

Relationships Among an Older Adult's Life Review, Ego Integrity, and Death Anxiety

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ABSTRACT. The frameworks of Erikson (1963) and Butler (1963) were used to design this descriptive study that investigated the relationships among life review, ego integrity, and death anxiety in older adults. Three hypotheses were proposed: (a) the greater the life review, the higher the ego integrity; (b) the greater the life review, the lower the death anxiety; (c) the higher the ego integrity, the lower the death anxiety. The sample consisted of 115 female and male volunteers between the ages of 65 and 93. The participants filled out the Life Review Questionnaire, Adult Ego Development Scale, Death Anxiety Scale, Death Preparation Scale, and a Personal Information Sheet. Life review, while not positively correlated with ego integrity, was found to have a negative correlation with death anxiety. Also, religious subjects were found to be more prepared for death than those who did not practice. Implications for therapy and future research are discussed, as well.

As America "grays" (Butler, 1963), there is an associated increase in the number of elderly with some type of psychiatric or mental impairment. In turn, interest in effective methods of facilitating or enhancing mental health in this population is intensifying. This is especially true in the emerging specialties of gerontological and geropsychiatric nursing, which will soon involve 25% of all nurses. Even nurses not explicitly identified with these specialties can expect to spend 25% of their practice life working with older adults. There is a great need for nursing research aimed at identifying holistic, preventative interventions and treatment modalities for this population.

It was with this aim that this study was designed. The phenomena investigated were life review, ego integrity, and death anxiety. The research hypothesis predicted that, after controlling for age and sex, the amount of life review would be positively related to ego integrity, but negatively related to death anxiety. Although the concepts had been in the literature for at least 25 years, as of 1988 no studies had looked at the relationships among life review, ego integrity, and death anxiety in older persons.

LITERATURE REVIEW

Life review is one of several types of reminiscence—a characteristic behavior among elderly persons. Others include: simple reminiscence; recalling the past; informative reminiscence, in the form of storytelling to entertain or to provide oral history data; and pseudoreminiscence, in which memory mingles with fantasy such that the past is glorified and the present deprecated (Coleman, 1974; Kahana & Levin, 1967). Life review differs from these in that the individual reviews memories of the entire span, either alone or in the presence of others who may actively facilitate the process or who may merely listen. There is a particular emphasis on resolving previously unresolved conflicts. Butler (1963) proposed that a person who had done a life review was better able to accept the past, to live more acceptably in the present, and to be less anxious about his or her eventual death. One's biography is viewed more positively when one's life review is intense, ranges over the entire life cycle, attributes past events to internal factors, and constructs individual past events as having turned out for the better (Marshall, 1974).

Behaviors such as these correspond to those exhibited by persons who are successfully dealing with what Erikson (1950) has identified as the positive aspect of the eighth stage of life, ego integrity. Butler's (1963) clinical observations support that life review leads to greater achievement of ego integrity.

Other research has suggested that life review might lead not only to greater ego integrity but to reduced death anxiety (Boylin et al., 1976). Women have been shown to evidence more death anxiety than men (Templer et al., 1971). As age of subjects increases, their death anxiety lessens (Nehrke, 1974). No prior study had definitely linked life review and death anxiety.

Walaskay and colleagues (1983–1984) investigated the relationships among reminiscence, ego integrity, and death anxiety, but reminiscence differs from life review, as has been pointed out. Georgemiller (1982) conducted seven 90-minute sessions, half didactic and half sharing-focused sessions with experimental subjects. There was no attempt to cover the entire life cycle, and the dimension of death anxiety was not explored. Connolly (1984) looked at life review and morale as operationalized on the Philadelphia Geriatric Center Morale Scale. Though clearly related to the topic of this research, none of these studies examined the same relationships.

METHODOLOGY

The sample for this study consisted of 115 volunteer male and female adults between the ages of 65 and 93. This sample size yielded a power of .97 to detect a medium-size effect ($F = .15$) at the .05 level of significance (Cohen & Cohen, 1975). To reduce extraneous variables, the sample was limited to subjects nominated and judged by nurse clinical specialists to be free of dementia or clinical depression and able to comprehend the directions of the study. Sixty-nine percent

of the subjects were between the ages of 65 and 74, the young-old. Twenty-six percent of the subjects were between the ages of 75 and 84, the middle-old. Five percent of the subjects were between the ages of 85 and 93, the old-old.

