

Middle-Aged Children's Coping Strategies With Tensions in the Aging Parent–Child Tie

The International Journal of Aging
and Human Development
0(0) 1–21

© The Author(s) 2019

Article reuse guidelines:

sagepub.com/journals-permissions

DOI: 10.1177/0091415018822079

journals.sagepub.com/home/ahd



Haowei Wang¹, Kyungmin Kim¹,
Kira S. Birditt², Steven H. Zarit³, and
Karen L. Fingerman⁴

Abstract

Middle-aged children may cope in different ways with interpersonal tensions with their aging parents. This study examined coping strategies as a function of parent's age and disability and children's emotions (i.e., guilty feelings and worry). Middle-aged children ($N = 378$) reported coping strategies when encountering interpersonal tensions with each of parents ($N = 482$): engagement, acceptance, avoidance, and confrontation. Middle-aged children also indicated how guilty and worried they felt about each parent. Multilevel models indicated that middle-aged children were most likely to use engagement and acceptance strategies, followed by avoidance, and least likely to use confrontation. Results also revealed that middle-aged offspring were more likely to use engagement toward their parents who were older and acceptance toward parents with more disabilities. Furthermore, when middle-aged children had stronger feelings of guilt toward parents, they were more likely to be avoidant and less likely to engage with parents. Worries about parents were positively associated with the use of engagement strategies.

¹Department of Gerontology, University of Massachusetts Boston, MA, USA

²Institute for Social Research, University of Michigan, Ann Arbor, MI, USA

³Department of Human Development and Family Studies, Pennsylvania State University, University Park, PA, USA

⁴Department of Human Development and Family Sciences, The University of Texas at Austin, TX, USA

Corresponding Author:

Haowei Wang, Department of Gerontology, John W. McCormack Graduate School of Policy and Global Studies, University of Massachusetts Boston, 100 Morrissey Blvd, Boston, MA 02125–3393, USA.

Email: haowei.wang001@umb.edu

Keywords

parent–child tensions, coping strategies, guilt, worry, disabilities

Introduction

When parents experience physical declines from healthy and independent to frail and dependent, it appears that adult children experience declines in relationship quality with their parents (Fingerman, Hay, Dush, Cichy, & Hosterman, 2007; Kim et al., 2017). The changes associated with increased parents' age and disability may create challenges for adult children to negotiate tensions with their parents. Moreover, when parents continue to age and become less independent, adult children might experience guilt and worrying emotions toward their parents (Gonyea, Paris, & de Saxe Zerden, 2008; Hay, Fingerman, & Lefkowitz, 2008; Kalmijn, 2018). These emotions may also influence adult children's behavioral responses to interpersonal tensions with aging parents.

From early childhood to adolescence and adulthood, children use various coping strategies when tensions occur with their parents, such as trying to solve the problem, avoiding contacts, or confronting with parents (Belsky, Jaffee, Hsieh, & Silva, 2001; Birditt, Rott, & Fingerman, 2009; Birditt et al., 2017). The coping strategies adult children use have implications for parent–child relationship quality; constructive strategies are associated with better parent–child relationship quality, while destructive strategies are found to be harmful for the parent–child relationship (Belsky et al., 2001; Birditt, Miller, Fingerman, & Lefkowitz, 2009; Caughlin & Malis, 2004). Yet, it is unclear how adult children use different coping strategies as parents become older and experience health declines. Furthermore, we know little about how adult children cope with parent–child tensions when they feel guilty and worried regarding their aging parents.

This study aims to examine (a) coping strategies used by middle-aged children in response to interpersonal tensions with their aging parents and (b) the associations of middle-aged children's coping strategies with parents' age and disability and children's emotions toward aging parents (i.e., guilty feelings and worries).

Types of Coping Strategies With Interpersonal Tensions in the Family

People utilize various coping strategies in response to interpersonal tensions, including avoidance, engagement, acceptance, and confrontation (Blanchard-Fields, Stein, & Watson, 2004; Fingerman, Miller, & Charles, 2008). Avoidance coping strategies involve passively not speaking to the social partner. Engagement strategies are active efforts meant to improve the situation—such as

discussing the problem and searching for solutions together. Acceptance strategies involve recognizing there is nothing one can do about the problem. In contrast, confrontation strategies include aggressive behaviors such as yelling or fighting. Rusbult, Bissonnette, Arriaga, Cox, and Bradbury (1998) classified these different coping styles in response to interpersonal tensions into two dimensions (i.e., constructive or destructive and active or passive). Engagement and acceptance are considered constructive because they aim at improving the relationship, while avoidance and confrontation are considered destructive due to the negative consequences of these two strategies on relationship quality. Moreover, engagement and confrontation are active strategies, whereas avoidance and acceptance are considered passive.

