# AGE AND EMOTIONAL WELL-BEING:

# THE VARIED EMOTIONAL EXPERIENCE OF FAMILY CAREGIVERS

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### INTRODUCTION

Research shows that as people get older, they enjoy a more positive emotional experience.¹ Laura Carstensen and others have shown that this is in part due to a focus on social relationships: Older adults derive more emotional benefit from their social network than do younger people.² However, this increase in well-being with age may not be not true across the board.

We hypothesize that older adults experience better emotional well-being when they can fulfill emotionally meaningful goals. In situations where older adults cannot achieve their relational goals, they do not experience agerelated emotional benefits.

Older people who have ailing relatives are an ideal sample for us to test our hypotheses, because some existing research suggests that this group experiences high well-being (because they are older), whereas other research points to low well-being (because they are caring for ailing loved ones).<sup>3,4</sup> The Stanford Center on Longevity collaborated with Comfort Keepers and ClearCare to better understand what aspects of caregiving might be detrimental to older adults' well-being.

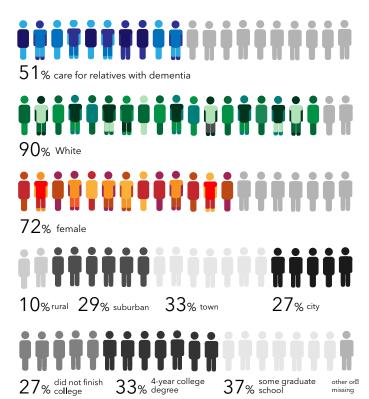


FIGURE 1: Characteristics of the sample

#### THE SAMPLE

We recruited participants who had hired a Comfort Keepers caregiver to help an ailing relative. We emailed surveys to over 2,000 such adults. The response rate was 22%, and of those responses, the completion rate was 75%, resulting in a sample of 376.

The sample ranged greatly in age, from 19 to 87 years old, with most participants being between ages 50 and 70. The majority of respondents were White and female, and they came from 37 states around the U.S. Figure 1 shows more summary statistics.

The survey was designed to assess participants' emotional well-being and their experiences with caregiving. Among other measures, each participant reported the type and severity of their relative's illness.

#### **FINDINGS**

This study partially replicates the well-known effect that older people report more positive emotional well-being than do younger people, and that there is considerable variation in levels of well-being, as defined by feeling more positive than negative in the past week (Figure 2).

Among older adults managing a loved one's health care, however, emotional well-being depends on the severity of the loved one's illness. Older adults who care for a relative with a mild

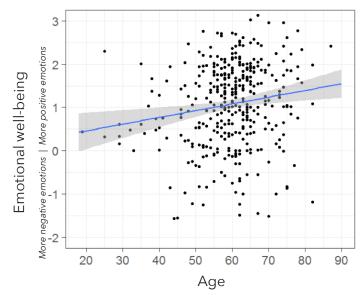


FIGURE 2: Overall, well-being is positively associated with age; however, emotional well-being varies greatly across individuals.

## FINDINGS, CONT.

illness report greater well-being than do younger adults, much like the general population. However, older adults caring for a relative with a severe illness do not experience the typical high levels of emotional well-being compared to other older adults (see Figure 3). Therefore, the positive association between age and emotional well-being is present for people whose relative has a mild illness but not for those who have a relative with a severe illness.

These results suggest that older people have higher emotional well-being than younger people but not when they have a relative with a severe illness. Moreover, our results contradict the dominant narrative of depressed, stressed-out caregivers. Not all older people with ailing relatives have low well-being; rather, it depends on the severity of the relatives' ailment.

Next, we sought to explain what accounted for lower levels of well-being among older adults who have a severely ill relative. Some possibilities include: hours spent providing care; interference with personal time or space; living in the same house as the ailing relative; financial strain; or interference with realizing social goals. We tested each possibility and found that

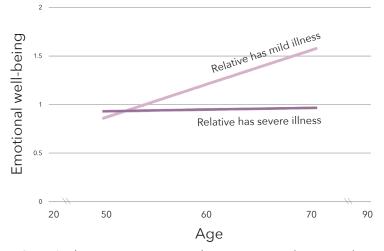


FIGURE 3: The positive association between age and emotional well-being is present for people whose relative has a mild illness, but not for those whose relative has a severe illness.

only one accounted for the impact on emotional well-being: Older adults with a severely ill relative report that their social lives suffer more than those with a mildly ill relative. In support of our hypotheses, older adults report lower levels of well-being when having a relative with a severe ailment interferes with their social goals.

This finding fits with what we know about aging: Social engagement matters. Older people who are more socially engaged are significantly healthier and happier than isolated older people.<sup>56</sup> This study shows that having a relative with a severe illness may interfere with a person's ability to maintain that social engagement, thereby hindering well-being.

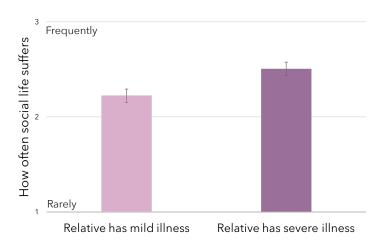


FIGURE 4: Participants with more severely ill relatives report more difficulty realizing their social goals than do participants with mildly ill relatives.

#### **IMPACT**

Our results show that a crucial factor to consider is the extent to which caregivers can remain socially engaged while also caring for an ailing relative. People who have severely ill loved ones in their lives may be particularly vulnerable to being unable to maintain their social lives in ways they desire. These findings have the potential to guide more targeted and effective interventions to ensure that caregivers can live healthy and happy lives.

#### **CITATIONS**

- 1. Carstensen, L. L., Turan, B., Scheibe, S., Ram, N., Ersner-Hershfield, H., Samanez-Larkin, G. R., ... & Nesselroade, J. R. (2011). Emotional experience improves with age: evidence based on over 10 years of experience sampling. *Psychology and Aging, 26*(1), 21.
- 2. English, T., & Carstensen, L. L. (2014). Selective narrowing of social networks across adulthood is associated with improved emotional experience in daily life. *International Journal of Behavioral Development*, 38(2), 195-202.
- 3. Pinquart, M., & Sörensen, S. (2003). Differences between caregivers and noncaregivers in psychological health and physical health: a meta-analysis. *Psychology and Aging,* 18(2), 250.
- 4. Adelman, R. D., Tmanova, L. L., Delgado, D., Dion, S., & Lachs, M. S. (2014). Caregiver burden: a clinical review. JAMA, 311(10), 1052-1060.
- 5. Pinquart, M., & Sörnsen, S. (2000). Influences of socioeconomic status, social network, and competence on subjective well-being in later life: a meta-analysis. *Psychology and Aging, 18*(2), 250-267.
- 6. Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist, 37*(4), 433-440.

