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Chapter Twelve Adult Development

At age eighty, John reflects on the many changes he has experienced. Although his eyes are now clouded by cataracts, he remembers when family and friends nicknamed him "Eagle-Eye Johnny" because of his excellent eyesight. He also recalls his friends' surprise when he married at age forty and went on to have two children. He explains, "I guess I was a late bloomer. Having kids in my forties kept me young, though." John recollects that his priorities have changed over time. In high school and college, he wanted to "be [his] own man" and after college he focused on his career. John recalls, "In my mid-thirties, I realized that I wanted to give back to the community. I also wanted to be married and have a family." John continues to give back to people in his small town by visiting people in the nursing home and sponsoring a support group for men who have had heart surgery. John admits that lately he has spent more time "remembering the good times." He continues, "I've had a good life. In some ways, I'm still the same person I was at twenty. For example, I've always valued being organized and efficient. In other ways, I've changed a lot."

The concept of development is most often equated with change. Development has been defined as "systematic change within an individual or a group of individuals that results from a dynamic interaction of heredity and environmental influences" (Lerner, 1998, as cited in **Bee & Bjorkland, 2004**, p. 14). However, it is important to remember that there is a sense of both stability and change in development (**Bee & Bjorkland, 2004**). For example, John's sense of organization has been a constant in his life. However, his values have changed somewhat. In the next section

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we will briefly introduce the approaches to development that wrestle with the importance of nature and nurture in the developmental process, including biological, psychological, sociocultural, and integrated perspectives.

Four Approaches to Adult Development

The biological perspective acknowledges the role of nature in our development. It recognizes that "we are physical beings" and that change in our physical being can be "driven by natural aging, the environment, our own health habits or by an accident or disease process" (Clark & Caffarella, 1999, p. 5). The psychological perspective "focuses on how we develop as individuals and examines primarily internal development processes" (p. 5). Psychological models of development have been used to explore faith development (Fowler, 1981), moral development (Kohlberg, 1976), identity development (Erikson, 1968; Loevinger, 1976), and intellectual development (Perry, 1999). The sociocultural approach posits that adult development cannot be understood apart from the historical context in which it occurs (Miller, 2002). The influence of society is taken into account in this perspective. The integrative approach to development combines several influences on adult development. For example, Bronfenbrenner's (2001) ecological model delineates changes that occur in people as the result of their interaction with peers or the interaction between a person's workplace and community.

We discuss the four approaches to adult development in this chapter. First, we explore biological aging and its impact on learning. Next, we examine psychological models of development, including Erikson's (1963, 1978) psychosocial model and Levinson's (Levinson, Darrow, Klein, Levinson, & McKee, 1978; Levinson & Levinson, 1996) model of personal development, among others. Third, we discuss how sociocultural factors affect development, including the influence of the timing of life events and the influence of race, class, and gender on development. The last section of the chapter presents integrative models of development, which demonstrate a more holistic approach.

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Biological Development

Biological aging is a fact of life, although rarely a welcome one in American culture. Antiaging products abound because people are fascinated with maintaining a youthful appearance. The top ten facial moisturizers (some of which advertise antiwrinkle properties) sold at supermarkets, drugstores, and discount stores produced \$262.8 million in sales in 2004, and professional skin care products sold at spas and salons netted an additional \$285 million ("Beauty at Every Age Is the Maxim," 2005). Antiwrinkle creams, hair color, sexual enhancement medications, and laser treatments temporarily keep the signs of aging at bay. Yet, people cannot escape the inevitability of biological aging.

Biological development refers to the physical and biological changes that occur over the life span. In this section, we discuss biological aging. We briefly explore theories of primary aging. In addition, we discuss age-related changes in vision, hearing, and the central nervous system.

Although life expectancy has increased from 49.2 years in 1900 to 76.5 years in the United States in 2000 (Guyer, Freedman, Strobino, & Sondik, 2000), our capacity to live longer does not mean we have been able to halt the primary process of aging—those time-related physical changes governed by some kind of maturational process, as in vision and hearing, for example—that happen to all of us (Bee & Bjorkland, 2004). Theories as to why primary aging occurs are plentiful, but all theories need further research. One theory asserts that cellular damage occurs during "the normal metabolism of oxygen" and this cellular damage builds up with age (Bee & Bjorkland, 2004, p. 61). Some scholars blame physical aging on the cell's lessening ability to repair daily breaks in DNA strands (Bee & Bjorkland, 2004; Carey, 2003). A third theory asserts that primary aging is related to "how many calories we metabolize per day" (Bee & Bjorkland, 2004, p. 63). Bee and Bjorkland note, "This theory is based on the premise that the hypothalamus serves as a glandular clock of some kind that measures age in the number of calories metabolized by the body" (p. 63).

Although life expectancy has increased, the human life span, usually given as 110 to 120 years, has not changed. Rather, our increased longevity stems from overcoming some of the problems related to secondary aging—aging that occurs due to "the … changes that are

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the result of disease, health habits or environmental influences" (**Bee & Bjorkland, 2004**, p. 60). These changes do not happen to everyone and can often be prevented. Improved nutrition, hygiene, discoveries in the medical and mental health fields, and lifestyle changes have accounted for most of this increased longevity.

It is important to note, however, that racial and ethnic health disparities have an impact on longevity. Black men are more likely to suffer from prostate, lung, colorectal, and stomach cancer than White men, and Black men and women are more likely than their White counterparts to suffer from hypertension ("Health Disparities Experienced by Black or African Americans," 2004). Numerous factors, including access to preventive services and racial discrimination, contribute to these disparities. In a study of three hundred thousand Medicare patients, research completed with Black patients found that they received different treatment than Whites (Schneider, Zaslavsky, & Epstein, 2002). Blacks were less likely than Whites to receive beta-blockers after a heart attack or aftercare following a hospitalization for mental illness. The researchers controlled for income, education, and quality of the clinic the patients visited.

