

Engaged as We Age



Just Do It?... Maybe Not!

**Insights on Activity in Later Life from the Life & Times
in an Aging Society Study**

Just Do It?... Maybe Not!

Insights on Activity in Later Life from the Life & Times in an Aging Society Study

Jacquelyn B. James

Elyssa Besen

Christina Matz-Costa

Marcie Pitt-Catsoupes

Sloan Center on Aging & Work, Boston College, Chestnut Hill, MA

Suggested citation

James J.B., Besen E., Matz-Costa C., & Pitt-Catsoupes M. (2011). *Just do it?... maybe not! Insights on activity in later life from the Life & Times in an Aging Society Study*.

Chestnut Hill, MA: Sloan Center on Aging & Work, Boston College.

Acknowledgements:

We are grateful to the Alfred P. Sloan Foundation (grant #2008-6-15), to the Institute for Intercultural Studies, and to the Boston College Institute on Aging for their support of this work. We are also indebted to the Boston College Alumni Association for its cooperation in recruiting participants. Most important, we are grateful to the many participants in the study who shared their experiences with us.

Table of Contents

Overview	4
About the Life & Times in an Aging Society Study	4
<hr/>	
The X Revolution	5
<hr/>	
Why did we conduct the Life & Times in an Aging Society Study?	7
<hr/>	
What is involvement, what is engagement, and how do they differ?	8
What is involvement?	8
What do older adults do?	8
What are the consequences of involvement?	8
What is engagement, and how does it differ from involvement?	8
What are the consequences of engagement?	9
<hr/>	
Findings	10
<hr/>	
Conclusion	15
<hr/>	
Appendix	16
Table I: Mean well-being scores by involvement status and age group	16
Table II: Mean well-being scores by level of engagement and age group	17
<hr/>	

Overview

In this research summary we highlight:

- adult roles that have both a personal and social benefit
- the difference between *involvement* and *engagement* in activities and roles
- some of the findings from the Life & Times in an Aging Society Study
- reasons why it is important for older adults to be *engaged* – not just *involved* – in certain types of life roles: paid work, volunteerism, education or training, and caregiving

Chief among the study's results are the following:

- The proportion of respondents age 65 and older was significantly greater than the proportion of respondents younger than 50 who were involved in volunteering.
- The proportion of respondents between the ages of 50 and 64 was significantly greater than the proportion of respondents younger than 50 who were involved in education or training.
- On average, engagement in paid work, volunteering, and education (but not caregiving) was deeper for those from the age of 50 up than it was for those who were under 50.
- Well-being appears to be considerably enhanced for those who are highly engaged (not just involved) in activities. The depth of engagement may be even more consequential for well-being in later life.

About the Life & Times in an Aging Society Study¹

The Sloan Center on Aging & Work addressed questions about involvement and engagement in later life in its Life & Times in an Aging Society Study. Participants were recruited through electronic newsletters announcing the conference “Spirituality in the Second Half of Life,” held at Boston College in April 2010. These newsletters contained a link to a survey associated with the study and invited readers to respond, regardless of their plans to attend the conference. About 850 people completed the survey between January and April 2010. Seventy-six percent were female, 19 percent were retired, 64 percent were married or living with someone, 97 percent were white, 64 percent had a graduate degree, and 45 percent had a total household income of more than \$100,000. The respondents ranged in age from 21 to 83.

In this report, we divide the sample into three age groups:

- younger than 50 (26 percent of respondents)
- 50 to 64 (45 percent of respondents)
- 65 and older (29 percent of respondents)

The X Revolution

Growing old in the 21st century is not what it was in the 20th. Life expectancy has dramatically increased,² and the typical postretirement period extends for many years.³ Furthermore, older adults of today are healthier than older adults of yesterday.⁴ Some say nothing short of a revolution is going on.⁵ In the absence of a name for these rather dramatic changes in life course, we have dubbed them the X Revolution.

Despite significant shifts in the hopes and opportunities associated with later adulthood, some people are stuck in an outdated way of thinking about this stage of life. They believe that older adults are a leisure class and that old age is a “roleless role.”⁶ Some researchers, for example, cling to the notion that as adults age, they disengage from their roles, obligations, responsibilities, and social systems in order to adapt to their inevitable “fading out.”⁷

The new way of thinking, of course, holds that the “fading out” period arrives much later in life than it once did, and that older adults can take action to improve the quality of their lives.⁸ New expectations involve the achievement of “successful aging,” which requires adjustments that are known to reduce the risk of certain diseases, enhance mental health, and keep older adults actively engaged in the world.⁹

While many important and meaningful activities are on the roster of possibilities for older adults today — for example, exercise, socializing with friends, traveling, and gardening — there may be good reason for practitioners, policy makers, and society in general to better understand and promote older adults’ participation in activities that not only have a personal benefit but that also have a direct or indirect social benefit—such as paid work, caregiving, volunteering, and education. The productive aging framework emphasizes the importance of involvement in such activities for the maintenance of health and vitality in later life as well as to support a sense of meaning, purpose, and value.¹⁰ Scholars employing this framework have argued that participation by older adults in activities with both a personal and social dimension is beneficial not only to the participants but also to families, communities, and society at large. When older adults invest themselves in such productive activities, they contribute to the economy, minimize the threat that a swelling population of elders poses to the sustainability of the Social Security and health care systems, and counterbalance distortions in the labor supply that create an economic burden on the young and middle-aged as the Baby Boom generation retires.¹¹

In the past, older adults who tried to get involved in activities that have the greatest potential for wide-reaching benefits to society also faced the greatest barriers to successful participation. Historically, older adults were directed away from these activities and “pushed toward less meaningful participation or into roles for which there are no market equivalents, no compensation, little recognition, and few institutional supports” (p. 4).¹⁰ Now that the X Revolution has begun, however, we are seeing modern retirees participating more and more in these roles.

