Are Older Adult German Women Satisfied with Their Lives?

On the Role of Life Domains, Partnership Status, and Self-Construal

Isabelle Albert¹, Katrin Labs², and Gisela Trommsdorff²

¹University of Luxembourg, Luxembourg, ²University of Konstanz, Germany

Abstract. Along with increased life expectancy, successful aging and possibilities for increasing well-being in old age have become important research topics in recent years. The present study (a) examines the relationship between satisfaction in several life domains (with respect to family, friendships, and health) and general life satisfaction of older adult women in Germany, and (b) determines which factors moderate the importance of satisfaction in these different life domains for the evaluation of general life satisfaction. More precisely, we examine the role of partnership status and self-construal. The sample consisted of 98 German women between the age of 58 and 83 years ($M = 69.6$ years; $SD = 5.9$ years) who were interviewed in the framework of the interdisciplinary and cross-cultural Value of Children Study. Results showed that for women living with a partner, satisfaction with family was most important for their general life satisfaction; whereas for women without a partner, satisfaction with friendships and with socioeconomic status had prominent roles. In addition, the kind of self-construal moderated the relations between (1) satisfaction with family and general life satisfaction and (2) satisfaction with health and general life satisfaction. Family satisfaction was less important for the general life satisfaction of women who were highly independently oriented; for women who had a strongly pronounced self-construal (either independent or interdependent), satisfaction with health was less important for general life satisfaction.

Keywords: independence, interdependence, life domains, life satisfaction, older adult women, self-construal

Introduction

The study of subjective well-being in the context of aging has become an important research topic in recent years. Along with increased life expectancy, successful aging and possibilities for increasing well-being in old age and the associated policy implications are studied (e.g., Baltes & Smith, 2003; Bowling & Dieppe, 2008; Easterlin, 2003; Schulz & Heckhausen, 1996).

Subjective well-being has often been referred to as an umbrella term (Ferring & Filipp, 1997; Veenhoven, 2000). *Satisfaction with life* can be seen as the cognitive component of subjective well-being and the result of the subjective evaluation of one's own life; this definition refers to cognitive judgmental processes that compare achievements and aspirations of an individual. Accordingly, a dynamic adaptation of one's life satisfaction is possible by changing the actual life circumstances ("is") or the personal standard ("ought") (Diener, 1984). Other aspects such as happiness or positive and negative emotions refer to affective components of subjective well-being (Diener, Suh, Lucas, & Smith, 1999; Ferring & Filipp, 1997). A related concept is

quality of life, including both subjective and objective living conditions (e.g., Chappell, 1991; Veenhoven, 2000).

Because aging is typically associated with multiple losses such as the death of a partner or close friends, or with poor health, early researchers supposed that well-being is reduced in older age (e.g., Wilson, 1967). However, the individual's subjective perception may diverge from the objective reality (Kahneman & Krueger, 2006). Cross-sectional studies have not provided clear evidence for differences between younger and older persons regarding their subjective well-being ("aging paradox") (e.g., Diener et al., 1999; Ferring et al., 2004; Kunzmann, Little, & Smith, 2000; Pinquart, 1997).

In psychological research, researchers identified a multitude of factors that influence subjective well-being either directly or indirectly as intervening factors and regulative mechanisms (e.g., Brandtstädter & Renner, 1990; Chappell, 1991; Ferring & Hoffmann, 2007; Heyl, Wahl, & Mollenkopf, 2007; Trommsdorff, 2009). These factors do not exist independently from each other. Further, the interaction of environmental, social, and psychological factors over the lifespan has to be taken into account (Caspi & Elder, 1986).

In the present study, we address the importance of satisfaction in different life domains for general life satisfaction and consider the role of partnership status and self-construal for older adult women in Germany.