The parent–child tie is one of the most important relationships for both adult children and their parents. In the events when tensions occur with parents, adult children usually try to maintain the relationship with parents. As a result, children may choose coping strategies that are beneficial for the relationship, such as calmly discussing the problem or avoiding certain sensitive topics during the conversation, rather than fighting or arguing (Fingerman, 1998). Thus, we expect middle-aged children are more likely to use constructive (i.e., engagement and acceptance) rather than destructive strategies (i.e., confrontation and avoidance) in response to parent–child tensions.

Parents' Age and Disability and Children's Coping Strategies

The social input model serves as a theoretical foundation in this study to understand the role of parents' age and disability in adult children's coping strategies (Fingerman & Charles, 2010; Fingerman et al., 2008; Luong, Charles, & Fingerman, 2011). The social input model suggests that people regulate their emotions and social behaviors by considering their social partner's characteristics (Fingerman & Charles, 2010; Fingerman & Pitzer, 2007). According to this model, people strive to avoid conflicts to enhance positive experiences when interacting with an older social partner, because they perceive the future time with the social partner as foreshortened (Luong et al., 2011; Miller, Charles, & Fingerman, 2009). Studies have used the social input model to examine conflict strategies with social partners of different ages (e.g., Fingerman et al., 2008; Miller et al., 2009). Evidence suggests that people respond differently to a social transgression or social faux pas committed by younger and older people (Miller et al., 2009). When dealing with social transgressions committed by older adults, people are more likely to use avoidance strategies to avert conflicts. Meanwhile, when dealing with problems with younger adults, people tend to use more confrontational strategies.

To add to the literature, this study examined how children utilized different coping strategies toward their parents—focusing on parents' age and disability, as the social input model suggested. In general, adult children feel positive about

the relationship if their parents can function independently as parents experience transitions to old age and emerging physical problems (Fingerman et al., 2007). However, when parents become older or begin to have disabilities, adult children may have difficulties in the parent–child tie because of their greater involvement in caregiving (Kim et al., 2017). Thus, adult children may use different strategies to cope with the tensions associated with their parents' aging and disabilities.

In the family, parents and children respond to changes in the other party (Hagestad, 2003). As the social input model posits, adult children may consider parents' changing situations, such as increasing age and disabilities to regulate their coping behaviors. When parents become older and have more disabilities, adult children may begin to feel their parents have limited time left in their lives. Therefore, even when adult children are annoyed or irritated by their parents, they may avoid conflicts to make their last years with their parents peaceful and harmonious. For example, a study of tensions between mothers and daughters found that some middle-aged daughters attributed their lack of openness with their mothers to a protection for the older mother because the time remaining with the mother was limited (Fingerman, 2003). Thus, we expect that adult children may use avoidance strategies rather than confrontation strategies with parents who are older and have more disabilities, due to a desire to maximize positive features of the relationship.

Guilt and Worry and Children's Coping Strategies

As adult children's parents continue to age and experience emerging disabilities, adult children worry about their parents and may feel guilty for their parents' declining health. These emotions toward parents may also play a role in adult children's behavioral responses to parent–child tensions. Extensive studies have found that various emotions are associated with moral behaviors (Tangney, Stuewig, & Mashek, 2007) and may have implications for interpersonal relationships (de Hooge, Mohiyeddini, Eysenck, & Bauer, 2013; van Kleef, De Dreu, Pietroni, & Manstead, 2006). Although other emotions, such as anger and hurt, may also be related to conflict strategies (Guerrero & La Valley, 2006), we chose to examine guilt and worry because these two emotions were found to be commonly experienced among adult children who have aging parents (Gonyea et al., 2008; Hay et al., 2008; Kalmijn, 2018).

A person who commits a moral transgression may feel guilty (Baumeister, Stillwell, & Heatherton, 1994). Although the experience of guilt is generally unpleasant, this emotion is expected to provoke prosocial behaviors (Roberts, Strayer, & Denham, 2014). Guilty feelings motivate people to make amends and to improve the relationship by actively engaging in interpersonal situations (Baumeister et al., 1994; Tangney et al., 2007; Wong & Tsai, 2007). However, studies also have found evidence of the antisocial effect of guilt; people with

guilty feelings tend to withdraw from social interactions (de Hooge et al., 2013). Transgressors may want to repair the relationship, but they may also be more inclined to avoid direct contacts with the person they wronged.

