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# Major Contributions

## A Model for Analyzing Human Adaptation to Transition

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The concept of adulthood as a period of change and development has recently been attracting widespread attention not only from theorists and researchers in the social sciences but also from practitioners in the helping professions, from the mass media, and consequently from the general public. The problems connected with aging, the plight of the elderly, and the panic of the middle-aged are the subjects of numerous popular books and articles. Such terms as *transition*, *crisis*, *adaptation*, *coping*, and *stress* — in addition to being key points of discussion at various professional meetings and seminars — have entered the vernacular. People have become concerned with how they, and those with whom they are connected, deal with change.

As this interest in adult development has mushroomed,

it has come to be recognized that psychic growth does not end with adolescence; that as people move through life they continually experience change and transition, and that these changes often result in new networks of relationships, new behaviors, and new self-perceptions. Much empirical work has been done on human adaptation to specific events, including both normal life transitions (e.g., marriage) and situations of extreme hardship (e.g., incarceration in a concentration camp). This research shows that individuals differ in their ability to adapt to change. For instance, job loss may stimulate one person to develop new interests and take up new activities but lead another to a dead end marked by inactivity, boredom, and feelings of worthlessness. To one person, a geographical move may represent a great opportunity; to another, it may mean a loss of support and identity.

Moreover, the same person may react differently to different types of changes or even to the same type of change occurring at different times in life. An illustration of this latter point comes from a pilot study of geographical mobility (Schlossberg, Note 1) in which one woman announced:

\*The original conceptualization of this model stemmed from a number of helpful discussions with Dr. Sue Smock, Acting Director, Center for Urban Studies, Wayne State University, and with Dr. William Schafer, Associate Professor, Department of Measurements and Statistics, College of Education, University of Maryland. Laura Kent's editing has been invaluable.

This is my last move following Jim. I've moved 15 times, I do it easily and used to enjoy it, but no more! I've begun to see myself differently. . . . I'm finally moving to independence, and I'm not just a satellite. I'm moving into center stage.

Although this woman had moved successfully many times, something had changed in the way she saw herself, and she was no longer willing to adapt to this transition.

But what exactly accounts for such differences between individuals and within the same person at different times of life? What determines whether a person grows or deteriorates as the result of a transition? Why do some people adapt with relative ease, while others suffer severe strain?

The model presented in this paper attempts to provide a context within which such questions can be examined and perhaps answered. It represents a framework in which transitions of all kinds — positive and negative, dramatic and ordinary — can be analyzed, and possible interventions formulated.

This paper constitutes my attempt to elaborate a theory which describes the extraordinarily complex reality that accompanies and defines the capacity of human beings to cope with change in their lives. In my view, studying the transition process requires the simultaneous analysis of individual characteristics and external occurrences. It should be understood at the outset that this model is tentative and exploratory, subject to revision as new data emerge. It should also be understood that previous transition models and other theories have been enormously useful in the development of this conceptualization.

To restate the thesis of this paper: Adults continuously experience transitions, although these transitions do not occur in any sequential order, nor does everyone experience the various transitions in like manner. All we know for certain is that all adults experience change and that often these changes require a new network of relationships and a new way of seeing oneself. The question is: Since people react and adapt so differently to transitions and since the same person can react and adapt so differently at different points in life, how can we *understand* and *help* adults as they face the inevitable but unpredictable transitions of life?

### Selected Views of Adult Development

Since my model draws so heavily on the work and

ideas of others, a brief review of some of the literature on adult development provides a way of relating the model to other theories as well as showing the incorporation of many sources in the formulation of this work. Since a considerable amount of empirical research, as well as theory building, has been done in recent years, this review is necessarily selective.

As Figure 1 shows, the theorists discussed here can be visualized as positioned on a continuum, depending on whether they explain transitions and adaptive behavior by individual idiosyncrasy, life stage, or chronological age.

Perhaps one of the best-known studies is that of Daniel Levinson. Using a small sample of blue-collar and white-collar men between the ages of 18 and 45, Levinson and his colleagues sought to identify "relatively universal, genotypic, age-linked adult developmental periods" (Levinson, Darrow, Klein, Levinson, & McKee, 1977, p. 49). The researchers say:

One of our greatest surprises was the relatively low variability in the age at which every period begins and ends. It was not a prediction we made in advance. . . . This finding violates the long-held and cherished ideas that individual adults develop at different paces. (Levinson et al., 1978, p. 318)

Thus, in this view, particular transitions are closely linked to chronological age. Although my model does not adopt the notion of age-grading, many of the issues identified by Levinson — such as life structure, the dream, the importance of the mentor, the polarities of young-old, feminine-masculine — underlie much of my thinking about the recurrent themes of adult development.

Diametrically opposed to the view that transitions are inextricably bound to chronological age or that they follow an invariable sequence is Bernice Neugarten, who emphasizes instead variability or what she calls "individual fanning out." Neugarten continually makes the point that, say, 10-year-olds are more similar than 60-year-olds: "As lives grow longer, as the successive choices and commitments accumulate, lives grow different from each other" (1979, p. 891). Evidence in support of this position comes from the Grant Study (Vaillant, 1977), which spanned over 35 years in the lives of more than 200 men (most of them from high socioeconomic backgrounds and of high ability), starting from the time they were college sophomores. Vaillant (1977) writes:

FIGURE 1  
A CONTINUUM OF VIEWS

Individual	Life Span	Transition	Stage	Age
Neugarten: fanning out; social clock; psychology of timing.	Brim & Kagan; Dohernwend; Holmes & Rahe: perspective, not theory; opposed to life stages; study impact of events and medi- ating variables like support; early experiences are not constraints.	Lowenthal & Chiriboga: stage not age; look at balance of resources and deficits look at per- ceived stresses; sex differences.	Erikson; Gould mastery; release from childhood constraints; sequential resolution of internal crisis.	Levinson, et al.: invariant sequence; life structure, dream, mentor, polarities.
Vaillant: early trauma not predictive of later behavior.				

When the Grant Study was started, the hope was that it would allow prediction and that once all the data were in, college counselors could interview sophomores and tell them what they should do with their lives. This was not to be. The life cycle is more than an invariant sequence of stages with single predictable outcomes. The men's lives are full of surprises. (p. 373).

Another important finding to emerge from this study was that "it is not the isolated traumas of childhood that shape our future, but the quality of sustained relationships with other people" (Vaillant, 1977, p. 29).

To return to Neugarten: Although she emphasizes individual fanning out, she is also intrigued by the movement from active to passive mastery as one ages (Neugarten, 1979). It is her notion of variability, however, that is of most interest here. In a sense, my conceptualization of the model represents an attempt to make some sense out of this variability. Otherwise, how can any generalizations be made that will form the basis of research and intervention?

Differing somewhat from both the age-graded and the individual variability approaches is the approach taken by Lowenthal, Thurnher, and Chiriboga in *Four Stages of Life* (1975), which reports a longitudinal study that involved four groups of men and women living in the San Francisco area. At the start of the study, each of these groups was on the threshold of a major transition: high school seniors, newlyweds, middle-aged parents, and preretirement couples. Finding that the four groups differed considerably in their general outlook on life, the stresses they faced, and their attitudes toward those stresses, the researchers concluded that it is not so much being 40 years old that is important as being 40 years old and having adolescent children or being 40 years old and recently divorced. Men facing retirement after they have had an active social life encounter many of the same problems whether they retire at age 50, 60, or 70. Newlyweds of any age are engaged in similar tasks of bonding, discovery, and negotiation. In short, life stage is more important than chronological age. (It should be noted that Lowenthal and her associates use the term *stage* in a different sense than Erikson, who will be mentioned later, as well as other stage theorists).

Lowenthal's focus on adaptation to various stresses during the life course is central to the model described later, as is her emphasis on sex differences and her discussion of the individual's resources and deficits over the life course.

Closely related to Lowenthal in outlook are those theorists who identify themselves as having a "life-course perspective." This perspective rests on the following premises:

- (1) developmental change and aging form a continual process, not limited to any particular stage of life, (2) change occurs in various interrelated social, psychological, and biological domains of human behavior and functioning, and . . . (3) life-course development is multidetermined. Thus, according to this viewpoint, to understand a particular stage of life — including middle and old age — it is necessary to place it within the context of the preceding and following developmental changes and stabilities and within its historical context (Abeles & Riley, 1977, p.3).

The "life-span development approach" and "life-events framework," terms which are used by other

theorists, closely parallel the concept of life-course perspective. Quoting Baltes' statement (1979) that the life-span approach is "a general orientation to the study of behavior" rather than "a specific theory or collection of theories," Brim and Kagan describe the life-span development approach as "an emergent intellectual movement, responsive to the possibility of change, currently trying to select its major premises, to gather new facts, and to conceptualize the developmental span without using chronological age categories." This approach is set in opposition to theories involving adult stages, on the grounds that "stages cast development as uni-directional, hierarchical, sequenced in time, cumulative and irreversible — ideas that are not supported by commanding evidence" (Brim & Kagan, 1980, p. 13).

Other researchers taking this approach include Abeles and Riley, the Dohrenwends, and Steven Danish, who uses what he calls a "critical life events framework." According to this view, life events play a pivotal role in individual development, whether they are viewed as markers, defined as "milestones or transition points which give shape and direction to the various aspects of a person's life" (Danish, Smyer, & Nowak, in press) or as processes which have:

histories of their own from the time they are anticipated, through their occurrences until their aftermaths have been determined and assessed. It is this process that the marker signified but does not describe. Viewing events only as markers underestimates the importance of the *context* of events. Events do not occur in a vacuum, they occur in a rich life space of the individual, including competing demands from a variety of areas (e.g., work, family life, physical development) and people significant to the individual (Danish, et al., in press).