General Life Satisfaction and Life Domains

One can distinguish between general life satisfaction and satisfaction with specific life domains (e.g., Argyle & Martin, 1991; Diener & Diener, 1995; Ferring et al., 2004). The bottom-up/top-down controversy deals with the question of causal direction (e.g., Headey, Veenhoven, & Wearing, 1991). According to the *bottom-up model*, individuals' evaluations of their current life constellations are the source of their satisfaction with life domains, which contributes to general life satisfaction. According to the *top-down model*, individuals tend to have a particular means of evaluating experiences: General life satisfaction is seen as a trait-like basis for satisfaction with specific life domains and not as their result. As Schwarz and Strack (1991) state, the assessment of one's satisfaction in single life domains might be data-driven (i.e., bottom-up), because information about single life domains that is needed for inter- and intraindividual comparison processes is rather easily available. The evaluation of general life satisfaction constitutes a more complex task, as many different dimensions have to be included and integrated in the judgmental process. Therefore, the assessment of general life satisfaction might be more concept-driven (i.e., top-down) and be influenced by judgment heuristics. Both bottom-up and top-down models have found empirical support and both processes may work together over time (e.g., Scherpenzeel & Saris, 1996; Schimmack, 2008).

The following focuses on those life domains that are considered in the present study, namely, social relations (with partners, friends, and family) and health.

Social relationships represent an important life domain related to life satisfaction because significant others provide social support, give material help, share leisure time activities, and provide company (Adams, 1971; Larson, Mannell, & Zuzanek, 1986). As proposed in socioemotional selectivity theory, as people age, their social networks are often reduced. It is assumed that older people concentrate more on existing relationships, which they try to improve in quality; thus, social relationships within the closer network remain highly important in older age (Carstensen, Isaacowitz, & Charles, 1999). Different network members serve different functions in the well-being of older people (e.g., Procidano & Heller, 1983). In the following sections, we focus on the roles of partners, family, and friends as close social network agents in the regulation of well-being in older adults.

Both marriage and living with a partner are positively related with life satisfaction (Connidis, 2001; Diener, Gohm, Suh, & Oishi, 2000; Larson, 1978; Wilson, 1967). People who lose their partner or split up often successfully

adapt to widowhood or divorce to some extent, but they may suffer more from loneliness or a lack of social support than do people who still have a partner (Diener & Diener McGavran, 2008). Regarding the quality of partnership, Headey et al. (1991) found an effect of marital satisfaction on general life satisfaction in their longitudinal study. However, in a top-down perspective, people who are more satisfied in general should also have more satisfying relations with their partners (Diener et al., 1999).

The family is generally – and in very different cultural contexts – a place of close bonding, emotional benefit, and functional support (e.g., Bengtson, 2001; Schwarz, Trommsdorff, Kim, & Park, 2006; Trommsdorff, 2006). Older people have to cope with the loss of their close friends and relatives of their age. Thus, their relationships with family members such as children and grandchildren become even more vital (Trommsdorff & Schwarz, 2007). Older parents may feel an increasing dependence on the support of family members. Apart from their spouse, children are the most important providers of family care in old age (Connidis, 2001). On the other hand, support provided by older parents to adult children can give them a sense of purpose in life and self-esteem (Schwarz et al., in press). Further, older people have certain expectations for the future of their offspring and their children's achievements may be another source of family satisfaction (Efklides, Kalaitzidou, & Chankin, 2003). Accordingly, satisfaction with family relations and with family members might influence older persons' life satisfaction (Diener & Diener McGavran, 2008; Schwarz, Trommsdorff, Albert, & Mayer, 2005; Schwarz et al., in press).

Relationships with friends have often been described as less strong than those with family members (such as children) (Chappell, 1991; Diener & Diener McGavran, 2008). However, close friends are important members of individuals' social networks over their lifespan and often gain importance with increasing age as children start having their own families and spend less time with their parents. Friends can provide support and serve as confidants and are especially important for the experience of positive affect and immediate well-being by providing enjoyment during activities and leisure time (Larson et al., 1986; Reinhardt & Fisher, 1989). In older age, the number of contacts with friends seems to be even more related with life satisfaction than contact frequency with family members (Pinquart & Sörensen, 2000).

Apart from the social domain, the life domain of health is of prime importance for older people as health problems generally increase with age (Molarius & Janson, 2002). Old age has often been regarded as being related to a decline in life satisfaction due to reduced health. However, although adaptation to impaired health conditions varies across individuals, studies on different age groups have shown that people usually adapt to a certain degree to a reduced health status and, after an initial decline, often return to their previous level of life satisfaction (see Die-

ner et al., 1999). Altogether, satisfaction with health in terms of the subjective appraisal and interpretation of the objective health status might thus have a greater impact on general life satisfaction than objective health status per se (Smith, Borchelt, Maier, & Jopp, 2002). Yet, impaired health may impede social contacts. Social relations seem to be most gratifying for persons who do not have difficulties in daily activities, compared with persons whose social contact is primarily related to their need for care (Lang & Baltes, 1997).

