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GENDER DIFFERENCES OF THE OLDER ADULT
IN RELATIONSHIP TO EGO INTEGRITY
AND THE NEED FOR CONTROL

A Thesis

Presented to

The Faculty of the Department of Psychology

East Tennessee State University

In Partial Fulfillment

Of the Requirements for the Degree

Master of Arts in Psychology

by

Ginger Helm

May 2000

APPROVAL

This is to certify that the Graduate Committee of
Ginger Helm
met on the
24th day of March, 2000.

The committee read and examined her thesis, supervised her defense of it in an oral examination, and decided to recommend that her study be submitted to the Graduate Council, in partial fulfillment of the requirements for the degree Master of Arts in Psychology.

Dr. James Perry
Chair, Graduate Committee

Dr. Otto Zinser

Dr. Roger Bailey

Signed on behalf of
the Graduate Council

Dr. Wesley C. Brown
Dean, School of Graduate Studies

ABSTRACT

GENDER DIFFERENCES OF THE OLDER ADULT

IN RELATIONSHIP TO EGO INTEGRITY

AND THE NEED FOR CONTROL

By

Ginger Helm

The present study examined gender differences in relationship to ego integrity resolution of Erikson's stage theory and the need for control in the older adult ranging from 55-90 years of age. Erikson's ego integrity versus despair was measured with a subscale found in Measures of Psychological Development by Hawley (1988). The need for control was measured with a scale developed by Burger and Cooper (1979).

Because of social roles, it was first predicted that males would score higher on resolution of ego integrity and lower on the need for control. The mean resolution of integrity score for males (N=31) was 16.35 and for females (N=56), it was 16.27. The mean of need for control for males was 98.68 and for females was \underline{M} =93.20.

Secondly, it was predicted that the lower age group (55 – 64 years old) would have a lower mean resolution of integrity score than the middle age group (65 – 74 years old) and that the high age group (75 years and up) would have a higher mean resolution of integrity score than the middle age group. However, results displayed the mean score for the lower age group was 16.50, for the middle age group it was 16.84; the high age group it was 15.35.

Thirdly, it was predicted that the lower age group (55 – 64 years old) would have a higher mean of need for control score than the middle age group (65 – 74 years old), and that the high age group (75 and up) would have a lower need for control score than the middle age group. The mean score for the lower age group was 97.50, the middle age group, was 98.16 and for the high age group it was 88.69.

A two factor (gender by age) ANOVA performed on the resolution of integrity and the need for control measures. However, no significant results were found.

All of the hypotheses were rejected because no statistical significance was obtained.

Limitations of the study included the size of the sample. It was too small. There were 87 participants, with 31 males and 56 females and only 5 males were in the high age group. It would

be recommended for future research to examine a larger and more diverse sample. Future researchers may also wish to reconsider the age for resolution of integrity, because of the changes in lifestyle, medical innovations, and venues of employment, persons of 55 years of age may be too young to relate to the eighth stage of Erikson's stage theory. Future researchers may also want to consider the need for control measure predicting isolation, loneliness, loss of purpose and depression often associated with the aging.

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Lastly, but not by any means the least, thanks to all the friends who have contributed to my graduate school experience. Thanks to Chris H., Christy M., Christi W., Lynn S. for offering encouragement through the years.

Institutional Review Board Approval

This is to certify that the following study has been filed and approved by the Institutional Review Board of East Tennessee State University.

Title of Grant or Project: Gender Differences of the Older Adult in Relationship to Ego Integrity and the Need for Control

Principal Investigator: Ginger Helm

Department: Psychology

Date Submitted _____

Institutional Review Board Approval, Chairman _____

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CHAPTER 1

INTRODUCTION

With the onset of new scientific technology, medical breakthroughs continue to lengthen the expected physical life of the individual, but the improvement of the quality of that life continues to challenge social science researchers. The population explosion following WWII commonly labeled as the baby boomers generation shall have a taste of the fountain of youth. The expected lifespan may exceed 85 years for more than 13 million Americans by the year 2040 (Census, 1998). With the increase in life expectancy, questions arise concerning the psychosocial health of the older adult. Life satisfaction of the older adult has been the focus of many studies particularly those that have examined the effect of the social support of family and friends (Gray, Ventis, & Hayslip, 1992). Other studies have examined age, gender, and race in relationship to satisfaction in the older adult (Coke, 1992; Israel, Houge, & Gorton, 1984).

Erik Erikson's Stage Development Theory and the Older Adult

Erik Erikson's theory of personality proposes that each person experiences eight stages of personality development within a lifetime. Within each stage, an individual encounters a crisis, which results from the interaction of psychological forces, comprised of biological, psychological, and cultural components. For each stage, the crisis or conflict is marked by both positive and negative outcomes, which emerge from either the successful or unsuccessful resolution of the crisis. Conflict and resolution shape the individual's personality characteristics.