The investigator contacted faculty members for nominations of volunteers free of dementia or clinical depression who were from their private practice. The instruments were administered by interview in the participant's home or were completed by the subjects independently and mailed to the investigator. A brief explanation of the study was given along with instructions for completing the questionnaires. No time limit was placed on the subjects, but instruments were reported to be completed usually within 40 minutes. The order in which the material was presented to subjects was varied to control for a possible ordering effect. In total, 195 questionnaires were distributed and 115 were returned to the investigator, giving a response rate of 65 %.

THE INSTRUMENTS: THE LIFE REVIEW QUESTIONNAIRE, ADULT EGO DEVELOPMENT SCALE, DEATH ANXIETY SCALE, INCLUDING THE DEATH PREPARATION SCALE

The Life Review Questionnaire was developed by the investigator (Fishman, in press). The Life Review Questionnaire measures the extent and manner in which an older adult has recalled, considered, and worked through the events of his or her life. The instrument was pilot tested in 1987 with a group of 18 subjects at a senior citizen center. The same 18 subjects were retested after a two-week period using the same questionnaire in order to establish the reliability of the tool. The differences between the responses were calculated. Chi-square analysis $\chi^2(4, N = 18) = 684.496, p = .00001$, revealed no significant differences between the scores on the two testings of the instrument over the two-week time period. Test-retest reliability had initial support.

Before it was administered to the subjects, the Life Review Questionnaire was sent to 10 experts in the field of geropsychiatry from the disciplines of medicine, nursing, sociology, and social work. Their extremely helpful comments were incorporated in revising the questions. Revised questions were submitted to the expert panel until there was total agreement. Content validity had initial support.

The Adult Ego Development Scale (Whitbourne, 1980, personal communication) measures the three adult stages of ego development. The scale is a refinement of an earlier scale used by Boylin and colleagues (Whitbourne), in 1976. The 10-item scale was based on Erikson's descriptions of behaviors and attitudes characteristic of the two alternate solutions to the final stage of development: ego integrity or despair. The internal reliabilities for the sample by Walaskay and colleagues (1983-1984) ($N = 40$) were .68, .46, and .76. Tesch (1985), in a study of 79 adults (age range 22-67, $M = 42, SD = 13$), also used the 10-item Ego Integrity Subscale and evaluated the internal consistency of the subscale by calculating Chronbach's

alpha coefficient to be correlated with the Life Satisfaction Index A (LSIA) ($r = .51$ for men, $p < .01$, and $r = .56$ for women, $p < .001$). The Adult Ego Development Scale used in the Walaskay et al. study (1983-1984) discriminated significantly ($p < .05$) between subjects who had achieved ego integrity and those who were in despair.

The Templer Death Anxiety Scale was devised in 1969 by Donald I. Templer to measure the amount of death anxiety an individual is experiencing. In a test-retest administration of the DAS three weeks apart, a product-moment correlation coefficient of .83 was obtained. A coefficient of .76 (Kuder-Richardson Formula 20) demonstrated reasonable internal consistency with 31 subjects. Templer (1971) included the DAS in a battery of instruments sent in a mail survey to 250 retired persons. The mean age of the 75 respondents was 69.7 years, with an age range between 51 and 92 years. The mean DAS score for this sample was 4.25, which is considerably lower than that for any other groups for whom data have been reported. One nursing home sample had a mean score of 4.08 (Nehrke et al., 1977-1978). There were significant but moderate to low correlations between DAS scores on the D, the depression scale of the MMPI ($r = .28$), as well as the psychiatric ($r = .54$) and total ($r = .34$) assessment scores for the Cornell Medical Index.

The Death Preparation Scale was devised by Walaskay and colleagues (1983-1984) for their study of the construction and validation of an ego integrity status interview. It measures the extent of preparations an older adult has made for disposable goods, financial resources, and final arrangements for their death. Marshall (1982) recommended the use of the Death Preparation Scale with the Templer Death Anxiety Scale in order to control for the preoccupation with death.

The three scores of the Life Review Questionnaire assess different aspects of the construct "life review." Score 1 assesses the percentage of decades of one's life for which events are remembered. Score 2 measures the percentage of decades of one's life for which memories contain some guilt, remorse, or regrets. Score 3 assesses the percentage of decades of one's life about which the subject feels he or she has worked through, or have come to terms.