For example, many older adults want to continue working beyond conventional retirement ages; after the recession of 2008, more feel they *must* work longer. Others are becoming committed to volunteer activities or civic responsibilities in ways that go beyond occasional, ad hoc efforts. Older adults are seeking education and training simply to keep their minds active or to retool for new work or to set the stage for long dreamed-of pursuits. And many provide care on a regular basis to children, grandchildren, peers, parents, and spouses.

Like it or not, a new “normal” is being defined. If employers, policy makers, and social scientists want to help shape the future of aging in America, they must pay attention to changes that are in progress now.

Why did we conduct the Life & Times in an Aging Society Study?

Older adults are often advised to “keep busy,” “stay active,” and “just do it.” In the course of our research at Boston College’s Sloan Center on Aging & Work, we began to wonder if fidelity to these mantras indeed makes for a satisfying later life. We suspected that involvement for involvement’s sake might not facilitate well-being, and that an older adult’s subjective experience of an activity or role influences the benefits derived. We launched the Life & Times in an Aging Society Study to compare engagement in paid work, volunteering, caregiving, or education with simple involvement in these activities. We defined engagement as one’s subjective experience of deep connection to something positive, meaningful, invigorating, and inspiring. We wanted to know if involvement is sufficient for the well-being of older adults or if something more — engagement — is required.

The study addressed the following questions:

- Does involvement in paid work, volunteering, caregiving, and education vary by age?
- Does engagement in paid work, volunteering, caregiving, and education vary by age?
- Do those who are involved in paid work, volunteering, caregiving, and education have a different sense of well-being than those who are not? Does the relationship between involvement and well-being change as people age?
- Does well-being vary with the depth of engagement in paid work, volunteering, caregiving, and education? Does the relationship between engagement and well-being change as people age?

What is involvement, what is engagement, and how do they differ?

What is involvement?

Researchers typically ask: What are older adults doing? In what activities are they participating? Some researchers ask how much time older adults spend on any given activity. In our view, answers to such questions connote involvement — “just doing it.”

What do older adults do?

While numbers vary from study to study, our analyses of data from the leading source of information on this topic — the National Institute on Aging’s longitudinal Health and Retirement Study (2008, HRS)¹² — suggest the following profile of activities in which older adults are involved:

- 21 percent of adults who are 65 and older are in the labor force
- 21 percent of adults who are 65 and older are involved in volunteer work
- 20 percent of adults who are 65 and older participate in some type of caregiving
- 25 percent of adults who are 50 and older reported having enrolled in classes in the previous five years (Because the HRS did not ask about education and training activities, the source of this figure is a poll conducted by the American Association for the Advancement of Retired People, or AARP.¹³)

What are the consequences of involvement?

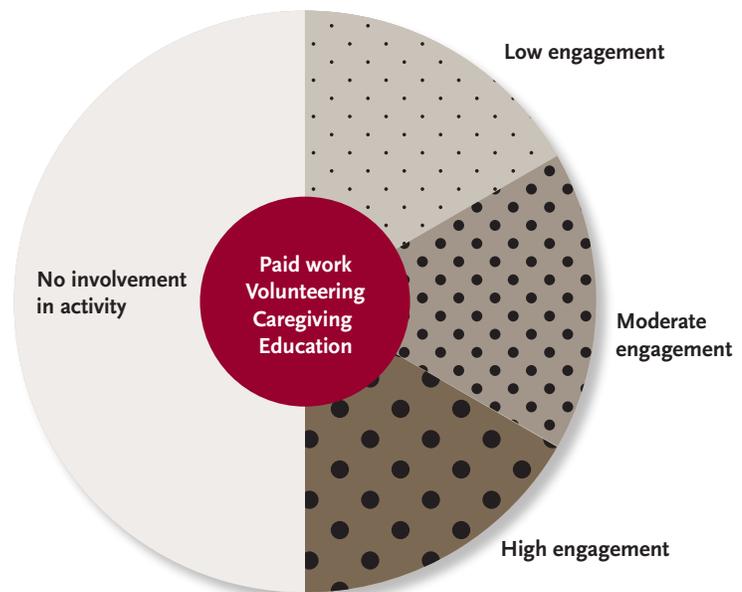
Numerous studies have linked forms of involvement in later life, such as those listed above, to outcomes of well-being.¹⁴ However, can adults as they age expect positive consequences simply from being involved in these activities? What about the quality of the experience? What about one’s subjective perception of one’s role in the activities?

What is engagement, and how is it different from involvement?