Erikson's theory suggests that there is a genetic ground plan in which a sequence of eight critical periods and stages are set. The experience of each stage and crisis may vary in intensity and time depending on the ground plan each individual possesses. The outcome of each stage is

related to the previously encountered stages and is in part a function of the tenor of the resolution of the previous crisis. Two attitudes are associated with the resolution of each stage that are polar but not exclusive. One could have attributes, both positive and negative, depending on the degree of resolution of a particular conflict and previously encountered conflicts. Each stage, represented by a specific crisis, plays a role in some form throughout the life span. Critical periods within a stage create the need for the resolution of a crisis. Stage conflicts are dynamic, and tension is ever present between polar attitudes. The dynamics consist of a continuous working through of conflicts. Regardless of the successive resolution of earlier stages within one's life, previous conflicts may reemerge to be resolved anew. The overall psychosocial health of an individual is dynamically controlled by the decisions an individual makes to resolve each crisis and what direction, positive or negative, she or he takes with its resolution. Erikson's theory accounts for the complexity of human personality: the multiple influences which shape personality and the dynamic relationship of crises within stages and between stages. The theory allows for growth of the personality through developmental stages, a lifelong endeavor in which issues can be revisited and resolved (Erikson, 1963).

Trust and mistrust defines the first stage. This is the crisis experienced by the infant to trust others (parents, caregivers) that they will provide for it's basic needs of food, comfort, safety, and security. If trust is not obtained, a lack of hope will develop; if trust is developed, hope emerges. Following a positive resolution, religiosity, art pursuits, participation in social action, or community directed endeavors may emerge (Erikson, 1963).

The second stage, autonomy versus shame and doubt, normally takes place when the individual is about 2 years old. The crisis for the toddler entails the concepts of accomplishing tasks, letting go, and holding on. The youngster develops general muscle control, enabling

mobility, which is reflected in the adult as control in interpersonal relationships. Vulnerability emerges if a child does not perceive support; shame, doubt, and self-consciousness may develop. In the older adult, giving up control can take place, such as when a person has to enter a nursing home. On the other hand, a person may emerge from the second stage with the capacity for willpower. What continues to be a source of conflict is societal laws that provide boundaries for the person's autonomy (Erikson, 1963).

Initiative versus guilt, the third stage, appears at 3 to 5 years of age. The third stage provides the opportunity for the development of purpose, mission or goal orientation defined by the ideal prototypes of society. Role anticipation or role inhibition are polar attitudes in this crisis. A sense of purpose is a positive outcome for the individual. Older adults may provide social support to the extended family. This could include providing childcare for grandchildren, enabling greater stability for the extended family and removing some of the childcare burden from the nuclear family. A negative outcome could be when the older adult has lost purpose and experiences role inhibition (Erikson, 1963).

The fourth stage, industry versus inferiority, supports the development of a sense of competence. This stage allows children to master cognitive and social skills needed to interact in the broader culture. The child assumes the role of apprentice in developing skills and completing challenging tasks; if the child receives recognition for the accomplishments, the child acquires the strength of competence and self-efficacy. If a child does not receive the recognition, excessive feelings of inferiority and inadequacy will develop inhibiting ego growth (Erikson, 1963). As one ages, opportunities to change how one spends personal energy in the direction of work emerge. Earlier in one's life, occupations might provide monetary rewards from work, whereas, retirement requires one to seek affirmation in other venues.

Identity versus identity confusion marks the fifth stage; this stage is typically labeled adolescence. Erikson (1968) suggests that physiological changes in the adolescent cause turbulence along with the complications of confusing social demands. The adolescent's challenge is developing a new sense of ego identity. The adolescent tends to acquire a sense of individuality and how the concept of self belongs in the larger societal order. A sense of identity is achieved, resulting in satisfaction with the answer to the question, "Who am I?" Harmony with oneself and with significant others characterizes a positive resolution. On the other hand, identity confusion and diffusion may emerge. People in our society identify themselves with their occupation; when the older individual makes the transition from their occupation to retirement, a new identity may need to be created. The older adult in a manner similar to the adolescent encounters physiological changes as well as complications created by confusing social demands. The older adult needs to adjust to sensory and physical deterioration and to new perceptions of self and their role in society. As an older adult an opportunity to move toward identity confusion or identity coherence once again presents itself.

The sixth stage, intimacy versus isolation (Erikson, 1980) represents the first of three distinct adult stages. The loss of loved ones, family and friends, creates isolation in the world of the older adult. Isolation is also the long-term result if the person does not take the initiative to create intimacy following the loss of family and friends. Intimacy is defined by psychological fusion with another person which fosters ego strength and the capacity to love. As individuals broaden their capacity for love and caring for others, a sense of community develops that extends their perception of intimacy and isolation beyond the self. Dynamics of the sixth stage include periods of intimacy and periods of isolation. Because people are different, there is generally a degree of antagonism between partners; nevertheless, love is revealed in patterns of cooperation

and competition, according to Erikson (1980). For the older adult, this stage is encountered when the person enters a nursing home or relocation due to declining health.

The seventh stage, generativity versus stagnation, fosters the development of caring for others. Nurturing the younger generation is an example. Cultural and social involvement of generativity can also be expressed in parenting, teaching, mentoring, or production of ideas through work. The older adult may choose to participate in volunteer work, mentoring and tutoring in the public schools to the benefit of the whole community. Caring for the younger generation represents a positive resolution of generativity; in contrast, a negative resolution results in self-absorption, self-indulgence, and stagnation (Erikson, 1980).

