Aging in America: Time to Thrive

Deborah H. Hammons

University of Pennsylvania, debhammons@bresnan.net

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Abstract
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Keywords
aging, positive psychology, thrive, positive aging, meaning, positive emotion, relationships, engagement

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Aging in America: Time to Thrive

Deborah H. Hammons

University of Pennsylvania

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Advisor: George E. Vaillant, M.D.

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Abstract

A demographic phenomenon occurring in recent decades in the United States suggests that individuals approaching their retirement years will have unprecedented leisure time available to them. This project surveys literature on aging research, reviews positive psychology research regarding how to achieve well-being, and blends these two fields of research into a discussion of pathways to positive aging, in order to provide this information to individuals who wish to thrive in the second half of their lives. By using foundational tenets of positive psychology such as character strengths, positive emotions, engagement in activities, meaning, and relationships, individuals can develop strategies to improve their well-being, which may increase their longevity, along with their psychosocial and physical health. Empirical research is reviewed to validate the aging discussion, with particular attention to the cohort group of American baby boomers entering retirement age.
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Aging in America: Time to Thrive

Every day in the United States, unprecedented numbers of Americans cross into a demographic category not previously witnessed in the history of the world. Relatively healthy, active, and financially secure, they can anticipate years of vital engagement following their retirements (Neugarten, 1996). The first true leisure-class of America, these individuals may illustrate that “growing old” is not a fact of chronology, but rather a mindset and consequence of choices. Their biological clocks still ticking, they will enjoy life’s rewards and pleasures long past previous generations’ years of decline.

Called the pig in the python by demographers, this generation of baby boomers has worked its way through the U.S. population and is now entering their retirement years. The magnitude of their portion of the population increases the significance of the phenomenon of the change in their life cycle. In 1900, individuals older than 65 represented 4% of the American population; today, according to the U. S. Census, they represent 13% (Werner, 2012). This generation will encounter the challenges and triumphs of this new era of post-retirement vitality. Both men and women will be able to enjoy the dividend of abundant time to thrive and explore well-being.

Given this unique opportunity, the purpose of this paper is to review research regarding aging; to explore the known elements affecting it, with emphasis on those factors over which individuals have control; and to analyze how positive psychology may be used to increase well-being in the second half of life. Individuals will encounter the issues of aging as they begin this phase of life, but of equal importance, our society will face the issues of an aging population. Will this American generation use their newfound time in retirement to thrive or simply survive?
Will they use the gift of time to enhance their lives, the lives of their friends and families, their communities, and the generations who follow in their footsteps? I believe they have the power to make this choice, and with this paper, offer pathways to well-being for those who choose to thrive and flourish during this time in their lives.

**Aging in America**

Human aging is a physiological fact. It is also a fact that the life long process of maintaining human health as people age is improving (Aldwin, Spiro, & Park, 2006). Life expectancy in 1900 in the United States averaged 47 years, but today averages 79. Increases in longevity have occurred worldwide, in both developing and established economies. In the past, research on aging envisioned loss and decay as an inevitable part of the life cycle dominating life in the years preceding death (Rowe & Kahn, 1987). However, a great deal of what we view as the natural decline in physical and psychosocial health between the ages of 70 and 90 is the consequence of disease and accident rather than the process of aging itself (Vaillant, 2004). More recent research efforts demonstrate extrinsic factors affect cognitive and physical well-being, and these factors can be avoided, leading to years of healthy living without the losses previously associated with aging (Birren & Schroots, 2001).

In addition, a focus on the loss of physical and psychosocial health in maturing adults fails to recognize the variability within single demographic groups (Neugarten, 1996; Rowe & Kahn, 1987; Vaillant, 2003). In the United States, it is estimated (Modad, Markes, Stroup, & Gerderding, 2004) that the leading causes of death are smoking, poor diet, lack of physical activity, and alcohol consumption – all of which are extrinsic choices made by the individual and none of which are a result of intrinsic “natural” aging. Human behavior leads to 7 of the 10 primary causes of death (Fowler, 1990). Within any age group, the variability of health behavior
choices affects the rate of morbidity and mortality, in addition to other factors associated with advanced years. For example, both men and women’s skin wrinkles with age; however, smoking and sun exposure accelerate wrinkle production, which increases the appearance of age and exposes the individual to risk of cancer and heart disease (Kadunce et al., 1991). Individual life choices have consequences, many of which accelerate aging.

Fortunately, it remains possible to positively affect aspects of the aging process during the second half of life (Carstensen, Fung, & Charles, 2003; Vaillant, 2004). Human behavior, at any age, is the domain of psychology, which contains the scientific knowledge of behavior and the methods to change it (Fowler, 1990). The human chronological clock cannot be stopped, but the individual life’s quality and quantity of time may be increased with the knowledge being developed through science.

**Brief Overview of Theories of Adult Development and Aging**

The element of time is deeply embedded in our lives as Americans. We cannot speak without using the English grammatical structure of time in our verb tenses -- past, present and future. Our words themselves reflect passages of time as infants become toddlers, and toddlers become preschoolers and kindergartners, each category with connotations of distinct, but often unspoken characteristics. Even our institutional structures reflect age grouping, from college football stadiums to senior citizen centers. Our governmental laws designate specific ages at which life changing moments occur: school entrance (age 5, with variations dependent on state regulations); eligibility to vote and enlist in the military (18); age of majority (consumption of liquor at age 21 and cessation of Social Security benefits for minors); Social Security eligibility and Medicare (edging past 65 with funding debates). Each of these chronological markers establishes in the mind of society and individuals passages from one age category to another.
(Birren & Schroots, 2001). Depending on their fields of study, researchers approach aging from different perspectives: sociological, psychological and biological, and various combinations. The last half-century has witnessed a growth in understanding of aging, and with it a multitude of life development and aging theories. For purposes of this paper, I will limit my overview to research that adds insight to increasing well-being as we age.

Matilda White Riley (1996), an American gerontologist and sociologist who directed Social Science Research at the National Institute of Aging from 1979 – 1991, wrote extensively about age stratification and the aging society perspective. As a sociologist, Riley believed that social structures and social change were powerful organizers of individuals’ lives. The age-stratification paradigm that Riley described advanced the concept that societies have hierarchal age structures that ascribe power to each age strata within a society (Riley & Foner, 1972). The result is ageism, or societal inequality based on age.

Over time, Riley’s concepts (1972, 1986) evolved from the age-stratification paradigm to the aging and society paradigm (Riley, 1996). She came to believe that society alone did not dictate the age hierarchy, but rather aging and society influenced one another. Riley advocated a broadening of the life course perspective, and offered as examples the changes she witnessed during her own lifetime. For example, Riley referred to the issue of increased longevity affecting the kin network, which, in turn, created a need for employed middle-aged women to care for their elderly parents while they also raised their own children. Society was not dictating the relationship or situation; increased individual longevity was interacting with society norms to create a new social issue: care of elderly parents. Riley believed that research in life development stages overemphasized individual people rather than taking the broader view of the interconnections between people and societal institutions.
Bernice Neugarten, a psychologist who was a contemporary of Matilda White Riley’s, wrote for over fifty years on adult development and aging (Neugarten, 1996). Neugarten, a winner of the Gold Medal in Life Achievement in Psychology from the American Psychological Association, was among the first to study aging. Her research dispelled many misconceptions about aging in America, including the midlife crisis, menopause as a traumatic event in the lives of women, and the empty nest syndrome. Neugarten’s work also revealed that there was no single successful route to aging, and variability among individuals far exceeded limited numerical age descriptors. She described a new category of the “young-old,” the individuals who remained active and engaged in life, which distinguished them from the “old-old” (Neugarten, 1981). Throughout her life’s work, Neugarten advocated for a more nuanced and fluid view of individual aging and adult development.

Bernice Neugarten (1987) described three perspectives that affect how age is viewed. Within American society, age is a major component of how we are organized socially. This first perspective of age is evident in the differentiated ways that institutions, families, schools, and even communities are organized. For example, the teachers’ lounge or work area in schools is populated with adult teachers and not the students, who are considered to be in a different age classification, and as such, belong in another part of the building. The second perspective that affects the way in which aging is viewed is the way in which people relate to each other. A young man telling his grandmother about a movie he saw the evening before will use different words than if he describes the same movie to his friends. As soon as we see an individual, our assumption regarding the person’s age leads us to adjust our behavior.

The final and third perspective on age, as described by Neugarten, is how we view ourselves. Regardless of our ages, whether children, middle-aged adults, or assisted living
residents, humans frequently ask themselves, “How am I doing – for my age?” Our comparators throughout our lifetimes continue to be our chronological peers. Neugarten’s three perspectives on age – how our society views age, how we view one another, and how we view ourselves – provides a framework to assess the issue as a whole and observe changes as they occur. She states that new patterns of aging have blurred the age demarcations in America, adding complexities that challenge the individual as well as the society at large.

Neugarten (1964) also played a pivotal role in the evolution of a series of aging theories. The disengagement theory that had been proposed by Cummings and Henry (1961) stated that as individuals aged and approached death they disengaged from activities and experienced a decline in both social and psychological involvement with life. Neugarten (1964) offered the activity theory of optimal aging, which proposed that individuals with high activity levels enjoyed higher levels of life satisfaction, and that those with lower activity levels correspondingly had lower life satisfaction. Findings from her research lead her to suggest that three elements were involved in aging after age 70 – activity, satisfaction, and personality type. Neugarten stated that neither the activity theory nor the disengagement theory were satisfactory explanations of activity levels and life satisfaction, because they did not account for variations in personality.

A third theory of aging, the continuity theory (Atchley, 1989), expanded on Neugarten’s activity theory. The continuity theory contends that as individuals age they make adaptive choices by referencing their own pasts and using those experiences to create strategies for dealing with their personal life changes. These adaptations are influenced by individual preference and social pressures, but provide a continuity within the individual’s own life story. Understanding these three theories, disengagement, activity, and continuity, helps identify critical components in enhancing well-being for individuals as they age: the relationship
between age and activity levels and the individual’s interpretation of their own life changes with advancing age.