Although many researchers use the terms interchangeably, we distinguish *involvement* (participation in an activity) from *engagement* (the quality of one’s connection to an activity or role or the act of attaching psychological importance to an activity or role). According to Cumming, “This raises a problem of the difference between the appearance of engagement and the experience of it” (p. 38).⁷ Indeed, using the terms *involvement* and *engagement* interchangeably places a rather intense pressure on older adults to stay “active,” or be “productive” by contributing to the economy, or to practice what one scholar has called the “busy ethic,” in one form or another.¹⁵ As in the Nike ad, the message is, “Just do it.” Yet, common sense suggests that one’s subjective experience of an activity or role (that is, engagement) can have an important impact on the extent to which an older adult benefits from his or her involvement, at least in terms of well-being.

To be engaged in an activity or role is to be able to embrace it physically, cognitively, and emotionally when one is involved in it.¹⁶ *Engagement* refers to the psychological connection one makes to the performance of activities or a role and to the investment of multiple personal energies (for example, physical, cognitive, and emotional).¹⁷ One can be involved in paid work, volunteering, caregiving, or educational pursuits and even very committed to one of these activities without being fully engaged by it. As the following figure shows, involvement is necessary for engagement. Moreover, engagement is a matter of degrees: One may be engaged fully or not much at all.

Figure 1. Potential levels of investment in meaningful adult activities



What are the consequences of engagement?

Research on engagement at work (“employee engagement”; “work engagement”) documents many positive outcomes for employers and employees when workers are highly engaged by their work tasks. Little is known, however, about the outcomes when people are highly engaged by volunteer activities, educational pursuits, or caregiving, and whether these outcomes shift as people age.

Findings

To assess involvement, respondents were asked if they participate in paid employment, volunteering, education and training, or caregiving on a weekly basis. (We defined weekly involvement in caregiving as providing care on a weekly basis for children, grandchildren, spouses, or friends.)

As the following table shows, 60 percent of respondents were involved in paid employment. The number of hours of participation per week ranged from 2 to 98 and averaged 41. Thirty percent of our sample were involved in volunteering. The number of hours of participation ranged from a half-hour to 50 hours per week and averaged 8 hours per week. Forty percent of the sample were involved in some type of education or training. The number of hours of participation ranged from 1 to 68 hours per week and averaged 8 hours per week. Finally, 30 percent of the sample were involved in caregiving. Of this group, 28 percent were providing childcare only, 13 percent were caring for their grandchildren, 25 percent were caring for an adult age 65 or older, 3 percent were caring for a disabled family member or friend under the age of 65, and 31 percent were providing multiple types of care. The number of hours of participation in caregiving per week ranged from 2 to 168 and averaged 71.

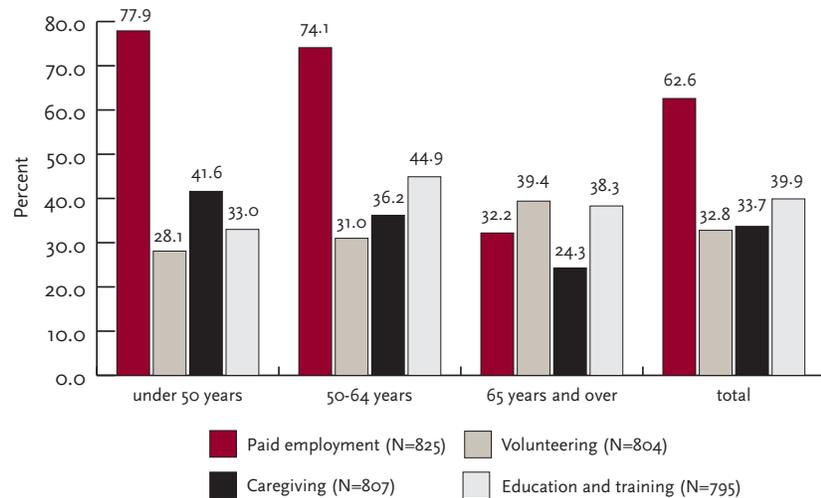
Table 1. Respondents' involvement in the study's categories of activity

Chronological age	Percentage involved	Range of hours spent	Average # of hours per week (median)
Paid employment (N=835)	60	2 to 98	40
Volunteering (N=815)	30	0.5 to 50	5
Education and training (N=817)	40	1 to 68	4
Caregiving (N=807)	30	2 to 168	30

Note: The sample for the range of hours and average number of hours in each of the activities consists only of those respondents who reported that they are involved in a given activity on a weekly basis.

To what extent does involvement in paid work, volunteering, caregiving, and education vary by age? As Figure 2 shows, the percentage of respondents who were involved in paid work and caregiving was significantly greater among those younger than 50 and between the ages of 50 and 64 than it was among those who were 65 and older. However, the percentage of respondents who were involved in volunteering was significantly greater among those who were 65 and older than it was among those younger than 50, and the percentage of respondents who were involved in education was significantly greater among those between the ages of 50 and 64 than it was among those younger than 50.