The same holds true for the influence of economic status on life satisfaction: Subjective appraisals seem to be more important than objective material wealth, although adverse material conditions may reduce subjective well-being by impairing living conditions (e.g., Kahneman, Krueger, Schkade, Schwarz, & Stone, 2006; Veenhoven, 2000). Empirical studies on the relation between material wealth and subjective well-being have documented moderate, curvilinear correlations that are stronger at lower economic levels (Biswas-Diener, 2008).

Self-Construal and Life Satisfaction

As Diener and others argued, culturally based values such as an individualistic or collectivistic orientation affect the impact of different factors on life satisfaction and well-being (e.g., Diener & Diener, 1995; see also Kornadt, 2009; Suh et al., 1998; Trommsdorff, 2009). Diener and colleagues (e.g., Diener & Diener, 1995) stated that in individualistic societies, personal feelings influence evaluations of life satisfaction, whereas in collectivist societies, people evaluate their life satisfaction in relation to society, family, or friends. Such cultural differences are explained partly by different self-construals which roughly correspond to cultural values on the individual level. *Self-construal* can be described as a system of thoughts, feelings, and actions regarding the self and the role of others (Markus & Kitayama, 1991). Markus and Kitayama differentiated between two types of self-construal: *Independent self-construal*, typical of Western cultures, is based on the norm of being unique and autonomous, focusing on personal characteristics distinct from others; *interdependent self-construal*, predominantly found in Eastern cultures, is connected with the social context based on the norm of mutual reliance and connectedness with others, stressing the relational aspects of the self. Thus, an interdependent person defines him- or herself through close relationships, and the development and maintenance of these relationships are consequently major goals (Cross & Morris, 2003). Singelis (1994) assumed that the individual's self is characterized by both independent and interdependent aspects. Depending on the self-construal, different life domains might be more central for individuals, and individuals take different information into account when evaluating their overall life satisfaction (Diener et al., 1999; Mollenkopf & Kaspar, 2005; Suh et al., 2008). Recent findings by Suh, Diener,

and Updegraff (2008) indicate that persons characterized by a higher salience of independent self-aspects take information about their own affective status into account when they evaluate their overall life satisfaction. In contrast, persons who view themselves in relational terms also consider social information in evaluating their lives. This result occurred when individual differences in independent and interdependent self-construals were examined in a U.S. sample and also when the salience of different self-construal aspects was manipulated in an experimental design comparing a collectivist country (Korea) with an individualistic context (United States).

The differential importance of different life domains for life satisfaction depends on relational aspects of self (Yeung & Fung, 2007). In a study on older Hong Kong Chinese individuals, Yeung and Fung found that those who scored higher on familism showed a higher relation between instrumental support of family members and life satisfaction. A study in Greece further showed that for presumably interdependently oriented participants, satisfaction with family and generativity were most important for their well-being (Efklides et al., 2003).

Depending on the self-construal, the salience of single life domains should thus differ between individuals: For interdependent persons, satisfaction with their families is presumably highly correlated to their general life satisfaction whereas for independent persons, the family presumably plays a less prominent role. For the latter, other aspects such as health status might be more important when evaluating their general life satisfaction.

Aims of the Study

Our first aim was to examine the relationships between older women's satisfaction with different life domains (family, friendships, and health) and their general life satisfaction. More precisely, we addressed the relative impact of satisfaction in these different life domains on general life satisfaction. The relationships between partnership and life satisfaction have often been documented in earlier studies. Here, we presume that marital status plays an important role with respect to the value attributed to single life domains. Similarly, Reinhardt and Fisher (1989) reported that relationships with social network members such as children and friends were more important for the well-being of widowed compared with nonwidowed women. This may indicate compensatory adaptive efforts of widowed women: They may try to optimize their relations with close family members and friends in order to compensate for partner loss (Baltes & Carstensen, 1996). To account for these differences, we studied the relative importance of single life domains for general life satisfaction (1) for the whole sample and (2) separately for women with and without a partner. Here, marital status serves as a proxy for women's life situation, covering different regulative strategies of widowed and nonwidowed persons.