The history of the development of gerontology helps to shed light on the unfolding aging complexities studied these past decades. Ironically, the baby boomers and the field of gerontology follow the same chronological trajectory. Following World War II, as American soldiers returned to their hometowns and began producing the modern era and the next generation, many countries became aware of the increase in longevity in their populations (Birren & Schroots, 2001). An increased need for information regarding age related disabilities, treatments, housing and capabilities of older adults developed. James E. Birren, one of the founders of the organized field of gerontology whose career spanned six decades, established much of the structure of modern gerontological theory. Birren was the first to scientifically research the age related process of slowing behavior, which continues in the field of gerontology today. However, his most critical contribution to the field involves the concept that “quality of life” includes biological, psychological and sociocultural domains.

Birren (2009) writes that the expansion of life development research brings together new fields of study, many of which are assets of healthy aging. He offers social intelligence as an example, one that he proposes improves with age. Life experiences teach individuals when to respond and when to hold their tongues, depending on the situation and those involved. Youth frequently lacks that social intelligence and self-regulation capacity to adjust their behavior according to circumstances. However, Birren describes the uncertainty facing the new generations entering the second half of their lives as they address the possibility of 30 additional years of active living. He suggests that they lack models, the grandparents or parents, whose
lives could guide and demonstrate how to successfully use this gift of time. This phenomenon of change in the life cycle remains a challenge, for both individuals and our society as a whole.

An additional, and significant, life development theory was proposed by Paul Baltes and his colleagues (Birren & Schroots, 2001). The central theory of their life span model, called “selective optimization with compensation,” consists of three interacting components: selection, optimization, and compensation (Baltes, 1997). In essence, the theory proposes that the course of life development is a process of gains and losses. As the individual ages, he or she may lose abilities, which causes the individual to select a more restricted environment in order to function successfully. The individual may also optimize life by selecting ways in which to enhance and maximize the life course. With advanced age, the individual faces increasing challenges to navigate the sea of gains and losses, with losses dominating the landscape. Eventually the decrease in gains and increases in losses leads the individual to compensate for the newly restricted situation.

Laura Carstensen, the founding director of the Stanford Center on Longevity, and her colleagues (Carstensen, Isaacowitz, & Charles, 1999; Carstensen, Fung, & Charles, 2003; Charles & Carstensen, 2010) suggest a different model for understanding the course of lifespan development: socioemotional selectivity theory. This theory and supporting research divide human social motivation into two categories, knowledge acquisition and emotion regulation. With regards to aging, this empirically supported theory describes a shift in motivation with age. As the individual enters the second half of life, they perceive their own finite amount of time remaining, which correspondingly impacts their personal choices. Rather than the Baltes model (1997) of increased loss in later years, the socioemotional selectivity theory finds stability in emotional regulation in the latter years of life.
Carstensen and colleagues (2003) state that as individuals age their domain of emotion is spared from decline, and actually may increase. They attribute this phenomenon to the individual’s perception of time. Given the acknowledgment of their own mortality and death, they have increased motivation to derive emotional meaning from their lives. Additionally, they have decreased motivation to expand their horizons. The consequence of these motivations results in decreased acquaintances for the individual, but increased meaning with the friends and family members who remain close. When emotion-related goals have more importance than knowledge-based goals, individuals savor special moments and focus on the present in their daily lives, in addition to connecting with others in meaningful ways. Rather than facing a loss with age, there is an emotional boost that contributes to a sense of well-being for those in their latter years. The empirical findings of Carstensen and colleagues hold the promise of people increasing their well-being and satisfaction with life as they enjoy the second half of their lives.

The fields of gerontology and geropsychology stand at the intersection of biological science and social science. As researchers seek explanations for the phenomenon of aging, they encounter the power of thought, emotions and actions to influence biology (Birren & Schroots, 2001). Great strides have contributed valuable new insights regarding aging, including the use of longitudinal studies, such as George Vaillant’s Harvard Grant Study (2008). By studying longitudinal individual variability, research clearly demonstrates the significant impacts apparent in extrinsic factors on aging. The snapshots that individual empirical research projects provide do not adequately address the long-term psychological changes accompanying aging. No single method of investigation provides all the answers, but each contributes illumination on the issue of the most effective ways to age with maximum health and well-being.
According to James Birren, with over 250 articles and awards too numerous to list, what has become clear in the history of the study of aging theory is “that age in itself doesn’t cause anything” (Birren & Schroots, 2001, p. 25). Age is simply a convenient method of categorizing group phenomena. An individual’s birthdate and number of years lived do not reflect an accurate index of the individual’s physical and psychological state of being. As knowledge regarding aging continues to develop, opportunities to improve quality of life promises to increase for those who choose to apply the newly discovered information in their individual lives. Applied collectively within an age cohort, these quality of life choices may profoundly improve well-being in the second half of life and raise expectations to thrive during retirement.

**Factors Influencing Aging**

It is beyond the scope of this paper to provide a thorough overview of the biological and physical elements affecting aging. However, because the goal of the paper is to inform individuals how they may positively influence their own aging, it is important to share information with them regarding those factors that may affect their ability to thrive. In this section, I will briefly review the misconceptions regarding aging factors, offer research based factors that prevent or delay aging, and provide an introduction to some of the aging models that offer a foundation for making healthy choices in the second half of life. Various researchers have proposed a number of names for this effort to develop methods of aging well: successful aging, optimal aging, positive aging and healthy aging. Many of the models share some of the same components.

Foundational knowledge in aging has been provided through the life work of George Vaillant, a psychiatrist and former Director of the Grant Study of Adult Development at Harvard Medical School, the first interdisciplinary study in the world to study mental and physical health
from adolescence through old age (Vaillant & Mukamal, 2001). Vaillant conducted the research project of life span development of 824 men and women over 60 years. This longitudinal approach to the study of adult development has provided invaluable insight into the aging process and maturation. Vaillant (2004, 2008) describes six variables gleaned from research that do not predict positive aging: ancestral longevity, cholesterol, parental social class, warm childhood environment, stable childhood temperament, and stress.

For anyone with ancestors who died at young ages, the shadow of genetics looms large as they approach their later years. Vaillant’s findings offer some solace (2008, 2012). Specific genes that cause diseases do shorten lives, such as the BRCA 1 gene’s relation to breast and ovarian cancer (Miki et al., 1994); however, by the time someone reaches the age of 70, genetic factors do not appear to influence longevity. Vaillant (2004) suggests that each individual possesses such large quantities of genes that the result is an averaging of both long and short-lived genes.

Popular magazines and pervasive advertising would have everyone in America with elevated cholesterol levels taking medication. Vaillant’s (2008) and other much larger research projects (Krumholz et al., 1994) found that cholesterol levels higher than 240 mg/dL for those over 70 without previous heart disease episodes did not warrant medication. Elevated cholesterol levels in those with heart healthy histories did not predict morbidity or mortality in retirement. Of course, those with personal histories of heart problems are recommended to take cholesterol lowering medications in order to increase their healthy longevity prospects.

Parental social class, warm childhood environment, and stable childhood temperament do not affect longevity once the individual attains the age of 70, although all may impact the younger adult, which in turn, may lead to premature morbidity or death. Vaillant’s research
(2008) demonstrated that the issues of those conditions were compounded by drug and alcohol abuses, lack of education and mental illness. The individuals’ upbringing and temperaments when young, in and of themselves, were not predictors of length of life.

Stress in the short term can seriously impact health. Over the long-term, however, stress alone is not as critical a factor in aging as how the individual deals with the stress (Vaillant, 2008). Again, the common concept that stress by itself cuts short our lives is based on misconceptions and not data. However, data does indicate that mature coping styles support healthy mental aging.

With regard to factors that produce longevity, Vaillant’s research reveals 7 categories that do predict positive aging: not smoking, avoiding alcohol abuse, healthy weight, exercise, and years of education. Additionally, mature coping styles affect mental health in aging. Many of these factors are widely known and do not require in-depth discussion. Vaillant found that among the Grant Study subjects, the greatest predictor of healthy physical aging was the individual not smoking or quitting smoking while young. Of note were the research results that showed that those who quit smoking by age 45 (one pack a day for 20 years) were not detectable as harmed by their smoking by age 70 or 80. A caveat is needed, however, in that alcoholism appears to affect individuals who continue to smoke, and may be the proverbial horse that pulls the cart in that individuals who continue to smoke may have issues with their alcohol consumption.

The second most predictive factor in the Grant Study was the use of mature coping defenses. In common terms, this is the ability of an individual to avoid turning molehills into mountains – don’t sweat the small stuff. Additionally, those with finely tuned mature defenses are able to practice the old adage: break an egg -- make an omelet, or in Vaillant’s words “turn
lemons into lemonade” (2004, p. 574). Absence of alcohol abuse, healthy weight, and regular exercise, which are behaviorally motivated, along with stable marriage and years of education, predicted longevity. The combination of these 7 positive aging factors at age 50 predicts healthy aging 30 years later. Of added interest to the aging population, however, is that many of the factors can be adopted after age 50 to increase positive aging. We are not necessarily doomed to endure our less than stellar choices made in the first half of our lives.

In that same vein of investigation, Rowe and Kahn (1987) in their research described the difference between “usual” and “successful” aging. They stated that the so-called effects of the usual aging process were exaggerated, with the mediating factors of diet, exercise, personal habits, and psychosocial components being underestimated. Again, their work demonstrated that substantial variations existed among older people, and they strongly warned against the common practice of using averages in aging research. They suggested additional research to investigate successful aging among individuals that could focus on which extrinsic factors played a positive or neutral role in the aging process in order to develop strategies to promote healthier aging.