Figure 2. Involvement in the study's categories of activity, by age group



Note: All analyses of variance (ANOVAs) significant at $p < .05$. For paid work, the group age 65 and older had a significantly lower percent of involvement than the other age groups [$F(2, 822)=83.06, p < .001$]. For volunteer work, the group younger than 50 had a significantly lower percent of involvement than the group age 65 and older [$F(2, 801)=3.65, p < .05$]. For caregiving, the group age 65 and older had a significantly lower percent of involvement than the other age groups [$F(2, 804)=8.22, p < .001$]. For education and training, the group younger than 50 had a significantly lower percent of involvement than the group between the ages of 50 and 64 [$F(2, 792)=3.94, p < .05$].

Does engagement in paid work, volunteering, caregiving, and education vary by age?

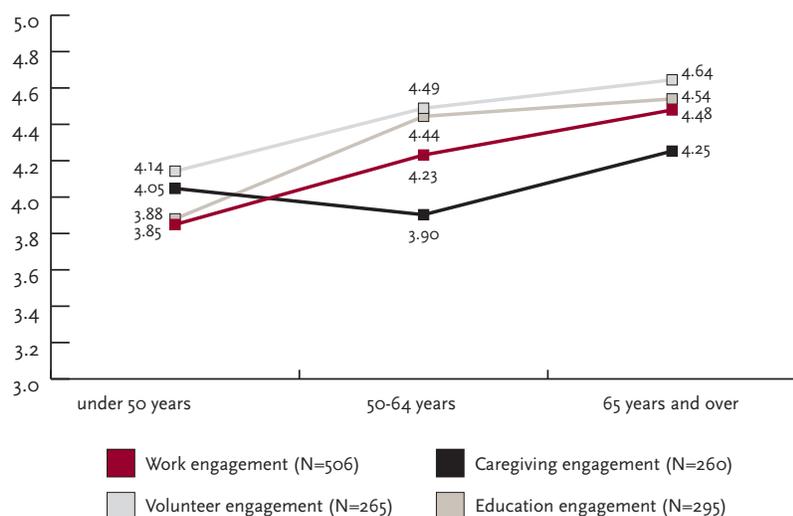
Because our study was the first to explore variation in engagement in different roles over the course of early, mid, and late adulthood, we had to develop a way to measure engagement. We adapted the Utrecht Work Engagement Scale (UWES)¹⁸ to measure engagement in volunteer, caregiving, and educational roles.

The UWES defines *work engagement* as “a positive, fulfilling work-related state of mind that is characterized by vigor, dedication, and absorption” (p. 702).¹⁹ The authors describe vigor as a state characterized by high levels of energy and mental resilience while working and by the willingness to invest effort in one’s work and to persist even in the face of difficulties. Dedication refers to being strongly involved in one’s work and experiencing a sense of significance, enthusiasm, inspiration, pride, and challenge. Absorption describes the state when one is fully concentrating and happily engrossed in work, to such an extent that time passes quickly and detaching from the work is difficult.¹⁹

We used three survey items to assess vigor (for example, “When I’m involved in X activity, I feel strong and vigorous”), three to assess dedication (for example, “I am enthusiastic about X activity”), and three to assess absorption (for example, “I feel happy when I am working intensely at my job, or my volunteer activity, or my caregiving activity, or my educational activity”) related to each category of activity, for a total of nine items for each category.

Scores on our engagement scales could range from a low of zero to a high of 6. The mean engagement score for work was 4.15, for volunteering 4.47, for caregiving 4.02, and for education 4.35. Just as the respondents' levels of involvement in the four spheres of activity varied with age, so did their levels of engagement (see Figure 3, below). For work, volunteering, and education (but not caregiving), on average, the level of engagement was higher among those between the ages of 50 and 64 and among those 65 and older than it was among those younger than 50.