While racial and ethnic disparities in health care persist, biological aging affects us all. However, decline in the actual functioning of the major biological systems is slow. The fourth and fifth decades tend to be the physiological turning point for most adults, although the effects of these changes may not be felt until the sixth or seventh decade of life (Bee & Bjorkland, 2004). The most obvious changes are changes in appearance. Suddenly, we notice our skin is not as firm and elastic as it once was. Our hair may become increasingly gray and turn white or we may experience hair loss. Yet these changes, although noticeable, really have little effect on our physical functioning. Less obvious are the more pervasive internal changes. For example, most adults begin to experience changes in vision, cardiovascular systems, bones and connective material, respiratory system, and reproductive function (for women) sometime in their forties or early fifties.

Although it appears that we will all experience many major changes in our physical beings at some point in our lives, the effect of these changes on our capacity to learn is largely unknown. In fact, many of these changes may prove to be very minor, except in cases of underlying disease processes. We will briefly discuss

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physical changes that have been shown to affect learning in adulthood: age-related changes in two of the senses and changes in the central nervous system. In addition, vision and hearing disorders common to older adulthood are discussed.

Senses

Deterioration in the ability to see and to hear can create problems with the learning process. Specific changes in vision are well documented (Pesce, Guidetti, Baldari, Tessitore, & Capranica, 2005; Stuen & Faye, 2003). One of the most notable changes is in the ability to perceive small detail on the printed page and computer screen. A loss of close vision begins for many people between the ages of forty and fifty and results primarily from the lens becoming larger and denser and losing elasticity (Meisami, Brown, & Emerle, 2003; Stuen & Faye, 2003). This problem can be corrected by eyeglasses or various types of surgery. A second major sight-related change concerns light. As people age, the pupil of the eye becomes smaller and allows less light to enter the eye (Stuen & Faye, 2003). Hence people need more illumination to see both near and far (Bee & Bjorkland, 2004; Marsh, 1996). These latter changes make people less responsive to sudden changes in illumination, such as oncoming headlights. In addition, "peripheral vision, depth perception, color vision, and adaption to the dark also become poorer and sensitivity to glare increases" with age (Lefrancois, 1996, p. 505).

In addition to age-related vision changes, there are age-related vision disorders. Cataracts are the most common of these age-related eye conditions; in this condition, there is a clouding of the lens that reduces passage of light (Meisami, Brown, & Emerle, 2003; Stuen & Faye, 2003). Cataract surgery is a common remedy for this condition. A second common eye malady is age-related macular degeneration, which "is the leading cause of vision loss among people over age 60" (Stuen & Faye, 2003, p. 9). Seeing detail and reading become difficult. Caucasians and people with light eye color are more at risk for this disease than African Americans or people with dark eye color. A third age-related eye disease is glaucoma, usually caused by very high eye pressure, which results in damage to the optic nerve and causes damage to peripheral vision and sometimes blindness. Treatment includes surgery and

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eyedrops. Those of African ancestry, individuals with diabetes, and people with a history of glaucoma in the family are at increased risk for the disease (**Stuen & Faye, 2003**).

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While changes in vision happen primarily at set periods in life, hearing loss is a progressive but gradual process throughout adulthood generally starting in the thirties (Bee & Bjorkland, 2004). Most adults do not notice any discernible change until their fifties and sixties, when sounds, especially in the high-frequency range, become more difficult to hear (Kline & Scialfa, 1996). Males suffer this type of hearing impairment more often than females (Bee & Bjorkland, 2004). By age sixty-five, over 25 percent of adults have a hearing difficulty, and for males over age seventy-five approximately 50 percent experience hearing loss (Bee & Bjorkland, 2004). The basic cause appears to be from "gradual changes in the inner ear" that result in structures in the inner ear becoming less responsive to sound (Rados, 2005, p. 22).

Some hearing deficits can be compensated for with the use of hearing aids. However, most older adults who could benefit from hearing aids do not use them because they do not feel the need, do not want to be associated with a device that makes them "look old," or simply cannot afford them. Other devices to assist hearing include hardwire systems, infrared systems, or FM devices (Montano, 2003). In addition, cochlear implants, which directly stimulate the auditory nerve through wires inserted in the cochlea, appear to improve the life of those with significant hearing difficulties (Meisami, Brown & Emerle, 2003).

Tinnitus, a ringing noise in the head or ears with no external stimuli present, is another common hearing disturbance in older adults (Whitbourne, 2005). Thirty-five to fifty million Americans experience this hearing impairment and two to three million are debilitated by this symptom (Ahmad & Seidman, 2004). Men are more commonly affected than women. The use of antibiotics, aspirin, and anti-inflammatory medications may contribute to tinnitus (Whitbourne, 2005). Other causes for the disturbance include injuries or infections of the ear, neck injuries, head trauma, stress, seizure disorders, possible nutritional deficiencies, and metabolic disturbances (Ahmad & Seidman, 2004).

Except for major degenerative and other disease processes, corrective measures, such as the wearing of eyeglasses and teaching people to find alternative ways of communicating, can help ensure

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the best use of the vision and hearing that remain. Further, advances in technology such as closed captioning of lectures and discussions (**Schmidt & Haydu, 1992**) and computer programs that assist low-vision individuals to read texts, help older adults navigate new learning in both formal and informal settings. Both teachers and learners must see to it that the educational environment is conducive to all adult learners, ensuring, for example, that rooms are adequately illuminated and acoustics are good.

The Central Nervous System

Consisting of the brain and the spinal cord, the central nervous system forms the primary biological basis for learning. We continue to learn how changes in this system may affect cognitive functioning (Bee & Bjorkland, 2004). Research on the aging brain has shifted from seeing "aging as an inevitable process of brain damage and decline" to aging as "a complex phenomenon characterized by reorganization, optimization and enduring functional plasticity that can enable the maintenance of a productive—and happy—life" (Reuter-Lorenz & Lustig, 2005, p. 249). For example, instead of seeing the decrease in brain cells as a sign of inevitable cognitive decline, we now know that although we lose brain cells or neurons through the aging process, the remaining neurons increase their connections with each other. This plasticity of the brain allows the aging brain to maintain much of its function (Bee & Bjorkland, 2004; Timiras, 2003). Further, brain scans have shown that deficits in one area of the brain may be compensated for in other areas (Cabeza, Anderson, Locantore, & McIntosh, 2002; Reuter-Lorenz & Lustig, 2005). In addition, older adults may also maintain higher levels of brain activity to compensate for deficits. However, higher levels of brain activity may not, for some, necessarily represent compensation but inefficient processing (Reuter-Lorenz & Lustig, 2005).