Within a decade, Rowe and Kahn (1997) and other researchers’ efforts revealed specific findings for use in the development of successful aging strategies. The MacArthur Foundation Funding Network on Successful Aging funded much of the work in the field, recognizing the benefits to society with the significant increase in the amount of individuals aging in America. Rowe and Kahn defined successful aging with three components: avoiding disease and disability, maintaining high cognitive and physical abilities, and engaging in social and productive activities. They believed the combination of all three elements produced the fullest realization of successful aging.
Much of Rowe and Kahn’s work (1997) is based on the Swedish Adoption/Twin Study. These reports reveal three consistent findings. First, intrinsic factors, although significant, do not dominate the risk factors affecting the aging process. Elements of lifestyle and extrinsic environmental factors play a very important role in risk of disease. Second, the contributing factor of genetics plays a decreasing role as a person’s age advances, and the factor of lifestyle choices increases in importance. Third, of great significance to this paper and the concept of affecting the second half of life through behavioral choices, the usual process of aging can be modified.

Of particular interest to our purposes in exploring the paths to well-being, Rowe and Kahn report the results of the MacArthur studies with regard to aging for cognition, physical function and continuing engagement with life. With regard to cognitive function (Rowe & Kahn, 1997), educational attainment appears to be protective, and cognitive maintenance can be modified with selected activities. Of interest is the surprising discovery that strenuous physical activity around the house also improves cognition. Healthy aging is also predicted by maintenance of high physical activity, with moderate exercise conveying similar advantages to more strenuous activities. The third component of successful aging, engagement with social and productive activities contains two major elements, both of which can be modified through behavioral choices. Maintaining relationships with others and participating in productive activities creates preventive aging strategies.

Unfortunately, some of the research regarding life stage development and aging neglects to address the issue of alcoholism, which afflicts between six to 20 percent of the population. The use of prospection in the Grant Study (Vaillant, 2012) provided detailed physical and psychological assessments across time that were supported with medical examinations, in-depth
interviews, self-reports, and reports from family members regarding behaviors. This longitudinal method enabled researchers to examine factors that affected the participants’ lives as they aged. As the study revealed over time, alcoholism and its detrimental effects were not necessarily evident when the participants were younger. (By age 70, 46% of the inner city alcoholics and 35% of the college alcoholics were dead.) As George Vaillant discovered, alcoholism and alcohol abuse affects far more than many of us suspect. Vaillant’s work demonstrates that alcoholism causes many personality disorders, in addition to tragically affecting these individuals, their marriages and families. Insightful research should statistically control for alcohol abuse when evaluating individual characteristics and behaviors in order to help us more fully understand which factors can contribute to our well-being.

For our purposes, it becomes important to identify those factors over which individuals may have control in their own aging processes. Research identifies the significance of individual variability within adult life development (Birren, 2001; Carstensen, 1999; Neugarten, 1996; Rowe & Kahn, 1997; Vaillant, 2008) and the power of selected behaviors to modify the aging process. Individuals who choose to follow these findings can predict longer and healthier lives: do not smoke; limit alcohol consumption; maintain healthy weight; and exercise on a regular basis. Although beyond the scope of this paper, these protective factors affect biological health and are important ingredients in healthy living, at any age.

In addition to the litany of common health standards for living, other behavioral factors remain that are not as widely understood in the general population, including alcoholism, which is often misattributed by social scientists to depression or low social support systems, rather than identified as the root cause of multi-faceted negative behaviors (Vaillant, 2012). These hidden factors mask complex systems of human behavior. Research studies that identify and
statistically control individual behaviors hold greater promise for helping us to understand the consequences of our daily choices. Increasingly, research reveals the importance of individuals engaging in productive activities, maintaining relationships with others, seeking and savoring positive emotions, and finding meaning in life, all of which contribute to building resilience for life’s challenges and learning to flourish (Seligman, 2011). These factors promise to enhance the lives of those who choose to thrive as their birthdays advance.

**The Power of Subjective Well-being in Aging**

Before addressing the factors that each of us can employ to improve the second half of our lives, we need to understand the ways in which our thinking about age impacts our own aging process. In George Vaillant’s longitudinal studies (Vaillant & Mukamal, 2001), he used a six-pronged model to analyze subjective and objective aging with two cohorts, college and inner-city adolescent boys who have grown to old age during this on-going study. This assessment model used six contrasting measures of health, including objective measures of physician assessment of lack of disability, independent researchers assessment of mental health, and independent raters assessment of social supports. Subjective measures, through self-reporting by the research participants, included the categories of self-assessment of physical health, mental health, and life satisfaction. The men of the Study of Adult Development show that objective good physical health was less important than subjective good health (Vaillant, 2008). What we think about our own health and aging trumps what others, even experts, may believe to be true about us.

There are limitations to the Study of Adult Development, including the quantity of participants and the lack of a broad spectrum of women (the Terman women longitudinally studied had been selected because of their precocious intelligence as elementary age students).
However, additional studies, both longitudinal and quantitative, appear to support the Study’s findings. The issue with quantitative empirical studies and other longitudinal studies resides with their initiation of assessment once individuals have already entered “old age.” Medical assessments at age 50 are accurate predictors of longevity, whereas subjective assessments at age 70 are of far less value as future predictors of health.

To understand personal attitudes regarding aging takes no more than a return to Bernice Neugarten’s question from 1987: “How well am I doing for my age?” (p. 72). First, individuals look to their community and country to determine how their society views someone their age. Does their employer hand them a retirement worksheet on their birthday? Next, they view how others react to them. Do their children tell them they shouldn’t travel because someone their age needs to be more careful? And finally, how do they view themselves? Do they go to their class reunion and ask who are these old people? All of these factors influence personal aging assessment.

With regard to how our society and others view aging, researchers (Hess, 2006) present strong evidence that negative attitudes prevail against aging within the Western culture. From patronizing talk from younger people to work-place stereotyping, the issues of negative behavior are a known factor in our culture. An interesting study (Levy & Langer, 1994) involving aging individuals from the United States and mainland China demonstrated that differences in memory were related to how individuals in the two cultures viewed aging. Americans’ beliefs regarding aging were less favorable than the views of the Chinese, and that belief correlated with decreased memory performance among Americans. The researchers suggest that the cultural belief regarding aging plays a role in the degree of memory loss experienced in aging Americans. Again, variability among the Americans regarding personal beliefs of aging and memory loss
were significant. As Americans age, they are not necessarily destined to reflect the views of our culture or to have that belief impact their memory capacity.

The encouraging news for our aging population is that positive attitudes towards aging appear to promote longevity (Levy, Slade, Kunkel, & Kasl, 2002). A study in Ohio covering a 23 year time span revealed that positive self-perceptions of aging among respondents correlated with 7.5 years increased longevity. How the individuals perceived their own aging had a greater impact on their survival than their gender, socioeconomic status, loneliness, and functional health. This presents critical information for individuals preparing for their post-retirement years. What they believe about the aging process, their own age, and their ability to age well has the potential to significantly impact the second half of their lives. How to build that belief? The remaining portions of this paper will address the means to begin thriving as people begin to enjoy their retirement years.

**Positive Psychology**

Positive psychology is a new field within psychology investigating the construct of well-being, a concept debated by humans since the time of Aristotle (Haidt, 2006; Peterson & Seligman, 2004). While psychology is the study of the mind and behavior, positive psychology focuses on those human behaviors that lead to man’s happiness and flourishing (Seligman & Csikszentimihalyi, 2000). Psychology, in its first century, primarily dealt with mental illness, mental dysfunction, and mental disease, all of the words that describe individuals who others consider to be suffering illnesses that seemingly originate in their minds. From its beginnings, positive psychology aimed to focus on changing that model of psychology – from one of repairing damaged psyches to one that also built positive lives that could thrive. The goal was not simply to live, but to live well and flourish (Seligman, Steen, Park, & Peterson, 2005).
In 1998, Dr. Martin Seligman, a professor of psychology at the University of Pennsylvania who had developed the significant theory of “learned helplessness” as a graduate student, was elected president of the American Psychological Association. Seligman challenged his fellow scientists to begin studying not the mental illnesses of humans, but the mental wellness of humans. Pop psychologists, motivational speakers, and preachers had long espoused the power of a positive mind, but psychology, as a science, had chosen to dwell on mental problems (Peterson, 2006), and for the most part, had ignored all of the individuals who seemed to be living productive, healthy, happy lives. What were their secrets to mental health – were they born that way, did they just happen to land in the right family nest, were they wired to thrive while others were wired to merely survive? Could others learn elements of their well-being?

Seligman was not the first to ask these questions. The premise of positive psychology had been discussed long before his tenure as APA president (Peterson, 2006; Seligman & Csikszentmihalyi, 2001). Rather, positive psychology simply provided the wing under which the various efforts to categorize human well-being could gather. A group of prominent social scientists soon established a framework for the science of positive psychology (Seligman, 2002). In 2000, Seligman and Mihaly Csikszentmihalyi, the creator of the concept of flow (the psychology of optimal experience), wrote a seminal article in the *American Psychologist* that outlined the purpose and structure of positive psychology. They stated that a science of positive subjective experience promised to improve the quality of life, along with preventing mental pathologies. Csikszentmihalyi (Seligman & Csikszentmihalyi, 2000) expressed the desire to reconcile the two mandates that he believed a science of human beings should include: to understand what *is* and what *could be*. Their vision extended far beyond personal well-being to the goal of building the factors that enable individuals, communities, and societies to flourish.
The science of positive psychology continues today, but with evolving changes as its practitioners conduct research and discover the nuances of this new construct. It remains true, however, to the initial quest of its originators. Positive psychology is first and foremost an empirically based science, using the most rigorous standards (Seligman & Csikszentmihalyi, 2001). The research work must be repeatable, cumulative, and objective. Positive psychology scientists currently focus their research on human behavior, and also research positive interventions to see which factors may contribute to well-being. For purposes of this paper, by examining the findings of positive psychology and using the knowledge from aging research, it becomes possible to suggest ways in which individuals entering the second half of their lives can use positive psychology interventions to increase their personal well-being.