Table 1: Range, means, standard deviations, and subgroup differences between measures

		Full sample (<i>n</i> = 98)	With partner (<i>n</i> = 54)	Without partner (<i>n</i> = 44)	Subgroup differences
	Range	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)	<i>t</i> (<i>df</i>)
General life satisfaction	2–5	4.28 (0.67)	4.31 (0.64)	4.23 (0.71)	0.64 (96)
Satisfaction with family	3–5	4.44 (0.63)	4.44 (0.60)	4.44 (0.67)	0.02 (95)
Satisfaction with friends	3–5	4.15 (0.62)	4.17 (0.62)	4.11 (0.62)	0.47 (94)
Satisfaction with health	1–5	3.61 (0.85)	3.65 (0.80)	3.57 (0.90)	0.46 (96)
Satisfaction with partner	3–5	–	4.49 (0.58)	–	–
Independence	2.6–4.8	3.93 (0.46)	3.91 (0.50)	3.96 (0.41)	0.49 (96)
Interdependence	3–5	4.24 (0.43)	4.31 (0.41)	4.17 (0.44)	1.62 (96)

If we combine bottom-up and top-down models of life satisfaction, different self-construals emerge within the person as trait-like aspects that moderate (top-down) the degree to which satisfaction with different life domains influences general life satisfaction (bottom-up). In a judgment-theoretical approach, evaluations of general life satisfaction are thus estimated “top” to “down” since self-construals are used to form a comparatively “parsimonious” judgment, taking only information about personally important domains into account. Based on these assumptions, the second aim of the study was to analyze whether aspects of the self-construal, namely, independence and interdependence, moderate the relationship between satisfaction in single life domains and general life satisfaction (i.e., contribute to different importance of single life domains for general life satisfaction).

Method

Sample

The hypotheses were tested using the data of *N* = 98 German grandmothers who participated in the crosscultural “Value of Children and Intergenerational Relations” study (Trommsdorff & Nauck, 2005; Trommsdorff, Kim, & Nauck, 2005), in which family members of three generations (adolescents, their mothers, and the maternal grandmothers) participated. The maternal grandmothers were contacted via their adult daughters, who also took part in the study, and who had been recruited through residents’ registration offices. About one-third of the respondents lived in Chemnitz (a middle-sized town in Eastern Germany), one-third lived in Konstanz (a middle-sized town in Southern Germany), and one-third in Essen (a larger city from an urbanized industrialized area in Northwestern Germany; see Mayer, Albert, Trommsdorff, & Schwarz, 2005).

Participants were interviewed individually in their homes by trained female interviewers in a standardized face-to-face interview. The interviews lasted between 1 h

and 1.5 h. The respondents received a small gift at the end of the interview.

Participants were between 58 and 83 years old (*M* = 69.6 years; *SD* = 5.9 years). On average, participants reported having had 9 years (*SD* = 1.9 years) of schooling. Altogether, 14 older women were still gainfully employed, and 9 women reported doing unpaid work outside the household. 54% were married (for three not the first marriage), 39% were widowed, and 7% were divorced. Two of those widowed or divorced had a new partner. Thus, altogether *n* = 54 women in the present sample had a partner, and *n* = 44 women were without a partner. On average, the women had given birth to 2.88 (*SD* = 1.52) children. They were grandmothers of at least one adolescent grandchild (*M* = 4.84, *SD* = 3.48, range = 1–17). Their average household size was 1.7 (*SD* = 0.7). Most women considered themselves to have a midlevel socioeconomic status compared to others living in their country, as rated on a 5-point Likert scale (1 = low, 5 = upper); women with and without a partner did not differ in their appraisals (*t*(95) = 1.33, *ns*).

Measures

General Life Satisfaction and Satisfaction with Life Domains

Satisfaction in the different life domains (family, friends, and health) was assessed with one item each (see Henrich & Herschbach, 1995). Women who still had a partner also rated their satisfaction with partnership. General life satisfaction was measured with the item “All things considered, how satisfied are you with life as a whole these days?” (Diener et al., 2000; see also Schilling, 2006; Veenhoven, 1996). Items were rated on a 5-point Likert-scale ranging from 1 (*very unsatisfied*) to 5 (*very satisfied*). Range, means, and standard deviations for the full sample and for the two subsamples of women with and without a partner are given in Table 1. Differences in satisfaction ratings between participants with and without a partner were not significant.