Figure 3. Mean engagement scores, by age group



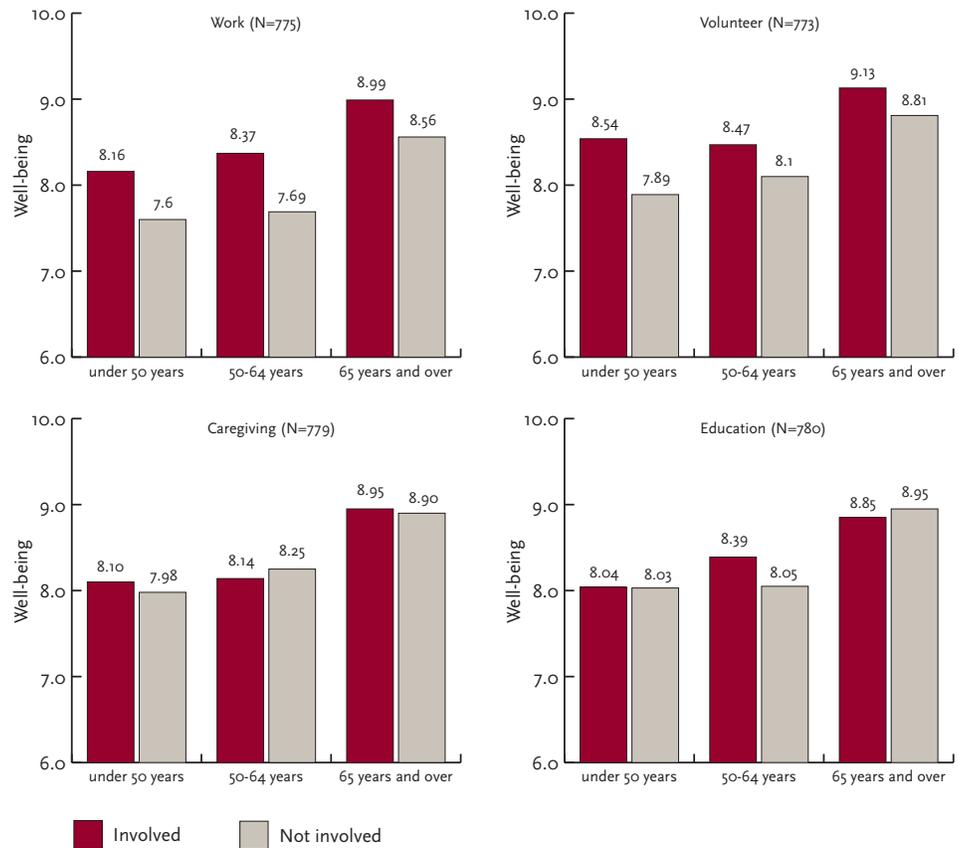
Note: All analyses of variance (ANOVAs) significant at $p < .05$ except for caregiving. For paid work, those younger than 50 were significantly less engaged than those in the other age groups [$F(2, 503)=16.73, p < .001$]. For volunteer work, those younger than 50 were significantly less engaged than those in the other age groups [$F(2, 262)=6.43, p < .005$]. For caregiving, the age groups did not differ significantly on engagement [$F(2, 256)=2.18, p > .05$]. For education and training, those younger than 50 were significantly less engaged than those in the other age groups [$F(2, 291)=8.67, p < .001$].

To what extent does well-being differ between those who are involved and those who are not in each of the study's categories of activity: paid work, volunteering, caregiving, and education? Does the relationship between involvement and well-being differ by age group? We used two questions to measure well-being. Those surveyed were asked to assess their overall satisfaction with life and their overall mental health on an 11-point scale ranging from zero (worst) to 10 (best). The overall well-being score was the average of the two responses.

As shown in Figure 4, below, those who were 65 and older had the highest well-being scores for each of the categories of activity, whether they were involved in that category of activity or not. Moreover, across all age groups few significant differences appeared in the well-being scores of those who were involved in an activity and those who were not. One exception is the category of volunteer work among respondents younger than 50: Those who were involved in volunteer activities had significantly higher well-being scores than those who were not. This was not the case among respondents who were

50 and older. Another exception is paid employment; respondents between the ages of 50 and 64 who were involved in paid employment had significantly higher well-being scores than those who were not. The scores of respondents younger than 50 or age 65 and older did not vary with involvement in paid employment. (Full results with significance tests appear in Table I in the Appendix.)

Figure 4. Well-being scores, by involvement status and age group

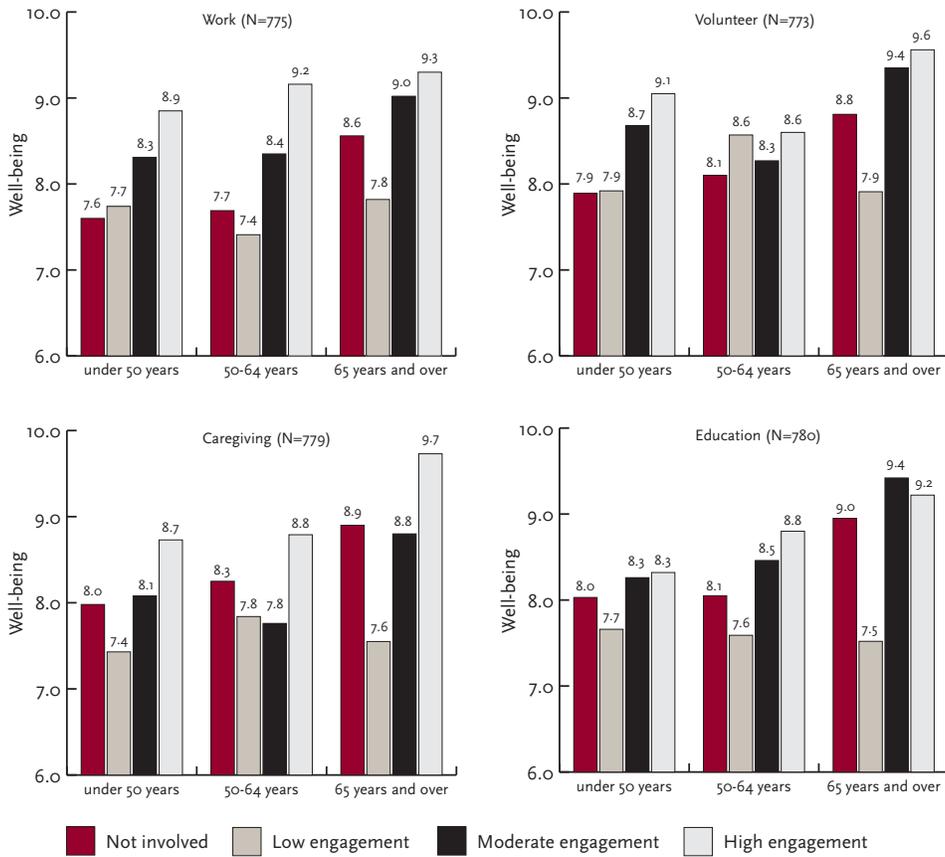


Note: See the Appendix for the results of significance tests.