The primary tenets of positive psychology include building positive character strengths, positive emotion, engagement, meaning, relationships, and accomplishment (Peterson, 2006; Seligman, 2011). In their original discussion of positive psychology, Seligman and Csikszentmihalyi (2000) mentioned the importance of building positive character traits such as optimism, creativity, self-regulation, self-determination, integrity, and wisdom. Additionally, they reviewed the long history of their predecessors, William James, Carl Jung, Gordon Allport, and Abraham Maslow, who explored concepts such as spiritual ecstasy, play, creativity, and peak experiences. They also discussed the power of building traits to buffer against adversity, and to develop resilience.

It soon became apparent that the multitude of positive attributes of human behavior required a system of organization similar to the DSM-IV (Diagnostic and Statistical Model of Mental Disorders), the text which social scientists worldwide use as their common “dictionary” of terms for diagnosis of mental illness. Seligman and Chris Peterson (2004) created a handbook
of “Character Strengths and Virtues,” which could be used across the globe as a means to research, empirically test and validate, and discuss terms critical to positive psychology. Their efforts found 24 character strengths, which had been used throughout history and in a wide assortment of cultures to describe positive human traits. In addition, through their research they found that when individuals identified their signature character strengths and used them regularly, their life satisfaction improved significantly (Peterson, 2006). This phenomenon has been repeatedly demonstrated as a means to improve well-being for individuals (Linley & Joseph, 2004).

In 2002, Seligman published his book *Authentic Happiness*, in which he listed the components of his theory of positive psychology. He covered the topics of positive feelings, positive character, happiness, engagement, love, meaning and purpose, in addition to others. Dissatisfied with the word happiness, Seligman continued to refine his ideas, culminating with publication of his book *Flourish* (2011), which outlines his current theory of well-being. In it he refines the ideas previously offered, and suggests that his new model, the well-being theory of PERMA (positive emotion, engagement, relationships, meaning and accomplishments), satisfies the drive to attain well-being and to flourish, a much fuller word in meaning than the transitory and often misunderstood word “happiness.” In well-being theory each of the five elements in PERMA must exhibit the following characteristics: 1) it contributes to well-being, 2) many people pursue it for its own sake, and 3) it is defined and measured exclusive of the other characteristics.

The first of Seligman’s five elements, (P) positive emotions, is shared with his authentic happiness theory. Positive emotions fuel well-being, but happiness and life satisfaction, which are the result of positive emotions, are simply a part of the whole construct of well-being, and no
longer the end goal (Seligman, 2011). Psychologist Barbara Fredrickson (2001, 2009, 2013), one of the world’s leading authorities on emotional positivity, studies positive emotions such as love, joy, gratitude, serenity and hope. Fredrickson’s extensive research in the field of positive emotions led to her discovery of the broaden-and-build theory. It describes the phenomenon of individuals who experience positive emotions becoming more receptive and more creative. In essence there is a broadening of experiencing and the way in which a situation or issue is viewed, along with a building of additional motivation and engagement in positive and productive experiences – a broadening of the mind. Fredrickson describes it as an “upward spiral” (2009, p. 69). For example, the positive emotion of joy sparks individuals to play and be creative. Curiosity or interest motivates us explore and seek more knowledge. Increasing positive emotions in an individual’s life helps them build their best possible future.

The second element of Seligman’s theory, (E) engagement, reflects the work of Csikszentmihalyi (1990). Viewed as “the optimal experience,” flow as engagement describes an individual feeling as if time stops, as if an activity involves the participant to the point where he or she becomes oblivious to personal feelings and environment. Engagement in the activity becomes the central focus. Csikszentmihalyi provides the example of rock climbers, whose absorption in their sport mesmerizes them to the point of intense, total concentration, one handhold at a time. Participants are repeatedly drawn back to their experiences that produce flow, although subjectively they state that they do not feel emotions during the experience itself. It appears that the term engagement used by life stage development scientists is less intensive and obsessive than the term “flow” as used by Seligman and Csikszentmihalyi; however, the principle components share the concept of active participation, attraction to and absorption in the activity, and positive emotions experienced recalling engagement in the activity. For example, a
volunteer teaching line dancing at a senior center may not have the total absorption of a rock climber in Yosemite, but nevertheless is positively engaged in a way that their well-being is enhanced.

The R in PERMA, which represents relationships, was a principle focus of Seligman’s colleague, Chris Peterson, who repeatedly said, “Other people matter” (Peterson, 2006). Increasingly research demonstrates the power of relationships to create well-being in individuals, and its absence becomes a critical factor in individual lives (Lyubomirsky, 2008). The work of Fowler and Christakis (2009) demonstrates the contagious aspects of happiness, with it appearing that happiness spreads up to three degrees of separation. For example, an individual experiencing positive emotions shares that with a friend, who in essence “catches” the happiness and spreads it to another friend. This phenomenon creates clusters of happy people in communities, and conversely, clusters of unhappy people. Our relationships with other people matter to our well-being (Gable & Gosnell, 2011). This becomes a critical factor for mature individuals whose network of relationships changes with retirement (Isaacowitz, Vaillant, & Seligman, 2003). Fishing alone is enjoyable to some, but fishing with a friend and sharing the thrill of catching a big one produces another level of enjoyment, not only in the moment but through shared and savored memories.

As we move forward into the discussion of age and positive psychology in the next section, it will be beneficial to recall the juxtaposition of relationships and meaning as they are revealed in life stage development theory. Seligman (2011) continued the concept of (M) meaning in his well-being theory from his authentic happiness theory, and considered it, like positive emotions and engagement, to be a subjective component. Before the creation of positive psychology, Seligman (1990) suggested in his book *Learned Optimism* that meaninglessness
contributed to depression, and that a necessary component for meaning was an attachment to something larger than the individual. This concept of meaning becomes an integral part of how individuals who age interpret their own lives, and is an important development in maturation (Birren, 2006; Lyubomirsky, 2013; Vaillant, 2012). Positive psychologists consider meaning to be a fundamental part of flourishing. Mere pleasure, such as savoring homemade ice cream, becomes more meaningful, and compounded, when it is shared with your family at your grandson’s first birthday.

The last addition to Seligman’s well-being theory is the (A) achievement element (Seligman, 2011). Suggested to him by a graduate student in the first of his Master of Applied Positive Psychology classes at the University of Pennsylvania, the addition of achievement was embraced by Seligman because he believed it fit the three criteria for inclusion in PERMA: many individuals pursue achievement for its own sake, it can be measured independently from the other elements, and, in his opinion, it contributed to well-being. Because the concept of achievement as a positive psychology and well-being factor lacks the extensive empirical validation that the other positive psychology elements possess, I am choosing not to include it in my construction of pathways for well-being in the second half of life. In addition, I believe it does not fit into the aging schema as portrayed by both longitudinal (Vaillant, 2012) and empirical life development research (Charles & Carstensen, 2010). Accomplishment and achievement may have significance as a desired outcome for some individuals during retirement, but it is also possible for them to achieve in the other arenas of positive psychology: building character strengths, positive emotion, engagement, relationships, and meaning and purpose. Suggestions for pathways to well-being do not preclude individual efforts to find meaningful personal goals.
Social scientists do recognize specific groups of individuals who struggle more regarding achievement or accomplishment with their aging. I highly recommend positive psychologist Sonja Lyubomirsky’s book *The Myths of Happiness* (2013) for those individuals, in that it contains a chapter that specifically addresses how to resolve personal issues in the arenas of accomplishment: *I Can’t Be Happy When...I know I’ll Never Play Shortstop for the Yankees.* For those with regrets, Lyubomirsky’s book offers ways to approach resolution of that issue, in order to progress and enjoy the remaining years of life.

The ideal of thriving in the second half of life requires motivation, determination, self-regulation, self-efficacy (belief in one’s ability to reach desired outcomes), resilience, hope – all of which are human characteristics studied in positive psychology and which help individuals to attain well-being. Throughout the next section of the paper, these necessary tools of well-being behavior will be introduced and integrated into the suggested ways in which individuals may thrive in the second half of their lives.

**Time to Thrive: Positive Psychology in the Second Half of Life**

Claire drives to the Worland Senior Center to eat lunch several times a week. She often meets her son there, who is also a “senior citizen,” or she joins others that she has befriended at the Center over the years. With stylish salt and pepper hair, and bright, dark eyes, she dresses well with colorful, small prints that fit her petite frame. Claire’s voice is firm, she listens intently, and she laughs easily. After a few sentences, it becomes clear that she does not suffer fools gladly, but she is attentive and carefully considers her answers before speaking. She lives in a condominium that she and her husband purchased ten years ago when they moved to be close to their daughter and son-in-law.
Claire is 94 years old. She retired in 1972, 41 years ago. Her husband passed away four years ago after their 71 years of marriage. “I suppose if I had to do it again, if he asked me to marry him …,” Claire waits, then smiles. “I’d probably say yes. It helps in life to have a good marriage. Not a perfect one. No one has that -- but a good one.”

When asked if she has advice for those entering retirement, Claire carefully considers the question, then speaks clearly. “You have a choice in life. You can choose to be happy. Or you can choose to be unhappy -- makes everyone around you unhappy too. It’s your choice.” Claire lifts her hands and shrugs. “I choose to be happy.”

When individuals ask how they can successfully age, they think of people like Claire, or James Wilson, who drives every morning to the YMCA in Casper, Wyoming and picks up the janitor on the way to let him into the building. James is heading to his daily 45-minute workout, which he began ten years ago after a bypass surgery at age 87. “I’d rather be in bed, but you can’t do that,” says 97-year-old James as he steps up to the treadmill. “Motion is the key to life.” (Storrow, 2013).