Table 2. Intercorrelations between measures of satisfaction and self-construal ($N = 98$)

	1	2	3	4	5	6	7
1. General life satisfaction	—	.38**	.31**	.26**	.39**	-.11	.05
2. Satisfaction with family		—	.29**	.23*	.56**	-.11	.25*
3. Satisfaction with friends			—	.32**	.21	.10	.18
4. Satisfaction with health				—	-.05	.01	.03
5. Satisfaction with partner ¹					—	-.24	.20
6. Independence						—	.34**
7. Interdependence							—

Note. ¹ $n = 54$. * $p < .05$. ** $p < .01$.

Independent and Interdependent Self-construal

Self-construal was measured on the two dimensions of independence and interdependence with five items each from the Self-Construal Scale by Singelis (1994). Items were rated on a 5-point Likert scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Wordings of items of the original self-construal scale were modified to refer to one's family instead of social groups in general. The interdependence scale (e.g., "It is important to me to respect decisions made by my family") had a good internal consistency of $\alpha = .77$. The independence scale (e.g., "I enjoy being unique and different from family members in many respects") had a lower internal consistency of $\alpha = .60$. Both scales were significantly correlated with $r = .34$, $p < .01$.

Both independence and interdependence as self-aspects were on average highly pronounced by the participants and did not differ significantly between participants with and without a partner (see Table 1). Intercorrelations of all measures are given in Table 2.

Results

Prediction of General Life Satisfaction

We carried out regression analyses to determine the relative impact of satisfaction in the life domains of family, friends, and health on general life satisfaction; sociodemographic variables such as age, educational level, socioeconomic status, and living with or without a partner (coded as a dummy variable) were controlled for in the regression analyses. We first ran these analyses for the whole sample and in a next step carried them out separately for married and widowed/nonmarried women.

The model for the full sample was significant, $F(7, 89) = 4.43$, $p < .01$, and explained 28% of the variance in general

life satisfaction. Among the sociodemographic aspects, only socioeconomic status had a significant positive effect on general life satisfaction ($\beta = .29$, $p < .01$). Regarding life domains, satisfaction with family was most important in predicting general life satisfaction ($\beta = .27$, $p < .01$); the other domains were not significant ($\beta = .20$, $p < .10$, for satisfaction with friendships; $\beta = .10$, *ns*, for satisfaction with health).

Next, we repeated the regression analyses separately for women with and without a partner. For women with a partner, only satisfaction with family was a significant predictor of general life satisfaction ($\beta = .49$, $p < .01$). When satisfaction with one's partner was added to the regression, the relationship between family satisfaction and general life satisfaction was reduced to $\beta = .35$, $p < .05$; however, satisfaction with one's partner itself did not significantly predict general life satisfaction ($\beta = .24$, *ns*), nor did satisfaction with friendships ($\beta = .04$, *ns*) or satisfaction with health ($\beta = .17$, *ns*). For people without a partner, only satisfaction with friends ($\beta = .52$, $p < .01$) and socioeconomic status ($\beta = .40$, $p < .05$) were significant predictors of general life satisfaction; the predictive values of the other two life domains were close to zero.

Moderating Effect of Self-Construal

We then tested the moderating effects of independent and interdependent aspects of self-construal for the relationship between domain satisfaction and general life satisfaction using several hierarchical regression analyses for the full sample following the suggestions of Cohen, Cohen, West, and Aiken (2003; see also Jaccard & Turrisi, 2003). Again, in the first step, we introduced sociodemographic aspects as control variables. In a second step, we added satisfaction with one of the three life domains (family, friends, or health) as predictor and one of the two self-construal variables (independent self or interdependent self) as moderator to the regression to predict general life satisfaction. The interaction term of satisfaction with the respective life domain (predictor) and self-construal (moderator) was added in the third step; thus, this last step included control variables, the respective predictor and moderator variables, as well as their interaction term. All variables were z -standardized before the interaction term was composed. Results showed a significant interaction between satisfaction with family and independent self-construal, $\Delta R^2 = .08$; $F_{\text{change}}(1, 83) = 9.74$; $B = -.31$, $p < .01$ (see Table 3).