As parents become older and experience physical declines, adult children remain closely involved with their parents. There are various situations that may evoke adult children's guilty feelings when they try to provide care to older parents, such as the inability to fulfill caregiving responsibility, criticisms from other relatives, leaving parents dependent on formal services, and regrets for their decisions on parent's care or medical treatments (Gonyea et al., 2008; Kalmijn, 2018; Parks & Pilisuk, 1991). Moreover, guilty feelings may also occur when aging parents experience declines, even when a grown child is not directly involved with care (Amirkhanyan & Wolf, 2003). Thus, the prosocial function of guilt may prompt the adult children with guilty feelings to use active strategies to improve the relationship. Nonetheless, adult children with guilty feelings may also use passive strategies in response to parent-child tensions as suggested by the antisocial effect of guilt.

Worries, on the other hand, are negative and intrusive thoughts about possible future events (Borkovec, 1994; Hay et al., 2008; Scott, Eng, & Heimberg, 2002). The effect of worry on social relationships provides conflicting expectations as well. In most times, worry may evoke empathy and helping behaviors (Clark, Pataki, & Carver, 1996). However, given that worry can also reflect life problems of the social partner, such as health problems or financial difficulties, people may try to avoid interactions with social partners who are struggling with life problems.

Adult children commonly worry about their parents (Cicirelli, 1988; Hay et al., 2008; Parker, Call, Dunkle, & Vaitkus, 2002). Adult children's worries toward parents may reflect their concerns about providing care for their aging parents (Cicirelli, 1988; Parker et al., 2002) or parents' declines in health or other aspects of the aging process (Hay et al., 2008). When parents get older and have more health problems, children may experience more worries about their parents. Thus, worries may motivate adult children to use more constructive coping strategies to support aging parents. Nonetheless, worries might also make adult children use more destructive strategies because of the negative perceptions of parents' trouble.

The feelings of guilt and worry are two common emotions that adult children experience toward their aging parents. However, these two emotions are intrinsically different. According to van Kleef et al. (2006), guilt serves an appeasement function resulting from the belief of wrongdoing, whereas worry functions as a supplication function that motivates individuals to help others. Therefore, these two emotions may have different impacts on people's behavioral response. As discussed earlier, guilt and worry were suggested to have both prosocial and antisocial effects on behavior regulations. Thus, we do not have specific

expectations for the specific associations of guilty and worry feelings with children's coping strategies.

Other Factors Associated With Coping Strategies

We also considered parent and child characteristics, which may be associated with conflicts and coping strategies in the parent-child tie (Birditt, Rott, et al., 2009; Caughlin & Malis, 2004; Cichy, Lefkowitz, & Fingerman, 2012). These factors include parent gender, education, marital status, coresiding status, and offspring gender, education, marital status, race or ethnicity, neuroticism, employment status, the number of children, and filial obligation.

Because adult children tend to have more intense relationships with their mothers than fathers (Fingerman, 2003), we expect adult children may use more active strategies with their mothers (i.e., engagement and confrontation). People with lower socioeconomic status (e.g., less education) may have fewer resources to provide or be stretched thin to help family members (Umberson, 1992). Considering parent demands for support, adult children with less education themselves or with lower educated parents may respond to problems in the parent-child tie with more destructive strategies. Furthermore, parents who do not have a partner are more dependent on their children for support, which in turn may be a source of strain for adult children (Umberson, 1992). Thus, children may incline to use destructive and passive strategies with tensions with nonmarried parents. Residential status may have an impact on the exposure to family tensions as well as the strategies in response to such tensions; adult children who live with their parents may be more likely to use active and constructive strategies to solve the problems.

As for children's characteristics, women are found to use engagement strategies during conflicts, whereas men tend to withdraw from tensions in romantic relationships (Birditt, Fingerman, & Almeida, 2005; Wester, Vogel, Pressly, & Heesacker, 2002). Thus, we expect daughters to use more engagement strategies, whereas sons to use more avoidance strategies toward their parents. Compared with married individuals, divorced and never married adults report receiving less support from their parents and poorer relationships with mothers (Umberson, 1992). Consequently, nonmarried adult children may use more destructive strategies to cope with parent-child tensions. With respect to racial or ethnical differences, White American families tend to use passive strategies more often than African American families (Birditt, Rott, et al., 2009). In addition, adult children with higher levels of neuroticism report greater ambivalence toward their parents and may use different coping strategies in response to tensions with aging parents (Fingerman, Chen, Hay, Cichy, & Lefkowitz, 2006). Adult children may have different roles in their lives, such as being an employer or being a parent. The stress from these competing roles may spill over into how they cope with interpersonal tensions with their parents (Liu et al., 2015). Finally, adult

children with stronger perceptions of filial obligation may be more likely to use active strategies toward parents rather than passive ones. These variables were included as covariates in our analyses.