To what extent does well-being depend on the degree to which one is engaged by paid work, volunteering, caregiving, and education? Does the relationship between engagement and well-being differ by age group? In the previous section we reported few differences in well-being between respondents who were involved in a given category of activity and those who were not. In this section, we examine whether differences in well-being emerge when we take into account the degree to which respondents who were involved in an activity were also engaged by it. Figure 5, shows that across all four categories of activity and all three age groups, respondents with the highest well-being scores were moderately or highly engaged. Those with the lowest well-being scores were not much engaged by an activity, or involved in it at all.

The results of this part of the survey suggest that being involved in one of the four activities but not feeling particularly excited about it, dedicated to it, or challenged by it — aspects of engagement — is about as good for one’s well-being as not being involved in the activity at all. However, the well-being of those who are highly engaged in any of the four activities appears to be considerably enhanced. It is interesting to note that the well-being gap between those whose level of engagement in an activity was low and those who were not involved in the activity at all was widest in the 65-and-older age group, suggesting that the quality of one’s experience of an activity may be most consequential for the well-being of people in later life. (Full results with significance tests appear in Table II, in the Appendix.)

Figure 5. Well-being scores, by engagement levels and age group



Note: See Appendix for results of significance tests.

Conclusion

Retirement probably never was a time of complete rest and relaxation. Today, however, both the longevity revolution and the current economic climate are leading to new views of older adulthood. The disengagement paradigm has been resoundingly refuted. Engagement is important for the well-being of older citizens as well as for society.²⁰ Retirement is an exciting time. According to the sociologist Lillian Rubin:

“... all of us are now in uncharted territory, a stage of life not seen before in human history. And whether woman or man, whether working-class or professional, we are all wondering how we’ll live, what we’ll do, who we’ll be for the next twenty or thirty years.” (p. 54)²¹

The new paths might be opened up by activities that enable older adults to make important contributions to society, such as extended paid work, volunteerism and civic engagement, education and training, and caregiving.

Two challenges lie ahead: creating structural supports that help older adults to become involved and developing a nuanced understanding that involvement may be counter to the goals of well-being unless we also take engagement into consideration.

When older people direct their energies and talents toward pressing social needs, they generate significant benefits for individuals, families, and communities.²² Understanding the potential for engaged aging is a tremendous challenge and a tremendous opportunity. By pointing to the psychological benefits when older adults are engaged by various activities, we hope to encourage new ways of thinking that move us beyond the idea of old age as a “roleless role.”

Appendix

Table I Mean well-being scores, by involvement status and age group

	(A) under 50 years (N=188)	(B) 50-64 years (N=355)	(C) 65 years and over (N=229)	Significant difference across
(I) Paid employment	8.16	8.37	8.99	C > A, C > B
(II) No paid employment	7.60	7.69	8.56	C > A, C > B
Significant differences down	None	I > II	None	
(I) Volunteering	8.54	8.47	9.13	C > B
(II) No volunteering	7.89	8.10	8.81	C > A, C > B
Significant differences down	I > II	None	None	
(I) Caregiving	8.10	8.14	8.95	C > A, C > B
(II) No caregiving	7.98	8.25	8.90	C > A, C > B
Significant differences down	None	None	None	
(I) Education	8.04	8.39	8.85	C > A
(II) No education	8.03	8.05	8.95	C > A, C > B
Significant differences down	None	None	None	

Note: As indicated by a series of one-way analyses of variance (ANOVA). Differences were considered significant when $p < .05$.

Table II Mean well-being scores, by level of engagement and age group

	(A) under 50 years (N=188)	(B) 50-64 years (N=355)	(C) 65 years and over (N=229)	Significant difference across
Paid Employment				
(I) Low engagement	7.74	7.41	7.82	None
(II) Moderate engagement	8.31	8.35	9.02	None
(III) High engagement	8.85	9.16	9.30	None
(IV) Not involved	7.60	7.69	8.56	C>A, C>B
Significant differences down	III>IV	II>I, III>I, III>II, III>IV	None	
Volunteering				
(I) Low engagement	7.92	8.57	7.91	None
(II) Moderate engagement	8.68	8.27	9.35	C > B
(III) High engagement	9.05	8.60	9.56	C>B
(IV) Not involved	7.89	8.10	8.81	C>A, C>B
Significant differences down	II>IV	None	III>I, III>IV IV>I, II>I	
Caregiving				
(I) Low engagement	7.43	7.84	7.55	None
(II) Moderate engagement	8.08	7.76	8.8	None
(III) High engagement	8.73	8.79	9.73	None
(IV) Not involved	7.98	8.25	8.90	C>A, C>B
Significant differences down	None	None	III>I, IV>I	
Education				
(I) Low engagement	7.66	7.59	7.52	none
(II) Moderate engagement	8.26	8.46	9.42	C>B
(III) High engagement	8.32	8.80	9.22	none
(IV) Not involved	8.03	8.05	8.95	C>A, C>B
Significant differences down	None	III>I, III>IV	II>I, III>I, IV>I	

Note: As indicated by a series of one-way analyses of variance (ANOVA). Differences were considered significant when $p < .05$.