DISCUSSION

Life Review and Ego Integrity

The first hypothesis, that on controlling for age and sex there will be a positive relationship between life review and ego integrity in older persons, was not supported. A significant negative correlation was found to exist between the amount of life review done and ego integrity (see Table 1). This finding was inconsistent with the findings of Boylin and colleagues (1976), who found a positive correlation of frequency of reminiscence and scores on the ego integrity subscale ($r = .41$, $p = .05$). These authors looked at the frequency of remembered events, however, whereas the present study looked at the percentage of one's past

TABLE 1. Partial Correlation Coefficients: Life Review with Ego Integrity and Death Anxiety

	Ego Integrity	Death Anxiety
% Decades remembered	-.254** ^b	-.072
% Decades having shame, guilt, remorse, or regret	-.309** ^b	-.091
% Decades worked through	-.217* ^b	-.189*

^a*df* = 79

^bOpposite direction predicted.

p* < .05 *p* .01.

remembered. It is the investigator's view that the amount of the life cycle that is covered may be a more revealing indication of the amount of life review than the frequency of events that are remembered. For example, a person might remember many events from a single decade, but neither recall many events from nor achieve solution of conflicts occurring in other decades.

Boylin and colleagues (1976) also found that reminiscing accompanied by negative affect positively correlated with ego integrity ($r = .45, p < .005$). The presence of negative affect in connection with remembered events may correspond to Score 2 in the Life Review Questionnaire. That is, it may correspond to the percentage, of decades in which memories evoked are shame, guilt, remorse, or regrets. Also it is possible the frequency of remembered events may be a measure of an entirely different concept from the percentage of decades remembered. Perhaps in future testing of the Life Review instrument the frequency of remembered events should be measured so as to assess this possibility.

The Life Review Questionnaire was designed to focus on negative emotions only—a measure that memories associated with these feelings are the hardest to let go. It was further reasoned that the more one remembers and the more negative emotions one remembers (even thinking that one has come to terms with, or worked through, those feelings), the lower the ego integrity, because the emphasis is on the past. Only when we can let the past go are we in what Erikson describes as a state of ego integrity. Nevertheless, the focus on negative emotions only, rather than on frequency of events as measured in the Havighurst and Glasser instrument, may be a shortcoming of the Life Review Questionnaire.

Many investigators (Tesch, 1985; Woods & Witte, 1981) have had difficulty with empirically operationalizing Erikson's theory. Recently, Ruff (1982) noted that investigators have not adequately studied the predictive validity of Erikson's theory as a model of successful aging. The ego integrity versus despair subscale contains only 10 items, arranged in a Likert Scale. Tesch (1985) recently performed an item analysis on the ego integrity versus despair subscale and found that two items on the despair subscale did not correlate with total scores. Tesch also found one item each from the stagnation and isolation subscales not to be correlated with total scores.

Several subjects in this investigation submitted written objections to the Likert Scale format, stating that they had found it confusing. In addition, not all questionnaires were fully completed, which accounts for the varying degrees of freedom in the correlations. Boylin et al., (1976) used a three-part scale with this questionnaire and the responses "rarely," "occasionally," or "often," which was probably less confusing for their subjects, institutionalized veterans. Since the scale has been used in only three studies, the investigator was reluctant to change the last published format for this present study. In the reliability checks run in the present study on the three subscales of the Adult Ego-Development Scale, all three negatively balanced subscales—despair, stagnation, and isolation—were found to have low alpha coefficients (.385, .177, .225), in contrast with the total score (.808). Perhaps the scale does not measure accurately Erikson's formulations of what constitutes ego integrity.

The lack of a positive correlation between life review and ego integrity may have had to do with the data collection procedure. In the Boylin et al. (1976) study, the questions were read to the subjects and the responses were recorded by the interviewer, rather than the subjects answering the questions independently, as was the case for some in the present study.

The older persons in this study were found to be less ego integral, less generative, less intimate, more anxious, and less prepared for death than previous populations studied (see Table 2). Prior data on the percentage of decades remembered, thought about by oneself, and discussed with others, and the amount of negative emotions felt or worked through about past events have not been reported.

Ego integrity—the ability to put the past in perspective, live in the present, and not fear the future—is an important attribute in older adults. In a normal, healthy population living in their own homes, one would expect to find a higher degree of ego integrity than in a population living in institutions or in public housing, due to better economic or health status. One would also expect to find less death anxiety in the former population than the latter. This expectation, however, was not supported in either this investigation or in previous research.