With age comes wisdom, or so they said when I was growing up. Claire and James both demonstrate that adage. Claire’s attitude – choosing to be happy, and James’ activity – keep on moving, happen to be hallmark components of successful aging. Rosa Finnegan in Needham, Massachusetts, demonstrates another element. Rosa hitches a ride into work every day with a co-worker at a stainless-steel needle factory in a Boston suburb. She loves her job and is considered a valuable employee by her boss. Rosa recently celebrated her 100th birthday with her fellow employees at work. “I’d rather be here than almost anywhere,” she says. “You feel like you’re still a worthwhile person, even though you’re old – you’re not sitting in a rocking
“Chair” (Trumbull, 2012). Rosa *loves* what she is doing and believes her life has *meaning and purpose*.

By taking the research of positive psychology and combining it with aging research, it is possible to describe the empirically based factors that can be chosen in order to thrive in the second half of our lives. Most of the factors are well-known and have been used for centuries, by both individuals and various cultures (Buettner, 2012). The difference for today’s aging American population is the predictability that they will have significantly more years in which they can use this knowledge to enhance their lives and daily living. The desired outcome for baby boomers is not to simply live longer, but to live better. As they enter this new, uncharted territory of longevity, it is as if they need a new map to help them understand where they are, where they want to go, and the best routes to arrive where they want to be.

Part of the definition of the “second half of life” was described by Bernice Neugarten (1979) as a time when individuals come to the realization that their own life is finite, that they are mortal, and their end is within view. This viewpoint brings a depth of meaning to them and heightens their interest in how to spend their remaining time. For some, these decisions are conscious, while for others, they simply make choices that lead them to spending their time in new ways. Everyone sees things differently from the viewpoint of 40, rather than near retirement. At that moment in life, many individuals are thinking about the rest of their life and reevaluating their past, present, and future. It is at this moment that they find the following information of value. It is my hope to offer suggestions for physically and mentally healthy individuals to thrive for decades. I also hope that they will be models for all of us, and show us how to spend the second half of our lives in productive, meaningful, and pleasurable ways, making our world a better place for not only ourselves, but others as well.
Where Am I?

Larry’s smile radiated pure joy. “I just retired for the second time, and I’m having the time of my life!” With his dark brown hair slicked straight back, Larry’s age is difficult to determine – somewhere past 65. His skin is weathered, but the smile that fills his face is the only thing you see. His first career was working on the line at a can manufacturing plant; his second job entailed working with boys at a state youth penal institution. Larry says, “The only ones I answer to these days are God and my wife. I can do whatever I want with my time and take as long as I want to do it.” Larry feels good about his past, looks forward to his future, and “sure as heck” enjoys every day.

In describing “positive aging,” George Vaillant (2004, p.277) writes, “Whether we live to a vigorous old age lies not so much in our stars or in our genes, as in ourselves.” As individuals approach the second half of their lives, it helps if they honestly assess their own attitudes to prepare themselves for their journey ahead. One of the first assessments involves their view of aging itself.

Bob exercises weekday mornings at our local small town health club. His exercising session completed, he walks with the rolling gate of a sailor as he approaches me. He slowly exhales as he sits on the bench, then struggles to reach over his considerable belly to tie his shoes. I have watched Bob exercise for half a dozen years, and he seems to be getting larger. He stands and shakes his head. “76 years old. I’m getting’ up there. Pretty darn old.” I want to tell him my mother had her first hole-in-one golfing at 78, but somehow I don’t think that will improve his attitude.

“How’s that granddaughter of yours?” I ask, wanting to change his regular topics of conversation (old age, arthritis, nothing right in the world.)
Bob shakes his head. “Trouble.”

“How’s that?”

“She thinks she wants to improve herself. Taking night classes to be a nurse. Doing that and working part-time, raising those kids and taking care of her husband. Nothing good’s going to come of that.” Bob shakes his head. “Well, another day, another dollar. See you tomorrow.” Bob puts on his cap and heads out the door. Bob doesn’t feel well, physically or mentally, and he blames his age for how he feels. He thinks it is “natural” to feel old and tired at 76.

Dave Asay, a rural veterinarian, drives hundreds of miles a year and works long days at the ranches in northwestern Wyoming. He doctors the cattle, sheep, and horses in a four county area. Dave, at 87, thinks it’s “natural” to keep doing the work he loves, just as he always has. “Age,” he says, tapping his finger on his head, “it’s in here.”

Our attitudes about aging, our own and others, influence the quality of our lives and how long we will live (Diener, 2000; Lyubomirsky, King, & Diener, 2005; Sadler, Miller, Christensen, & McGue, 2011). Using the Longitudinal Study of Danish Twins, Sadler et al. demonstrated that subjective well-being predicts mental and physical health, and longevity. Studying twins allowed the researchers to account for genetic and environmental factors, along with personal (subjective) assessments of health. Based on explanations to others and ourselves about how we feel about our personal state of being, subjective well-being consistently affects quality of life, outside of genes and environment, and is causal to longevity. Why does one person with arthritis suffer in their chair alone at home, while another shakes it off to go play a game of tennis? Is it surprising that attitude, or subjective well-being, affects quality of life and longevity? When we reach a certain age, do we expect to be relegated to a reduced activity level, because that’s “normal aging”?
Sadler et al. (2011) recommended further research is needed in the area of subjective well-being and longevity. Even allowing for the 3,966 Danish Twins age 70 and older who were studied over the nine year period, significant questions remain. Physiologic health may make an individual report higher subjective well-being. Their personal assessment may also be mediated behaviorally. It may be possible that more social individuals develop skills to build stronger social networks, which in turn contributes to their feelings of well-being. They may be more likely to engage in physical activities, make healthy life choices, and limit their alcohol consumption, all of which contribute to their longevity. The study’s focus was on genetic and environmental factors and did not address these other considerations.

However, a fundamental question for those who are aging remains: what if you really do feel lousy – what can you do about feeling that way?

Ask yourself: do I want to feel lousy for the next 20 years? That is the choice. People are living longer. It is a simple medical fact (Neugarten, 1979; Birren & Schroots, 2001; Vaillant, 2008). How you choose to live those extra years depends on you and the choices you make. The good news is that positive choices lead to feeling better, which compounds itself (Sadler et al., 2011). When you feel better, you engage in more activities, relate positively to more people, make healthier choices (exercise, better diet) (Levy et al., 2002) – all of which makes you feel subjectively and objectively better.

As we age, we face certain physical and mental changes: our vision, motor performance, and cognitive speed, to name a few – all diminish (Birren & Schaie, 2006). These are accompanied with changes in physical appearance. As these life stage developments unfold, we frequently ask ourselves Bernice Neugarten’s question: “How am I doing – for my age?” For comparators, we look to our previous self (younger, less wrinkles, stronger, etc.), to our peers.
(do I look younger or older than her?), and to those we know to be older (do I look like my mom, or oh no, I’m getting a dowager’s hump like Mrs. Smith!)

Age stereotypes (Kotter-Grün & Hess, 2012) influence our assessments of ourselves, but as our population ages and we are exposed to a wider range of appearances and behaviors, it is possible that the variability will provide more positive models on which to base age assessment. In addition, research (Levy et al., 2002) demonstrates the negative power of simply thinking about aging as a negative occurrence. Both young and older participants in an experiment that were exposed to both negative and positive images of aging responded by viewing aging more negatively. Individuals tend to view themselves within the context of the aging viewpoint of their culture. The natural question to ask is – what if that cultural viewpoint changes?

Where we choose to focus our attention as we age influences our personal choices – to do crossword puzzles and Sudoku, wear contact bifocal lenses, dye our hair, get hair implants, varicose vein surgery, facelifts…or to go au naturel. Do we accept a bigger belly as natural aging, or do we work to maintain a healthy mind and body? Interestingly, women who feel younger after having their hair cut or colored show decreased blood pressure and actually appear younger to independent raters who are shown pictures of the women with their hair styles blocked out (Hsu, Chung, & Langer, 2010). Conversely, as men bald, they report feeling older, and raters report them as looking older. Again, the good news for aging baby boomers is today’s current hairstyles with many young men sporting shaved heads. It is possible our views of men without hair may no longer be linked to age, and other signals will have more significance. (As 81 year old former U. S. Senator Alan Simpson says, as he rubs his bald dome, “If you want to waste your hormones on growing hair, that’s fine with me. I found better ways to use mine!”)
Adult development is a life-long process (Vaillant, 2012). The ability to change and grow continues throughout our life. Acceptance of our age and our expectations about aging influence the next stage of our life. As we mature, it is possible to gain both wisdom and the time to use it (Charles & Carstensen, 2010). We have been given the gift of years and the freedom to choose to do those things that build our well-being. Positive psychology offers us to the tools to thrive as we age.

**Where Do I Want to Be?**

Pete and Jean, ages 78, just returned from driving their new camping van to Alaska, where they visited their 92 year old friend near Denali National Park. Their emails state the trip was “beyond words, the trip of a lifetime.” They previously spent their vacations on their sailboat in the Caribbean, but with Pete’s atrial fibrillation, his kids said he had to sell his boat. Pete enjoyed a long career as a civil engineer and state politician. Pete loves roads (he worked on engineering the road through Yellowstone Park in 1952), and politics (he’s a former national committeeman for his political party), but increasingly he finds that his activity, or rather, his reaction to his activities, affects his health. And so, Pete has retired. He and his wife Jean are making the choices that will contribute to their thriving these remaining years of their lives. He is not focused on what he cannot do, but has instead found a replacement. This type of accommodation to life’s changes represents a healthy model of aging (Baltes, 1997).

As we imagine what we will do in the second half of our lives, it helps to know that social scientists distinguish between two different groups within this demographic: the young-old and the old-old (Neugarten, 1979). The young-old are those who are healthy and vigorous, while the old-old, because of physical or mental decline, or losses in their social support system, need special care and support services. Both groups can benefit from positive psychology.
strategies, but the primary focus of my paper benefits the young-old with the idea that by prolonging this stage of their lives, they will limit their years in the old-old category. The goal is to remain healthy and vigorous for as many years as possible with the tools of positive aging. In addition, as our life circumstances and health changes, our goals involve accommodating those changes and continuing to be optimally healthy, given our evolving capabilities (Caprara et al., 2013). The past may predict our future, but it does not necessarily determine it (Vaillant, 2008).