Those who take this approach tend to reject the notion that childhood experiences (especially traumatic experiences) determine the course of the individual's life. As Brim and Kagan (1980) put it:

The view of human nature emerging from this work sees a capacity for change across the entire life span and questions the traditional idea that the experiences of the early years . . . constrain the characteristics of adolescence and adulthood. . . . the consequences of the events of early childhood are continually being transformed by later experiences, making the course of human development more open than many have believed. (p. 1)

A word needs to be said about the view of adult development embodied in theories which assert that human beings pass through an invariable *sequence* of developmental stages, though these stages are not necessarily linked exactly with chronological age; that is, some people move through faster than others, and some people may become arrested at one stage and never move on. Erik Erikson (1950), for instance, postulates an eight-stage progression in ego development, each characterized by a crucial issue that must be successfully resolved before the individual can move on. The adult stages involve the issues of identity versus role diffusion, intimacy versus isolation, generativity versus stagnation, and ego integrity versus despair.

Erikson's views are so well-known that a discussion of another stage theorist might be more useful. Roger Gould sees adult development as a struggle for freedom from the internal constraints of childhood, a "sequence of

process fluctuations that define the posturing of the self to its inner and outer world over time. The fluctuations are time-dominated, but not necessarily age-specific for any one individual" (1978 p. 531).

The notion of the struggle for freedom from childhood constrictions and the notion that mellowing and maturity arrive after age 50 are reminiscent of Erikson's view of successful aging as a matter of resolving crucial issues. While Erikson sees the resolution of each crisis as the completion of a stage that is an entity unto itself, Gould believes that at any time most adults are tinkering with some aspect of themselves. This tinkering with one's inadequacies can be the prod for further growth (Gould, Note 2).

My own approach in formulating the model presented in this paper has been eclectic; I concur generally with those who take a life-course perspective. In addition, I have drawn heavily on the work of Lieberman (1975), Lipman-Blumen (1976), Lowenthal, Thurnher and Chiriboga (1975), Parkes (1971), and Zill (1974).

### Transition and Adaptation: Some Definitions

Because adaptation to transition is such a complicated process, I felt it necessary in formulating the model to catalog and categorize the tremendous number of variables which seem to affect the outcome of the transition on an individual. My belief is that it is not the transition itself that is of primary importance, but rather how that transition fits with an individual's stage, situation, and style at the time of the transition. Moreover, I believe that differ-

ent variables have different salience depending on the transition and the group being studied.

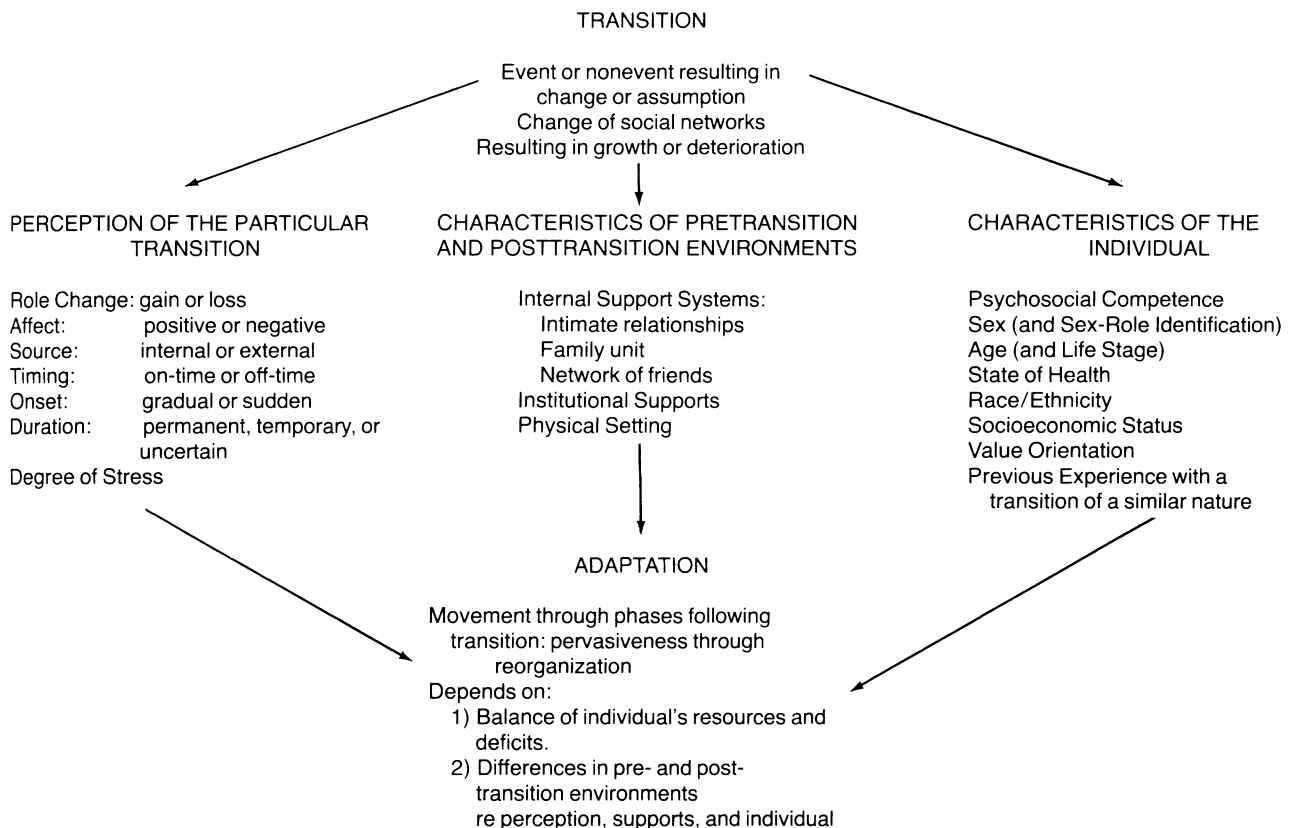
The model is presented in Figure 2. It postulates three major sets of factors that influence adaptation to transition: (1) the characteristics of the particular transition, (2) the characteristics of the pre- and post-transition environments, and (3) the characteristics of the individual experiencing the transition. All three sets of factors interact to produce the outcome: adaptation or failure to adapt. Before discussing the tremendous number of factors mediating between transition and adaptation, some definitions are set forth.

#### Transition

*A transition can be said to occur if an event or non-event results in a change in assumptions about oneself and the world and thus requires a corresponding change in one's behavior and relationships.*

Since it seems reasonable at this point to be inclusive rather than to restrict the analysis by too narrow a definition, the term *transition* as used in this model is defined broadly to mean not only obvious life changes such as high school graduation, job entry, marriage, birth of the first child, and bereavement, but also such subtle changes as the loss of one's career aspirations and the nonoccurrence of anticipated events (e.g., an expected job promotion that never comes through). That is why I have included "nonevents" in the above definition. Beeson and Lowenthal (1975) enlarge on this point: "Stress reactions may result from (1) the general absence of change or new

**FIGURE 2**  
**A MODEL FOR ANALYZING HUMAN ADAPTATION TO TRANSITION**





life events, (2) the failure of an expected event or change to occur, or (3) the mitigation of events or circumstances formerly considered stressful" (p. 173).

Brim and Ryff (work in progress) make a further useful distinction between events that have a high probability of occurring in the life of the individual (for example, getting married, starting work, having a child, retiring) and those which are improbable, happening to comparatively few people (for example, inheriting a fortune, being convicted of a crime, having one's home destroyed by an earthquake or flood). Brim (Note 3) asserts that we need to "search for hidden unnamed events" because the more events we can identify, the better can people be prepared to deal with them through anticipatory socialization.

The definition of *transition* given actually grows out of crisis theory, the foundations of which were laid by Erich Lindemann's classic study (1965) of grief reactions among the relatives and friends of the victims of the Coconut Grove fire. According to Moos and Tsu (1976):

Crisis theory asserts that people generally operate in consistent patterns, in equilibrium with their environment, solving problems with minimal delay by habitual mechanisms and reactions. When the usual problem-solving mechanisms do not work, tension arises and feelings of discomfort or strain occur. The individual experiences anxiety, fear, guilt or shame, a feeling of helplessness, some disorganization of function, and possibly other symptoms. Thus a crisis is essentially a disturbance of the equilibrium, an "upset in a steady state" (p.13).

Moos and Tsu elaborate on this last point, defining *crisis* as a "relatively short period of disequilibrium in which a person has to work out new ways of handling a problem" (1976, p. 13). Other researchers have offered other definitions. For instance, according to Hill (1949), a crisis is "any sharp or decisive change for which old patterns are inadequate . . . and new ones are called for immediately" (p.51).

While retaining the emphasis of these definitions on the necessity for new patterns of behavior, I follow Parkes' lead (1971) in rejecting the term *crisis* because of its negative connotations; the kinds of life events covered in my model often involve gains rather than (or as well as) losses. Moreover, *crisis* implies a dramatic event, and I am also concerned with less observable events and with nonevents.