Nehrke and colleagues (1977-1978) found a death anxiety mean score of 4.08 in a nursing home sample. Nehrke (1974) found a mean of 4.28 for a retired sample. Perhaps because of the increased contact and supports given an older adult who is participating at a senior citizen center nutrition program, as in the Walaskay et al. (1983-1984) sample, a subject felt better able to place life in perspective, to be

TABLE 2. Data on Instruments

Instrument	<i>M</i>	<i>SD</i>	Range
Adult Ego-Development Scale			
Ego integrity vs. despair	9.135	8.433	-18-+29
Generativity vs. stagnation	7.171	7.582	-24+22
Intimacy vs. isolation	8.486	8.404	-24-+24
Death Anxiety Scale	6.278	3.434	0-15
Death Preparation Scale	25.202	6.968	10-40

creative and intimate, and to feel less anxiety about death. Older adults living at home have not necessarily progressed further in these respects than persons who have reached out for services, or those who have faced the crisis of institutionalization.

Life Review and Death Anxiety

The second hypothesis—that controlling for age and sex, there will be a negative relationship between life review and death anxiety in older persons—was partially supported. One of the three scores obtained on the Life Review Questionnaire showed the hypothesized relationship. Controlling for age and sex, the partial correlations among the amount of life review done, Score 1 (percentage of decades remembered), Score 2 (percentage of decades during which subjects reported having felt shame, guilt, remorse, or regrets), Score 3 (percentage of decades worked through), and death anxiety were $r = -.072, p < .263$; $r = -.091, p < .210$; $r = -.190, p < .045$ in the hypothesized direction, respectively.

This finding suggests that the more an older adult feels he or she has worked through to come to terms with the negative feelings of remembered events, the lower his or her death anxiety. The percentage of decades in which negative feelings were remembered about those events was not significantly related to the level of death anxiety in this study. However, the higher the percentage of decades remembered by subjects, the greater the amount of death preoccupation or preparation was found ($p < .043$). Perhaps a function of remembering events from one's past is to prepare oneself for death. This finding suggests that life review does have a functional value in facing one's inevitable death. This is consistent with Butler's (1963) ideas. Butler theorized that reviewing one's life and coming to terms with the memories of the events of one's life would make an older person more accepting of his or her inevitable death. Erikson (1963) has also theorized that the acceptance of one's life as the only life one could have lived would result in less fear of one's own death. Boylin and colleagues (1976) suggested that the greater the amount of life review, the less death anxiety could be expected. It seems plausible to infer that the more accepting one is of the events of the past, the less anxious one is about one's future death.

A related finding was that women were more death anxious than men. This finding is consistent with the literature (Templer, 1971).

Ego Integrity and Death Anxiety

The third hypothesis, that on controlling for age and sex, the higher the level of ego integrity, the lower is the level of death anxiety in older adults, was supported. The partial correlation coefficient between ego integrity and death anxiety was $r = -.198, p = .039$ in the hypothesized direction. As anticipated, those persons who had achieved ego integrity and put life in perspective were less anxious about their own and other's deaths. All these findings are consistent with the literature (Butler,

own and other's deaths. All these findings are consistent with the literature (Butler, 1963; Erikson, 1963; Walaskay et al., 1983-1984). To face the future without fear, one has to let go of the past and to live in the present. In succeeding at this, one achieves what Erikson has described as ego integrity.

Related Information and the Major Variables

Age, sex, education, marital status, health, current illness, and religious observance have been related to the major variables in this study. Accordingly, these were examined in turn, with the following results:

Age. Although controlling for age did not change the correlations significantly, some findings indicated that the older the subject, the more negative the scores on ego integrity. As one ages and reaches one's nineties, perhaps the fear of disability, illness, and impending death leaves one less able to put one's life in perspective. Although this study dealt with elderly people presumed to be well, the older subjects tested may have been experiencing some physical and psychological deficits. Also, it is possible that people age 75 and over need to conduct their life review individually, rather than in groups, as Haight and Bahr have recommended (1984).

Education. Education was related both to the percentage of decades subjects reported thinking about on their own and to a lower death anxiety score. In general, the gerontological literature (Boylin et al., 1976; Havighurst & Glasser, 1972) suggests that the more education one has, the greater the introspection one may display and the better one's adjustment to old age and death.