We applied posthoc plotting procedures to test the direction of effects as suggested by Cohen et al. (2003, see Figure 1). In this procedure, we plotted the three regression lines for the regression of general life satisfaction on a specific domain satisfaction for low (one *SD* below the mean), medium (at the mean), and high (one *SD* above the mean) levels of independence and interdependence, respectively.

The posthoc analysis showed that the lower the inde-

Table 3. Linear regression predicting general life satisfaction by satisfaction with single life domains, self-construal, and the interactions between the two predictors ($N = 98$)

Life satisfaction				Life satisfaction			
Predictors	<i>B</i>	<i>SE B</i>	β	Predictors	<i>B</i>	<i>SE B</i>	β
Step 1 ΔR^2	.09+			Step 1 ΔR^2	.09 +		
Years of schooling	0.00	0.11	.01	Years of schooling	0.00	0.11	.01
Living with a partner ¹	0.06	0.22	.03	Living with a partner ¹	0.06	0.22	.03
Respondents age	-0.02	0.11	-.02	Respondents age	-0.02	0.11	-.02
Economic status	0.28	0.10	.29**	Economic status	0.28	0.10	.29**
Step 2 ΔR^2	.14**			Step 2 ΔR^2	.13**		
Satisfaction with family	0.36	0.10	.36**	Satisfaction with family	0.38	0.10	.38**
Independent self	-0.06	0.10	-.06	Interdependent self	-0.05	0.11	-.05
Step 3 ΔR^2	.08**			Step 3 ΔR^2	.01		
Satisfaction with family $\times$ Independent self	-0.31	0.10	-.30**	Satisfaction with family $\times$ Interdependent self	-0.09	0.11	-.08
Step 2 ΔR^2	.13**			Step 2 ΔR^2	.10**		
Satisfaction with friends	0.33	0.10	.34**	Satisfaction with friends	0.32	0.10	.32**
Independent self	-0.15	0.10	-.15	Interdependent self	-0.02	0.11	-.02
Step 3 ΔR^2	.00			Step 3 ΔR^2	.00		
Satisfaction with friends $\times$ Independent self	0.00	0.08	.00	Satisfaction with friends $\times$ Interdependent self	-0.01	0.10	-.01
Step 2 ΔR^2	.07*			Step 2 ΔR^2	.06+		
Satisfaction with health	0.25	0.10	.25*	Satisfaction with health	0.25	0.10	.25*
Independent self	-0.10	0.10	-.10	Interdependent self	0.02	0.11	.02
Step 3 ΔR^2	.06*			Step 3 ΔR^2	.05*		
Satisfaction with health $\times$ Independent self	-0.22	0.09	-.26*	Satisfaction with health $\times$ Interdependent self	-0.22	0.10	-.22*

Note. Living with a partner was dummy coded with 0 = no, 1 = yes. In all consecutive steps, the variables of previous steps are included. All variables are *z*-standardized. + $p < .10$, * $p < .05$, ** $p < .01$.

Figure 1. Independence as a moderator of the relation between satisfaction with family and general life satisfaction.

pendent self, the stronger the relationship was between satisfaction with family and general life satisfaction (simple slopes at low, medium, and high values of independence were $b_{\text{low}} = .74$, $b_{\text{medium}} = .43$, $b_{\text{high}} = .11$ (see Figure 1).

Another moderator effect of an independent self-con-

Figure 2. Independence as a moderator of the relation between satisfaction with health and general life satisfaction.

strual was found with respect to the relationship between satisfaction with health and general life satisfaction ($\Delta R^2 = .06$; $F_{\text{change}}(1, 84) = 6.73$; $B = -.22$, $p < .05$; see Table 3). Contrary to expectations, the posthoc analysis showed that the lower the independent self of the person, the stronger the relationship was between satisfaction with health and

Figure 3. Interdependence as a moderator of the relation between satisfaction with health and general life satisfaction.

general life satisfaction ($b_{\text{low}} = .44$, $b_{\text{medium}} = .21$, $b_{\text{high}} = -.01$; see Figure 2).

Concerning interdependent self, there was a moderator effect on the relationship between satisfaction with health and general life satisfaction ($\Delta R^2 = .05$; $F_{\text{change}}(1, 84) = 4.66$; $B = -.22$, $p < .05$; see Table 3). The posthoc analyses showed that the lower the interdependent self, the stronger the relationship was between satisfaction with health and general life satisfaction ($b_{\text{low}} = .52$, $b_{\text{medium}} = .30$, $b_{\text{high}} = .08$; see Figure 3).