In place of *crisis*, Parkes (1971) proposes the term *psychosocial transition*, which he defines as a change that necessitates "the abandonment of one set of assumptions and the development of a fresh set to enable the individual to cope with the new altered life space" (p.103). The term *transition* is also preferred by other authorities. Levinson and his associates (Levinson et al., 1977) use *developmental transition* to mean "a turning point or boundary between two periods of greater stability" (p. 57). According to Spierer (1977), a transition is any change that has "important consequences for human behavior" (p. 6). Spierer also discusses the causes and consequences of transitions:

These transitions may be due to biological, sociological, environmental, historical, or other phenomena. They may have consequences that are evident now or are manifested at some future date (and thus have "sleeping effects"). They may be evident to friends and to society (going bald, becoming rich, losing a job) or remain unnoticed,

although still dramatic, such as losing one's career aspirations. They may be sudden or, more likely, cumulative, as is true, for example, of some diseases (Spierer, 1977, p. 6).

Weiss (1976) uses both terms but distinguishes between them, and adds a third, to describe three different types (or three different stages) of stressful situations. A *crisis* is a severely upsetting situation of limited duration during which the individual's resources must be hastily summoned. For example, if a person's spouse suddenly and unexpectedly suffers a heart attack, that person (as well as the spouse, of course) is undergoing a crisis. A crisis ends either by a return to the preexisting situation (i.e., the spouse recovers completely and returns to his or her normal activities) or by a change in the situation (i.e., the spouse dies or is permanently impaired).

If the crisis ends in change, the individual moves into a *transition state*, a period marked by relational and personal changes, including attempts to deal with upset, tension, or fatigue and attempts to find new sources of support. For instance, if the spouse dies, the bereaved partner must not only deal with grief but must also alter his or her life and behavior, usually in very profound ways.

The end of a transition state is usually marked by a stable new life organization and by a stable new identity. If these prove to be inadequate, the individual is said to be in a *deficit situation*. Thus, the widow or widower may not be able to accept the new role or to summon the support needed to replace the support previously provided by the spouse.

Weiss' view implies that a transition may be either for better or worse. This brings us to the second important element in the definition of transition:

*A transition may provide both "an opportunity for psychological growth and a danger of psychological deterioration"* (Moos & Tsu, 1976, p. 13).

The outcome of a transition is not always positive, but neither is it always negative. Thus, some of the elderly subjects who moved to nursing homes (Lieberman, 1975) "remained intact in the face of radical environmental change" (p. 156), whereas about half suffered marked declines . . . behaviorally, physically (including death), socially, or psychologically" (p. 142).

Often the outcome of a transition has both positive and negative aspects for the same individual, as was confirmed by interviews with men whose jobs had been eliminated (Schlossberg & Leibowitz, in press) and with couples who had recently undertaken geographical moves (Schlossberg, Note 4). For the men whose jobs were eliminated, the event was initially a kick in the back, a shock, a terrifying experience that was worse than all other crises they may have suffered. For instance, one man who had recently been divorced, said he would rather go through the divorce again than the experience of job loss. Yet the three-month follow-up interview with this man revealed that he felt lucky, more in control of his life, partly because he had found out that he was "saleable" and had more options. The couples who had moved also tended to find both positive and negative elements in the event. For instance, one woman talked about the miserable experience of moving: "I kept thinking, 'If only I were back home,'" but at the same time she described such positive outcomes of the move as the opportunity it offered both her husband and herself to break away from their families, with whom they were "almost too close."

The ambivalent nature of many transitions is dealt with more thoroughly in the section on the characteristics

of transitions that affect adaptation.

All these views of transition have contributed to my conceptualization of the model. To repeat: The emphasis is on those occurrences and nonoccurrences that elicit certain changes in the individual's perceptions (of self, of the world) and that simultaneously call for new patterns of behavior that may or may not be effective. A transition is not so much a matter of change as of the individual's *perception* of change. A transition is a transition if it is so defined by the person experiencing it. If, for example, menopause does not have much impact on a particular woman, does not change her set of assumptions nor her relationships, then (in my view) it cannot be regarded as a transition. If, however, another woman experiences menopause as an event that marks her passage from youth to old age, from sexuality to nonsexuality, then in this case it constitutes a transition. In this model, then, the transition is defined by the individual.

### *Adaptation*

*Adaptation to transition is a process during which an individual moves from being totally preoccupied with the transition to integrating the transition into his or her life.*

Lipman-Blumen (1976) describes the movement as being from "pervasiveness" (i.e., an awareness of the transition permeates all of a person's attitudes and behaviors) to "boundedness" (i.e., the change is contained and integrated into the self). Thus, in the early stages, a person is totally conscious of being a new graduate, a new widow, a new mother; in the later stages, the person is aware of having graduated, having been widowed, being a mother, but this awareness is only one of the dimensions of living.

The "whole range of individual differences in response to stress" was the subject of a National Institute of Mental Health (NIMH) sponsored conference on coping and adaptation (Coelho, Hamburg, & Adams, 1974). The volume covering this conference includes studies from a variety of social scientists. In one chapter, White (1976) delineates three necessary strategies for moving toward adaptation: "securing adequate information, maintaining satisfactory internal conditions, and keeping up some degree of autonomy" (pp. 5-8). White (1976) commented on the time dimension of adaptation. He states that an individual's ability to adapt should not be judged on the basis of short-term observations: "Strategy is not created on the instant. It develops over time and is progressively modified in the course of time" (p. 29).

This dynamic view of adaptation contrasts sharply with the static view, which is epitomized by such terms as "mental health," "life satisfaction," "homeostasis," and "effective role and social functioning." These terms involve assessing the individual against some rather arbitrary and vague standard, whether positively or negatively, e.g., "absence of breakdown" (Lieberman, 1975, p. 137). The dynamic view constitutes a more productive approach to measuring adaptation.

Other observers have delineated patterns of adaptation to transition. Moos and Tsu (1976) identify two phases:

an acute phase in which energy is directed at minimizing the impact of the stress, and a reorganization phase in which the new reality is faced and accepted. In the acute period feelings may be denied while attention is directed to practical matters. . . . The reorganization phase involves the gradual return to normal functioning. (pp. 14-15)

Hill (1965) believes that reaction to crisis takes a "roller-

coaster" form: The crisis event occurs, the individual "dips down" into a period of disorganization, gradually "rises up" again, and levels off into a period of reorganization.

There is a wealth of literature dealing with human adaptation to specific types of transition. For example, based on her work with terminal cancer patients, Kubler-Ross (1969) identifies five stages experienced by people who realize they are dying: (1) denial and isolation, (2) anger and resentment, (3) bargaining, (4) preparatory depression over impending loss and (5) acceptance. Similarly, bereavement over the loss of a loved one moves from "almost global denial or 'numbness,' . . . bitter pining and frustrated searching, . . . succeeded by depression and apathy . . . with a final phase of reorganization when new plans and assumptions about the world and the self are built up" (Parkes, 1971, p. 106). Lindemann (1965), who has done extensive research on grief, maintains that if the person does not do the necessary "grief work" — passing through each of the stages in its turn — trouble can erupt later on. Such is also the conclusion of Kaplan and Mason (1965), who found that the mother of a premature infant has four tasks to perform: (1) preparation for possible loss of the child (but hope for its survival), a stage that resembles anticipatory grief; (2) acceptance of her failure to deliver a normal child; (3) resumption of hope and of an active relation with the infant; and (4) recognition of the baby's special needs as a premature baby, along with an awareness that these needs are temporary; "her task is to take satisfactory precautions without depriving herself and the child of enjoyable interactions" (Kaplan & Mason, 1965, p. 125). If the mother fails to perform these tasks — if, for instance she reacts to the premature birth with apparent cheerfulness and lack of anxiety, the depression will catch up with her later. Indeed, failure to perform any one of the tasks in its proper order may interfere with her developing a warm and loving relation with the child.

Levine (1976) found a sequential pattern of adaptation among draft dodgers and deserters: (1) Disorganization, a stage characterized by "the sense of isolation, loneliness, and psychic pain," along with feelings of guilt and sometimes suicidal impulses; (2) Acting Out, a stage in which the individual becomes apathetic, antisocial, and manipulative of others; (3) Searching, "in which the individual explores himself and his relationships, looks for meaning in life, and pursues his interests (school, work, commune, etc.);" (p. 217); (4) Adaptation and Integration, a period during which the individual becomes "totally involved in his new life style." Levine adds that few of the subjects he observed reached the final stage; most either returned to the United States before becoming fully integrated into life in Canada or simply joined enclaves of exiles and led insular lives.

Each kind of transition may have its own particular pattern with respect to adaptation. More empirical work is needed on the varieties as well as on the common elements of adaptive patterns.

Even accepting the notion that adaptation to transition may follow some general pattern, however, we are still confronted by the questions of why some people adapt more quickly and easily to a given transition than others do and why a given individual varies in adaptability over the life span. These questions bring us to the second component of the definition of adaptation:

*Ease of adaptation to a transition depends on one's perceived and/or actual balance of resources to deficits in terms of the transition itself, the pre-post environment,*

and the individual's sense of competency, well-being, and health.

This notion of a balance between resources and deficits is drawn from Lowenthal, et al. (1975, p. 100). An example may serve to clarify the point: Two women suffer slipped spinal discs. For both, the experience is painful, incapacitating, and psychologically distressing because of the uncertainty about whether — and when — the condition can be corrected. One of the women, however, has ample resources to balance this deficit in her physical well-being: She has a tenured position in a university, she has a highly supportive family as well as friends and colleagues who rally round her, and she is generally a coper. The other woman is low on resources at this particular point in her life: She has recently had a double mastectomy, so both her physical stamina and her self-esteem are low. She has also just gone through a divorce, so part of her support system has crumbled. Moreover, this particular disability threatens her very economic survival: A bad back makes it impossible for her to work at her low-income job as a potter. Finally, her ability to cope has always been no better than average. Thus, the deficits far outweigh the resources in her case, making adaptation especially difficult.

