who marry in their 30's and begin bearing children at 35 years of age.

Sociological and psychological literature suffers from other serious limitations and assumptions that militate against developing a theoretical understanding of women in their middle years. This paper will discuss the literature concerning the following issues relevant to adult women: (1) personal roles, (2) multiple roles, and (3) coping and support systems.

**Personal Roles**

A limiting assumption that a woman's personal life is synonymous with marriage or loss of marriage permeates the professional literature. Studies of women who are single or no longer married most frequently focus upon the loss or absence of a husband. Reflecting our society's belief that marriage is good and right for adult women is the belief that singleness is merely the negative state of marriage. A focus upon singleness as a potentially viable or desirable status is absent, although recent studies give indication that being single might be a more positive role for some women than being married (Birnbaum, 1975; Sears and Barbee, 1975).

There are many studies of marriage, but it is unclear as to what the role of wife or mother is within our society and how individual perceptions of this role are related to life-satisfaction or a sense of well-being.

The confounding of romantic values with problems of daily living within marriage may be a large part of the health hazard Bernard suggests marriage to be. It is clear that societal expectations for marriage have an effect upon
how women evaluate their own role performance. Elder and Rockwell, in a study of 40-year-old women who married "early", "on time" or "late" showed that the felt consequences of the timing of these events were forceful enough for respondents to conclude that it is best to marry "on time" when one is not too old to enjoy children. Parenthetically, in the study a "late" marriage occurred when a woman was 23 years old or older.

Once in the role of housewife, illusion comes face to face with reality. Oakley analyzed the role of housewife as a work role (Oakley, 1974). She separated the role of mothering from that of housekeeping. When questioned about their work, women reported the same negative reactions to housework that factory workers reported in relation to assembly-line jobs. The work was seen as monotonous and fragmented, and the pace was too demanding (Oakley, 1974; Chinoy, 1955). Since Birnbaum reported that life satisfaction and self-concept were lower for full-time homemakers than those who combined work and marriage, does this suggest that the structure of the housework role is enough to effect the psychological state of role occupants?

The relationship between social structure and psychological well-being is supported by the work of Kanter who postulates that the structure of work, not one's sex, is crucial in determining the psychological characteristics of individual workers. In looking at men and women in similarly low-level positions with no possibilities for advancement, she found similar psychological patterns such as lack of aspiration and low motivation (Kanter, 1975).

There are, of course, individual differences among adult women in relation to satisfaction with their housewife role. Being a mother as well as a wife complicates the issues. Pearlin found, that for some women, homemaking was a source of pleasure and pride while others were disenchanted, and saw the
role as an unchallenging, unrewarding trap. The disenchantment with the homemaker role increased with the number and young age of children at home. Guttentag states that "a house full of children is one of the most depressing things in the United States" (Guttentag, 1976).

The natural conclusion from such empirical findings is not that child-rearing should be abandoned in the name of mental health, but that the roles and values associated with child-rearing need empirical examination free from limiting biases which equate womanhood with motherhood. Women as well as researchers have assumed that the wife and mother roles are the ones through which women will find fulfillment and such assumptions have prematurely limited research and a theoretical understanding of adult women.

Recently, Ann Landers asked her readers with children to help a young couple decide whether or not they should have a child. Seventy percent of those who answered her question, "Would you do it again?" said, "No." One woman wrote, "...Do you want a child who will be everything you weren't? Someone whose achievements you can brag about? Do you want company in your old age? Forget it..." (Landers, 1976).

What do women get from child rearing? As it is now structured, the mother role may be highly guilt-producing for women. When children do not meet their parents' expectations, or when social climates change so that young adults do not behave as those of the older generation would have them, it is the mother who is likely to see this as her fault (Lazarre, 1976; McBride, 1973).

Part of this guilt may come from what Strober calls the "mind set of the community" (Strober, 1975). Changes in women's roles do not occur in isolation and are highly dependent upon changes in men's roles and institutional policies.
within society. Last winter, in my own community, the local elementary school sent all the children home early because of heavy snow. The assumption that mothers would be home at noon was so accepted, that many 5 and 6 year olds were sent home to empty houses. Mothers who work are made to feel deviant by such community expectations.

We need more empirical data on major adult roles such as singleness, marriage, motherhood and the interplay of these roles with the larger community. As the literature has been limited by an overriding focus on the positive aspects of being a wife and mother, it has also been affected by a focus on the negative consequences of women occupying multiple roles.