Marital status. Surprisingly, married subjects were lower in ego integrity ($p = .016$) and intimacy ($p = .019$) than nonmarried subjects. Perhaps having faced losing a spouse or never marrying strengthens one's life perspective. When older adults are married and still facing the possibility of losing a spouse, they may feel less able to put their lives in perspective. The most recent sociological literature states that married subjects appear to be less adjusted than those who are unmarried. Kerr (1987) reports that role strain associated with marriage emerges as a major stressor related to depression for both men and women. Gove (1972), in studying the rates of mental illness in men and women, found higher rates in mental illness among married women than among those unmarried. Women regard the retirement of a spouse as one of the most difficult times in their lives (Troll, 1982). Furthermore, the average married woman cares for a sick spouse for several years before his death (Bengston & Haber, 1975). This period may be too draining to be experienced as one in which the spouse was supportive.

Health. The better the health reported by the subjects, the less negative their emotions about past events. This finding corroborates the findings of the Lieberman and Falk (1971) study. The group that reported having current illnesses had more negative emotions about past events in their lives than the group that reported no illnesses. This finding is consistent with Lieberman and Falk's (1971) determination that current stress increases the tendency to remember one's life negatively and suggests that this behavior may indeed be anticipatory grieving.

Religion. The religiously observant were significantly higher in ego integrity than the non-observant ($p = .032$). This finding is consistent with the literature (Templer, 1972). It also has been noted that half of the elderly persons questioned choose clergy rather than other professionals when seeking counseling, if they seek it at all (Kalish, 1979). Many receive adequate support through the religious triad: their churches, clergy, and religious faith.

Subjects who practiced their religion thought less by themselves about decades of their lives ($p = .011$). Religion encourages us to confide in a spiritual leader and to participate in community events. The religiously observant subjects scored higher in generativity ($p = .005$) and in intimacy ($p = .008$) and were more prepared for death ($p = .004$) than those who did not observe. The practice of religion generally encourages one to try to be more generative, more intimate, and better prepared for death.

Implications

The results of this study support the position that the greater the amount of life review an older person has done, the lower his or her level of death anxiety. Thus, in working with older clients to reduce their death anxiety it may be advantageous for clinicians to use life review as a treatment modality either individually, in groups, or in a family context. Another factor found to be related to death anxiety was ego integrity. The lower the level of death anxiety, the higher the level of ego integrity. This finding supports the position of using life review to reduce the amount of death anxiety exhibited by older adults. In working with clients to achieve lower death anxiety, it may be helpful for clinicians to assess the amount of life review a client has done, his or her level of ego integrity, and his or her level of death anxiety. Because preparation for death and death anxiety were found to be negatively related, perhaps helping adults to prepare for their eventual death is another way of reducing their death anxiety.

In view of the apparent predilection of the aged for religious supports, nurses might work to learn more about the importance to the elderly of their religious faith and to encourage its use in stressful times. Efforts to collaborate with clergy may be productive, as well.

In engaging in life review, it appears that lowered death anxiety is not simply a function of remembered decades or negative emotions; rather, it is a function of how many remembered events with which one has come to terms. In conducting a life review with clients either individually or in groups, the clinician ideally would try to cover as many unresolved conflicts in a client's memory as is feasible.

With regard to implications for future research, more testing of the Life Review Questionnaire is needed. Interviews with older adults living in different environments (retirement villages, senior citizen housing, nutrition sites, and nursing homes) should be used to assess the impact of environment on life review, death anxiety, and ego integrity.