Rather than assessing a person's adaptation in terms of health or sickness, this model assesses the ratio of resources to deficits, allowing for changes in the ratio as one's situation changes. This approach allows for an answer to a question raised earlier: Why does the same person react differently to the same type of transition at different times in his or her life? The answer is partially that the resources-deficits balance changes: at one point, resources outweigh deficits, so adaptation is relatively easy; at another point, deficits outweigh resources, and adaptation is correspondingly more difficult. It is important that psychologists and others in helping professions delay diagnosing someone as "ill" when in fact all that may be wrong is a temporary shift in the balance from resource to deficit.

Moreover, the notion of a resources-deficits ratio is consistent with the dynamic view of adaptation embodied in the first definition. The movement can also represent gradual restoration of resources following an abundance of deficits. An example from the study of couples who had recently moved (Schlossberg, Note 1) may illustrate this point. One woman reported she had undergone a "year of turmoil" following the move. She felt angry at her husband, seeing him as her enemy because he had forced her into a move that had deprived her of the resources she had had in her old community: a good job, involvement in her church, close contact with friends and relatives. Gradually, however, she began to find new resources, making new friends, serving as an advisor to college students in a religious organization, and otherwise becoming more involved in the new community. One cannot say that in the early stages she was "sick" and later "healthy;" one can only say that a better balance between resources and deficits was being achieved over time.

There is still another way of assessing adaptation, which brings us to the third component in the definition of adaptation:

*Adaptation depends in part on the degree of similarity or difference in one's assumptions about self and in one's environment (especially the interpersonal support system network of relationships) before and after the transition.*

One way of examining a transition is to assess the degree of difference between the pretransition and the

posttransition environments. Lieberman (1975), studying four groups of old people who made radical changes in living arrangements, concluded that the intensity of stress experienced depended not upon the individual's subjective interpretation of the change in living arrangements — whether it was welcomed or feared, or whether it was regarded as a change for the better or the worse — but rather "upon the degree to which an individual is required to make new adaptations associated with environmental change. . . . The greater the difference between the Time 1 life space and the Time 2 life space, the higher the degree of stress and consequent adaptive requirements" (p. 151). He found "a rough ordering between frequency of breakdown and amount of environmental discontinuity" (p. 153). That is, the individual's success or failure in adapting to the new environment was strongly correlated with the similarity or dissimilarity of the pretransition and posttransition environments, whatever the individual's attitude toward or definition of the change.

Parkes (1971), on the other hand, believes that changes in the "life space" are important only insofar as they affect the individual's "assumptive world," which includes "everything we know or think we know. It includes our interpretation of the past and our expectations of the future, our plans and our prejudices. Any or all of these may need to change as a result of changes in the life space" (p. 103). The life space is changing constantly, but not all these changes call for a major restructuring of the assumptive world. In this model, I have adopted Parkes' view: that the degree of difference between the pretransition and the posttransition environment is significant insofar as that difference affects the individual's assumptions about self and the world, and consequently, the individual's relationships in family, work, and community.

The remainder of this paper discusses three sets of factors which seem to mediate between the transition and adaptation: the characteristics of the transition itself, the characteristics of the pre- and posttransition environments, and the characteristics of the individual. Although each factor or variable is described as an independent unit, dynamically they work together; the relative salience of each in influencing adaptation to a particular transition probably depends upon the individual's life stage, perceptions, and resources.

### **Factors Affecting Adaptation: Characteristics of Transition**

According to the model discussed in this paper, most transitions can be described using a common set of variables: role change, affect, source, timing, onset, duration, and degree of stress.

#### *Role Change: Gain or Loss*

Many, but not all, transitions involve role change. Lowenthal, Thurnher and Chiriboga (1975) distinguish between decremental changes or role gains (such as getting married, becoming a parent, taking a job, getting a job promotion) or role losses (such as getting divorced, retiring, being widowed). Similarly, in talking about transitions that the family as a unit may undergo, Dyer (1976) makes a distinction between accession (remarriage, birth) and dismemberment (divorce, death). Regardless of whether a transition involves a role gain or loss, some degree of stress accompanies it.

#### *Affect: Positive or Negative*

Some kinds of changes — getting married, being promoted — generate feelings of pleasure. Other changes —



losing a job, being divorced — are accompanied by painful feelings. Most transitions probably have elements of both positive and negative affect. For instance, LeMasters (1957) found that the period after the birth of the first child often constitutes a mental health crisis for the mother; along with her feelings of joy and satisfaction, she may be physically exhausted, anxious about her responsibilities, frustrated over her loss of freedom, resentful of her husband for not sharing more of the duties, and — on top of it all — guilty over having such negative feelings. Similarly, though an individual may look forward with pleasurable anticipation, for instance, to retiring from employment or seeing the last child launched into the world, the actual event may carry with it feelings of pain. Again, any change — whether primarily positive or negative in affect — involves some degree of stress.

#### *Source: Internal or External*

Some changes come about as the result of a deliberate decision on the part of the individual, whereas others are forced upon the individual by other people or by circumstances. It is hypothesized that the individual adapts more easily to transitions in which the source is internal. A worker who retires because of ill health or a mandatory age limit probably finds retirement a more difficult and troubled period than a worker who retires voluntarily. Similarly, wives often experience considerable negative stress in connection with residential moves when the move is forced upon them by the job requirements of their husbands (Seidenberg, 1973). The issue here is one of perceived control over one's own life.

#### *Timing: On-Time or Off-Time*

According to Neugarten (1977), "there exists a social prescribed timetable for the ordering of major life events" (p. 34), and most adults have built in "social clocks" by which they judge whether they are "on-time" or "off-time" with respect to those life events. To be off-time, whether early or late, carries social and psychological penalties: The individual is branded as, and feels himself or herself to be, deviant. Not all transitions are "scheduled," so to speak, but getting married, having children, going to college, taking a job, and retiring are linked in people's minds with age. Neugarten points out that the issue of timing has become somewhat confused as we move toward what she sees as an emerging "age-irrelevant" society in which more people of all ages engage in activities formerly reserved to one age group (1980). However much Neugarten hopes for age irrelevancy, we must take into account that most people probably still use age as a defining variable for themselves. Thus, though lip service may be paid to the concept of age irrelevancy; the reality is still an "on-time — off-time" stance regarding oneself.<sup>1</sup>

#### *Onset: Gradual or Sudden*

Many of life's transitions are expected — either because they are general, even inevitable, or because they are the result of deliberate decisions; their onset may be said to be gradual. The college student anticipates graduation and entry into the job market; the middle-aged mother looks forward to the empty nest period; the 60-year-old man sets the date for his own retirement. Transitions whose onset is gradual are usually easier to adapt

to because the individual can prepare for them. Atchley (1975) comments that anticipatory socialization — "the process of learning the rights, obligations, resources, and outlook of a position or situation one will occupy in the future" (p. 275) — helps to ease the pain of some inevitable transitions; through fantasizing and through getting to know people who already occupy a given position and thus serve as role models, one can "rehearse" for these future roles. Neugarten postulates that this fact helps to explain why the widow of 60 has an easier time of adjusting to her situation than does the widow of 30; she has "rehearsed" for the role of widow (Neugarten, 1968, p. 97). Obviously, there is some relation between gradual onset and the "on-timeness" of a life event.

When a change occurs suddenly and unexpectedly, no such preparation or rehearsal is possible. The untimely death of a spouse, an acute illness, a natural disaster — these events are more difficult to cope with. Typically, the individual goes through a period of numbness and apathy during which he/she is unable to accept what has happened.

Gradual onset often characterizes the stressful "nonevents" of later life: the middle-aged man's awareness that he has advanced as far in his career as he is likely to go; the older woman's recognition that time is running out and that her life is empty. But in some cases, the individual arrives at "a sudden, acute awareness of a slow change," which may cause "a rather abrupt shift in morale" (Beeson & Lowenthal, 1975, p. 174).

#### *Duration: Permanent, Temporary, Uncertain*

Yet another factor related to the ease or difficulty of adaptation to change is its expected duration. A change that is regarded as permanent will be perceived differently from one that is viewed as a temporary state. A wife may be willing to tolerate the inconvenience involved in moving to a new location so her husband can attend graduate school if she believes that the move is temporary and that, when he has received his degree, they will return to their former home. A transition that is painful and unpleasant may be more easily borne if the individual is assured that it is of limited duration; as when one enters the hospital for surgery that one knows will be minor and will have no lasting effects. Conversely, if the change is desired, then the certainty that it represents a more or less permanent state may be reassuring.

Perhaps the greatest degree of stress and negative affect is connected with uncertainty. Chodoff (1976), talking out the psychological stresses of being interned in a German concentration camp, says: "A healthy personality [can] defend itself against a peril, which though grave, is predictable and is at least potentially limited in time, but . . . the absolute uncertainty of [the concentration camp inmate's] condition was a barrier to the erection of adequate psychological measures" (pp. 337-38). To have an illness whose cause and prognosis is uncertain may be more stressful and unsettling than to know for sure that one has a terminal disease.