Erikson proposes the “fruit of the seven stages” (1963, p. 268), the harvest of life’s season, is a result of the previous stages tied with meaning and order. The eighth stage represents positive resolution of the previous seven stages. The positive resolutions of the earlier life stages provide a foundation for the resolution of the final stage, ego integrity versus despair. In Cole’s (1970) review of Erikson’s theory, the eighth stage is described as one in which a person either does or does not find at least a “degree of purpose and coherence in his life—hence, in all life” (p. 135). The establishment of positive or adaptive resolution of a given conflict intertwines with the sequential interdependence of all stages. As a “semblance of unity and purpose” the older adult reviews and reflects on life’s accomplishments, learns to cope with loss, and prepares for their own demise (McAdams, Diamond, & de St. Aubin, 1997). Death anxiety has been found to be successfully predicted by psychosocial immaturity; as psychomaturity increased, death anxiety decreased (Rasmussen & Brems, 1996). Vargo & Black’s (1984) study suggests a relationship exists between an increase in psychosocial development and a decrease in death anxiety.

As the individual approaches the last stage of life, physical and social adjustments need to be made. Internal and external changes, beyond personal control, challenge the individual. In the eighth stage the ego strength of wisdom emerges, reflecting an informed and detached concern with life itself in the face of death itself (Henry & Cummings, 1959). Individuals find peace with themselves and the world in acquiring an accumulation of wisdom of the ages (Erikson, 1980). If positive psychosocial resolution is not achieved in the individual's life review, the individual faces despair. Despair results in an unwillingness to accept death, because there are too many regrets and too little time to change matters; life has lost meaning and purpose.

Need for Control

The level of one's well being has been related to one's internal control. Psychological stress decreases as one's security increases. It has been noted that greater security, wealth, power, and prestige shift the balance of emotions from sadness and distress to happiness and well-being (Mirowsky & Ross, 1996). Control declines as an individual's physical and emotional resources dwindle and the cost of living increases. One's health, level of income, loss of a spouse, and retirement influence morale and one's sense of control (Tallner & Kurner, 1970). Berghorn and Place (1978) found a correlation between life satisfaction and the person's coping ability with life's problems. Social relationships and institutional relocation (Geis & Klein, 1989) affect the sense of control. The passage of time, though not in one's control, is increasingly evident in one's life when one begins measuring time by the distance from death rather than from birth (Henry & Cummings, 1959). By turning from the outer to inner life and by withdrawing from actual contact with people (Henry & Cummings, 1959) an individual perceives a new aspect of control.

Gender-Related Issues of Aging

Research on later adulthood and aging is not well integrated (Birrin & Birrin, 1990). According to Cooper and Gutman (1987), behavioral changes of an individual could be a result of life events rather than age-related behavioral issues, such as retirement. For example, divorce and widowhood may encourage an older person to become androgynous (O'Bryant, 1987) as they venture into role changes.

Roles of women and men are affected by gender through the interaction and influence of our society (Hagestad, 1994). It has been observed, "to an important degree, men and women grow up in different cultures, develop different expectations, learn different roles, and live different lives" (Campbell, Converse, & Rogers, 1976, p. 395), as was concluded by a national study of the well being of adults in the United States.

In a 1985 study, Hagestad (1994) identified how aging and gender interact on three levels. The first level consists of "life scripts" or one's life's experience through the aging process. Secondly, the perception of aging is affected by gender. It is culturally perceived, women age quicker with more negative effects (Kogan, 1979). Lastly, Hagestad (1994) focused on a third level of research, investigating women's roles and aging, finding female roles are associated with a greater negative effect than male roles. Also, gender roles do not originate in old age nor do they affect the elderly only.

Males and females experience the life span through unique roles determined by both nature and society. The differences are found in the concept of work, family and nonfamilial roles, and social networks of support. Clearly, gender roles are determined by multiple influences over the lifespan resulting in distinctive differing perspectives as individuals experience old age.

Statement of the Problem

The present study was designed to contribute to the understanding of gender differences in the perception of aging, by way of two factors: resolution of integrity and the need for control. More knowledge of this subject can help psychologists help the elderly. Increasing the quality of life in the elderly is an important goal of psychologists. As individuals journey through life, the basic instinct is to survive, but psychologists look beyond physical survival.

Aging has been related to Erikson's stage theory, in particular the eighth stage of ego integrity. Coles' (1970) investigation of ego integrity focused on the resolution of the cumulative stages. Having or not having discovered a purpose for life is an outcome of how well these cumulative stages are resolved. If the previous seven stages have been positively resolved, an inner peace and contentment develops. Negative resolution results in despair, increasing one's anxiety as one approaches death (Sarah Fishman, 1992).

More specifically, the major objective of this research was to measure the need for control and the positive resolution of Erikson's eighth stage, ego integrity in relationship to gender and age.

Hypotheses

First Hypothesis

It was predicted male subjects would have a higher mean resolution of integrity score, but a lower mean need for control score than females would.

Second Hypothesis

It was predicted that the lower age group would have significantly lower mean resolution of integrity scores than the middle age group and that the high age group would have a significantly higher mean resolution of integrity score than the middle age group would.

Third Hypothesis

It was predicted that for the need for control measure the lower age group would have a higher mean score than the middle age group, and that the high age group would have a lower mean score than the middle age group would.