In America, when you turn 50, AARP (American Association of Retired Persons) mails you a card inviting you to join their organization. How do they know you are 50? When you turn 60 and fill in forms, you discover that your days in the 45 to 59 age category are over, and you have joined the 60 to 85 group. One day you are associated with 45 year olds, the next day with 85 year olds. What does a 60 year old have in common with an 85 year old? If your answer is *not much*, you may be correct. Chronological age in the second half of life has lost its meaning (Aldwin, Spiro, & Park, 2006). Your level of vitality and interest in life dictates your activities, which in turn leads to your age cohort group. If you find that your lifelong downhill ski buddies are abandoning the slopes, you may need to find new friends who share your passion. You are not alone. Ski resorts previously offered free lift tickets to anyone 70 or older, but those days are over (Shay, 2010). There are too many seniors hitting the slopes, and the resorts are making them pay, just like everyone else. Your chronological age may limit your skiing speed, but it doesn’t require you to limit your participation.

If you now believe that age alone will not stop you from full participation and enjoyment in the second half of your life, then you are ready to begin building your path to well-being. If you still have doubts about your own aging, you are proof that with age comes wisdom.
Growing older challenges all of us; fortunately, life’s experiences help us form mature insights into how to do it well (Carstensen, Isaacowitz, & Charles, 1999).

**How Do I Get There?**

“I should never have retired,” said Glenn Simmons, when I saw him at the high school basketball game. A former teacher and coach, Simmons was known for his Marine sergeant coaching techniques and his ability to turn average adolescents into high scoring AP American History students. A Vietnam vet without a gray hair on his head, Glenn was not happy in his retirement, and he let everyone know it. He had run into the chronological clock of 65 and thought retirement was what he was supposed to do. When a new school year started without him after retiring, he discovered he missed teaching teen-agers, and he didn’t have a clue how to spend his time.

Retirement remains an important turning point in the lives of most people (Neugarten, 1990). With it comes a major change in daily activities, a restructuring of time, different daily associations with people, and a change in physical locale for activity. Although some people opt for early retirement, retirees’ chronological age most often dictates the dates of retirement, according to their available pensions and financial support. Research shows that meaningful preparation for retirement, beyond financial planning, correlates with life satisfaction after retirement, and is second only to health as a contributor to life satisfaction (Dorfman, 1989). This phenomenon may help explain why the people who do not enter their retirement through their own choice (mandatory retirement, reduction in force, etc.) have greater difficulties adapting to their new status (Taylor, Goldberg, Shore, & Lipka, 2008). Repeatedly, employees who make retirement plans demonstrate the effective strategy of preparing for retirement prior to beginning it, which contributes to their entering their retirements with greater life satisfaction.
Typically, patterns of retirement emerge: retirees begin with their honeymoon period (Neugarten, 1990) in which they try every activity they ever imagined doing but previously lacked the time to attempt, or they kick back for some serious R and R, rest and relaxation. Within six months to a year, the retiree settles into a new, established routine. It is during this time that most retirees describe themselves as satisfied. Issues may arise, but for the most part, people enjoy themselves, and either find resolution to their problems, or decide to accept the situation as it is. Some may return to working, in new jobs with fewer stresses than their previous employment; others volunteer, contributing their time and experience to local organizations; some may help raise their grandchildren, while others travel, leaving their snowy Minnesota winters for Florida sunshine and beaches; some find time to play every day or to start new creative endeavors; and others challenge themselves to learn new skills or develop talents that have been dormant during their busy lives.

The goal of this paper is to introduce ways in which people can thrive. They can best begin doing that by increasing their positive emotions. When they do this, they will broaden and build their receptivity to new ideas and enhance their creative abilities to seek and find answers on their quest for well-being (Fredrickson, 2001). This is the first step to thriving. I am recommending well researched and effective positive psychology exercises to help that process begin.

**Three Blessings or “Hunt the Good Stuff” Exercise.** Many retirees’ lives have been anchored around their families or their work, both of which are in the process of profound change. Children have moved away (or moved back); work schedules have altered. The changing landscape presents challenges, which may invigorate some, while paralyzing others. All of these individuals can benefit from increased positive emotions (Fredrickson, 2009), which
help them to broaden and build their thinking. The new circumstance of retirement benefits from an open mind and creative problem-solving.

Positive psychologists (Fredrickson, 2009; Seligman, Rashid & Parks, 2006;) have repeatedly demonstrated the effectiveness of the Three Blessings exercise, or Hunt the Good Stuff, as it has been called in the U. S. Army Resiliency program (Reivich & Saltzberg, 2013). Participants are asked to write three good things in the evening that happened during their day and to attribute the causes of the good things that occurred. Research has shown increased well-being for individuals up to six months after participating in this exercise (Seligman, Rashid & Parks, 2006). By doing this simple daily task, individuals build their positive emotions and reframe their daily awareness to discover the good that exists in their lives (Peterson, 2006).

Eighty-two year old Caroline was a cradle Episcopalian who had played the organ for her church for over thirty years. Short of stature, she had to stand to play the organ pedals with her feet, while her hands took care of the other organ chords. She was crestfallen when the both the Senior Warden and the Pastor asked to meet with her to let her know her services were no longer needed. Much of Caroline’s free time had been spent practicing at the church and selecting the week’s hymns. Apparently, younger congregants wanted more modern music. She was at a loss with what to do with her time.

I offered Caroline the Three Blessings exercise and a new notebook to jot her nightly thoughts. I didn’t have high expectations for her recovery from her personal loss, but thought it couldn’t hurt. A week later, she could hardly contain herself when she told me the results of the experiment. “It’s great! But I don’t think a week is enough. You should keep doing it. All day long I look for positive things to write down at night. I have to find three things every day.” Caroline’s quest to find good things in her day paid off. She soon found two other local
churches that needed her services, and one of them asked her to join their weekly women’s Bible group, creating a new circle of possible friends. Making lemonade out of lemons – a life attribute of Caroline’s that received a boost from Three Blessings. Empirically through research, and anecdotaly, it works.

**Savoring.** The Three Blessings/Hunt the Good Stuff exercise may be followed by savoring activities (see Appendix A), which have been demonstrated to prolong positive emotions (Bryant, 1989; Bryant, 2003; Bryant, Smart & King, 2005). Whether individuals practice savoring through anticipation, savoring the moment, or reminiscing, it is possible through savoring to build positive emotions, which in turn strengthens resilience and buffers against depression (Reivich, Seligman, & McBride, 2011; Saltzberg, 2013). Savoring heightens awareness of the good aspects of an individual’s life, again contributing to the aspects of broaden and build that help individuals creatively envision a future life of well-being.

Take a moment to appreciate the sunset, the daffodils blooming, the butter melting on the fresh corn on the cob, or share a memory, with all the vivid details of when you felt loved and special (Bryant, Smart, & King, 2005). Savor the anticipation of summer after the long nights of winter. Savor life’s moments, and fill yourself with the pleasure. As Auntie Mame most aptly said, “Life is a banquet and most poor suckers are starving to death!” Join the banquet and enjoy.

**Character Strengths.** Another effective mechanism to build positive emotions involves the daily use of signature character strengths (Peterson & Seligman, 2004; Seligman, 2011). The VIA Character Strengths survey was developed to accompany Chris Peterson and Martin Seligman’s carefully constructed master list of character strengths, which was empirically tested and created for cultural and historical validity. Character strengths include attributes such as
creativity, love, kindness, appreciation of beauty, leadership, forgiveness, gratitude, hope, humor – all of the human characteristics that we view as valuable and which contribute positively to our lives as humans.

Once individuals take the VIA survey, they discover, examine, and explore their signature strengths. Through regular use of their character strengths, they enhance their well-being and build position emotions (Niemic, 2013). In addition to building a foundation for well-being, utilizing the VIA Character Strength survey provides information to the individual that can effectively be applied as they address other components that contribute to thriving. As individuals enter the second half of their life and retirement, by enhancing their positive emotions and using their character strengths in new ways, they will increase their personal life satisfaction, which in turn will help them develop strategies to thrive.

In preparing to meet these well-being goals, it helps to be specific, to focus on what you will do rather than what you won’t do, and to practice good goal setting strategies (planning, persistently pursuing, and monitoring progress) (Halvorsen, 2010). Additionally, it helps to remember that aging research reveals that older individuals prefer to focus on the process of attaining goals rather than focusing exclusively on the outcome of the goal itself (Freund, Hennecke, & Riediger, 2013). In other words, they enjoy the journey on the way to their destination. Once the belief in well-being and the route there is anticipated, individuals may begin to apply the components that positive psychology and aging research suggests will make the greatest differences to well-being: positive emotions, engagement, meaning and purpose, and relationships. It is time to thrive – by building the pathways there.

**Positive Emotions.** As we age, we have increased motivation to derive emotional meaning from life (Carstensen, Fung, & Charles, 2003). Research points to a gain in emotional
capacity later in life, and unlike other aging processes, positive emotions are enhanced. One study found that negative emotions in daily living slowly declined until around age 60, when they appeared to level off. Positive emotions seemed to increase from middle adulthood to early young-old age, which implies that the positive to negative ratio of emotions improves with age. In essence, when concerns about the future become less relevant, the events of daily living and the in-the-moment experiences are heightened, increasing the potential for positive emotions.

Carstensen and her colleagues found that an optimizing of emotions occurs in later life. This affects not only positive emotions themselves, but also engagement in activity choices and relationships.