#### *Degree of Stress*

The final characteristic of a transition considered in this model is the degree of stress involved, which is to some extent dependent on the characteristics already described. As was pointed out previously, any change or transition — whether it represents a gain or a loss, whether it is predominantly positive or negative in affect — causes some stress. The Social Readjustment Rating Scale (Homes & Rahe, 1967) assigns numerical values to

<sup>1</sup>This issue of age irrelevancy is not clear-cut. In discussions with experts on aging it has been pointed out that age irrelevancy carried to the extreme would eliminate entitlements for older people.

different kinds of life events, with "death of a spouse" ranking at the top of the scale and such items as "vacation," "Christmas," and "minor violations of the law" at the bottom. The Holmes-Rahe scale is useful not only in ascertaining the probable degree of stress connected with a given life event but also in indicating a person's general state of mental and physical health. By adding up the numerical values of the life events that the person has experienced during a given period of time (say, a year), one can arrive at a total score which serves as an index of that person's general condition. The person who has gone through a number of changes in a relatively short period of time is more vulnerable to illness.

As the Dohrenwends point out (Dohrenwend, Krasnoff, Askenasy, & Dohrenwend, 1978), the Holmes-Rahe scale must be used with reservation. In the first place, the numerical values represent empirically derived averages and are subject to individual variation. Thus, the person who has suffered the loss of a loved one around Christmas time may for many years after find the holiday season more stressful than other events given a higher value on the scale. In the second place, the stressfulness of a particular event depends not so much on the event itself, in my view, as on the balance between a person's deficits and resources at the time the event occurs. The construction of a new scale, the Peri Life Events Scale (Dohrenwend, et al., 1978, p. 205) expands the Holmes-Rahe Scale by including 102 items covering such categories as school, work, love and marriage, parenthood, family, residence, crime and legal matters, finances, social activities, and health.

Lowenthal and Chiriboga (1975, p. 147) have constructed "stress typology" based on two dimensions: (1) exposure to stress, as indicated by the factual reports of the subjects and as assessed by a modified version of the Holmes-Rahe scale, and (2) preoccupation with stress, as indicated by the tendency of the subjects to dwell on stressful events when talking about their lives. Four personality types emerged: Of those people who were lightly stressed (i.e., had experienced only mild or infrequent stress in their lifetimes), the ones preoccupied with stress were labeled "the self-defeating," those not preoccupied were called "the lucky." Of those who were heavily stressed, "the overwhelmed" showed preoccupation with stress, whereas "the challenged" did not. Intrapersonal characteristics distinguished between the first two types, and interpersonal characteristics distinguished between the latter two. The challenged were more likely to have close and trusting relations with others, while the overwhelmed tended to rate themselves low in capacity for intimacy. The role of interpersonal support systems in cushioning the impact of stress is discussed more thoroughly in the next section.

### **Factors Affecting Adaptation: Characteristics of Pretransition and Posttransition Environments**

*Environment* should be understood in its broadest sense. In this section, three aspects of the environment are discussed: (1) interpersonal support systems, (2) institutional supports, and (3) physical setting.

#### *Interpersonal Support Systems*

Research evidence indicates that interpersonal support is important — even essential — to successful adaptation. To take an extreme example: Dimsdale (1976), discussing the coping strategies of people in Nazi concentration camps, cites group affiliation as one necessary type of behavior: "If an inmate was unsuccessful in affiliating with

a group within the first few days of internment, his chances of survival were very limited" (p. 357). He adds that the group provided the individual with information, advice, protection, and just as important, reinforced his/her sense of worth. Spaulding and Ford (1976) assert that one reason the Pueblo crew (imprisoned by North Korea in 1968) held up better than American prisoners-of-war during the Korean conflict was that the former were kept together rather than isolated, "thus reducing the stress upon the more dependent and vulnerable members of the crew" (p. 319). That there were no deaths during the imprisonment of the Pueblo crew is attributed to "the organization of the crew and group support [which] offered protection against the 'give-up-itis' previously described [i.e., with respect of Korean war prisoners] as a frequent cause of death" (p.319).

Robert Kahn (1975) introduces the concept of the *convoy* of social support; "the idea that each person moves through the life cycle surrounded by a set of significant others related to him [either] by the giving or receiving of social support" (p. 1). Two notable features of this concept are, first, that it implies movement and change and, second, that it emphasizes "the giving as well as the receiving of social support." The importance of this latter point is underscored by Hamburg, in a study of burn victims and patients with severe poliomyelitis: "The effectiveness of coping behavior is strongly related to the feeling that one's presence is not only valued by significant other people but is virtually indispensable to them" (Spierer, 1977, p. 471). Similarly, Dimsdale (1976) concluded that the desire to help someone else — a friend, a relative — to survive was an effective coping strategy for concentration camp inmates.

In his discussion of the *convoy* of social support, Kahn (1975) suggests that "the adequacy and stability of social support is a determinant of objective and subjective well-being, of performance in the major social roles, and of success in managing changes in those roles" (p. 3). As partial evidence for this proposition, he cites the findings of several investigations. For instance, in a 12-year study that compared the predominantly Italian-American residents of Roseto, Pennsylvania, with residents of four surrounding communities, death from myocardial infarction was found to be much less frequent among the Roseto citizens, despite their bad dietary habits; this difference was attributed to their "closely-knit" families, mutually supportive and gregarious behavior, respect for the elderly, and use of family conclaves for the resolution of problems (Kahn, 1975, p. 4). A study of white-collar workers found that those who received high support from supervisors, peers, and subordinates were relatively unlikely to suffer from stress-related health disabilities. Similarly, a study of factory workers who had been laid off from their jobs found that stress-related physiological changes (elevation of cholesterol and serum uric acid levels) were more likely to occur among those workers who received little support from their family, friends, and neighbors.

The present model specifies three different types of interpersonal support systems: (a) intimate relationships, (b) the family unit, and (c) the network of friends.

With respect to the first of these three types, Fiske and Weiss (1977) maintain that *intimate relationships* — involving trust, support, understanding and the sharing of confidences" (P. 25) — are an important resource during stressful transitions. Moreover, "in the absence of overwhelming external challenge, most individuals find the motivation to live autonomous and satisfying lives only through one or more mutually intimate dyadic relation-

ships" (p. 19). For instance, research indicates that the death of a spouse may be more traumatic for men than for women because men are less likely to have formed — or to be able to form — close relationships with other people; when they lose their wives, they literally lose their best friends. Men's inability to form close ties with other people may also contribute to their shorter life expectancy. As further indication of the power of intimate relationships, Fiske and Weiss suggest that "former intimate relationships, disrupted by death, distance, or interpersonal conflict, may continue to be a resource in terms of crisis, chronic and acute, throughout the life course . . . Knowing through past experience that one is capable of having an intimate relationship, romantic or otherwise, may prove nearly as important a resource in difficult life situations as actually having an intimate at the time of crisis: a former relationship is reinforcing, and at the same time sustains hope for a future one" (1977, p. 27).

The *family unit* has long been a subject for study by sociologists and others, many of whom have attempted to define those qualities of the family that contribute to its ability to adapt to a crisis or to ease the process of adaptation for one of its members. Thus, Angell focused on family integration, "the bonds of coherence and unity running through family life, of which common interests, affection, and a sense of economic interdependence are perhaps the most prominent" (Hill, 1965, p. 41) and on family adaptability. Lipman-Blumen (1976) lists, among other dimensions of the social system, the family level of organization or disorganization and its adaptation coefficient or degree of flexibility as major determinants of adaptation to the crisis of divorce.

Evidence of the importance of the family unit as a support system in times of transition comes from the San Francisco study. Lowenthal and Chiriboga (1975) found that, of their four "stress" types, the challenged had the highest ratings on family mutuality, and the overwhelmed had the lowest. In addition, the challenged — those who were heavily stressed but not preoccupied with stress — had warmer and more positive feelings toward members of their families. A study of draft dodgers and deserters who fled to Canada during the Vietnam era (Levine, 1976) indicates that those who received parental support for their move adapted better to the new situation than did those whose parents disapproved of their action; the latter were more likely to seek professional help for their difficulties, and lack of parental support "remained a crucial factor until the young people joined a group that made them feel welcome and worthwhile" (p. 219).

Finally, then the individual's *network of friends* is an important social support system. Troll (1975) comments that one of the most stressful side effects of divorce for the woman is that often she automatically loses many of the "family friends" that were available to her as part of a couple; such a loss is particularly likely if the marriage was a traditional one, in which "family friendships" were based on the common occupations of the husbands. Loss of the network of friends may also result from a residential move or from the death of a spouse, thus exacerbating the difficulties of those transitions. Conversely, the presence of friends can cushion sudden shock. In the immediate aftermath of major disaster, friends and neighbors typically draw together for mutual support and comfort; this show of solidarity often helps the individual to make it through the first grim period (Hill, 1965).

#### *Institutional Supports*

Included in this category are "occupational organiza-

tions, religious institutions, political groups, social welfare or other community support groups" (Lipman-Blumen, 1976), and various other more or less formal outside agencies to which an individual can turn for help. That the need for such agencies has become more widely recognized is attested by the proliferation of counseling programs — which may take the form of seminars, lectures, workshops, or simply discussion groups — aimed at people experiencing particular transitions: mid-career change, divorce, retirement, a return to school.

Different people seek different kinds of institutional support. For instance, one study (Chiriboga, Coho, Stein & Roberts, 1979) found that young women tend to seek support from a variety of sources, including clergy, counselors, and lawyers, whereas men and older women seek support from a more limited number of sources. Weiss (1973) reports that low-income, single-parent women seem to need a "temporary alliance with an authoritative figure" (p. 321), from whom they seek help of two kinds: the provision of concrete services and the provision of support and guidance. All too often, however, they have difficulty gaining access to such people. Moreover, even when they do succeed in making contact with professional helpers, those helpers — while able to offer specific services — generally cannot provide the needed support and guidance.