References

- 1 Our study, intended as a pilot test of our adaptations of the Utrecht Work Engagement Scale (UWES), is limited, in that participants are largely educated, white, and female. Thus, findings are not necessarily representative of the broader population and should be interpreted with caution.
- 2 Oeppen, J., & Vaupel, J. W. (2002). Broken limits to life expectancy. *Science*, 296(5570), 1029-1031. doi:10.1126/science.1069675
- 3 Shultz, K. S., & Wang, M. (2011). Psychological perspectives on the changing nature of retirement. *American Psychologist*, 66(3), 170-179. doi:10.1037/a0022411
- 4 Martin, L. G., Schoeni, R. F., & Andreski, P. M. (2010). Trends in health of older adults in the United States: Past, present, future. *Demography*, 47(Supplement), S17-S40. doi:10.1353/dem.2010.0003
- 5 Butler, R. (2008). *The longevity revolution: The benefits and challenges of living a long life*. New York, NY: PublicAffairs, Perseus Books Group.
- 6 Burgess, E. (1960). *Aging in western societies*. Chicago, IL: University of Chicago Press.
- 7 Cumming, E. (2000). Further thoughts on the theory of disengagement. In J. F. Gubrium, & J. A. Holstein (Eds.), *Aging and everyday life* (pp. 25-39). Malden, MA: Blackwell Publishers Ltd.
- 8 Carstensen, L. L. (2009). *A long bright future: An action plan for a lifetime of happiness, health, and financial security*. New York, NY: Broadway Books.
- 9 Rowe, J. W., & Kahn, R. L. (1998). *Successful aging*. New York, NY: Pantheon/Random House, p.4.
- 10 Morrow-Howell, N., Hinterlong, J. E., & Sherraden, M. (Eds.). (2001). *Productive aging: Concepts and controversies*. Baltimore, MD: The John Hopkins University Press.
- 11 Bass, S., & Caro, F. (2001). Productive aging: A conceptual framework. In N. Morrow-Howell, J. Hinterlong & M. Sherraden (Eds.), *Productive aging. Concepts and challenges* (pp. 37-80). Baltimore: The Johns Hopkins University Press.
- 12 McNamara, T. (2010). [Health and Retirement Study]. Unpublished raw data.
- 13 Keenan, T. A., & Barrett, L. L. (2009). *Going back to school: A bulletin poll*. Washington, DC: American Association for the Advancement of Retired People (AARP).
- 14 See for example: Bambrick, P., & Bonder, B. (2005). Older adults' perceptions of work. *Work: A Journal of Prevention, Assessment & Rehabilitation*, 24, 77-84.; Calvo, E. (2006). *Does working longer make people healthier and happier?* Chestnut Hill, MA: Center for Retirement Research.; Conner, K.A., Dorfman, L.T., & Thompkins, J.B. (1985). Life satisfaction of retired professors: The contribution of work, health, and length of retirement. *Educational Gerontology*, 11, 337-347.; Dave, D., Rashad, I., & Spasojevic, J. (2008, October). The effects of retirement on physical and mental health outcomes. *Southern Economic Journal*, 75(2), 497-523.; Gallo, W.T., Bradley, E.H., Siegel, M., & Kasl, S.V. (2000). Health effects of involuntary job loss among older workers: Findings from the Health and Retirement Survey. *Journal of Gerontology*, 55, s131-s140.; Lum, T., & Lightfoot, E. (2005). The effects of volunteering on the physical and mental health of older people, *Research on Aging*, 27(1), 31-55.; Morrow-Howell N., Hinterlong J., Tang F., & Rozario P. (2003). The effects of volunteering on the well-being of older adults. *Journal of Gerontology Series B: Psychological Sciences and Social Sciences*, 58, S137-S145.; Mathers, C.D., & Schofield D.J. (1998). Health consequences of unemployment: The evidence. *Medical Journal of Australia*, 168, 178-182.; Menec, V. (2003). The relationship between everyday activities and successful aging: A 6-year longitudinal study. *Journal of Gerontology: Social Sciences*, 58B(2), S74-S82.; Musick, M., & Wilson, J. (2003). Volunteering and depression: The role of psychological and social resources in different age groups. *Social Science and Medicine* 56(2), 259-269.; Noonan, A.E., & Tennstedt, S.L. (1997). Meaning in caregiving and its contributions to caregiver well-being. *The Gerontologist*, 37, 785-794.; Pinquart, M., & Sorenson, S. (2003). Associations of stressors and uplifts of caregiving with caregiver burden and depressive mood: a meta-analysis. *Journals of Gerontology: Psychological Sciences & Social Sciences*, 58B, 112-128.; Thoits, P., & Hewitt, L. (2001). Volunteer work and well-being. *Journal of Health and Social Behavior*, 42(2), 115-131.; Wahrendorf, M., von dem Knesebeck O., & Siegrist, J. (2006). Social productivity and well-being of older people: Baseline results from the SHARE study. *European Journal of Ageing*, 3(2), 67-73.