The Current Study

This study first explored middle-aged children's coping strategies with interpersonal tensions with aging parents by examining how likely middle-aged adults would be to use different coping strategies (i.e., engagement, acceptance, avoidance, and confrontation) when they had problems with each parent. Second, we examined the associations of parents' age and disability with children's coping strategies toward parents. We also considered two of children's emotions (i.e., guilt and worry) with regard to adult children's coping strategies toward parents.

We tested three hypotheses:

Hypothesis 1 (H1): Middle-aged children are more likely to use constructive strategies (i.e., engagement and acceptance) rather than destructive strategies (i.e., avoidance and confrontation) toward their parents.

Hypothesis 2a (H2a): Middle-aged children use more passive strategies (i.e., avoidance and acceptance) rather than active strategies (i.e., engagement and confrontation), when parents are older and have more disabilities.

Hypothesis 2b (H2b): Middle-aged children's guilty feelings and worries toward their aging parents are associated with different coping strategies. Because theories have suggested both prosocial and antisocial effects of guilt and worry, we have no hypothesis for the specific directions (i.e., more engaged or avoidant) of such associations.

Methods

Sample

Data were from the second wave of the *Family Exchanges Study* (Fingerman, Miller, Birditt, & Zarit, 2009). The original sample from Wave 1 included 633 middle-aged adults (aged 40–60 years) who had at least one grown child (over age 18 years) and one living parent, and who resided in the Philadelphia Metropolitan Area in 2008. The study identified potential participants through listed samples from the Genesys Corporation and random digit dialing within geographic area codes. Participants completed telephone interviews about their

demographic information and relationships with each grown offspring and parent.

In 2013, the original sample was invited to participate in the second wave of the study. Of 490 participants who completed the second wave of survey (retention rate from Wave 1 = 79%), we included 383 participants who had at least one living parent at Wave 2. Five participants did not complete questions regarding coping strategies with any parent; the final sample consisted of 378 middle-aged adults who reported coping strategies on each of aging parents. Among these respondents, 269 had one living parent (71.2%; only mother $n=209$ and only father $n=60$) and 109 had both parents (28.8%). Because five respondents only reported coping strategies with one of their two living parents, five aging parents were excluded from our analyses (parent $N=482$). Table 1 presents characteristics of middle-aged children and their aging parents.

Measures

Coping strategies. Middle-aged participants rated the extent to which they used the following strategies when they have had problems with each of their parent (Birditt et al., 2017; Blanchard-Fields et al., 2004; Miller et al., 2009): (a) engagement (I calmly discuss the problem with parent), (b) acceptance (I accept that there is nothing I can do about the problem), (c) avoidance (I avoid talking about the problem with parent), and (d) confrontation (I argue or fight with parent). Responses were rated on a 5-point scale from 1 (*not at all*) to 5 (*a great deal*). The bivariate correlations among four types of coping strategies and main predictors are presented in Table 2.

Parents' age and disability. Participants provided the age and disability of each living parent. Parent's disability was measured by four activities of daily living (ADL) from the Community Disability Scale (Bassett & Folstein, 1991; Rovner, Zisselman, & Shmueli-Dulitzki, 1996). The items included (a) personal care, (b) housework, (c) transportation, and (d) finances, and each item was coded as 0 (*no help is needed*) or 1 (*help is needed*). The sum scores of four items were used to indicate older parents' disability ($\alpha=.78$). ADL disability showed a positive correlation with parents' age ($r=.35, p<.001$).

Children's guilt and worry. Participants rated their feelings of guilt (Gonyea et al., 2008) and worries (Hay et al., 2008; Parker et al., 2002) toward each parent, using a single item scale. Specifically, respondents were asked "how guilty do you feel in your relationship with parent" and "how much do you worry about your parent." Responses were rated on a 5-point scale from 1 (*not at all*) to 5 (*a great deal*). The correlation between these two emotions was not high ($r=.12, p=.010$).

Table 1. Characteristics of Middle-Aged Children and Their Parents.

	Middle-aged children		Parents	
	M	(SD)	M	(SD)
Age	55.44	(4.92)	80.92	(6.29)
Female, %	56		66	
Years of education	14.44	(1.98)	12.37	(2.69)
Racial or ethnic minority, %	36		–	
Marital status, %				
Married or remarried	72		40	
Divorced or separated	18		13	
Never married	6		2	
Widowed	3		45	
Neuroticism ^a	2.62	(0.78)	–	
Employed for pay, %	70		–	
Number of children	2.82	(1.47)	–	
Filial obligation ^b	3.90	(0.57)	–	
Coresiding with offspring, %	–		7	
ADL disability ^c	–		1.28	(1.41)
Guilty feeling toward parents ^d	–		1.70	(1.01)
Worry about parents ^d	–		3.53	(1.11)
Coping strategies ^d				
(a) Engagement	–		2.95	(1.19)
(b) Acceptance	–		2.85	(1.30)
(c) Avoidance	–		2.23	(1.23)
(d) Confrontation	–		1.44	(0.74)

Note. Middle-aged offspring (respondent) $N = 378$; Parent $N = 482$. ADL = activities of daily living.