The potential benefits of institutional supports became clear to me in the course of a study (Schlossberg & Leibowitz, in press) that involved interviewing government employees of the National Aeronautics and Space Administration (NASA) whose jobs had been eliminated because of required reductions in force. At first, these men were shattered at having lost their jobs. Their initial reactions were shock, numbness, and disbelief, followed by bitterness and anger directed against their former employer. NASA organized a series of intensive workshops and assigned counselors to work with each person. The men with whom we talked reacted very favorably to this program, not only because it represented a demonstration of concern on the part of NASA itself, but also because it gave them practical support in the form of job placement and, where necessary, job training.

The ritual occasions that mark particular transitions in our culture also fall into the category of institutional supports. Obvious examples are weddings, funerals, and retirement banquets. According to Lipman-Blumen (1976) "rituals symbolize that the society is involved in the individual's crisis, and thus convey to the individual that she is not alone in this trying period. Rituals signify the society's stake both in the crisis and the return to society and normal social life of the persons involved" (p. 249). But, as Lipman-Blumen also points out, rituals have become somewhat scarce in our fast-paced and determinedly informal society. The court proceedings connected with divorce offer nothing in the way of support; graduation from high school, or even from college, is no longer a certain signal of entry into the world of full adult responsibility; christenings have become infrequent. Beyond a visit from the welcome wagon, there are no rituals or other institutional supports to ease the stress of residential moves in our highly mobile society.

#### *Physical Setting*

The importance of physical setting — used broadly to include climate and weather, urban or rural location, neighborhood, living arrangements, and workplace — is so obvious as to be easily overlooked. All these factors may contribute to stress, sense of well-being, and general



outlook and thus may play a role in adaptation transition. City planner C.A. Doxiadis has proposed a science of ekistics, which rests on the assumption that "environment affects biological, social and behavioral growth and development" (Spieler, 1977, p. 26).

In a comprehensive discussion of crowding and behavior, Freedman (1975) concludes that "crowding by itself has neither good effects nor bad effects on people but rather serves to intensify the individual's typical reaction to the situation" (pp. 89-90). People who usually have a favorable reaction to others "will have a more positive reaction under conditions of high density" (p. 90), whereas those who dislike or feel aggressive toward others will find these feelings intensified in crowded situations.

Rubin (1979), discussing the effects of the seasons on human moods and behavior, cites the well-known fact that suicides and mental hospital admissions peak during the spring and early summer, as does will-making, even though for most people these are happy and hopeful times of the year. A possible explanation is that increasing day lengths ("photoperiodic effects") stimulate glandular activity. "While such stirrings of the glands may contribute to feelings of optimism and 'thoughts of love' associated with springtime, for some vulnerable individuals the glandular activity may be excessive and precipitate emotional disorder or breakdown" (p. 16). Moreover, "in the mildness of spring, people can blame their troubles only on themselves . . . In spring, we must account to ourselves most honestly our failings, which may push some troubled people over the edge of despair" (p. 16).

Considerable research attention is now being paid to such topics as "personal space," sensory deprivation, and high-density living; and from this research could emerge new insights into factors of the physical environment that facilitate or hamper adaptation. I would tentatively suggest that perhaps the most important dimensions in this category are comfort, privacy, and aesthetics.

### **Factors Affecting Adaptation: Characteristics of the Individual**

The third major determinant of adaptation to transition is the individual him/herself. Though some observers attribute adaptation solely to the individual's characteristics, this model views the individual's characteristics as only one of three major sets of variables affecting adaptation. Of the many individual characteristics that might be considered significant, the ones I will focus on are (1) psychosocial competence (2) sex (and sex role identification), (3) age (and life stages), (4) state of health, (5) race-ethnicity, (6) socioeconomic status, (7) value orientation, and (8) previous experience with a transition of a similar nature.

#### *Psychosocial Competence*

Various personality variables and behavior mechanisms have been proposed to explain an individual's success or failure in adapting to transition, and one can easily get lost in a welter of terms and constructs. For simplicity, this model focuses on the concept of psychosocial competence proposed by Tyler (1978), which has received some empirical testing. Tyler postulates a "three-faceted personality configuration, the competent self," involving: (a) self-attitudes, (b) world attitudes, and (c) behavioral attitudes.

Under the rubric of *self-attitudes* are included a moderately favorable self-evaluation, an internal locus of control (that is, the belief that one's actions have some causal relation to one's life), and a sense of responsibility.

The importance of the first — a moderately favorable self-evaluation — is supported by research, which shows, for instance, that the maintenance of self-esteem and a sense of personal worth is important to survival under conditions of extreme stress such as incarceration in a prison camp (Dimsdale, 1976). Another item that might be added to this list of self-attitudes is "the capacity to maintain a coherent and consistent self-image," which among elderly subjects undergoing relocation proved to be positively associated with the "maintenance of homeostasis" (Lieberman, 1975, p. 155). The ability to introspect was also a variable that predicted successful adaptation among the elderly (Lieberman, 1975, p. 156). This finding receives some confirmation from a study of American prisoners of war subjected to prolonged solitary confinement:

Prisoners often spend hours on end contemplating what they have done with their lives and what they intend to do with them if they are lucky enough to survive their imprisonment. This type of contemplation often results in very positive philosophical changes in a man's attitude, value system, and philosophy of life. (Hunter, 1976, pp. 329-330).

The *world attitudes* that Tyler (1978) regards as contributing to psychosocial competence are optimism and moderate trust "as a basis for developing a pattern of constructive interaction with the world" (p. 5). Optimism can also be termed hope, which other researchers see as a key factor in adaptation (Dimsdale, 1976; Lieberman, 1975; Spaulding & Ford, 1976). Chiriboga and Lowenthal (1975) view hope — defined as "the feeling that what is desired is also . . . possible." (p. 111) — as an important psychological resource, connected with goal-directed striving or simply with maintenance of the status quo. In a study of high school and college students, Tyler found that marginal students were somewhat more trusting than exemplary students and concluded "being either too trusting or too little trusting reduces one's overall effectiveness" (1978, p. 5).

The behavioral attributes that Tyler found to be indicative of "the competent self" were "an active coping orientation; high initiative; realistic goal setting; substantial planning, forbearance and effort in the service of attaining goals; and a capacity for enjoying success, suffering failure, and building from both" (Tyler, 1978, p. 313). The importance of seeking and using information and of making plans has been emphasized by other researchers as well. Those draft dodgers who had sought information about the new situation before they ever went to Canada and who had prepared for the change beforehand were likely to adapt more easily (Levine, 1976, p. 216). White (1976) cites as two of the elements of "successful transaction with the environment" the securing of "adequate information about the environment" and the maintenance of "satisfactory internal conditions both for action and for processing information" (p. 25). An *active* coping orientation may be important even in those extremes of crisis where action is impossible and planning almost meaningless in view of the uncertainties of the situation. In the Pueblo incident, the men who were able to "tolerate the stress of incarceration best" were those who, in psychiatric terms, were "bright and schizoid," able to isolate the negative affect "and entertain themselves with fantasy" (Spaulding & Ford, 1976, p. 317). Those crew members characterized as obsessive-compulsive, or passive-dependent fared badly. Similarly, among prisoners of war kept in solitary confinement, those who were passive-



dependent personality types were less able to endure the stress.

One caveat should be borne in mind here. Both Lieberman (1975) and Lowenthal and her associates (1975) offer some evidence that the particular coping mechanisms and personality characteristics that facilitate adaptation may be life-stage-specific. For instance, Lieberman found that the elderly patients who adjusted best to relocation tended to be "aggressive, irritating, narcissistic, and demanding. . . . They certainly were not the most likable elderly" (p. 155). The San Francisco study suggests that psychic complexity, though related to adaptation among the young, is dysfunctional among older people in our society (Chiriboga & Lowenthal, 1975, p. 120). The point here is that, given our limited knowledge, we cannot at this point make absolute statements that certain personality characteristics or coping mechanisms are adaptive; their effectiveness may depend on the individual's life stage on the particular situation or transition involved.

#### *Sex (and Sex-Role Identification)*

The relationship between sex and adaptation to transition are complex and will only be touched on here. Many observers have suggested that, because in our culture men are taught to hide emotion and deny problems whereas women are given greater freedom to express their feelings, men present a more favorable picture with respect to mental health. Despite appearances, however, women's greater capacity for intimacy and mutuality may make it easier for them to adapt to certain transitions; the example of widowhood has already been cited. Moreover, evidence suggests that women

can apparently integrate many and diverse emotional experiences. Men seem more distressed by ups and downs of emotional life; they apparently thrive either on a preponderance of positive emotional experiences or a relative lack of any kind [of experiences]. (Chiriboga, 1975, p. 97).

As one would expect, the sexes face somewhat different kinds of transitions: men in connection with work, and women in connection with family life. Moreover, Beeson and Lowenthal (1975) point out that the "person focus" differs for the sexes; men undergo stress as a result of events in their own lives, whereas women undergo stress as a result of events in the lives of their husbands and their children (or other family members). Thus, a decline in the husband's health may be as much a transition for the wife as a change in her own health, bringing about significant changes in her assumptive world.

To some extent, it is more meaningful to talk about sex-role identification than about sex as a significant factor in adaptation to transition. Males and females are socialized to different attitudes and behaviors, and the extent to which the individual man or woman internalizes these norms may significantly influence his or her ability to adapt. Thus, the woman who conforms to the feminine stereotype — dependent, passive, helpless — may find herself at a disadvantage in adapting to situations that require her to be independent, assertive, and self-reliant: divorce or widowhood, for instance. Generally speaking, women are more likely than men to experience changes whose source is external and thus to develop a pervasive feeling of powerlessness (and, consequent to that, of depression). By the same token, however, she may fare better when faced with changes over which she has no control. The man, unused to the feeling of powerlessness,

may suffer greater negative affect when, for instance, he is forced to retire from his job or to slow down his pace because of ill health. More research on such sex difference is needed.