Fourth Hypothesis

It was predicted that there would be an increasing discrepancy between the male and female groups across the three age groups on the resolution of integrity scores.

Fifth Hypothesis

It was also predicted there would be an increasing discrepancy between the male and female groups with increasing age, on the need for control scores.

CHAPTER 2

METHOD

Participants

The participants were older adults: the youngest age was 55 years old, the oldest was 90 years old, and the average age was 70 years old. The participants lived in the upper east Tennessee area. Participants were sought from local retirement centers and senior citizen community organizations. A total of 97 subjects participated but due to incomplete questionnaires, ten questionnaires were eliminated from the study because they were not completed. Of the remaining eighty-seven subjects participated; 31 were males and 56 were females. The participants were arbitrarily divided into three age groups. Group one, the low age group (55 years old to 64 years old), consisted of 24 subjects; group two, the middle age group (65 years old to 74 years old), consisted of 37 subjects; and group three, the high age group (75 years old and up), consisted of 26 subjects (See Table 1).

Demographic Information

A demographic information sheet (See Appendix B) was administered to each participant which requested information about gender, age, marital status, and level of education. Also, the demographic sheet asked subjects to indicate level of health and monetary resources. In addition, subjects were asked to indicate involvement with religious groups, community organizations, friends and family, association of a close friend, if living independently, and communication both written and verbal with friends and family. No compensation was offered for their participation.

TABLE 1

PARTICIPANT SAMPLE BY GENDER AND AGE GROUP LEVEL

Gender	Age Group Level		
	Low	Medium	High
Male	10	16	5
Female	14	21	21

Measures

Resolution of Integrity Questionnaire

The resolution of ego integrity versus despair variable, relating to Erik Erikson's eighth stage, was measured by way of a scale in Hawley (1988) in the Measures of Psychosocial Development. In order to focus on Erikson's eighth stage of ego integrity versus despair, only the questions pertaining to the eighth stage were selected and administered to the subjects. The survey (See Appendix C) contained 14 questions indicating positive or negative resolution of general issues encountered at the eighth stage of life. The subject responded to a score on a Likert scale of 1 (not at all like you) to 5 (very much like you). Scores were added together to determine a total score. Total scores varied with a possible high of 28 and a low score of -6, indicating the level of positive resolution of ego integrity. Test-retest reliability was assessed resulting in reliability coefficients of the MPD scales according to Hawley (1988) in the Measures of Psychosocial Development, (See Table 2).

TABLE 2
RELIABILITY COEFFICIENTS FOR
HAWLEY RESOLUTION OF INTEGRITY QUESTIONNAIRE ITEMS

Scale	Reliability Coefficient
Trust vs. Mistrust	.78
Autonomy vs. Shame and Doubt	.81
Initiative vs. Guilt	.86
Industry vs. Inferiority	.83
Identity vs. Identity Confusion	.91
Intimacy vs. Isolation	.75
Generativity vs. Stagnation	.82
Ego Integrity vs. Despair	.85
Total Resolution	.87

(Hawley, 1988)

The Need for Control Questionnaire

The perceived Need for Control questionnaire (Burger & Cooper, 1979) see Appendix D, allowed respondents to provide information about their attitudes toward, desirability of control (Burger & Cooper, 1979). This survey of 20 possible life experiences included areas of control at work, in political participation, in leadership roles, and in decision making. The scores were from Likert Scales ranging from 1 (statement does not apply) to 7 (statement always applies). Items 7, 10, 16, 19, and 20 were reversed for scoring; that is, if the respondent entered 1, it was scored as a 7. If the respondent entered 2, the response was scored as 6. If the response was 3; it was scored as 5, but if the response was 4; it remained unchanged. Scores were then summed with a possible high score of 140 and a low score of 20. The Kuder-Richardson 20 reliability correlation was used and yielded a .80 reliability coefficient. In a second sample, utilizing the Kuder-Richardson, a .81 reliability coefficient was obtained. Also, a test-retest was done with a sample of 31 subjects for which reliability coefficient of .75 was obtained.

Procedure

Each subject was given a packet containing an informed consent form (See Appendix A) that gave a brief description of the survey. After the consent form was read and signed by the subjects, the consent forms were collected. The subjects were then instructed to completely fill out both of the questionnaires (See Appendix C and D). They were reassured that participation in the study was voluntary and that all of the information would remain anonymous. If participants desired, the complete results of the survey would be made available for review. Both the name

and telephone number of the researcher was on the consent form. The researcher was to be contacted if any problems or discomfort resulted from participation in the study. It was anticipated to take subjects 15 to 20 minutes to complete the packets.

Experimental Design

A 2 (gender) X 3 [age group levels of low (55 years old to 64 years old), medium (65 years old to 74 years old) and high (75 years old and up)] independent groups factorial design with unequal cell sizes was created. Independent groups two-way analysis of variances were calculated on the resolution of integrity and need for control for the raw scores. For each F-test, the alpha level was set at $p \leq .05$. Had significance been found on the F-tests, post hoc testing utilizing the Tukey-HSD for unequal cells would have been employed.