A consistent finding related to changes in the central nervous system concerns declining reaction time as people age (Bee & Bjorkland, 2004; Schaie & Willis, 2002). Reaction time is usually measured as the time it takes a person to complete a psychomotor task such as putting together a puzzle or responding to a specific stimulus by hitting a lighted button. Although "it is not true that all elderly people are markedly slower than young people ...,

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on the average people over the age of 65" react less rapidly (Lefrancois, 1996, p. 506). Numerous explanations have been posited for this change, such as possible sensory deprivation (Baltes & Lindenberger, 1997) or changes in actual brain activity (Baltes & Lindenberger, 1997; Schaie & Willis, 2002). Factors such as the nature of the task and a person's familiarity with it also affect reaction time. In addition, physical activity seems to improve reaction times in older adults (Schaie & Willis, 2002).

In sum, while our life expectancy in the United States has increased from 49.2 years in 1900 to 76.5 years in 2000—although racial disparities in health care affect longevity for African Americans—the human life span remains at approximately 110 to 120 years. Regardless of race, changes in vision, hearing, and reaction time are an inevitable part of the aging process. However, new technologies such as cochlear implants and laser surgery for cataracts help older adults remain active and they can continue learning well into old age. In addition, technology has demonstrated the brain's elasticity. Older adults who show deficits in one area of the brain may compensate for it in other areas.

Psychological Development

Most of the work in adult development has been driven by the psychological tradition and focuses on the individual's *internal* process of development. A myriad of models concerning faith development (Fowler, 1981), identity development (Erikson, 1963), and self-development (Gould, 1978; Josselson, 1996; Kegan, 1994) have been based on this perspective. In this view, little attention is paid to the society's influence on the person's development. The psychological perspective also underlies models used to explain race identity development (Helms, 1990), gay identity development (Cass, 1979), and more recently, biracial identity development (Henriksen & Trusty, 2004). In short, the psychological model of development, which explores the internal experiences of the individual, continues to be a favorite of developmental psychologists even among those studying socially constructed identities of race and gender.

In this next section, we will touch on two foundational psychological models of development: namely, Erikson's model of psychosocial development and Levinson's model of personal

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development will be discussed. In addition, Helms's model of White identity development, Henriksen and Trusty's recursive Black-White biracial identity development model, and Cass's gay identity development model will be explored.

Models of psychological development fall into two main categories. In stage theories, there is a stepwise upward movement, but it is not necessarily tied to chronological age (for example, Erikson, 1963, 1978; Fowler, 1981). These scholars assert that these stages are hierarchical in nature and therefore build on one another. There is disagreement about what causes the movement between stages and whether this movement is upward only to higher stages or whether it is back and forth across stages. Age-graded models, in contrast, tie specific ages to particular tasks (for example, Levinson et al., 1978; Levinson & Levinson, 1996).

Erikson's Psychosocial Development Model

Erikson's (1963) psychosocial development model is representative of the stage-related view of development. Considered "the most influential view of adult development proposed thus far" (Bee & Bjorklund, 2004, p. 33), Erikson's theory consists of eight stages of development, each representing a series of crises or issues to be dealt with over the life span. At each stage, there is a choice between opposites—one negative and the other positive—and it is imperative that persons achieve a favorable ratio of positive over negative prior to moving to the next stage. In young adulthood, the successful resolution between intimacy versus isolation results in love. In middle adulthood, resolving the tensions between generativity and self-absorption allows people to care for others; in older adulthood, resolutions between integrity versus despair provide the capacity for wisdom. Although Erikson tied his fifth stage—identity versus identity confusion—primarily to the period of adolescence, researchers in adult development have also included the examination of this stage as part of their research on adults (for example, Josselson, 1987). Erikson maintains that as adults we may revisit earlier stages to resolve or re-resolve conflicts from earlier periods in different ways. For example, because of the loss of a spouse, we may need to work again through issues of both intimacy and identity. In addition, Erikson, Erikson, and Kivnick (1986) go on to suggest that vital involvement in old age

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and interdependence among people allow adults to complete the life cycle successfully and leave a positive legacy for the next generation.

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Erikson's theory continues to stimulate discussion and research. One recent work, for example, seeks to realign his eight stages into a decade-by-decade formulation (Capps, 2004), in essence making Erikson's model an age-based one, rather than stage-of-life; generativity would then be most prominent in one's sixties, and ego integrity the task for the seventies. In terms of research, Westermeyer (2004) has recently reported on a thirty-two-year longitudinal study applying Erikson's theory to healthy men. In 1959, ninety-four male students completed a seven-hundred-item questionnaire assessing dimensions of Erikson's theory. After thirty-two years, eighty-six of the original ninety-four were assessed again. Fifty-six percent of the participants had achieved generativity, the appropriate task for adults in their late fifties. Likewise, Norman, McCluskey-Fawcett, and Ashcraft (2002) assessed developmental differences between women in their sixties and women in their eighties. The young-old group more so than the old-old women "identified with the positive aspects of Erikson's developmental stages such as fidelity, wisdom, and satisfaction with their lives, work, and accomplishment" (pp. 37-38). The authors speculated that the older women were dealing with widowhood, physical limitations and decreased resources, which may have caused them to revisit earlier issues of trust and identity.