#### *Age (and Life Stage)*

Again, the wealth of data about the relation between age and ability to adapt precludes all but a cursory discussion here. One point that makes analysis difficult is that most experts agree that chronological age is relatively unimportant compared to biological age, psychological age ("the capacity to respond to societal pressures and the tasks required of an individual"), social age ("the extent to which an individual participates in roles assigned by society"), and functional age ("the ability to function or perform as expected of people in one's age brackets, which in turn, depends on social, biological, and personality considerations") (Spierer, 1977, p. 10).

Another complication is that the process of aging itself constitutes a series of events that require adaptation on the part of the individual. That is, the biological and physiological changes that occur over the life span may themselves be regarded as transitions (the most obvious examples being puberty and menopause).

An example of how one's age may affect one's reaction to a crisis comes from a study of men age 37 to 67 who were hospitalized following a heart attack (Rosen & Bibring, 1968). Whereas the younger men were generally cheerful and the 60-year-olds fatherly and easygoing, the 50-year olds were hostile, withdrawn, depressed, and difficult as patients. The authors interpret these age differences as follows: Those under 50 simply denied the seriousness of their condition, those in their 60's accepted it as an "ontime" event, but those in their 50's experienced "open conflict from the active orientation of youth" (p. 207). "A heart attack theoretically accentuates the very issues with which the [middle-aged man] has been actively struggling" (p. 207): that is, his anxiety about aging and his reluctance about shifting from an active to a passive role.

Life stage may be a more useful concept than chronological age in studying transitions. The San Francisco study (Lowenthal, Thurnher, & Chiriboga, 1975), identified numerous stage differences with respect to the sources and nature of stress, the number of significant life events, and the ratio of positive to negative experiences. The younger subjects (high school seniors and newlyweds) reported two-and-a-half times as many "stressor events" during the last ten years of their lives as older subjects (middle-aged and preretirement couples), giving support to the notion that the "density" of time — its fullness and eventfulness — seems to lessen with age: "The self-reports of older people . . . suggest a more restricted perception of things happening in their lives and also less involvement in the circumstances that do occur" (Chiriboga & Gigy, 1975, p. 127). As was pointed out previously, in the later stages of life, more subtle factors cause changes in self-perception and satisfaction: e.g., the realization that one has not achieved as much as one had planned, the shift in time perspective so that one thinks in terms of years left to live rather than of years since birth.

According to Lowenthal and Chiriboga (1975), "the young may thrive better on stress than on the lack of it" (p. 160). Middle age (more specifically, the period immediately preceding the "empty nest") is a period of high risk for both sexes, in that they are more likely to experience negative rather than positive stresses and to be over-

whelmed by them. The preretirement couples in the San Francisco study were generally in better psychological shape than the middle-aged parents, though Chiriboga points that "among older people a greater breadth of activities actually weighs against life satisfaction. . . . Getting rid of unwanted duties and obligations and settling for ease and contentment. . . as a way of life may represent one of the major adaptive tasks for older people" (Chiriboga, 1975, p. 98).

Lieberman (1975) suggests that "the processes for adequate coping . . . may be life-stage-specific" (p. 155) and that "characteristics or process [that] predict adaptation at other life stages appear to be irrelevant in predicting adaptation in old age" (p. 154), when adequate cognitive and physical resources are essential — though not necessarily sufficient — to assure successful adaptation. The importance of physical resources is discussed more thoroughly in the next section.

### *State of Health*

As with age and aging, the individual's state of health not only affects his/her ability to adapt to a transition but also may itself be a source of stress: That is, ill health in itself constitutes a transition. In some cases, a person may recover quickly from an acute but minor illness and be left relatively unaffected, with little change in self-perception. In other cases, an illness — though brief — may remind the person of his/her own mortality and thus have lasting-psychological effects. In still other cases, the illness may be chronic, leading to a gradual decline in physical resources and energy level and thus profoundly affecting the individual's coping ability. As was mentioned, Lieberman believes that "physical capacity . . . may be the most important and perhaps the only salient predictor of adaptive failure, at least among the elderly" (1975, p. 145).

Health has a subjective as well as an objective aspect. For instance, Shamas and his associates, comparing self-ratings of health with degree of actual incapacity, classified people as "health pessimists," "health optimists," and "health realists." They found that, among people over age 80, women were more likely to fall into the first category than were men, although men were less optimistic about their health immediately after retirement than either earlier or later (Shamas, Townsend, Wedderburn, Friis, Milhøj & Stehouwer, 1968, p. 218).

The San Francisco study found some relation between self-reported health status and psychological adaptation, with the direction of the correlation differing by sex. That is, women who said they had few health problems were less likely to have psychological deficits than women who saw themselves as having many or major health problems, whereas men who reported themselves as healthy were more likely to suffer psychological deficits than men who reported themselves to have health problems (Chiriboga & Lowenthal, 1975, p. 114). One explanation for this difference comes from the additional finding that, among older men, the "challenged" (those high in exposure to stress but low in preoccupation with stress) were more likely to be physically impaired than were the "overwhelmed" (those high on both dimensions); this suggests that the former are basically noncomplainers who repress and deny their problems and that this repression exacts a physical toll (Lowenthal & Chiriboga, 1975, pp. 161-162).

### *Race/Ethnicity*

The effects of the individual's racial/ethnic background on his/her ability to adapt are probably mediated

through other factors such as value orientation and cultural norms. For instance, one may surmise that the person from an ethnic background that still emphasizes the extended family will have more interpersonal support available during times of transition in a marital separation or a divorce than would be true if his/her background were one where termination of marriage was more accepted.

One's racial/ethnic background may be an isolating factor, making adaptation more difficult. Thus, though the sample in the San Francisco study was predominantly Caucasian, the few subjects of non-Caucasian origin (chiefly among the high school seniors) were likely to be of the "self-defeating" type: that is, they ranked low in exposure to stress but were inclined to be preoccupied with it:

A Polish-born girl felt loss without a "homeland"; a Chinese girl born in Trinidad did not know where she "belonged" and was making plans to return; a Filipino girl felt inferior because of her ethnic background. Two of the four self-defeating high school boys also associated their ethnic or national origins with problems of adjustment. Nearly all of the self-defeating young people had difficulty relating to their peers (Lowenthal & Chiriboga, 1975, p. 155).

### *Socioeconomic Status*

The data on the relation between adaptation to transition and socioeconomic status are not always consistent, perhaps because of the different measures of SES used (income, occupation, education, or some combination). Thus, Lowenthal and Chiriboga (1975) found that high status (as measured by education among men, and by socioeconomic background among women) was related to greater exposure to stress, probably because high status is associated with a more varied life style (p. 149).

Hill (1965) points out that socioeconomic differences may make a difference to the amount of stress associated with different transitions: Thus, lower-income families may be rendered more desperate by financial difficulties than middle-income families, because "the lower-class family not only is restricted in income, but in health, energy, space, and ideas for coping with crisis . . ." (p. 41). The idea that a lower-class background may make for more limited resources — material and psychological — is supported by Levine's finding (1976) that those draft dodgers and deserters of the Vietnam War period who came from lower-class backgrounds and were relatively uneducated frequently failed to adapt to life in Canada and had to seek professional help for their problems.

In some instances, the lack of knowledgeability and awareness associated with a lower-class background may be something of an advantage. Rosen and Bibring (1968), in a study of hospitalized coronary patients, found that, after the first heart attack, men of lower SES (as measured by occupation) were generally less anxious about their condition and more docile as patients than were men of higher SES. The explanation offered for this difference is that the blue-collar workers attributed their heart attack to physical causes and had few doubts that, by following the doctor's orders, they could be "cured," whereas the white-collar workers were more knowledgeable about the uncertainties of coronary attacks and more skeptical about the medical treatment. The authors conclude that these findings are consistent with other findings with respect to social class differences: "denial of psychic pain . . . appears to be a mechanism linked with lower-class status" (p. 210). Interestingly, these differences disappeared after the second heart attack; that is, the blue-

collar workers, unable to deny the seriousness of the condition, were as anxious as the white-collar workers.

### *Value Orientation*

An individual's basic values and beliefs are a factor in his/her ability to adapt to transitions. On the basis of subjects' responses to the question, "What is the main purpose in life" Thurnher (1975) developed a seven-category value typology: (1) instrumental-material (economic or occupational productivity or achievement, social status, household chores), (2) interpersonal-expressive (intimacy, friendship, sociability), (3) philosophical-religious (including concern with the meaning of existence and adherence to an ethical code), (4) social service (helping others, community service), (5) ease and contentment (simple comforts, security, relaxation), (6) hedonism (sensual pleasure, enjoying life to the full), and (7) personal growth (self-actualization). Values may be valuable or dysfunctional, "dependent on the ease with which they can be translated into goals and behavior and successfully pursued" (Thurnher, 1975, p. 184). Moreover, a value system that contributes to adaptation at one life stage may be dysfunctional at another; thus people at different stages tend to emphasize different values.