^aMean scores of four items rated 1 = *not at all* to 5 = *a great deal*.

^bMean score of six items rated at 1 = *never* to 5 = *always*.

^cSum scores of four ADL items coded 1 = *yes* and 0 = *no*.

^dRated 1 = *not at all* to 5 = *a great deal*.

Covariates. Participants provided information about their own background characteristics: gender (1 = *female*, 0 = *male*), years of education, marital status (1 = *married or remarried*, 0 = *not married*), race or ethnicity (1 = *racial or ethnic minority*, 0 = *non-Hispanic white*), neuroticism, employment status (1 = *employed for pay*, 0 = *not employed*), the number of children, and filial obligation. Participants rated four neuroticism items (i.e., moody, worrying, nervous, and calm [reverse coded]; Lachman & Weaver, 1997) on a 5-point scale from 1 (*not at all*) to 5 (*a great deal*). A mean score was calculated across these items for neuroticism ($\alpha = .73$). Participant also indicated how often middle-aged adults should provide their parents six types of support: emotional support, practical assistance, financial support, listening, socializing, and advice (Silverstein, Gans, & Yang, 2006). Responses were rated from 1 (*never*) to 5

Table 2. Pearson Correlations Among Main Study Variables.

Variables	1a	1b	1c	1d	2a	2b	2c	2d
1a. Engagement ^a	—							
1b. Acceptance ^a	-.03	—						
1c. Avoidance ^a	-.23**	.37**	—					
1d. Confrontation ^a	.06	.13**	.02	—				
2a. Parent age	-.07	-.01	-.01	-.00	—			
2b. Parent ADL ^b disability	-.05	.10*	.10*	.05	.35**	—		
2c. Guilty feeling ^a	-.10*	.12**	.14**	.08	-.00	.17**	—	
2d. Worry ^a	.10*	.03	-.02	.13**	.12**	.33**	.12**	—

Note. Middle-aged offspring (respondent) $N = 378$; Parent $N = 482$. ADL = activities of daily living.

^aRated 1 = *not at all* to 5 = *a great deal*.

^bSum scores of 4 ADL items coded 1 = *yes* and 0 = *no*.

* $p < .05$. ** $p < .01$. *** $p < .001$.

(*always*). A mean score was created for participants' perceptions of filial obligation toward their parents ($\alpha = .81$).

Participants also provided background information about each living parent, including gender (1 = *female* and 0 = *male*), years of education, marital status (1 = *married or remarried* and 0 = *not married*), and coresiding status (1 = *coresiding with middle-aged offspring* and 0 = *not coresiding*).

Analytic Strategy

To examine which coping strategies middle-aged children were more likely to use toward aging parents (H1), we estimated multilevel models (SAS PROC MIXED; Little, Milliken, Stroup, & Wolfinger, 1996). Participants (*Level 3*) indicated how likely they would be to use four different coping strategies (*Level 1*) toward each parent (*Level 2*). We included a categorical predictor for types of coping strategies: (a) engagement, (b) acceptance, (c) avoidance, and (d) confrontation. Confrontation was used as the reference type, since we hypothesized that adult children were least likely to use this coping strategy. We also compared each of the four coping strategies, using Tukey–Kramer post hoc tests. We controlled for middle-aged children's (i.e., gender, marital status, race or ethnicity, education, neuroticism, employment status, number of children, and filial obligation) and aging parents' characteristics (i.e., gender, marital status, education, and coresident status) in the model.

Next, to address how four different coping strategies were associated with parents' age and disability (H2a) and adult children's guilty feelings and worries (H2b), we estimated multilevel models (two-level models; each parent nested within middle-aged children). Each type of coping strategies was treated as a separate outcome, and parents' age and disability and children's emotions (i.e., guilty feelings and worry) were examined as main predictors in the separate

Table 3. Differences in Middle-Aged Children's Coping Strategies With Tensions With Parents.