Levinson's Age-Graded Model

Levinson and his colleagues (Levinson & Levinson, 1996; Levinson et al., 1978) provide an often-quoted description of an age-graded model. Levinson and Levinson (1996), for example, from their studies of both men and women, suggest that people evolve through an orderly sequence of stable and transitional periods that correlate with chronological age. One's life structure, that is, "the underlying pattern or design of a person's life at any given time" (p. 22), tends to be established and maintained during stable periods and then questioned and changed during transitional periods. For example, the authors indicate that the early life transition occurs between the ages of seventeen and twenty-two. This is followed by the entry into the life structure at age twenty-two to

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twenty-eight, followed by the age thirty transition, which occurs from the ages of twenty-eight to thirty-three, and the culmination of the life structure occurring between ages thirty-three and forty. The model ends with the era of late adulthood, starting at age sixty.

Among the components of this changing life are marriage and family, occupation, friendships, religion, ethnicity, and community. The "central components are those that have the greatest significance for the self and the life. They receive the greatest share of one's time and energy, and they strongly influence the character of the other components" (Levinson & Levinson, 1996, p. 23).

Although Levinson and his colleagues hold that both men and women follow these alternating sequences of structure building and transitional periods, these periods "operate somewhat differently in females and males" (Levinson & Levinson, 1996, p. 36), largely because of *gender splitting*, which "refers not simply to gender differences but of a splitting asunder—the creation of a rigid division between male and female, masculine and feminine, in human life" (p. 38). They elucidate four forms of gender splitting: (1) public sphere (male)/domestic sphere (female), (2) within marriage breadwinner (male)/homemaker (female), (3) "men's work"/"women's work," and (4) splitting of the psyche as male and female.

This framework of relating development to specific age periods has led a number of educators to propose a link between age-appropriate tasks and behavior and the fostering of learning activities for adults. Havighurst (1972) was one of the earliest writers to link these ideas into what he termed the teachable moment. The idea of the teachable moment is grounded in the concept of developmental tasks—tasks that arise at a certain period in a person's life, such as selecting a mate, starting a family, and getting started in an occupation. Although the time frame and some of the tasks Havighurst suggested are somewhat dated, the idea of specific life tasks giving rise to a teachable moment is not. Knowles (1980, p. 51) has also viewed developmental tasks as producing "a 'readiness to learn' which at its peak presents a 'teachable moment'" and outlines his own list of "life tasks" for young, old, and middle-aged adults.

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Other Models

The psychological paradigm has been embraced by some who have constructed models of racial identity development and sexual identity development. While some of these models implicitly recognize the influence of society on racial and sexual orientation identity development, they still primarily focus on the experience of the individual, with little mention of society's influence on these types of development. For example, Helms (1990, 1995) proposes a process model of White racial identity that consists of two phases: abandoning racism and creating a nonracist identity. The process of abandoning racism is as follows (Helms, 1990): Initially, Whites are oblivious to racism, until they encounter an incident or series of incidents that alert them to racism. During the disintegration stage, they recognize that racial discrimination exists and may experience confusion or guilt because of their White privilege. During reintegration they often believe there is an element of truth to negative stereotypes about people of color. They avoid associating with or may even act violently toward people of color. As Whites focus on developing a nonracist identity, they traverse through a pseudo-independent stage where they begin to recognize that Whites are not superior to people of color, but they may still perpetuate the idea of White superiority through their actions or behaviors, while in the immersion/emersion stage individuals encourage others to abandon racism and come to terms with their Whiteness. In the last phase, autonomy, they abandon racism and commit to its eradication on a personal and societal level. Maintaining this perspective is a continual process (Richardson & Silvestri, 1999).

Biracial identity development has received more attention from researchers in the past fifteen years (Bowles, 1993; Collins, 2000a, 2000b; Herring, 1995; Pinderhughs, 1995). Research has explored conflicts about dual racial identity, self-esteem and identity, and identity development, among others (Rockquemore & Brunsma, 2002). Like Helms's model, the focus of a recent biracial identity development model constructed by Henriksen and Trusty (2004) is on the experience of the individual, with less explicit attention given to the impact of society on this development. Their model of recursive Black-White biracial identity development, developed

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from interviews with biracial women, describes six periods that individuals undergo during their biracial identity development. These periods are *neutrality*, *acceptance*, *awareness*, *experimentation*, *transition*, and *recognition*. During the neutrality period, individuals are unaware of racial differences (Henriksen & Trusty, 2004). Acceptance occurs when people realize that they are racially different from others and that they "[do] not have a racial reference group" (p. 72). This difference and the lack of a racial reference group promote feelings of isolation during the awareness period. People "try to fit into one part of their racial identity" (p. 72) by associating mostly with Blacks or Whites in an effort to find where they fit in (Henriksen & Trusty, 2004). During transition, women realize they cannot identify as Black or White. Last, the recognition period is one of acceptance of their biracial identity.

Early models of sexual identity development also relied on the psychological paradigm. Cass's (1979) foundational model of gay or lesbian identity development is one of the most well-known. Cass proposes a six-stage model. The first stage, identity confusion, is marked by feelings of confusion as an individual begins to realize that he or she may be gay or lesbian. This is followed by the identity comparison stage, when the person begins to realize that he or she is gay or lesbian but denies the identity on some level. During the second stage, the individual may believe that his or her attraction to the same sex is temporary. In the third stage, identity tolerance, the person becomes more open to the idea of a gay or lesbian identity but does not yet fully embrace the identity. Identity acceptance occurs during Stage 4. Individuals have increased contact with other gays or lesbians and evaluate them more positively. This is followed by the identity pride stage, where the person discloses the identity to others and may be more immersed in the gay or lesbian subculture. Last, the gay or lesbian identity is synthesized into one's self.