Discussion

The aim of the present study was to get further insight into the general life satisfaction of older women with respect to the life domains of family, friendship, and health. Marital status, namely, living with or without a partner, was taken into account as a proxy for women's life situation, and we examined the role of self-construal as a moderator for the relation between satisfaction with specific life domains and general life satisfaction.

To summarize the results, all life domains included here were related to general life satisfaction. Regarding the relative importance of life domains, social relationships with family and friends were most important factors influencing general life satisfaction, whereas satisfaction with health was less influential. Although the direction of effects could not be established because of the cross-sectional data structure, findings speak against a simple top-down model; rather, a bottom-up model or a more sophisticated top-down model allowing for distinct relationships between satisfaction in specific life domains and general life satisfaction seem more appropriate here (Schimmack, 2000). The results confirm the prominent role of social relationships for well-being in older age (see Lang, 2001; Litwin & Shiovitz-Ezra, 2006). As shown by Reinhardt and Fisher (1989), social relationships have different meanings for people depending on their life situation. These authors re-

ported a higher salience of relationship quality to both daughters and friends for the life satisfaction of older women who were widowed compared with women who still had a partner. In the present study, the satisfaction of women without a partner with their friendships was most important for their general life satisfaction, whereas for women who had a partner satisfaction with family was most strongly related to general life satisfaction. The focus on friendships of women without a partner may be one way to cope with partner loss as described in theories on adaptation and personal functioning in old age, such as the model of selective optimization with compensation (e.g., Baltes & Carstensen, 1990). Friends may compensate to some extent for partner loss as they share leisure time activities, provide feelings of autonomy and positive emotional exchanges, whereas family members may also represent obligations and stressful encounters, particularly in case of need for care (Lang, 2001; Pinquart & Sörensen, 2000). In the absence of a partner, friends are needed more as conversation partners and companions who share similar interests. A lack of satisfying friendships may thus be more detrimental to life satisfaction for women without a partner than for women with a partner. Our finding that family satisfaction was most important for the general life satisfaction of women who still had a partner but not for women without a partner corresponds to the results of Larson et al. (1986). They found in their study on retired U. S. adults that spending time with both family members and partners together contributed to higher positive affect than did the presence of either independently.

Taken together, these results may reflect different strategies of relationship regulation depending on the availability of network partners (see Lang, 2001). Accordingly, women both with a partner and without a partner concentrate their regulation efforts on distinct relationships that serve their specific needs. It has often been assumed that satisfaction with one's health gains in importance for life satisfaction with advancing age because health becomes more unstable (Bowling & Dieppe, 2008). In the present study, however, the participants' satisfaction with health was only weakly related with general life satisfaction, and it was less important than were social relationships. Many studies have shown that it is possible to adapt to a reduced health status to some extent (see Diener et al., 1999), making satisfaction with health less focal for the life satisfaction of older people. Also, comparisons with people who are worse off can lead to a positive personal balance (Ferring & Hoffmann, 2007). One must also consider that the participants in the present study were a positively selected sample. Because of their readiness to participate in the study a certain degree of health can be assumed.

Among the sociodemographic variables, only socioeconomic status had an impact on general life satisfaction. Socioeconomic status was measured by asking participants to compare themselves to other people living in their country. Downward comparisons could explain the correlation with general life satisfaction here (see Ferring & Hoffmann,

2007). The predictive value of economic status was especially high for the life satisfaction of women without a partner. Older women often have a worse economic situation than do men of their age (e.g., Motel-Klingebiel, 2006). Thus, for widowed or divorced women, economic status might be of higher salience in their daily lives (see Diener & Diener McGavran, 2008). Other objective factors such as age, education, and having a partner per se did not influence life satisfaction, which is in line with the findings of Diener et al. (1999) and Kahneman et al. (2006), who underlined the importance of subjective interpretations of objective facts. Baltes and Smith (2003) argued that the so-called "fourth" age is prone to a decline in subjective well-being because this last stage of life is characterized by less plasticity and higher vulnerability compared with the "third" age, which is seen more positively and characterized by higher plasticity. With a mean age of around 70 years, a major part of the present sample belonged to the group of the "young old," whereas only a fifth of the sample was 75 years or older (Neugarten, 1974). Thus, the lack of age effects in the present study could be due to the comparably young age of participants.