All humans pay attention to time (Carstensen, Isaacowitz, & Charles, 1999). As we sense the clock running out, we seek more meaningful positive experiences. We have less time for trivial interactions, which may be negative, and we don’t spend time worrying about it. We seek meaningful, positive interactions and appreciate and savor the interaction while it is occurring and after, through reminiscence. The impact of these positive emotions is similar to a vaccination or well-being inoculation. Over time, the predictive value of positive emotions accounts for a 17% variance with physical health, and a 33% variance of mental health (Dainese, Allemand, Ribeiro, Bayram, Martin, & Ehlert, 2011). Positive emotions are a preventative factor that delays disease and decline. This is an empirically demonstrated fact.

Individuals who seek positive emotions such as joy, gratitude, serenity, interest, hope, pride, amusement, inspiration, awe, and love, and enhance their positive emotions through savoring, increase their well-being and build a better future (Fredrickson, 2009). George Vaillant in his book Aging Well (2008) recommends four strategies for well-being in retirement: make new social networks when you leave your work behind; play; be creative; and continue
learning. His recommendation, based on his life-long longitudinal Study of Human Development, resonates with experience and science. The voice of experience tells us it is the quality of life in the years, not the years in the life.

**Engagement.** Rowe and Kahn’s (1997) work on successful aging advocates active engagement with life. They saw two critically important components: interpersonal relations and productive engagement (activities which creates societal value). For individuals who want to prevent disease and to protect or enhance their cognitive functioning, this is a good place to focus. Self-efficacy, the belief in one’s ability to influence events that affect his or her life (Bandura, 1977) is critical to motivation in searching for activities that create positive emotions or are meaningful to the individual. We tend to try to do things that we 1.) think we can do successfully and 2.) believe are worth doing. Carstensen and her colleagues (2003, 2010) also found that strong social networks and social activity help individuals avoid cognitive decline. In other words, these researchers offer this advice: if you want to keep your marbles, go play with your friends and find something worthwhile to do.

A particularly intriguing research project in the area of engagement and activities discusses the placebo effect and mindset (Crum & Langer, 2007). Individuals whose daily work required engagement in movement were told that their routine work was actually beneficial exercise. At the end of the four-week research intervention project, the control group and the “beneficial exercise” group, both of whom had participated in an equal amount of daily activity, were measured for physical health. The “beneficial exercise” group, which continued in the same work routine as the control group, decreased their weight, blood pressure, body fat, hip-to-waist ratio, and body mass index. As Shakespeare said, “There is nothing either bad or good, but
thinking makes it so.” Being engaged in activity has multiple benefits, apparently even more so, if you believe it.

George Vaillant (2008) specifically recommends three separate types activities of great value in leisure time (he also advocates “practicing” during vacations in preparation for retirement.) Vaillant states that play is essential to a happy retirement. He contends that play helps individuals to maintain self-esteem while letting go of their self-importance. In addition, it is fun, creating opportunities to make new friends and to experience more positive emotions. He also recommends creativity, which he believes should be a primary goal of retirement activities. Our busy lives often cut us off from our creative selves, and retirement offers the time to rediscover those things that we always thought we might enjoy. Have you always wanted to play the guitar or paint, write a family story, or design a family webpage? Now is the time to try.

The last activity that Vaillant suggests is life long learning. Challenging ourselves to stretch our brains, to be beginners again, to add to our knowledge, all of which builds our mental vitality and our interest in life. Play, creativity, and life-long learning offer a good reason to get out of bed in the morning and to live every day to the fullest.

Many individuals choose to volunteer in their retirement, and research demonstrates the value in this choice. Our reasons for volunteering change as we age (Ho, You, & Fung, 2012). Younger individuals may volunteer to network with others, while older volunteers are motivated by a care and concern for the society. In fact, other researchers have found that giving help fosters greater mental health than receiving help (Post, 2005). Five factors that create benefits for altruistic volunteering emerge: enhanced social interactions; distraction from personal problems; enhanced meaningfulness; enhanced self-efficacy and competence; and improved mood and more physically active lifestyle. One study (Oman, Thoresen, & McMahon, 1999)
found that volunteerism reduced mortality 44%, a factor greater than physical mobility, exercising four times a week, and weekly attendance at religious services. Only not smoking had a greater benefit. Finding new leisure activities with volunteering can also enhance well-being and life satisfaction (Nimrod, 2007). Novelty stimulates the mind and creates positive emotions, both of which benefit the individual.

Positive interventions that are receiving more attention in America in recent years include mindfulness training (meditation) and yoga. A recent study at the University of Rochester Medical Center (Gallegos et al., 2013) revealed that participants age 65+ who were trained to practice either yoga or meditation for a two month period increased their immune functions and positive affects. These results are similar to those discovered by Richard Davidson (2012), whose work at the University of Wisconsin has demonstrated the beneficial affects of various forms of meditation as measured through fMRI imaging. These practices, which have been practiced by Asian populations for centuries, may be of benefit to the increasing numbers of baby boomers as they age. In their second half of life, individuals may discover they have the time to try different strategies for well-being that they never previously imagined attempting.

**Meaning and Purpose.** Bunny lost her husband to cancer when he was only 56. Her children were grown, and although she helped raise her grandchildren, she spent most of her time developing a wellness exercise routine that she still teaches daily. At 89, Bunny easily looks twenty years younger, with a knock-out figure, stylish short blonde and brunette hair, and an energetic way of moving. She travels world-wide, volunteers at her church, and has a wide assortment of young and old friends. Bunny is ageless, an inspiration to all who know her. Her grandson is a regularly featured photographer for *National Geographic* magazine. Bunny’s support and belief in him made the critical difference in the development of his talents as he
grew up in their rural, provincial town. Although beset with a tragic loss with her husband’s
death, Bunny found meaning and purpose for her life. It is not without significance that she still
enjoys vitality and robust health at 89.

Positive psychologists joined ancient Greek philosophers and countless others from over
the centuries to ask the question, “What is the good life?” The answer is as simple and as
complex as humans themselves, but the consensus is that meaning and purpose is a significant
part of the answer (Pawelski & Moores, 2013). With maturation and development over a
lifetime, many individuals begin to look for the meaning of their lives as they approach the
second half (Vaillant, 2013). As these individuals build positive emotions in their lives and
increase their engagement in activities, they can also apply positive psychology strategies to
strengthen the meaning and purpose of their lives.

Meaning and purpose can be found through engagement using signature strengths for the
benefit of something larger than the self (Seligman, 2011). In retirement, there are abundant
opportunities to spend more time with family, to volunteer, to contribute to community needs,
and to do those things that were not possible during the first half of life. The use of signature
strengths in those activities increases positive emotions, which in turn can be prolonged through
savoring (Bryant, 1989; Bryant, 2003). Meaning and purpose, and its significance to the
individual, may be discovered in past experiences, present moments, and imagined visions of
their future.

Another factor which many individuals experience in the second half of their life is Erik
Erikson’s stage of generativity from his theory of human development (Slater, 2003).
Generativity is primarily the concern of establishing and guiding the next generation. For
involved parents and grandparents, teachers, and other youth workers, the development of
generativity is a natural continuation in the second half of their lives. But for many others, a concern arises about connecting to those that are younger and extending the individual’s beliefs and ideas to the next generation. The potential benefits for this generation of baby boomers to connect in meaningful ways with those younger than themselves are enormous. The need for help with youth exists in every community, and the time and experience to help will multiply every year as new individuals join the ranks of the retired. It is a mutually beneficial association. It is clear the children benefit. However, volunteering a few hours a week in something meaningful to the individual also prolongs both life and well-being for the volunteer (Charles & Carstensen, 2010).

**Relationships.** Repeatedly, studies (Peterson, 2006; Gable, Reis, Impett, & Asher, 2004) have demonstrated the significance of relationships with others as a significant contributor to our individual well-being. As you prepare for the second half of your lives, it becomes critical to evaluate the inevitable changes in daily interaction with others, whether through the departure of your children, loss of daily contact with your colleagues at work, or increased interactions and contact with your spouse or significant other.

George Vaillant (2008) advises that preparation for retirement involves finding and making new social networks to replace the loss of our networks provided by our employment or loss of loved ones as we age. This serves a number of purposes. First, it gets the individual out of their house and into the world, which in turn, increases physical activity and cognitive stimulation. It provides novelty, which also benefits well-being. It is fun to be with friends, which creates positive emotions, which as learned earlier is contagious up to the third degree of separation (Fowler & Christakis, 2009). Positive emotions broaden and build your ability to solve problems with receptive and creative solutions. Ultimately, it is in your own interest,
because new friends will enhance your vitality and longevity, providing prevention against disease and mortality. It may not be easy to create new social networks and to find friends, but it is essential.

Good friends help their friends to live longer. Having a strong social network is a critical contributor to well-being, with some researchers (Charles & Carstensen, 2010) rating it as important to our health as not smoking. However, our social networks change with our age. As people age they begin pruning their social networks to those they consider most meaningful and positive to them, which includes their family and close friends. This process occurs over decades, with increased longevity the result. Carstensen believes that positive and meaningful relationships may be causal to good health and life satisfaction. Baumeister and Leary (1995) contend that the need to belong, which is powerful, fundamental, and an extremely persuasive motivation, is fulfilled through positive meaningful relationships. We need positive relationships in our lives.

Friendships and family relationships are valuable at any age, but friendship as we age helps us cope with the specific issues encountered with aging. An experiment (Stevens, Martina, & Westerhof, 2006) to create a Friendship Enrichment program for older adult women demonstrated that women suffering from loneliness were motivated in the program to make new friends and to deepen their relationship with existing friends. Participants had either lost a partner or had higher levels of loneliness and negative affect. The educational program, applied over the course of a year, resulted in significant decreases in loneliness for the study participants; however, the two factors of new friends and deepening existing relationships were needed to alleviate the loneliness.
Another important relationship factor, daily exposure to positive interactions, buffers against stress (Russell, Bergeman, & Scott, 2012). In particular, lonely people benefit from daily positive responses from others, a factor of importance to social agencies working with that population. (This is something to remember if you volunteer at the senior center – saying, “Hi, how’s it going” may have more impact than you realize.) However, it remains important to remember that loneliness is subjective rather than objective. Size of social networks and number of social interactions do not necessarily dictate whether or not individuals perceive themselves as being lonely. Individuals perceive themselves as lonely when their social needs are not met, either in quantity or quality. Another important distinction relates to whether the interactions occur with friends or family. Negative interactions with friends do not appear to negatively affect well-being as much as negative interactions with family members. Both family and friends’ positive interactions create beneficial positive affect, making them an important component of well-being. It also appears that lonelier people receive greater benefit from daily exposure to positive social interactions.