Even recent models of women's midlife development have used a psychological perspective (Barrett, 2005; Josselson, 2003; Tangri, Thomas, Mednick, & Lee, 2003). Implicit in these developmental stages is the influence of society on midlife women, but the focus is still on the internal experiences of the women. Howell and Beth (2002) interviewed eleven women (seven Caucasian and four African-American) between the ages of forty and sixty in an urban environment to understand their midlife experiences. A

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three-stage (nonlinear) process emerged: *Rejecting Midlife Stereotypes, Exploring Midlife Realities*, and *Adjusting Attitudes, Behaviors, and Circumstances*. Rejecting Midlife Stereotypes included an awareness of midlife changes and a denial of the label "middleaged" (which they associated with negative stereotypes) as applying to themselves (**Howell & Beth, 2002**). In Stage 2, the denial of being middle-aged gave way to the second stage, Exploring Midlife Realities, where women mourned midlife losses, including losses in relationships due to divorce, death, or estrangement, their changing bodies, and concern about finances. Participants also clarified their values as a result of their losses and looked for role models that they felt were successfully negotiating midlife changes. During the third stage, Adjusting Attitudes, Behaviors, and Circumstances, women acted on their newfound values.

A second study expanded the findings of the Howell and Beth 2002 investigation. The study concentrated on midlife development in lesbians. It revealed that while lesbians experienced some of the same stages as heterosexual women, there were differences. For example, because of the "coming out" process that the women journeyed through earlier in their lives they had "a stronger sense of who they were and were less concerned with what others thought of them" (Howell & Beth, 2004, p. 133). They were much less concerned about ageism than their heterosexual counterparts. The earlier coming out process for participants equated with the Rejecting Midlife Stereotypes stage for heterosexual women. For example, both groups of women struggled with self-esteem. In addition, both groups coped with social rejection. Lesbians felt rejected by some members of society because of their sexual orientation. Middle-aged heterosexual women felt rejected by others because they were growing older. They experienced ageism (Howell & Beth, 2004). Lesbians experienced losses in the Exploring Midlife Realities stage but "they experienced grief with the pragmatism of individuals who had already been through many difficult experiences" because many had experienced losses during the coming out process (p. 143). Stage 3, Adjusting Attitudes, Behaviors, and Circumstances, was similar for lesbians and heterosexuals.

How do psychological models of adult development relate to learning? Educators who accept that their job is to help learners achieve the highest level of development possible could encourage students to examine their assumptions, and facilitate critical

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reflection on these assumptions (Daloz, **1986**, **1999**; **Levine**, **1989**; **Mezirow**, **2000**). Through mentoring and learning activities designed with development in mind, facilitators can enable the "transformational journeys" of their students (**Daloz**, **1986**, p. 16).

In sum, psychological models of development explore the internal experiences of the individual. Models of psychological development primarily fall into two categories. For stage theorists, there is a stepwise upward movement, but it is not necessarily tied to chronological age (for example, Erikson, 1963, 1978; Fowler, 1981), nor is it always linear (Howell & Beth, 2002). Age-graded models tie specific ages to particular tasks (for example, Levinson et al., 1978; Levinson & Levinson, 1996). Despite the knowledge that society affects adults' development, the psychological model continues to be popular.

Sociocultural Factors

The sociocultural perspective on adult development acknowledges how the social world in which we live influences our development (Dannefer, 1996; Gardiner & Kosmitzki, 2005; Shaffer, 2005). This perspective recognizes that factors such as age, race, gender, ethnicity, socioeconomic status, and sexual orientation affect how society defines us. We offer two salient strands of work from the literature on the sociocultural perspective on adulthood that provide us with different ways of looking at adult development. We examine how adult social roles and the timing of life events affect development. We then review how socially constructed notions of race, ethnicity, gender, and sexual orientation affect development.

Social Roles and the Timing of Life Events

The earlier work on the sociocultural dimensions of adulthood focused on the taking of social roles and the notion of the timing of life events. Social roles are defined as both positions and associated expectations determined primarily by normative beliefs held by society (Bee & Bjorkland, 2004). Examples of these various roles include parent, spouse, worker, child, and friend. Changes in one's social position result from modifications of these roles (such as redefining the role of parent when both parents assume employment) and the taking on of new roles (such as wife to widow or

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paid worker to retired person). These changes may be initiated by the individual or by others; a parent might ask an older child to take on the role of worker to help pay for her college expenses, for example, or changes in legislative policy might give a specific group in society, such as minorities or women, more or perhaps less control over their own lives.

Research on role transitions has migrated from a "life problem" approach to a "life trajectory" approach (Ferraro, 2001, p. 316). Early research on role transitions in the United States in the 1950s through the mid-1970s focused on loss of roles, such as the loss of the worker role after retirement. It was thought that such losses led to disengagement from society. Studies in the 1970s and 1980s moved from a concentration on role loss and gain to one of role transitions as life circumstances change (Bee & Bjorkland, 2004; Ferraro, 2001). More rigorous research designs and longitudinal studies on role transitions brought to light the complexities of role transition outcomes. Role transition outcomes could be positive or negative instead of solely negative. In the 1990s, research began to focus on the place of role transitions and role salience in the life course. Scholars investigated "how role transitions are both influenced by earlier life experiences and shape subsequent paths of personal adjustment" (Ferraro, 2001, p. 315). In research on role salience (Krause, 1999; Reitzes, 2003), people have multiple roles or identities, such as mother, sister, parent, or worker, which are arranged hierarchically according to their salience. The role's importance or salience is determined by how much the person values that role and how detrimental the loss of the role would be to a person's self-concept. This spotlight on social roles has fostered a number of research traditions in such areas as career development and marriage and family roles (see Bee & Bjorkland, 2004; Berger, 1998; Ferraro, 2001; Kalmijin, 2004).

The scholarship on the timing of life events, which is exemplified by the work of Neugarten and others (Neugarten, 1976, 1979; Neugarten & Datan, 1973), suggests that "every society is age-graded, and every society has a system of social expectations regarding age-appropriate behavior. The individual passes through a socially regulated cycle from birth to death as inexorably as he [sic] passes through the biological cycle: a succession of socially delineated age-statuses, each with its recognized rights, duties and obligations" (Neugarten, 1976, p. 16). Although the timing of

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events has changed somewhat and the deadlines for completing such events have become more variable since Neugarten completed her original work, being "off-time" or "on-time" regarding certain major life events still holds merit (Bee & Bjorkland, 2004; Pinhey & Pinhey, 2002). It is not the events themselves that necessarily precipitate crisis or change. Life events that occur "off-time," such as going through menopause at an early age, becoming a widower at age thirty, or having children later in life, can be stressful (Bee & Bjorkland, 2004; Pinhey & Pinhey, 2002). From this vantage point, the study of adult development then becomes a study of life events construed from socially constructed beliefs, whereas in the psychological tradition, the focus is on the life events themselves as markers and processes.