Variables	B	SE
Fixed effects		
Intercept	0.97*	0.41
Type of coping strategies		
(a) Engagement	1.50***	0.07
(b) Acceptance	1.41***	0.07
(c) Avoidance	0.79***	0.07
(d) Confrontation	(Ref)	(Ref)
Parent characteristics		
Female	0.13*	0.05
Years of education	0.01	0.01
Married/remarried	-0.10	0.07
Coresiding with offspring	-0.05	0.11
Offspring characteristics		
Female	0.07	0.06
Years of education	0.02	0.02
Married or remarried	-0.02	0.07
Racial or ethnic minority	-0.04	0.07
Neuroticism ^a	0.07	0.04
Employed for pay	0.03	0.07
Number of children	0.00	0.02
Filial obligation ^b	-0.04	0.06
Random effects		
Intercept variance (Level 2: parent)	-0.10**	0.03
Intercept variance (Level 3: child)	0.18***	0.04
Residual variance	1.20***	0.05
-2 Log likelihood	5,711.3	

Note. Middle-aged offspring (respondent) $N = 378$; Parent $N = 482$. Ref = reference type. Tukey-Kramer post hoc comparison: (a) = (b) > (c) > (d), $p < .001$.

^aMean scores of 4 items rated from 1 = *not at all* to 5 = *a great deal*. ^bMean score of 6 items rated from 1 = *never* to 5 = *always*.

* $p < .05$. ** $p < .01$. *** $p < .001$.

models (i.e., eight models; 4 Outcomes \times 2 Sets of Predictors). Models also controlled for middle-aged adults' and parents' characteristics as in the previous models.

Results

Regarding differences in the four coping strategies (H1; see Table 3), we found that middle-aged children were more likely to use engagement ($B = 1.50$, $p < .001$), acceptance ($B = 1.41$, $p < .001$), and avoidance ($B = 0.79$, $p < .001$)—

compared with confrontation to cope with parent–child tensions. According to the Tukey–Kramer post hoc tests, middle-aged children reported using engagement and acceptance most often, followed by avoidance, and confrontation least often ($p < .001$).

Next, we examined the associations between parents' age and disability and children's coping strategies (H2a; see Table 4). Multilevel models revealed that middle-aged adults were less likely to use the engagement strategy toward parents who had older age ($B = -0.02$, $p < .05$). Also, middle-aged children were more likely to use the acceptance strategy when their parents had more disabilities ($B = 0.10$, $p < .05$).

Table 4. Multilevel Models for Middle-Aged Children's Coping Strategies and Parents' Age and Disability.

Variables	Engagement		Acceptance		Avoidance		Confrontation	
	B	SE	B	SE	B	SE	B	SE
Fixed effects								
Intercept	4.36***	1.15	3.40**	1.25	1.80	1.19	1.26	0.72
Parent age	-0.02*	0.01	-0.01	0.01	0.00	0.01	0.00	0.01
Parent ADL disability ^a	0.01	0.04	0.10*	0.05	0.06	0.04	0.00	0.03
Parent characteristics								
Female	0.03	0.10	0.04	0.12	0.19	0.12	0.12	0.07
Years of education	0.06**	0.02	0.01	0.03	-0.01	0.02	-0.01	0.01
Married or remarried	-0.45***	0.13	-0.09	0.14	0.05	0.13	-0.06	0.08
Coresiding with offspring	-0.11	0.21	-0.23	0.24	-0.18	0.23	0.16	0.14
Offspring characteristics								
Female	-0.24	0.12	0.13	0.13	0.25	0.13	0.09	0.08
Years of education	-0.02	0.03	0.03	0.04	0.07	0.03	0.00	0.02
Married or remarried	0.08	0.14	-0.10	0.15	-0.04	0.15	-0.01	0.09
Racial or ethnic minority	-0.10	0.15	-0.06	0.16	-0.08	0.15	-0.06	0.09
Neuroticism ^b	-0.16*	0.08	0.11	0.09	0.11	0.08	0.16***	0.05
Employed for pay	0.11	0.14	-0.02	0.15	-0.03	0.14	0.05	0.08
Number of children	0.03	0.05	-0.05	0.05	0.00	0.05	-0.02	0.03
Filial obligation ^c	0.13	0.11	-0.09	0.12	-0.19	0.11	-0.01	0.07
Random effects								
Intercept variance (Level 2: child)	0.66***	0.13	0.58***	0.17	0.53***	0.16	0.20***	0.05
Residual variance	0.69***	0.10	1.08***	0.16	0.96***	0.15	0.35***	0.05
-2 Log Likelihood	1,454.1		1,554.8		1,501.7		1,069.7	

Note. Middle-aged offspring (respondent) $N = 378$; Parent $N = 482$. ADL = activities of daily living.

^aSum scores of four items coded 1 = yes and 0 = no.