The negative aspects of women's participation in multiple roles has lead to the generation and application of such concepts as role conflict, whereby a woman may be caught between conflicting obligations to her family and her work; role ambiguity, whereby the requirements of being a good homemaker or mother are unclearly defined, leading to stress; multiple role strain whereby a woman may find it difficult to fulfill all the expectations of her various roles; status inconsistency whereby a woman may experience difficulties because she occupies multiple statuses as wife, mother, student and woman; and status contradictions, whereby two statuses are contradictory - for example, being a woman (low status) and a judge (high status) (Hochschild, 1973; Hughes, 1945; Lipman-Blumen and Tickamyer, 1975).

It is helpful to consider the obverse of role conflict, namely role compatibility or role complementarity. By occupying multiple roles, women have been reported as having additional arenas of life from which to gain stimulation and positive feedback. Thus, a woman may be potentially better off psychologically if she does not seek all her satisfactions from her wife and mother roles.
Also, working has been shown to be related to women gaining more power in terms of decision-making within the family (Blood and Wolfe, 1960). Following this promising approach, Pleck talks about role articulation -- how a woman's various roles fit together with men's roles and how these, in turn, affect one another (Pleck, 1975).

Coser and Rokoff point out how the articulation between work and motherhood can adversely influence a woman's motivation to succeed in a career. In her efforts to combine work and family responsibilities, a woman may select a position in which she does not "get ahead". Worrying about how she could take care of her children should they become ill, the working woman may tend to select work in which commitment is low, and she can be easily replaced should the need arise. The authors discuss the irony of such a decision, for in academic positions, the greater the commitment to work, the greater the possibility to rearrange one's hours (Coser and Rokoff, 1970).

Pearlin's empirical data suggests, to the contrary, that among working mothers, maternal conflict is high when commitment to work is high (Pearlin, 1975). Given the limited number of studies employing the concept of role articulation, it is not yet clear how a woman's multiple roles converge, and affect her over-all sense of well-being. However, the approach seems particularly fruitful. Bailyn's work points to the importance of looking at the relationship between a woman's role and that of her husband. She suggests that marital satisfaction is, in part, a function of the husband's commitment to his work and marriage. When wives were positive about their employment, marital satisfaction was high if husbands were family-oriented and low if husbands were work-oriented (Bailyn, 1971).

In viewing the compatibility of work and family roles, Pleck discusses how the boundaries between roles differ for men and women. For women, family
concerns are allowed to intrude upon her work. Even when working, women must give family needs priority. It is the mother who is called when a child gets sick at school. For men, the direction is reversed; work commitments are allowed to take priority over family concerns (Pleck, 1975).

Given the strains between roles and within roles, individual adult women vary in their reactions to them and their psychological states. While it is evident that women in their middle years are decidedly more susceptible than men to symptoms of depression and psychological impairment (Cove and Tudor, 1973), we have little knowledge why it is that some women experience psychological disorders without the presence of stress, and others who experience stress and conflict do not evidence emotional disorders. There are obviously some mitigating circumstances of which coping and access to and use of support systems may play a significant part.

Hall, in a study of coping mechanisms of adult women who were married with careers, categorized women by coping styles. Coping styles were divided into three types: (1) attempts to alter external, structurally imposed role expectations, (2) attempts to change one's own psychological role concept, and (3) attempts to change oneself to meet the multiple role requirements. The first two coping styles assume that role demands can be changed; the last, that such demands are immutable and that the individual must change. Interestingly, Hall found that the simple act of having a coping style as opposed to having no coping style was a better indicator of life-satisfaction than any one style (Hall, 1972).

As used in psychological and psychiatric literature, coping usually refers to an intra-psychic adjustment which leads to a more harmonious fit between
individuals and the environmental pressures upon them. The emphasis is not upon changing the environment to fit the individual, but upon the individual changing to fit the environment. As our society becomes more complex, however, individual coping mechanisms will need to be supplemented by social supports. As Mechanic states, "Increasingly it is clear that major stresses on modern men and women are not amenable to individual solutions but depend on highly organized cooperative efforts" (Mechanic, 1974b).

Supports can come from many sources within our society: intimate relationships, friends, kin, formal organizations and help-giving sources. The small number of emerging studies of support systems suggest that sex and class differences influence use of available supports. Women are reported to use friends, kin and neighbors while men depend more on wives, work colleagues and work organizations (Bott, 1971; Weiss, 1973).

In a study of men and women in the greater Detroit area, Warren found the unavailability of adequate support systems to be related to symptoms of depression. Thirty-three percent of the unemployed women reported symptoms of distress as compared to approximately nine percent of the unemployed men. The difference, she concludes, is related to the difference in availability of support systems to men and women. When the man of the family was laid off, he drew the sympathy of his wife, co-workers, neighbors and relatives. Women, especially blue-collar women, did not receive the same support. Their jobs were considered supplementary to those of their husbands and therefore their unemployment was not met with sympathy. More than half the women interviewed said that they could not count on their husbands for help. Support from neighbors came only when there was a close social bond within the neighborhood. When this was lacking, women were often left to cope with their problems alone (Warren, 1975).
It is not yet agreed upon within the literature what a support system is. Combining a number of definitions, a support system can be said to provide individuals with: (1) opportunities for feedback about themselves and a reference point from which to evaluate their particular reality, (2) emotional guidance and support, (3) concrete information, (4) a haven for relief from stress and monotony, and (5) the chance to develop mastery through specialization of function, pooling of resources and reciprocal help giving (Caplan, 1974; Mechanic, 1974b; Pearlin, 1975; and Weiss, 1973).