The idea that learning in adulthood is related to appropriate role taking, as defined by society's expectations, has a long history in adult education, from the early citizenship education programs for immigrants to today's workplace learning programs. Several writers have suggested that programs be developed related to the social roles of adults. Some thirty years ago, Kidd (1973) and Knox (1977), for example, explored how changes in social roles can be related to learning activities. In particular, Kidd (1973) outlined a taxonomy suggested by Malcolm Knowles at a UNESCO seminar in Hamburg in 1972 that takes into account not only roles but also the competencies related to those roles. The implied assumption underlying this taxonomy is that learning programs could be built to address these competencies for adults going through role changes or wishing to become more competent in their current roles (for example, family member, worker, and citizen). Even learning on our own may be driven by what society expects of us, such as learning parenting skills or taking care of aging parents. For the most part, adult educators have developed programs around role taking to the age-normative times of life events and have not taken into account those people who are "off-time." More recently there has been some change in this thinking. For example, hospice programs, which both offer support and teach caretakers how to care for dying people, do not discriminate whom they will serve based on either the age of the patient or the age of the caretaker.

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Socially Constructed Notions of Race, Ethnicity, Gender, and Sexual Orientation

Researchers have been especially interested over the past two decades in the socially constructed notions of race, ethnicity, gender, and sexual orientation as they relate to adult development (Alderson, 2003; Cross & Vandiver, 2001; Ponterotto, Casas, Suzuki, & Alexander, 2001; Worthington, Savoy, Dillion, & Vernaglia, 2002). Discussing these different constructs in relation to development is challenging because they often overlap and have been given different meanings by researchers. For example, some people use the terms race and ethnicity interchangeably, whereas others clearly distinguish between these two concepts. What makes it even more difficult to establish the connection between these ideas and development is the intersection of various positionalities, that is, where one stands or where one's "position" is in relation to others. As Kincheloe and Steinberg (1993, p. 302) write: "We are never independent of the social and historical forces that surround us—we are caught at a particular point in the web of reality. The post-formal project is to understand what that point in the web is, how it constructs our vantage point, and the ways it insidiously restricts our vision." A person's race, class, gender, and sexual orientation, among other positionalities, intersect to influence the development of that person. For example, a middle-class White lesbian may face different developmental challenges than a wealthy, heterosexual Black man because of their different positionalities. There has been increasing interest in examining these intersections and their impact on adult development (Bowman et al., 2001; Etter-Lewis & Foster, 1996).

Most approaches to Black identity development appear to be sociocultural. Black identity development models take three approaches: mainstream, underground, and multidimensional. The mainstream approach focuses on how racial identity can be viewed in relation to other identities. This view of Black identity development emphasizes coping with the stigma associated with a marginalized identity but does not examine "the qualitative meanings associated with particular ethnic and racial identity" (Sellers, Smith, Shelton, Rowley, & Chavous, 1998, p. 21). The underground approach recognizes the importance of history and culture

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in the "experiential meaning associated with being Black" (p. 21). The multidimensional approach combines the mainstream and underground perspectives.

Cross's (1971) theory exemplifies an underground approach to Black identity development and offers several propositions. First, Black racial identity contains two dimensions: "a personal identity component (PI) and a reference group component (RGO)" (Cross & Vandiver, 2001, p. 380). Second, the "core of the theory is on the various ways Black people make sense of themselves as social beings" (p. 380). Third, the theory addresses how Black identity is "enacted in everyday interactions with Black and White people" and while there are four stages that contain a total of eight "identity exemplars" (p. 375), Cross recognizes the myriad ways people experience their Nigrescence.

Cross's model has grown from five identity stages (Cross, 1971) to multiple identity clusters at each of four stages (Cross & Vandiver, 2001). The four main stages are pre-encounter, encounter, immersion-emersion, and internalization. An individual in the pre-encounter stage generally does not interact with Black culture or problems. In the encounter stage, the individual may have an experience or series of experiences that "shatter the relevance of the person's current identity and worldview, and at the same time provide some hint of the new direction the person must now take" (Cross, 1995, p. 105; italics added). Generally, this new worldview is followed by Stage 3, immersion-emersion, where the individual immerses himself or herself in Black culture. The last stage, internalization, is marked by an "inner peace," and the person's idea of Blackness "tends to be more open, expansive, and sophisticated" (Cross, 1995, p. 114). Furthermore, an internalization-biculturalist engages in Black issues and is committed to Black concerns but he or she also enjoys aspects of the dominant culture (Cross & Vandiver, 2001). An internalization-nationalist stresses the Afrocentric perspective. The internalization-multiculturalist feels a part of the Black community but appreciates many cultures and "prefers solutions ... that address multiple oppressions" (p. 376).

As noted, mainstream and underground perspectives are combined in the multidimensional approach to racial identity development (**Sellers et al., 1998**). Racial identity is composed of four elements: racial salience, racial centrality, racial regard, and racial ideology. *Racial salience* "refers to the extent to which one's race is

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a relevant part of one's self-concept at a particular moment or in a particular situation" (p. 24). Centrality concerns how central race is to the person's self-definition. Racial regard refers to how positively or negatively a person feels about his or her race. This includes how the individual believes others view African Americans as well as how he or she feels about being African American. Ideology "is composed of the individual's beliefs, opinions, and attitudes with respect to the way she or he feels that the members of the race should act" (p. 27). Various ideologies include that of the nationalist, oppressed minority, assimilationist, and humanist. People with a nationalist ideology "stress the uniqueness of being Black," while oppressed minority ideologists compare the oppression faced by Blacks with other groups and support building coalitions with other groups in an effort to fight oppression (p. 27). The assimilationist emphasizes similarities between cultures and works within the existing power structure to change the system, while the humanist "emphasize[s] the similarities among all humans" and is concerned with oppression of all people and global issues such as hunger and environmental issues (p. 28).