The more independent the women were, the weaker the relationship was between their family satisfaction and general life satisfaction. A woman who defines herself as independent from others is obviously also independent from family regarding her life satisfaction. Contrary to expectations, there was no moderator effect of interdependence; nonetheless, a positive correlation between interdependence and satisfaction with family occurred. People with an interdependent self-construal seem to be altogether more enthusiastic about their family than persons who do not define themselves through their relationship to their family. Thus, personality variables are related to life satisfaction of a person directly and indirectly (Staudinger, Freund, Linden, & Maas, 1996).

The weaker relationship between satisfaction with health and general life satisfaction of more independently oriented persons is in contrast to the assumption that health as an aspect of the individual person is especially important for these persons. Perhaps a strong, independent-minded person is better able to cope with health problems. In turn, a woman who is not as independently oriented in her self-construal may be concerned about who will care for her in case of illness and need, and be afraid of becoming a burden to others.

The weaker relationship between health satisfaction and general life satisfaction for more interdependent women indicates that, for a woman with a strong interdependent self-construal, relational factors are presumably more important than health. She might be convinced that she can count on her family's support in case of need. This interpretation is supported by research by Sarason, Sarason, and Pierce (e.g., 1994), who showed that the perception of available social support depends on working models about self and others, and can be seen as a trait, while it is only partially correlated to actual support.

In summary, it seems that persons with a self-concept that focuses strongly on either independent or interdependent aspects rely less on health satisfaction for their general life satisfaction. Thus, the more pronounced aspects of self-construal are, the more they override the effects of single life domains on general life satisfaction – something that seems to be true for independent as well as interdependent aspects. This may be also due to the earlier stated high interconnection between health status and the social domain.

The fact that the moderator effects of independent and interdependent self-construal were in the same direction was nevertheless astonishing and unexpected. Caution is needed when interpreting the results, and alternative explanations should also be taken into account. It has to be kept in mind that the measures were reformulated to refer to family instead of social partners in general; therefore, this measure may be less sensitive in the context of health. Further, reliability of the independence scale was rather low: Although originally conceptualized as two orthogonal dimensions, the positive correlation between independence and interdependence is in line with the assumption that both self-construal aspects might be present within a person and cannot be seen as opposites (Singelis, 1994). Feeling closely connected to family and valuing one's own personal identity highly is obviously not mutually exclusive. The concept of self-construal might thus need additional clarification; for instance, one could consider aspects of self-construal such as context dependence (e.g., Kühnen & Oyserman, 2002). Further elaboration that covers also aspects relevant for the domain of health as well as the domain of friends where no moderator effects with the current measure were found would be helpful here.

Nonetheless, the results regarding self-construal demonstrate that differences in factors influencing the life satisfaction of older women cannot only be found between cultures as was, for instance, shown for the relation between social support provision of older mothers toward their daughters and mothers' life satisfaction in Germany, Indonesia, and China (Schwarz et al., in press), but rather different salience of self-construal aspects for persons living in the same culture is related to intracultural differences in the regulation of subjective well-being.

Caveats

A more sophisticated measure for life satisfaction instead of single-item measurements would be desirable for future studies and other life domains such as work or voluntary work should be considered, too. Because of selection criteria of the sample, the results cannot be generalized, but apply especially to older women who have children and grandchildren, and who have at least a fair health status.

Finally, the sequence of questions can influence evaluations of general life satisfaction (Kahneman & Krueger, 2006). Thus, by asking first about single life domains, satisfaction in specific domains could have become more sa-

lient when finally responding to the question on general life satisfaction.

Conclusion

The current study shows that satisfying social relationships are crucial for life satisfaction in older age, but that the importance of single-life domains for general life satisfaction varies. The study underlines the necessity of a differentiated view regarding the regulation processes of well-being in older age that differ depending on living conditions and self-construal aspects between and within cultural contexts.

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Isabelle Albert

University of Luxembourg
Campus Walferdange
Route de Diekirch B. P. 2
L-7201 Walferdange
Luxembourg
E-mail isabelle.albert@uni.lu