CHAPTER 3

RESULTS

Gender and Ratings for Resolution of Integrity and Need for Control

It was hypothesized that male subjects would display a higher resolution of integrity score than females would, but a lower need for control score than females would. Means of the resolution of integrity ratings (See Table 1) revealed that the males scored (\underline{M} = 16.35) slightly higher than the females (\underline{M} = 16.27). On the need for control measure, males (\underline{M} = 98.68) scored higher than the females (\underline{M} = 93.20) did. These hypotheses were not confirmed (See Tables 3,4,5, and 6), as the gender effects in the two-factor (gender by age) ANOVA's performed on the resolution of integrity, $F(1,81) = .004$; $p > .05$, and need for control, $F(1,81) = .642$; $p > .05$, measures were nonsignificant.

Age and Ratings for the Resolution of Integrity and Need for Control

For resolution of integrity, it was hypothesized that the lower age group would score lower than the middle age group and the higher age group would score higher than the middle age group. The lower age group (\underline{M} = 16.50) scored lower than the middle age group (\underline{M} = 16.84) and the higher age group scored lowest (\underline{M} = 15.35); see Table 3. However, the age effect for resolution of integrity $F(2,81) = .190$; $p > .05$ was nonsignificant and therefore the hypothesis was not supported (See Table 3&5).

For the need for control, it was hypothesized that the lower age group (\underline{M} = 97.50) scored lower than the middle age group (\underline{M} = 98.16) and the high age group (\underline{M} = 88.69) scored lower

than the middle age group. However, the age main effect, ($F(2,81)= 1.516$; $p > .05$) was nonsignificant (See Tables 4 & 6) and therefore the hypothesis was not confirmed.

Interaction Effects: Age by Gender on Resolution of Integrity and Need for Control

It was predicted that there would be an increasing discrepancy between the male and female resolution scores with increasing age, with male resolution of integrity scores showing a greater divergence with age than those of females would across the three age groups. Again, the interaction effect was nonsignificant, and therefore the hypothesis was not confirmed.

It was also predicted that there would be an increasing discrepancy between the male and female need for control scores with increasing age with male scores showing a greater divergence with age than those of females', however, this trend was not found because the interaction was nonsignificant, ($F(2,81) = .438$, $p > .05$).

A Pearson-product moment correlation was performed on the resolution of integrity and need for control ratings. The correlation of these variables was .384, significant at the .05 level.

TABLE 3

GENDER X AGE GROUP LEVEL MEANS AND STANDARD DEVIATIONS OF THE
RESOLUTION OF INTEGRITY SCORES

Age Groups	Gender	Mean	Std. Deviation	N
Low 55 to 64 years (N=24)	Male	16.20	6.37	10
	Female	16.71	7.53	14
	Total	16.50	6.99	24
Medium 65 to 74 years (N=37)	Male	16.63	6.21	16
	Female	17.00	8.38	21
	Total	16.84	7.42	37
High 75 years and up (N=26)	Male	15.80	5.54	5
	Female	15.24	6.24	21
	Total	15.35	6.01	26
Total (N=87)	Male	16.35	5.97	31
	Female	16.27	7.33	56
	Total	16.30	6.84	87

TABLE 4

GENDER X AGE GROUP LEVEL MEANS AND STANDARD DEVIATIONS OF THE
NEED FOR CONTROL SCORES

Age Groups	Gender	Mean	Std. Deviation	N
Low 55 to 64 years (N=24)	Male	96.60	9.71	10
	Female	98.14	28.50	14
	Total	97.50	22.29	24
Medium 65 to 74 years (N=37)	Male	101.94	9.10	16
	Female	95.29	14.97	21
	Total	98.16	13.04	37
High 75 years and up (N=26)	Male	92.40	3.65	5
	Female	87.81	16.19	21
	Total	88.69	14.67	26
Total (N=87)	Male	98.68	9.22	31
	Female	93.20	19.70	56
	Total	95.15	16.87	87

TABLE 5
TWO FACTOR GENDER X AGE ANOVA
FOR RESOLUTION OF INTEGRITY SCORES

Source of Variation	Sum of Squares	DF	Mean Square	F	Sig. of F
Main Effects	19.705	3	6.568	.133	.940
Gender	.203	1	.203	.004	.949
Age	18.736	2	9.368	.190	.827
2-Way Interactions	3.192	2	1.596	.032	.968
Gender X Age	3.192	2	1.596	.032	.968
Explained	39.413	5	7.883	.160	.976
Residual	3986.817	81	49.220		
Total	4026.230	86	46.817		

TABLE 6
TWO FACTOR GENDER X AGE ANOVA
FOR NEED FOR CONTROL SCORES

Source of Variation	Sum of Squares	DF	Mean Square	F	Sig. of F
Main Effects	1419.438	3	473.146	1.709	.172
Gender	177.786	1	177.786	.642	.425
Age	839.843	2	419.922	1.516	.226
2-Way Interactions	242.668	2	121.334	.438	.647
Gender X Age					
Explained	2053.282	5	410.656	1.483	.204
Residual	22429.776	81	276.911		
Total	24483.057	86	284.687		

CHAPTER 4

DISCUSSION

The primary goal of this study was to examine the relationship of gender and age within the realms of both Erikson's eighth stage of ego integrity and the need for control. These variables were measured in individuals who are experiencing the physical and emotional changes of aging in our society today. It was predicted that by the year 2040 there will be 13 million Americans over the age of 85 years (Census, 1998). Since it will be possible to extend the length of life, the questions to be addressed will be those of psychosocial health for the older adult (Coke, 1992). What contributes to positive aging, to integrity, or the "fruit of the seven stages" was a focus of attention (Erikson, 1963, p.268). The eighth stage can be highlighted by satisfaction and understanding of purpose in life's journey, a source of comfort in preparation of one's demise (McAdams, Diamond, & de St. Aubin, 1997).