Intuitively one can understand why access to and use of support systems could enhance the well-being of women caught by the multiple stresses of their lives, but this needs further exploration.

In conclusion, our understanding of women in the middle years has suffered from a number of limitations and biases. Several major issues have been relatively neglected: the positive benefits of not being married; the negative aspects of being a mother, the complementarity of women's role patterns and how these roles articulate with those of men. The successful techniques used by women who, in the face of conflict and stress, have achieved a high sense of well-being also need exploration.

This requires an emphasis on positive mental health as well as depression and impairment and an emphasis on support and coping as well as women's vulnerabilities and frailties.
References


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I would like to discuss briefly the implications — theoretical and practical — of a focus on healthy adult development beyond what is meant by an absence of symptoms.

All panelists agree that theory of healthy development in women is lacking. Central to such a theory is the concept of competence or efficacy (Brewster-Smith, 1968; Brim, 1974; White, 1959). At the heart of the concept of competence, a motive, thought by some to be innate, by others to be acquired, is the importance of active mastery over one's environment. According to M. Brewster-Smith, already referred to, to become a competent individual one needs particular early experiences plus a social environment that provides one with opportunity, power and respect. The competent individual would then have high self-regard and realistic expectations that his or her behavior would have the desired effects on the environment.

How can these ideas best be applied to the study of women? Since the patterning of women's lives seems highly varied, as the panelists have pointed out, one approach that seems potentially rewarding begins with certain outcome states, for example, a sense of well-being. While it is no doubt true that there are many paths women might travel that would lead them in their middle years to a sense of well-being, an understanding of the similarities among those paths would be highly informative. Such an approach avoids the problem, discussed by Sue Dibner, of arbitrarily assuming "normal" and "deviant" life patterns and provides a potentially more useful approach to uncovering
areas amenable to social action.

I would like to illustrate the difference a focus on competence would make by drawing from both the literature on stress and on the role of economic provider.

Students of stress disagree about whether the more events a person has to adjust to in a given period the more the individual will be diminished in energy and in capacity to cope. If this is so, then events such as starting back to school, changing one's job, or relocating geographically are all viewed as problematic. This approach fails to acknowledge that for some individuals returning to school, switching jobs and moving can be seen as challenging, rewarding and therefore invigorating. Indeed, the competent individual might seek out such changes as signs of social recognition or successful mastery.

Turning briefly to the treatment of the role of economic provider, there is suggestive evidence in the literature that seeing oneself as an economic provider enhances self-esteem in women, yet married women whose husbands are working are almost never viewed as economic providers, even if they are income producers. It is therefore impossible to know whether married women who are working, contributing to their family's income, and who have a perception of themselves as economic providers differ in self-esteem or in sense of well-being from their counterparts who do not perceive themselves as economic providers.

Thus, it appears that focusing on antecedents of positive outcome states would generate fruitful research questions that are likely to advance our efforts at finding a way of conceptualizing women in the middle years that better fits empirical findings and everyday experience.
References


Occasional Paper #1: Some Thoughts on Adult Development*

I don't know if these papers have answered the question of who the real middle-aged woman is— but they certainly have made clear who she is not: she is not pathetic and depressed, at the mercy of hormonal changes in her body, desperate about the departure of her children from the nest. The papers document in some detail the negative consequences of applying this biased and stereotyped picture to the problems and study of women in the middle years— consequences that take on particular urgency (as is evident from Parlee's paper) when outmoded views dictate actual treatment, and not only the interpretation of research data.

Further, the papers— both individually and as a set— make clear that it is impossible to understand women's middle adulthood without a multiple perspective, a perspective that probes individual response to internal and external developments in the social context in which it occurs.

Finally, the papers conclude that most of the work on adult development in recent years, based primarily on data from men, is not applicable to the issues confronting women.

On the whole, I agree with these conclusions, and would like to use my few minutes to comment on what I think we should emphasize in order to come to a realistic and meaningful understanding of women—or men, for that matter— in the middle years. This is not to imply that what I want to say comes close to Barnett's and Beruch's call for a grand theory— indeed, I am not really sure that that is what we need at this point. Rather, I would like to suggest some categories for looking at this problem that might help us proceed.