Not all of our relationships go smoothly, which may affect our physical well-being. How you feel about others and what you believe others think about you affects your psychoimmunological functioning (Antonucci, 2001). Individuals who are lonely or have hostile relations or interactions with others have higher morbidity (disease and illness), develop heart disease, and have a longer recovery time once they are ill. Negative relationships and interactions with others damage our hearts and minds, and shorten our lives. There is no doubt that positive relationships provide critical means to attain well-being. What happens to those individuals who may lack the social skills to sustain or develop positive relationships?
It is possible to approach this in a variety of ways, but a rewarding place to begin is with ACR, Active Constructive Response (see Appendix B). ACR, the way in which the individual responds to others, can improve relationships with others, which in turn, enhances personal positive emotions and well-being (Reivich & Saltzberg, 2013). Potentially, applying Active Constructive Response improves our relations with our spouses or significant others, relations with our children and other family members, and personal relationships within the community.

An example of what not to do (passive destructive reaction) entails two women friends who live in separate retirement communities meeting at a get together. Mary begins by asking how Betty’s son is doing. When Betty shares that her son recently traveled to Chicago, Mary interrupts to say, “My daughter goes there all the time with her business! You know how busy she is since her promotion.” Mary continues with her story about her daughter, in essence hijacking the conversation. This is not an effective way to deepen or maintain friendships. An Active Constructive Response would involve genuine interest in the other person’s good news, an invitation to share details, which creates a shared positive experience with the recalling of a positive event. By inviting this type of social interactions, the ACR initiator creates good feelings in the other person, enjoys them herself, and strengthens their relationship. Other people make a significant difference in our lives (Peterson, 2013). It follows that strengthening our relationships in a positive way contributes to a flourishing life. Reacting to others in a positive, constructive way builds the bridge to better relationships.

An additional relationship element that makes a profound difference in our lives is love. Both Barbara Fredrickson (2013) and George Vaillant (2012) have demonstrated through their life-long research that love is the supreme emotion, which governs all that we feel, think, and do. It lifts us to emotional heights and empowers us to more broadly view our lives and the world in
which we live. It has the power to heal, the power to sustain us through difficulties, and the power to bring meaning to our lives that surpasses all of the other emotions. Both Fredrickson and Vaillant advise that we should seek love, savor love, reach out to love. It will truly make a difference in our lives. For those seeking success and joy in their maturity, the greatest contributor is love (Vaillant, 2012). I highly recommend their books to those who wish to grow more love in their lives.

Conclusion

As individuals begin the process of planning for the second half of their lives, it is possible for them to imagine a future in which their positive emotions rise along with their engagement in a meaningful life. Their vision can include personal relationships that flourish, and a daily anticipation for what life holds next. In other words, the good life is waiting for us when we enter the second half of our lives. It is up to us to embrace positive change and to help make it happen.

Ginny, age 93, lives in Spokane, Washington. With a warm smile and dimples, grey streaks in her curled auburn hair, she seems to always be moving towards something that needs to be done. An orphan from birth, Ginny was raised by Catholic nuns in Arkansas. At age 18, she began to support herself as a secretary. With the start of World War II, she fell in love and married a young man who was stationed at a nearby military base. When he was shipped off to fight on eight major beachheads in the Pacific, she moved to Wyoming to live with his parents and care for their new son. With the end of the war, Richard returned home to Wyoming. He and Ginny had been married for five years, but had only spent a year and a half together. He and his brother started an insurance and real estate business, and Ginny stayed home to raise their family, which grew to include five children. At 50, Richard developed a terminal brain tumor,
and with his death, Ginny was left to finish raising their kids. A local businessman with a good sense of humor became her steady and dance partner, but Ginny wasn’t interested in marriage – to him. She knew she wanted more in her life.

Her last child away at college, Ginny headed off on an Alaskan cruise with the intention of finding a husband. She found a great one. Cliff, who had been a pilot in WWII, was also widowed. Ginny and Cliff married and moved to Spokane, where Cliff began working on the 1974 World Fair Expo. In her 50s, Ginny had become a recreational runner, and she competed in the first Spokane Lilac Bloomsday Run in 1977 – a 12-kilometer event. She ran in the Bloomsday every year until two years ago, when she finally hung up her running shoes. Ginny says, “Skiing wrecked my knees for running.” (She gave up downhill skiing in her 80s.)

Cliff and Ginny traveled extensively during their life together. They played hard and worked hard, but finally slowed down when Cliff developed Alzheimer’s. Ginny took care of him at home until the neighbors began to complain and the condominium association told her it was time to move him to a facility. It was a very, very difficult thing for her to do. She moved him nearby and visited daily, until he passed away 7 years ago. Ginny’s family loved Cliff for the joy he brought to their mother, and Cliff’s family loved Ginny for the wonderful thirty-five years she shared with their father. Today she is mother and grandmother to both of their families.

Energetic, outgoing, attractive, slim and still stylish, Ginny attends Tai Chi class three times a week, plays bridge, drives herself and her friends to their social events and daily Mass, and keeps up regular contact with her family and friends now spread from coast to coast. Ginny’s spirit is testament to a life well lived. Her friends, family, and faith sustain her and give
her life meaning. She, in turn, continues to offer unconditional love to the young people who come to her for support and advice. And they do come!

As each of us thinks about our own aging, we know we will face tragedy in our lives – through illness, death of loved ones, and the despair that accompanies those events. But as we consider Ginny, her courage, her desire to embrace life fully, her loving and open heart, we witness the triumph of a life well lived. None of us can avoid the troubles that occur in every life. We can, however, overcome those adversities and grow, in both wisdom and love. As we continue life’s journey, we now have the knowledge to thrive – the choice is ours to make, every moment and day of our lives.
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Appendix A

**SAVORING**

- Focused thinking or actions that increase the effect of positive events on positive emotions
- Increases positive emotions, deepens gratitude, enhances engagement and meaning

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**How Do You Answer These Questions from the Savoring Beliefs Inventory?**

**Anticipating** – looking forward to a positive event
- I get pleasure from looking forward
- Anticipating is a waste of time
- It is hard for me to get excited beforehand

**Savoring the moment** – intensifying and prolonging enjoyment of current experience
- Know how to make the most of a good time
- Feel fully able to appreciate good things
- Find it hard to hang on to a good feeling

**Reminiscing** – looking back to rekindle positive feelings
- Enjoy looking back on happy times
- Feel disappointed when I reminisce
- Easy to rekindle the joy of happy memories

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**POSITIVE EMOTIONS**
- Gratitude
- Compassion
- Joy
- Faith/Trust
- Hope
- Amusement
- Inspiration
- Awe
- Love
- Forgiveness
- Serenity
SAVORING: 4 TYPES

<table>
<thead>
<tr>
<th>Type of Experience:</th>
<th>Focus of Attention: Internal Self</th>
<th>Focus of Attention: External World</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thinking About It</td>
<td>Basking (pride)</td>
<td>Thanksgiving (gratitude)</td>
</tr>
<tr>
<td>Experience Absorption</td>
<td>Luxuriating (pleasure)</td>
<td>Marveling (awe)</td>
</tr>
</tbody>
</table>

**TEN SAVORING STRATEGIES** (Bryant & Veroff, 2007)

1. **Sharing with others**: sharing an experience with others or thinking about seeking out others to share the memory
2. **Memory building**: mindfully storing images to remember – snapshots of experiences -- and forming detailed, memorable images
3. **Self-congratulation**: telling yourself how proud or impressed others may be with you and you are with yourself; found in response to achievements and personal successes
4. **Comparing**: comparing to past experiences in personally positive way, and contrasting your own feelings with other people’s
5. **Sensory-Perceptual Sharpening**: intensifying pleasure by focusing on certain stimuli and screening out other, concentration, mindfulness — slowing down
6. **Absorption**: mindfulness without thinking and reflecting, simply feeling
7. **Behavioral expression**: laughing, fist pumping, jumping for joy, outward physical expression of positive feeling
8. **Temporal awareness**: in the moment reflection of how quickly life passes, reminding yourself to enjoy the moment in this minute – may be bittersweet moments
9. **Counting blessings**: mindfully remembering specific moments and expressing gratitude
10. **Avoiding Kill-Joy thinking**: stop yourself from thinking about what you should or could be doing, and focusing your attention on the moment of joy at hand
Research (Gable & Haidt, 2005) demonstrates that humans experience three times more positive events in their daily lives than negative events. What do people do when things go right? 60 to 80% of them share those positive events with others (Reivich, 2008). Psychologists call this capitalization. Capitalization leads to:

- positive feelings and emotion
- greater life satisfaction
- greater feelings of belonging
- the positive event is more likely to be remembered
- the more the positive event is shared, the greater the benefit
The Active Constructive Response chart helps you understand how you and others respond when hearing about a positive event and to detect communication patterns that may be helping or hurting your relationships.

If your partner uses ACR (Active Constructive Response) you will experience

- fewer conflicts
- increased daily happiness
- greater satisfaction and intimacy, which contributes to
  - understanding,
  - validation,
  - trust and caring –
  - all components of deeply satisfying long-term relationships

Partners who do not practice ACR are far more likely to have their relationships dissolve. Active Constructive Response is a research based pathway to successful relationships that benefits both partners and leads to personal well-being.
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