The sociocultural approach to development is not limited to scholars who investigate racial identity development. Researchers have also used this approach to explore gay sexual identity development. For example, Cox and Gallois's (1996) social identity perspective on gay and lesbian identity development explicitly acknowledges the importance of society in the construction of a gay or lesbian sexual identity. Their model, grounded in social identity theory, "examines the identity processes which occur within the individual ... [and] explores the effect that the larger social and societal forces have on these processes" (p. 10). Identity development involves two processes: self-categorization and social comparison. **Cox and Gallois (1996)** assert that people can possess a personal identity (self-categorization) that is not part of their social identity. In short, people can self-categorize as gay or lesbian but not have a gay or lesbian social identity. They note that when people adopt a gay or lesbian social identity they may use several strategies in order to address the stigma, which include putting down heterosexuals. For example, they may call heterosexuals "breeders" (p. 21) in order to feel better about being gay or lesbian.

A second model of gay identity development takes an ecological approach (Alderson, 2003). This model examines the myriad

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influences that help or hinder the person in the process of claiming a gay identity. In the Before Coming Out stage, influences that can serve as catalysts to continue the process or can hinder the process include parents, culture, church, peers, and society. These influences continue in the During Coming Out phase, when a person experiences conflicting emotions, learns new behaviors, and works at reducing his or her own internalized homophobia. In the Beyond Coming Out phase, the person commits to the gay identity, has integrated the gay identity with other parts of the self, and has reintegrated into the heterosexual world (Alderson, 2003).

Numerous scholars, primarily over the past decade, have acknowledged the importance of the socially constructed notions of race, ethnicity, gender, and sexual orientation to understanding learning in adulthood and the teaching-learning transaction (Hayes & Colin, 1994; Flannery & Hayes, 2001; Lee & Johnson-Bailey, 2004; Johnson-Bailey & Cervero, 1998; Maher & Tetreault, 1994; Mojab, 2005; Tisdell, 1995). Lee and Johnson-Bailey (2004) examine their experiences as teachers of color in the White academy. While explaining their feminist classroom practice, they unearth issues of racism, sexism, and power in the classroom and its effect on the teaching-learning transaction. They write, "In those early days, we were often the only women of color in a sea of white women and men who felt free to vocalize their surprise that we were their instructors and to ask openly whether or not we belonged in that environment" (p. 56). In another study, Johnson-Bailey and Cervero (1998) compared graduate student perceptions of a White male full professor and a Black female assistant professor. Race had an impact on the messages students received from each professor. The White professor, who discussed race as a central topic in his class, was not seen as having an agenda associated with race. His competence and fairness to students was not questioned. In contrast, the Black professor, who did not discuss race as a central topic in class, was seen as having a racial agenda and her fairness and competence were questioned (Johnson-Bailey & Cervero, 1998). Tisdell (1995), among others, has pointed out the important role that power plays when introducing socially constructed notions of race, ethnicity, gender, and sexual orientation into formal and even nonformal programs of adult learning. Tisdell observes that "what counts as knowledge in a particular learning context and decisions about what gets included in the

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curriculum for a given learning activity—are decisions made with attention to the politics of this particular educational context and to what is seen as 'real' knowledge relevant to this educational context" (p. 11). Teaching strategies that allow participants to connect the material to their own life experiences, allow for reflective time, confront differences, and bring together theory and practice seem to provide useful starting points for doing this (Caffarella, 1992; Wlodkowski & Ginsberg, 1995).

To summarize, the sociocultural approach to adult development acknowledges how the social world influences our development. This perspective recognizes that the intersection of various positionalities affects how society defines us. In addition, the social roles we take on and the timing of life events such as marriage and having children affect our development. Cross and Vandiver's (2001) model of Black identity development and Cox and Gallois's (1996) model of gay and lesbian identity development were two models that were highlighted that come from the sociocultural paradigm.

Integrative Perspectives

There have been attempts to respond to the call for a more integrated theory of adult development by combining two or more of the perspectives reviewed in this chapter. Four models of adult development—those proposed by Baltes (1982, 1987), **Magnusson (1995)**, **Perun and Bielby (1980)**, and **Bronfenbrenner (2001)** are illustrative of this wave of theory building.

Baltes (1982, p. 18) introduced one of the earlier comprehensive models that emphasized a "multicausal and interactive view" of adult development. Drawing on the work of Havighurst, Neugarten, and others, he hypothesized that biological and environmental forces constitute the basic determinants of development. These are then influenced by three major sets of factors: normative age-graded influences (forces normally correlated with age), normative history-graded influences (events that are widely experienced by one age group of people), and nonnormative influences (factors significant to one particular person). The interaction of these influences results in developmental changes over the life span. Baltes hypothesized that the relative significance of the three developmental influences may vary at different points in the life span—"for example, age-graded influences may be

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especially important ... in old age, whereas history-graded nonnormative influences may predominate in early and middle adulthood" (Baltes, 1982, p. 22).

Within this life-span perspective, writes Bee (1996, p. 74), Baltes and his colleagues assume "there is *lawfulness* to the changes we see in adult life. ... Our task ... is to uncover and understand the nature of that lawfulness. They do not assume that the specific pathways followed by adults will necessarily all be the same; they do not assume that all pathways lead toward either decline or toward higher efficacy. They do assume that the underlying lawfulness will create many surface patterns." Baltes has also stressed the need for new "development-specific" research methodologies to address the more interactive and complex models of adult development.