The need for control has been related to a sense of well being and happiness by Mirowsky & Ross, (1996). Coping ability with life's problems has been correlated with life satisfaction in studies by Berghorn and Place (1978). As an individual ages, unique circumstances, such as relocation to an institution, threaten an individual's sense of control (Geis & Klien, 1989). The older adult is faced with many factors not in their control, including isolation caused by health issues, one's own death, dwindling monetary resources with fewer options to replenish resources, the loss of spouse and other friends and family. The challenges to the older adults' sense of control threaten their sense of well being.

Major Results and Conclusions

Due to cultural expectations, gender differences were expected on need for control and resolution of integrity. Males were predicted to have a higher mean resolution of integrity score than the females. Males represented thirty-one of the eighty-seven subjects. Males were more difficult to find, as well as more reluctant to participate in the study. Less than half of the subjects were male; the lack of males subjects may have contributed to the nonsignificance of the results.

The study also examined the hypothesis that males would display a lower mean score on the control measure than females would. Due to employment changes, males typically experience life style changes with retirement; within Erikson's eighth stage, it was expected males need for control would decline. In contrast, females within this age group (born before 1946) would not be experiencing as many employment changes. Therefore, it was anticipated that the males need for control would decline, but this expectation was not confirmed. Two factors are possible contributors to nonsignificance, one being the small number for males and the second being the age set for Erikson's eighth stage. Life spans have increased as health care has improved. Due to modern technology, employment opportunities are extended. Therefore, the eighth stage, of resolution of integrity, may begin much later than fifty-five years of age.

Another of interest of this study was the relationship between age and integrity. It was predicted that the lower age group would have a lower resolution of integrity mean than the middle age group and that the high age group would display a higher mean resolution of integrity than the middle age group. As individuals age, there is an opportunity for reflection on their life journey. Therefore, it was expected the individual would have had a chance to gain insight into their past as well as perspective for the future, which would result in an increase of integrity over

time. The predicted differences were, however not confirmed. One explanation for this finding may be due to a small number in the low age group (55 – 64 years of age) n=24; the middle age group (65 – 74 years of age) n=16; while in the high age group (75 years of age and up) n=26.

Age level differences on the need for control measure were also predicted. It was expected that the lower age group mean would be higher than the middle age group mean and that the high age group would have a lower mean score than the middle age group. Although, no significant differences were displayed, the means reflected the hypothesis. Again, the small number of subjects may have been a contributing factor to the results. Previous research studies (Coles, 1970) did find differences also.

It was expected that interaction effects would be found between the male and female groups and the age variables. It was predicted the male need for control ratings would diverge from those of females with increasing age. No significance was found, however.

Finally, this study examined the questions of resolution of integrity in relationship to gender. It was predicted that the resolution of integrity scores for males would diverge from those of females with increasing age. Due to cultural differences in aging, males and females experience aging differently. Previous research (Hagestad, 1994) has suggested that females experience a greater negative effect with aging. The results of this study failed to confirm this finding, however.

Of particular interest was living independently, religious participation, age group, community involvement and monetary resources. Previous research by Berghorn and Place (1978), found that the ability to cope with life's problems enhance life satisfaction. Mirowsky and Ross (1996) reported as one's security increases, psychological stress decreases.

The integrity emerges as the individual develops and positively experiences the previous seven stages of life. A deeply felt satisfaction is found in discovering the “fruit of seven stages” (Erikson, 1963, P.268). Resolution of the eighth stage of development enables people to connect with other people such as close friend, the community, and family members.

Critique of the Present Study

This study encountered several limitations. One of the limitations was found in the sample. The majority of subjects willing to participate, were usually in good to excellent health, had obtained more than a high school education and had a comfortable level of income. Thus these subjects did not reflect the general population, and therefore, results cannot be generalized to all persons of similar age (Census, 1998). Another limitation of the sample was the gender issue; males were more difficult to recruit, and, less willing to participate. In addition, demographically, due to disease and death, females generally outnumbered males (Census, 1998). There were only five participants in the male high age group.

Another concern lies in the materials used. The Marlowe Crowne Social Desirability Scale could have been utilized to determine social desirability bias.

Generally speaking, subjects within this age group were difficult to recruit. Less than half of individuals qualifying for the above 55-years-old age group, were willing to participate. The resistance to participate reflected a distrust of strangers such as the administrator of the survey inquiring into their personal life, despite the fact that all participants were assured of anonymity and no names would be collected or used in any form or fashion. Many individuals with health complications were not feeling well enough to participate.