- 15 Ekerdt, D. J. (1986). The busy ethic: Moral continuity between work and retirement. *The Gerontologist*, 26(3), 239-244. doi:10.1093/geront/26.3.239
- 16 Kahn, W. A. (1990). Psychological conditions of personal engagement and disengagement at work. *Academy of Management Journal*, 33(4), 692-724.; Pitt-Catsouphes, M., & Matz-Costa, C. (2009). *Engaging the 21st century multi-generational workforce: Findings from the age & generations study*. (Issue Brief No. 20). Chestnut Hill, MA: Sloan Center on Aging and Work at Boston College. Retrieved from http://agingandwork.bc.edu/documents/IB20_Engagement_2009-02-10.pdf; Saks, A. M. (2006). Antecedents and consequences of employee engagement. *Journal of Managerial Psychology*, 21(7), 600-619. doi:10.1108/02683940610690169
- 17 Christian, M. S., Garza, A. S., & Slaughter, J. E. (2011). Work engagement: A quantitative review and test of its relations with task and contextual performance. *Personnel Psychology*, 64(1), 89-136. doi:10.1111/j.1744-6570.2010.01203.x
- 18 Schaufeli, W.B., & Bakker, A.B. (2003). *Test manual for the Utrecht Work Engagement Scale*. Unpublished manuscript, Utrecht University, the Netherlands. Retrieved from <http://www.schaufeli.com>.
- 19 Schaufeli, W.B., Bakker, A.B., & Salanova, A. (2006). The measurement of work engagement with a short questionnaire. *Educational and Psychological Measurement*, 66(4), 701-716.
- 20 Windsor, T. D., Anstey, K. J., & Rodgers, B. (2008). Volunteering and psychological well-being among young old adults: How much is too much? *The Gerontologist*, 48(1), 59-70.; Morrow-Howell, N. (2000). *Productive engagement of older adults: Effects on well-being*. St. Louis, MO: Washington University.
- 21 Rubin, L. B. (2007). *Go on up: The truth about aging in America*. Boston, MA: Beacon Press.
- 22 Hinterlong, J. E., Morrow-Howell, N., & Rozario, P. A. (2007). Productive engagement and late life physical and mental health: Findings from a nationally representative panel study. *Research on Aging*, 29(4), 348-370. doi:10.1177/0164027507300806

About the Sloan Center on Aging & Work

Established in 2005, the Sloan Center on Aging & Work at Boston College promotes quality of employment as an imperative for the 21st century multi-generational workforce. We integrate evidence from research with insights from workplace experiences to inform innovative organizational decision-making. Collaborating with business leaders and scholars in a multi-disciplinary dialogue, the center develops the next generation of knowledge and talent management.

Since our founding, we have conducted more than 20 studies in collaboration with employers: for example, studies on “Age & Generations,” “Talent Management,” and “Generations of Talent.” Studies under way are “Assessing the Impact of Time and Place Management” and “Engaged as We Age.” The Sloan Center on Aging & Work is grateful for the continued support of the Alfred P. Sloan Foundation.

Additional support for the Engaged as We Age initiative, which is ongoing, was provided by the Institute for Intercultural Studies, Inc., and by the Boston College Institute on Aging.

For more information about the Sloan Center on Aging & Work at Boston College, please visit: <http://agingandwork.bc.edu>.

Contact us:

The Sloan Center on Aging & Work

140 Commonwealth Avenue

3 Lake Street Building

Chestnut Hill, MA 02467

Phone: 617.552.9195 • Fax: 617.552.9202

agework@bc.edu

Authors

Jacquelyn B. James, Ph.D., a personality and developmental psychologist, is director of research at the Sloan Center on Aging & Work and a research professor at the Lynch School of Education, at Boston College. Her research has focused on the meaning and experience of work in women's lives, gender roles, and adult development. Dr. James is past president of the Society for the Study of Human Development and serves on the editorial board of the society's flagship journal, *Research in Human Development*.

Elyssa Besen is a research assistant at the Sloan Center on Aging & Work and a doctoral student in the Applied Development Psychology Program in the Lynch School of Education, at Boston College. She earned her BA degree in Psychology from Brandeis University. She is interested in studying the impact of work on adult development.

Christina Matz-Costa, Ph.D. is senior research associate at the Sloan Center on Aging & Work and assistant professor at the Boston College Graduate School of Social Work. She has been a lead researcher for several of the center's studies, including the Age & Generations Study and the National Study of Business Strategy and Workforce Development. Her research focuses on the productive engagement of older adults, work-family issues, and the response of employers to the aging of the workforce.

Marcie Pitt-Catsoupes, Ph.D. is director of the Sloan Center on Aging & Work, at Boston College. She is an associate professor at the Boston College Graduate School of Social Work and also holds appointments at the Boston College Carroll School of Management and the Middlesex University Business School in London. Dr. Pitt-Catsoupes received the 2006 Work-Life Legacy Award from the Families and Work Institute.