One response to Baltes's concern about methodology is an integrative model proposed by **Magnusson (1995)**. Grounded in four basic assumptions, Magnusson argues that his model "can serve as a general theoretical framework for planning, implementation, and interpretation of empirical research on specific aspects of individual development" (p. 19). His four assumptions are as follows (pp. 25–29):

- 1. The individual functions and develops as a total integrated organism. Development does not take place in single aspects, taken out of context. ...
- 2. The individual functions and develops in a continuously ongoing, reciprocal process of interaction with his or her environment. ...
- 3. At each specific moment, individual functioning is determined in a process of continuous, reciprocal interaction between mental factors, biological factors, and behavior—on the individual side—and situational factors. ...
- 4. The individual develops in a process of continuous reciprocal interaction among psychological, biological, and environmental factors. ...

What is key to this model is that "individuals do not develop in terms of single variables but as total integrated systems. In this perspective, all changes during the life span of a person are characterized by lawful continuity" (p. 39). Magnusson emphasizes that his model "does not imply that the whole system of an individual

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must be studied at the same time. The essential function of the model is that it enables us to formulate problems at different levels of the functioning of the total organism, to implement empirical studies, and to interpret the results in a common, theoretical framework" (p. 50).

The third model we discuss is not widely known, but we have found it useful in framing development from the integrative perspective. Perun and Bielby (1980) view adulthood as "consisting of a large number of temporal progressions—sequences of experiences or internal changes, each of which follow some timetable" (Bee, 1996, p. 75). Pictured as a set of disks, similar to machine gears rotating on a central rod, each disk represents a part of the developmental picture: physical changes, changes in nuclear family roles (like marrying and having children), changes in other family roles (such as death of a parent), changes in work roles, and changes in emotional and personal tasks of adulthood (Perun & Bielby, 1980). Each of these gears or disks moves at different rates for different people, "thus creating a unique pattern for each adult" (Bee, 1996, p. 76). For example, one person may delay having children until her early forties so she can establish herself in a career, while another may start a family in her teens and then start a career once her children are grown. The first person would have speeded up her career or work progression while slowing down her family life cycle, while the second person would have done just the opposite. In addition, the entire developmental process is embedded in historical time, which also affects the developmental progression in each of the major areas.

In this model, developmental changes come from two sources. The first is the basic changes that happen during each of the temporal progressions, some of them inevitable and others chosen. Second, *asynchrony*, which "occurs when one or more dimensions is off-time in relation to others" (**Perun & Bielby, 1980**, p. 105), triggers other changes. For example, when a person's spouse or partner dies in early adulthood, the nuclear family roles and possibly the work roles often change dramatically, especially if there are minor children involved. Bee (1996, p. 77) has outlined a number of "intriguing and potentially useful implications or expansions of this model." Among these are that the rate of movement along any of the temporal dimensions may be influenced by gender, race, class, ethnicity, and sexual orientation.

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Last, Bronfenbrenner's (2001) bioecological systems theory delineates five layers of the environment or systems that influence development. Although his emphasis was on child development, his theory has implications for adults. The microsystem includes the "activities, roles, and interpersonal relations" in the person's immediate environment, which include the home, school, peers, and workplace (Bronfenbrenner, 2001). The mesosystem is defined as the relationships between these microsystems. An example of a mesosystem is the relationship between a person's workplace and the community. The exosystem is a larger social system in which the person may not function directly but which has an effect on his or her microsystem. For a child, this may be the relationship between the home and the parent's workplace. For an adult, this may be the relationship between the child's school and a community group (Bronfenbrenner, 2001). The fourth system is the macrosystem, which contains the cultural values, mores, and laws that affect the previously mentioned systems. For example, if the cultural belief is that women should marry and raise children, opportunities for aspiring career women may be limited and affect their development and standing in society. Last, the *chronosystem* refers to the influence of time as it relates to the person's environment and subsequent development. Examples include the timing of historical events such as the Depression or personal events such as the timing of a parent's death.

Although application of these integrated models to learning in adulthood has been limited, the message conveyed by the theorists is clear: to understand development in adulthood fully, one must move beyond explanations fostered only by one or two perspectives. Educators of adults must be mindful of the impact of single-perspective theories "on shaping and maintaining conventionally held views about what it means to be a mature and healthy adult" (Tennant, 1988, p. 65). The psychological perspective, which has been used as the major lens through which educators of adults have viewed development, can be widened to include the other lenses of biological, sociocultural, and integrated perspectives. Tennant and Pogson (1995) observe that "the raw material[s] in the process of development are the organism, with its constitutionally endowed equipment, and the social environment, with its historical and cultural formations. Development thus proceeds through a constant interaction between the person and the environment.

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[Further], because development is contested, and because different versions of development serve the interests of different groups, it is as much a political as it is a psychological construct" (pp. 198–199). Therefore, it is important to foster a multiperspective focus in our study and practice of how adult development theory is linked to learning in adulthood.

Summary

Adult developmental theory and research offer a rich array of material from which numerous implications can be drawn about learning in adulthood. This chapter has reviewed the developmental characteristics of adults from four perspectives: biological aging, psychological change, the influence of sociocultural factors on development, and the integrative paradigm. With regard to biological aging, all adults experience some changes as they age. Many of these changes vary from person to person and may have little effect on learning thanks to advances in technology. Psychological changes in adulthood have been charted by a number of researchers. The sequential models of development of Erikson and Levinson are representative of those that attempt to delineate the common themes of adult life according to what phase or stage of life one is in.

From the sociocultural perspective, change in adulthood is determined more by sociocultural factors, such as social roles, race, and gender, than by individual maturation. Two strands of work from the sociocultural perspective were described, and implications for this work for adult learning were addressed. Discussed first was the importance of social roles, such as parent, worker, or friend. Social roles are determined primarily by societal expectations and change over time. Adult educators have often designed programs tied to social roles, such as parenting classes or workshops on retirement. Society still determines at what age we ought to be engaged in which life events, although some would argue that the age norms for events are much more flexible than they were in the past.

Addressed next was the socially constructed nature of the concepts of race, gender, ethnicity, and sexual orientation and how defining these concepts as social constructions versus individual traits has affected the way we think about adult development.