Also, many subjects seemed hurried to finish the questionnaire, which may have resulted in some questions being left blank and others not thoroughly addressed. Some subjects were distracted by activity simultaneously taking place during the administration of the questionnaire. In future research, it would be helpful to eliminate these distractions.

The questionnaire could be improved by increasing the point font size of the questionnaire. Many of the subjects, especially those in the high age group (74 years of age and above), were experiencing some visual impairment and the larger font would enhance usability of the questionnaire.

A Pearson-product moment correlation was performed on the resolution of integrity and need for control ratings. The results suggested some indication of significance on the dependent variables measures. This suggests that measures of the dependent variables were similar.

Suggestions for Future Research

The baby boomer generation may be the most influential in the study of old age, since they are a large group and are approaching old age. If aging brings conflict due to the need for control or the resolution of integrity, then the aging of such a significant portion of the population will create a significant effect on society as a whole. By better understanding the process of aging, perhaps the transition into the eighth stage can be better understood. This study examined certain factors contributing to psychosocial well being of the individual, such as age, gender, the need for control, and resolution of integrity.

In addition to these factors, future research could incorporate the role of monetary resources, of health, and of level of education. Future research could incorporate how these factors contribute to the psychosocial maturity of the individual. Other factors examined

included level of communication with friends and family, community involvement and religious participation. Future research could incorporate factors of human involvement, that would include the level of community involvement, the level of involvement with close friends, and family , in relationship to death anxiety, isolation or loneliness. Additional research could identify the factors that contribute to isolation, loneliness, fear and death anxiety.

Another area of focus for future research, could include a comparison to the relationship between the attitudes of younger adults (18 to 28 years old) and attitudes of the older adult (55 years old and up) on scales of measurement of resolution of integrity and the need for control. Some other factors to examine are health-related issues and long term planning of monetary resources in relationship to resolution of integrity and need for control.

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APPENDICES

APPENDIX A

Informed Consent Form

FORM 106

East Tennessee State University

INFORMED CONSENT FORM

PRINCIPAL INVESTIGATOR: Ginger Helm

TITLE: Erikson's Eighth Stage and Life Satisfaction in Relationship to Perceived Control of the Older Adult

The objective of this study is to explore the level of perceived control with life satisfaction and the resolution of the eighth stage of Erikson's personality theory.

The expected duration of your participation should not exceed thirty minutes.

PROCEDURES Subjects will be asked to fill out a questionnaire dealing with life satisfaction perceived control and a personality questionnaire.

POSSIBLE RISKS / DISCOMFORTS.

There are no known risks to individuals who participate in this study.

If you have any further questions about this study you may call Ginger Helm at 439-4424, or 439-8307, who will try to answer additional questions that you might have. Further information about research subject's rights and who to contact in the event of research-related injury may be obtained from the Chairman of the Institutional Review Board at 423/439-6134.

Although your rights and privacy will be maintained the Secretary of the Department of Health and Human Services and the ETSU Review Board do have free access to any information obtained in this study should it become necessary and should you freely and voluntarily choose to participate. You may withdraw at any time without prejudice.

You understand that because this study does not involve articles regulated by the FDA (Food and Drug Administration), the FDA may not choose to inspect records that identify you as a subject in this investigation. Your study record will be maintained in the strictest confidence according to current legal requirements and will not be revealed unless required by law or as noted above. East Tennessee State University does not provide compensation for medical treatment other than emergency first aid, for any injury which may occur as a result of your participation as a subject in this study, claims arising against ETSU or any of its agents or employees may be submitted to the Tennessee Claims Commission for disposition to the extent allowable as provided under TCA Section 9-8-307. Further information concerning this may be obtained from the Chairman of the Institutional Review Board at 423/439-6143.

The nature demands, risks, and benefits of the project have been explained to me. I understand why my participation involves. Furthermore, I understand that I am free to ask questions and withdraw from the project at any time, without penalty. I have read and fully understand the consent form. I sign it freely and voluntarily. A signed copy has been given to me.

SIGNATURE OF VOLUNTEER _____ DATE _____

SIGNATURE OF INVESTIGATOR _____ DATE _____

APPENDIX B

Demographic Information

Demographic Information

Gender: _____ Male _____ Female

Age _____ Marital Status: _____ Level of Education: _____

How would you rate your health? Excellent Good Poor

Are you involved with a religious group? Yes No

On a monthly basis, how frequently? _____

Are you active in community organizations? Yes No

On a monthly basis, how frequently? _____

How would you rate your resources? Excellent Good Poor

Do you see enough of friends and family? Yes No

On a monthly basis, how frequently? _____

I am still living independently. Yes No

I often speak to my friends by telephone. Yes No

I often speak to my relatives by telephone. Yes No

I have a very close friend. Yes No

I exchange letters with my friends or relatives.