I do think we have learned something from the recent work on adult development

that is applicable to both women and men—they do, after all, share certain attributes of the human condition. That work is premised on the assumption and also documents it, that change and development occur in the adult years.

It is a development, further, that has a jerky, non-continuous quality to it—not dissimilar to Kuhn’s description of paradigmatic shifts in science. But the analogy is only a superficial one because in adult development the common element is the task that confronts the individual, not its resolution. In other words, there are certain life tasks that confront everyone in these middle years—though by no means at any specific chronological age—but the meaning assigned to them and the way they are dealt with vary from individual to individual. Such universal tasks are more general than those outlined, for instance, by Levinson (1974) which, as these papers have shown, are very sex-role specific. The tasks that I am talking about are not tied to any particular life course but consist, rather, of such general needs as meshing the childhood image of adult life with reality (Gould, 1975) and coming to terms with death (Jacques, 1965).

These tasks, moreover, are different from those that confront the individual at earlier periods of life. By focusing on them, therefore, one is highlighting the fact that this is a period in which earlier resolutions and life styles may turn out to be dysfunctional. Indeed, it is just such discontinuities that give adult development its jerky quality and it is the dysfunctions of seemingly satisfactory approaches to earlier tasks that have given much of the impetus to studying the middle years.

The papers have shown that withdrawal into house and child care by women, even though potentially a very satisfactory way of handling the demands of the early adult years, may exact its toll at mid-life. And there is also evidence that the complementary solution of men to commit themselves almost entirely to work in these early years—however valuable from the point of view of career
establishment—may also be disruptive to the satisfactory resolution of mid-
life tasks.

But these common tasks can only provide the context for understanding
development in the middle years. Even a full description of them would not give
the multiple perspective called for by these papers. To come closer to such a
perspective one must look also, at the events that trigger a person's concern
with each of these tasks. Such marker events (to use Levinson's term) fall
into three general categories, though at times they may be entirely idiosyncratic.
Marker events may be biological: the menopause is an example here, but so is
illness; or they may be family cycle events, such as children leaving home or the
death of a spouse; or they may be work and career related: for instance pro-
motion, retirement, or, indeed, any experience of success or failure at external
or internal transition points in a career.

Though all of these events may occur in a person's life, only some of them
will be marker events—only some will actually trigger changes in the way the
individual experiences and interprets the middle years. Take, for instance,
the event of children leaving home. Barnett and Baruch have already drawn
attention to the fact that this event can be interpreted in two very different
ways. There seems no doubt that a woman who interprets it as the transition to
an "empty nest" period will react differently from one who views it with an
"about-to-be-free" attitude. As a matter of fact the particular interpretation
given to it may determine whether or not it will be a marker event at all. For
some women, for instance, the event may not mark any crucial transition because
the concerns they are facing when the event occurs center on some entirely
different area of life, such as a career.

Similarly for the menopause: whether or not this will be a marker event
in a woman's life will depend on what family cycle and career events it coin-
cides with and the interpretation she assigns it.
Let me give you an example that came up the other day when I talked to a woman who had just gone back to professional training even though she graduated from college twenty years earlier. Her youngest child is still in elementary school but she had thought the move out very carefully and felt that is was now or never. When I asked how it was going she told me the following story. Two days after finishing her first semester exams, she discovered a lump on her breast and subsequently had a mastectomy. Two weeks after the operation she started her second semester. Imagine if the malignancy had been discovered the previous year: she might well have given up or at least postponed her decision to return to school. As it was, the disease with its "disfiguring" treatment was hardly marked at all: as she said, she literally had "no time" to worry about it.

Surely this is vivid support for Dibner's call for an emphasis on ego-enhancing experiences rather than on loss in the study of adult women.

It seems clear, therefore, that the impact of events in a person's life is not easily predictable and errors will occur if we do not accept this fact. Indeed, the stereotypes and biases outlined in the papers in this symposium stem from assuming that certain events are necessarily marker events for all women in all circumstances. What I would like to suggest, rather, is that the study of which events do in fact become salient and mark the transition to awareness of mid-life tasks, should be our crucial question. We must attempt to identify the particular combinations of life styles, social role expectations, and individual circumstances that transform certain happenings into marker events in people's development. Once this is known, then we can inquire into the conditions under which the event is interpreted as a constraint or an opportunity; and the conditions under which it triggers change that will call forth feelings of stress or of well-being.
A useful theory of adult development—one that will be applicable to both women and men—will, in my opinion, have to be based on such a complex net of contingent relations.

References


Papers presented at the Symposium

R.C. Barnett and G.K. Baruch, Women in the middle years: concepts and misconceptions.

S.S. Dibner, Some sociological perspectives on adult women.

M.B. Parlee, Psychological effects of the climacteric in women.