^bMean scores of four items rated from 1 = not at all to 5 = a great deal.

^cMean score of six items rated from 1 = never to 5 = always.

* $p < .05$. ** $p < .01$. *** $p < .001$.

Regarding H2b about the associations of guilt feelings and worry with adult children's coping strategies (see Table 5), we found that middle-aged children had greater feelings of guilt toward their parents, and they were less likely to use the engagement strategy ($B = -0.13, p < .05$) and more likely to use acceptance ($B = 0.13, p < .05$) and avoidance ($B = 0.19, p < .01$) coping strategies. When adult children had increased worries about their parents, they were more likely to use the engagement coping strategy ($B = 0.14, p < .01$).

Regarding control variables, adult daughters and adult children with higher levels of education were more likely to use avoidance. Children who had higher

Table 5. Multilevel Models for Middle-Aged Children's Coping Strategies and Children's Emotions Toward Parents.

Variables	Engagement		Acceptance		Avoidance		Confrontation	
	B	SE	B	SE	B	SE	B	SE
Fixed effects								
Intercept	2.36**	0.80	2.13*	0.86	1.67*	0.82	0.99*	0.50
Emotions toward parents								
Guilty feeling ^a	-0.13*	0.06	0.13*	0.06	0.19**	0.06	0.03	0.04
Worry ^a	0.14**	0.05	0.06	0.06	-0.04	0.06	0.05	0.03
Parent characteristics								
Female	0.10	0.10	0.06	0.12	0.16	0.11	0.12	0.07
Years of education	0.06**	0.02	0.00	0.03	-0.02	0.02	-0.01	0.01
Married/remarried	-0.35**	0.12	-0.06	0.14	0.09	0.13	-0.04	0.08
Coresiding with offspring	-0.11	0.21	-0.21	0.24	-0.16	0.22	0.14	0.14
Offspring characteristics								
Female	-0.18	0.12	0.16	0.13	0.25*	0.12	0.10	0.07
Years of education	-0.03	0.03	0.04	0.04	0.07*	0.03	0.00	0.02
Married or remarried	0.02	0.14	-0.12	0.15	-0.08	0.15	-0.02	0.09
Racial/ethnic minority	-0.11	0.14	0.00	0.15	0.02	0.15	-0.07	0.09
Neuroticism ^b	-0.15	0.08	0.08	0.09	0.10	0.08	0.15**	0.05
Employed for pay	0.08	0.14	0.02	0.15	0.02	0.14	0.04	0.09
Number of children	0.05	0.05	-0.05	0.05	0.00	0.05	-0.02	0.03
Filial obligation ^c	0.10	0.11	-0.11	0.12	-0.21	0.11	-0.03	0.07
Random effects								
Intercept variance (Level 2: child)	0.71***	0.12	0.56***	0.16	0.65***	0.15	0.20***	0.05
Residual variance	0.63***	0.09	1.06***	0.15	0.81***	0.12	0.34***	0.05
-2 Log Likelihood	1,428.5		1,530.8		1,470.7		1,054.6	

Note. Middle-aged offspring (respondent) $N = 378$; Parent $N = 482$.

^aRated 1 = not at all to 5 = a great deal.

^bMean scores of four items rated from 1 = not at all to 5 = a great deal.

^cMean score of six items rated from 1 = never to 5 = always.

* $p < .05$. ** $p < .01$. *** $p < .001$.

levels of neuroticism were more likely to use confrontation but less likely to use engagement. Middle-aged children were more likely to use the engagement strategy with their parents with higher levels of education and less likely to use engagement with married parents.

As post hoc analyses, we examined the associations of parent's age and disability with children's emotions of guilt and worry (see Supplementary Table 1). Multilevel models revealed that adult children would experience more guilty feelings and worries toward parents who had more disabilities. Moreover, we examined both parents' age and ADL disability and children's emotions variables (i.e., guilty feelings and worry) in comprehensive models (see Supplementary Table 2). Most results on the associations between parents' age and ADL disability, children's worry and guilt, and children's coping strategies remained stable when considering all predictors together.

Discussion

This study explored middle-aged children's coping strategies when they experience interpersonal tensions with their aging parents. Guided by the social input model, we examined how parents' age and disabilities were associated with adult children's coping strategies with aging parents. To add to the literature, we also considered two emotions (i.e., guilt and worry) that were commonly experienced by adult children toward aging parents and examined the implications for children's coping strategies. As expected, we found that adult children generally avoided using confrontation and preferred to use engagement and avoidance strategies. This result was consistent with the existing literature on coping strategies with parent-child tensions (Birditt, Rott, et al., 2009). Although tensions in the parent-child tie are common, findings suggest that children strive to regulate their negative feelings during the tension and use positive strategies to cope with such tensions.