Weekly Monthly Annually

APPENDIX C

Need for Control Questionnaire

CONTROL SCALE

INSTRUCTIONS:

Below you will find a series of statements. Please read each statement carefully and respond to it by expressing the extent to which you believe the statement applies (applied) to you. For all items, a response from 1 to 7 is required. Circle the number that best reflects your belief when the scale is defined as follows:

1. = The statement does not apply to me at all
2. = The statement usually does not apply to me
3. = Most often, the statement does not apply
4. = I am unsure about whether the statement applies to me, or it applies about half the time
5. = The statement applies more often than not
6. = The statement usually applies to me
7. = The statement always applies to me

ITEMS

1. I prefer(ed) a job where I have a lot of control over what I do and when I do it.
Never applies 1 2 3 4 5 6 7 Always applies
2. I enjoy a political participation because I want to have as much of a say in running government as possible.
Never applies 1 2 3 4 5 6 7 Always applies
3. I try to avoid situations where someone else tells me what to do.
Never applies 1 2 3 4 5 6 7 Always applies
4. I would prefer to be a leader than a follower.
Never applies 1 2 3 4 5 6 7 Always applies
5. I enjoy being able to influence the actions of others.
Never applies 1 2 3 4 5 6 7 Always applies
6. I am careful to check everything on an automobile before I leave for a long trip.
Never applies 1 2 3 4 5 6 7 Always applies

7. Others usually know what is best for me.
Never applies 1 2 3 4 5 6 7 Always applies
8. I enjoy making my own decisions.
Never applies 1 2 3 4 5 6 7 Always applies
9. I enjoy having control over my own destiny.
Never applies 1 2 3 4 5 6 7 Always applies
10. I would rather have someone else take over the leadership role when I'm involved in a group project.
Never applies 1 2 3 4 5 6 7 Always applies
11. I consider myself to be generally more capable of handling situations than others are.
Never applies 1 2 3 4 5 6 7 Always applies
12. I'd rather run my own business and make my own mistakes than listen to someone else's orders.
Never applies 1 2 3 4 5 6 7 Always applies
13. I like to get a good idea of what a job is all about before I begin.
Never applies 1 2 3 4 5 6 7 Always applies
14. When I see a problem, I prefer to do something about it rather than sit by and let it continue.
Never applies 1 2 3 4 5 6 7 Always applies
15. When it comes to orders, I would rather give them than receive them.
Never applies 1 2 3 4 5 6 7 Always applies
16. I wish I could push many of life's daily decisions off on someone else.
Never applies 1 2 3 4 5 6 7 Always applies
17. When driving (when I drove), I try to avoid putting myself in a situation where I could be hurt by another person's mistake.
Never applies 1 2 3 4 5 6 7 Always applies
18. I prefer to avoid situations where someone else has to tell me what it is I should be doing.
Never applies 1 2 3 4 5 6 7 Always applies
19. There are many situations in which I would prefer only one choice rather than having to make a decision.
Never applies 1 2 3 4 5 6 7 Always applies
20. I like to wait and see if someone else is going to solve a problem so that I don't have to be bothered with it.
Never applies 1 2 3 4 5 6 7 Always applies

APPENDIX D

Scale C – Integrity versus Despair Questionnaire

SCALE C

INSTRUCTIONS:

Below you will find a series of statements. Please read each statement carefully and respond to it by expressing the extent to which the statement represents your opinion. For all items, a response from 1 to 5 is required. Circle the number that best reflects your belief when the scale is defined as follows:

- A. = The statement is *not at all like you*
- B. = The statement is *not much like you*
- C. = The statement is *somewhat like you*
- D. = The statement is *like you*
- E. = The statement is *very much like you*

ITEMS

1. Life has passed me by
 - A. Not at all like me
 - B. Not much like me
 - C. Somewhat like me
 - D. Like me
 - E. Very much like me

2. Believe in the basic dignity of all people

A. Not at all like me

B. Not much like me

C. Somewhat like me

D. Like me

E. Very much like me

3. Full of regret

A. Not at all like me

B. Not much like me

C. Somewhat like me

D. Like me

E. Very much like me

4. Believe in the overall wholeness of life

A. Not at all like me

B. Not much like me

C. Somewhat like me

D. Like me

E. Very much like me

5. Wish I'd lived my life differently

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

6. Life is what it should have been

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

7. A "has been"

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

8. Life has meaning
 - A. Not at all like me
 - B. Not much like me
 - C. Somewhat like me
 - D. Like me
 - E. Very much like me

9. Life is a thousand little disgusts
 - A. Not at all like me
 - B. Not much like me
 - C. Somewhat like me
 - D. Like me
 - E. Very much like me

10. Feel akin to all humankind – past, present, and future
 - A. Not at all like me
 - B. Not much like me
 - C. Somewhat like me
 - D. Like me
 - E. Very much like me

11. No hope for solutions to the world's problems

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

12. Would NOT change my life if I could live it over

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

13. Human-kind is hopeless

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

14. Satisfied with my life, work, and accomplishments

- A. Not at all like me
- B. Not much like me
- C. Somewhat like me
- D. Like me
- E. Very much like me

VITA

Ginger Davis Helm

Personal Data	Date of Birth: March 9, 1953
	Place of Birth: Corpus Christi, Texas
	Marital Status: Married
Education	Bellaire High School, Bellaire, Texas
	Howard Payne University, Brownwood, Texas, B.S.
	East Tennessee State University, Johnson City, Tennessee
Professional Experience	Graduate Assistant, East Tennessee State University, College of Arts and Sciences
	Advisor, Council for Adult and Experiential Learning (CAEL), Johnson City, TN
Honors and Awards	Gamma Beta Phi Society
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