Religious belief is an obvious example of a value orientation that is often said to sustain people through the trials of life. For instance, grief over the death of a loved one may be eased by the belief that the death is "God's will." Among preretirement women, however, high philosophical-religious values were related to low satisfaction, suggesting that "if the intensification of religious beliefs and practices arose from the search for solace, the comfort derived would seem only partial and not such as to result in full acceptance of one's self or one's life course (Thurnher, 1975, p. 188). On the other hand, "among men and among people of both sexes in the later stages . . . there was evidence that *involvement* in religion, either through feelings of religiosity or through greater participation, allows for more direct handling of the prospect of personal death" (Chiriboga & Gigy, 1975, p. 143). The specific content of one's religious beliefs, and the cultural norms associated with particular religions, must also be considered. A woman from a Catholic background facing divorce may find her distress exacerbated by the Church's strictures against divorce. A man from a Protestant background who has grown up with a strong commitment to the work ethic may find forced unemployment especially hard to take, quite apart from the financial strain it entails.

Beyond the comforts of religion, strong commitment to an ideology or cause may be a necessity in some situations. Thus, those draft dodgers who moved to Canada not to escape from some difficult personal situation or to seek adventure but for ideological reasons — because they believed the Vietnam War to be immoral or regarded themselves as political refugees from an oppressive system — were more likely to adapt to the new situation (Levine, 1976). Concentration camp victims who saw themselves as surviving for some greater purpose were able to mobilize their coping resources more effectively (Dimsdale, 1976).

### *Previous Experience with a Transition of a Similar Nature*

Experts agree that the individual who has successfully weathered a transition in the past will probably be successful at adapting to another transition of a similar nature. As Danish and D'Augelli (1980, p. 114) state: "The past experience has provided both constructive attitudes about the event and behavioral competencies that were

reinforced by the success experience." Conversely, the person who has been defeated by a situation may become more vulnerable and less able to cope in the future. The past experience to some extent determines the person's mental set, and if that past experience was unfavorable, then the mental set may become something of a self-confirming prophecy. Of course, given possible changes in the ratio of resources to deficits (discussed earlier), the correlation between successful adaptation in the past and at a later point in time is by no means perfect.

Some types of loss seem to have long-lasting negative effects. Lowenthal and Chiriboga (1975) found that, of the one quarter of their sample who had suffered an early childhood loss through death or divorce, one-half belonged to the "overwhelmed" category; that is, though they had been relatively lightly stressed, they were preoccupied with stress. Undoubtedly, some experiences are so harrowing that many people are left permanently damaged: Follow-up studies of concentration camp inmates provide evidence of such damage (see Ostwald & Bittner, 1976).

### *Summary*

The model described here views adaptation to transition (defined as an event or nonevent that alters the individual's perception of self and of the world, that demands a change in assumptions or behavior, and that may lead either to growth or to deterioration) as a dynamic process, a movement through the various stages of a particular transition. Generally, this movement can be described as from pervasiveness to boundedness. Adaptation can be assessed in terms of the individual's resources-deficits balance or in terms of degree of similarity and difference between the pre- and posttransition environment.

Three sets of factors seem to influence adaptation to transition: (1) the characteristics of the transition itself, including role change (gain or loss), affect (positive or negative), source (internal or external), timing (on-time or off-time), duration (permanent, temporary, or uncertain), and degree of stress; (2) the characteristics of the pre- and posttransition supports, and physical setting; and (3) the characteristics of the individual, including psychosocial competence, sex (and sex-role identification), age (and life stage), state of health, race/ethnicity, socioeconomic status, value orientation, and previous experience with a transition of a similar nature. Not all these factors have equal salience to an individual's adaptation to a particular transition.

### **Preliminary Data on the Model**

Any value the model described in the paper may have lies in its usefulness as a basis for research, and eventually, for intervention and counseling. At this point, the model is tentative and exploratory, subject to revision as new evidence and insights emerge. Several studies that draw on the model have been carried out or are in progress, and a brief description of some of these studies may clarify the uses to which the model may be put and may stimulate further research.

I have already mentioned one study that has been completed (Schlossberg & Leibowitz, in press). The sample consisted of men whose jobs with NASA had been eliminated because of a required reduction in force (RIF). These men were first interviewed the week after the RIF had been announced and then followed up six months later. The interviews were structured on the model. That is, each man was asked about his perceptions of the transition (role change, affect, source, timing, onset, dura-



tion, and degree of stress involved), about the interpersonal supports available to him before and after the job loss, and about his own particular coping style. Predictably, the subjects saw the termination of their jobs as a role loss that had been forced on them suddenly, that was off-time, that was strongly negative in affect and involved considerable stress. Most were uncertain about how long they would be jobless. As was also mentioned earlier, NASA itself supplied institutional support in the form of workshops, counseling, and placement services. Through this intervention, all of the men were able not only to find new jobs but also to regain a sense of control over their own lives. Moreover, the model offered a useful way to collect and organize the interview data.

A study recently completed (Lyons, 1980) aims at facilitating entry into the first job. As Lyons states: "The transition of a neophyte professional from the role of learner to worker is important to both the individual and the organization. Unsuccessful transitions are costly to organizations in many ways, the least expensive being early termination of the employee. Greater penalties often result when the employee stays with the organization, but is an underproducer or in some cases is counterproductive."

The subjects are 60 new employees at NASA's Goddard Space Flight Center — half of them scientists and engineers and half of them administrators — who are taking their first professional position after completing their formal education. Because a major obstacle to successful adaptation in a new job is the employee's failure to understand what is required or expected of him or her (Schein, 1978), Lyons first interviewed supervisors, using the critical-incident technique (Flannegan, 1954), to define operationally those work behaviors that are expected of employees.

Lyons then developed and implemented a workshop, patterned on a model developed by Weiss (1976) that comprises three components: (1) cognitive content (that is, information designed to help the participant make the transition; in this case, the desired work behaviors identified in the interviews with supervisors provided the basis of the cognitive content); (2) support and guidance from a "veteran" (that is, someone who has recently completed the transition and who can share his or her experience with those currently undergoing the process); and (3) peer support, in this case provided by fellow neophytes participating in the workshop.

The subjects were randomly selected into two comparison groups. One group participated in the workshop, which consisted of four two-hour sessions, while the other group was given a placebo treatment consisting of a brief lecture on the desired work behaviors. To measure the degree to which each subject exhibited the desired behaviors, a questionnaire was completed by supervisors before and after participants' exposure to the workshop (or lecture). If comparisons of the pretest and posttest data for the two groups indicate that those who took part in the workshop were more successful at mastering the desired behaviors, the workshop will be incorporated into the standard Goddard program for new professional employees.

In another study (Merikangas, 1980), a planning seminar for a group of employees nearing retirement is being tested at Goddard Space Flight Center. The seminar, comprising five three-hour sessions, is aimed at preparing participants for the coming transition. Again, the program is structured around the Weiss model: the presentation of cognitive information, the provision of support, and the provision of help in planning for the transition, with

experts and veterans being used where necessary. Special emphasis is placed on giving participants a total view of life after retirement (rather than limiting discussion to finances and use of leisure time, as is often the case with traditional retirement programs); on helping participants get in touch with themselves — their value systems, interests, skills, and abilities — through self-assessment activities; and on enabling participants to develop planning skills and to take the initiative in planning so that they can gain control over the transition. A pretest and posttest design, with a control group, is being employed. Of course, adaptation could not be assessed until much more time had passed.

In another study now in progress, (Gottlieb, Note 4) is looking at a special kind of transition: the acculturation of Spanish-speaking/surnamed Americans. To selected variables from the transition model (role change, locus of control, support systems) Gottlieb has added two variables associated specifically with acculturation: contact with the majority culture and communication skills in English. She is focusing on the role of anxiety in transition.

Adults entering graduate school after having been out in the labor force (often in professional positions) are the subjects of yet another study (Minor, Note 5). The study looks at the adaptation that these subjects make from the role of worker to that of graduate student (comparing them with those more traditional graduate students who go directly from college into graduate school) and at the person-environment fit. Three primary hypotheses are being tested: that the discrepancy between expectations and perceptions of the graduate school environment are greater among those adults from higher career development stages; that these discrepancies are moderated by individual characteristics such as level of ego development and by full-time versus part-time student status; and that the greater the difference between the pre- and post-transition environments, the greater degree of adjustment the individual will have to make.

What is emerging from all these studies is that different factors have different salience depending on the transition and on the subgroup being studied. For instance, in the RIF study, the variable making the big difference in adaptation was institutional support. In the study of couples who had made a geographical move (Schlossberg, Note 1), the most salient factors were sex and sex-role identification, perceived duration of the move, interpersonal supports, and degree of control. For instance, unhappiness about a move was mitigated when a couple realized that they could rent rather than sell their old house; this realization gave them a feeling of being in control; they could go home again, if they wanted to.

It is hoped that this extensive discussion of the many factors influencing adaptation to transition will alert psychologists and others in the helping professions to the rich complexity of the process of adaptation to transition. Simplistic explanations about the reasons for an individual's behavior — about his or her success in adapting to transition — are simply inappropriate. Hopefully, the discussion of the many variables will alert psychologists to the variety of explanations underlying an individual's behavior and the recognition that life's balance of resources to deficits is not a fixed matter.

Through these studies, and others that may follow, data will emerge that can be used in refining the model, thus developing a clearer picture of human adaptation to transition. This understanding can then provide the basis for appropriate interventions, for it is after all the goal of



counseling psychology to develop preventive interventions, pretransition, as well as effective support and counsel for those in transition. Brammer and Abrego, in the following paper, offer the missing link in this discussion — strategies for counseling psychologists to utilize to facilitate adaptation of others. The paper provides a taxonomy of coping skills which can be introduced to shift the balance from deficits to resources.

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