REFERENCES

- Bengston, V., & Haber, D. S. (1975). Sociological approaches to aging. In D. S. Woodruff & J. E. Birren (Eds.), *Aging: Scientific perspectives and social issues* (pp. 70-91). New York: The Van Nostrand Co.
- Boylin, W., Gordon, S. K., & Nehrke, M. F. (1976). Reminiscing and ego integrity in institutionalized males. *Gerontologist*, *16*(2), 118-124.
- Butler, R. N. (1963). The life review: An interpretation of reminiscence in the aged. *Psychiatry*, *26*, 65-76.
- Butler, R. N., & Lewis, M. (1982). *Aging and mental health* (3rd ed.). St. Louis: C. V. Mosby Company.
- Cohen, J., & Cohen, B. (1975). *Applied multiple regression/correlational analysis for the behavioral sciences*. New York: John Wiley and Sons.
- Coleman, P. G. (1974). Measuring reminiscence characteristics from conversation and adaptive features of old age. *International Journal of Human Development*, *5*, 281-294.
- Connolly, P. M. (1984). *The effects of group life review therapy on the ego integrity of the elderly*. Unpublished manuscript.
- Erikson, E. H. (1985). *Childhood and society*. New York: W. W. Norton.
- Fishman, S. (1988). An investigation to determine the relationships among an older adult's life review, ego integrity, and death anxiety. *Dissertation Abstracts International* (University Microfilms No. 8825228)
- Fishman, S. A construct and validity check of the life review questionnaire. (In press)
- Georgemiller, R. J. (1982). Group life review therapy with older adults. *Dissertation Abstracts International* (University Microfilms No. 8217691)
- Gove, W. R. (1972). The relationship between sex roles, marital status, and mental illness. *Social Forces*, *51*, 34-44.
- Haight, B. K., & Bahr, R. T. (1984). The therapeutic role of the life review in the elderly. *Academic Psychology Bulletin*, *6*(B), 287-299.
- Havighurst, R. J., & Glasser, R. (1972). An exploratory study of reminiscence. *Journal of Gerontology*, *27*, 253-254.
- Kahana, R. J., & Levin, S. (Eds.). (1967). *Psychodynamic studies on aging, creativity, reminiscing, and dying*. New York: International Universities Press.
- Kalish, R. (1979, Spring). The religious triad: Church, clergy, and faith in the resources network. *Generations*, *3*(4), 27-28.
- Kerr, N. J. (1987). Patterns of depression. In J. Haber, P. P. Hoskins, A. M. Leach, & B. F. Sideleau (Eds.), *Comprehensive psychiatric nursing* (3rd ed.) (pp.647-679). New York: McGraw Hill.
- Lieberman, M. A., & Falk, J. M. (1971). The remembered past as a source of data for research on the life cycle. *Human Development*, *14*(2), 132-141.
- Marshall, V. W. (1974). The life review as a social process (Abstract). *The Gerontologist*, *14*, 69.
- Marshall, V. W. (1982). Death and dying. In D. J. Mangen & W. A. Peterson (Eds.), *Research instruments in social gerontology: Vol. 1. Social Psychology* (pp. 303-381). Minneapolis, MN: University of Minnesota Press.
- Nehrke, M. F. (1974). *Actual and perceived attitudes towards death and self-concept in two generational families*. Paper presented at the meeting of the 27th Annual Gerontology Society, Portland, OR.

- Nehrke, M. F., Bellucci, G., & Gabriel, S. J. (1977-1978). Death anxiety, locus of control, and life satisfaction in the elderly: Towards a definition of ego integrity. *Omega*, 6, (2), 171-178.
- Ruff, C. D. (1982). Successful aging: A developmental approach. *Gerontologist*, 22, 209-214.
- Templer, D. I. (1969). Death Anxiety Scale. *Proceedings of the 77th Annual Convention of the American Psychiatric Association*, 4, 737-739.
- Templer, D. I. (1971). Death Anxiety as related to depression and health of retired persons. *Journal of Gerontology*, 4, 521-523 (a).
- Templer, D. I. (1972). Death anxiety in religiously very involved persons. *Psychological Reports*, 31, 361-362.
- Templer, D. I., Ruff, C. F., & Franks, C. M. (1971). Death Anxiety: Age, sex & parental resemblance in diverse populations. *Developmental Psychology*, 4(1), 108.
- Tesch, S. (1985). Psychological development and subjective well-being in an age cross-section of adults. *International Journal of Aging and Human Development*, 21, 109-120.
- Troll, L. E. (1982). *Continuations: Adult development and aging*. Monterey, CA: Brooks/Cole Publishing Co.
- Walaskay, M., Whitbourne, S. K., & Nehrke, M. F. (1983- 1984). Construction and validation of an ego integrity status interview. *International Journal of Aging and Human Development*, 18(1), 61-72.
- Woods, N., & Witte, K. L. (1981). Life satisfaction, fear of death, and ego identity in elderly adults. *Bulletin of the Psychonomic Society*, 18(4), 165-168.
- Whitbourne, S. (1980), personal communication.

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