Parents' Age and Disability

Regarding parents' age and disability, findings of this study were consistent with the social input model, which suggests people consider a social partner's age to regulate their coping strategies (Fingerman & Charles, 2010). When tensions occurred with parents who were in older age, adult children were less likely to use the engagement strategy; when parents had more disabilities, adult children were more likely to use the acceptance strategy. Adult children might perceive future time with parents as limited as parents became older and experienced declines. The process to find a solution for parent-child tensions could be time-consuming and distressful for both adult children and their parents. Thus, adult children may choose not to spend time on solving the problems and value the time left with parents by accepting the existing situation.

We did not find much evidence for the implications of parents' age and disability on adult children's destructive coping strategies (i.e., avoidance and confrontation). It is likely because adult children generally avoid using destructive strategies regardless of parents' health conditions. In addition, our findings suggest that parents' disabilities evoke increased guilty feelings and worries from their adult children. Children's guilt and worry, which may indirectly reflect children's concerns about parents' disabilities, have implications for children's coping strategies.

Because adult children's coping strategies are found to influence their relationship qualities with aging parents (Birditt, Jackey, & Antonucci, 2009; Branje, 2008; Caughlin & Malis, 2004), examining how parent characteristics influence adult children's coping strategies may have implications for family conflict resolution, especially for families with aging parents. Findings of this study suggest that adult children may adopt coping strategies toward their parents considering parents' changing conditions (e.g., advancing age and declining health). Thus, it may be valuable for family counselors to consider parent's physical changes and adult children's communication strategies to promote better family relationships.

Adult Children's Guilt and Worry

We examined two of children's emotions toward parents: guilty feelings and worry. Prior studies on the social function of guilt suggest two possibilities: guilty people tend to improve the relationship actively (Baumeister et al., 1994; Tangney et al., 2007; Wong & Tsai, 2007), or they prefer to withdraw from social interactions (de Hooge et al., 2013). This study found evidence of the antisocial effect of guilt; children with greater guilty feelings were less likely to use engagement but more likely to use avoidance and acceptance. Guilty feelings experienced in the parent-child tie indicate that children may blame themselves for parents' problems (e.g., declining health) or their wrongdoing on the relationship. Although adult children feeling guilty toward parents wish to repair the relationship or improve parents' situation, they may be unwilling to interact with the "victims." Considering the limited future time with older parents, guilty children may choose to cope with tensions with parents passively to avoid further harm.

Previous studies also provide conflicting hypotheses on the effect of worry on social behavior (Clark et al., 1996). Worried people may provide greater support to the social partner or try to avoid problematic social partners. Our finding supports the prosocial effect of worry; adult children with greater worries toward their parents were more likely to use the engagement coping strategy. For adult children with aging parents, their worries reflect the endorsement of filial responsibility to care for parents (Cicirelli, 1988). Thus, even in the midst of

tensions, worries motivate adult children to discuss with parents about their problems actively before tensions endanger parents' well-being.

Investigating guilty feelings and worries in children's coping strategies yield intriguing implications on research. Literature on caregiver's emotions usually focuses on burden and distressed emotions as a result of caregiving (e.g., Robertson, Zarit, Duncan, Rovine, & Femia, 2007; Savundranayagam, Montgomery, & Kosloski, 2011). However, this study indicates that preoccupation of different emotions such as guilty feelings and worry may also have implications on caregiving. For example, our findings suggest that adult children with guilty feelings tend to avoid interacting with their parents. However, a lack of communication with parents may prevent adult children from providing timely and adequate support for their parents.

Limitations and Directions for Future Research

Several limitations in this study should be noted. First, participants' responses on coping strategies were retrospective, asking about general tensions with parents. Moreover, children's own reports of coping behaviors may be biased by social desirability, given that we observed fewer reports of using confrontation strategy. Future research is needed to explore patterns of coping strategies over time, in specific situational contexts, and in regard to different types of interpersonal tensions. Second, the measures for parents' ADL disabilities were more indicative of daily functioning and it would be helpful to consider medical assessments of parents' physical conditions in the analyses. In addition, we used a single-item scale for children's guilty feelings and worries toward parents. More could be learned from utilizing multi-item scales for each emotion. Last, the study was limited to the perspective of one focal offspring, which may mask sources of differences observed in coping strategies (i.e., if the differences reflect individual or family characteristics). Incorporating multiple children's perspectives within families could improve the understanding of children's coping strategies with tensions in the parent-child tie.

Despite these limitations, this study made some contributions. This study examined the social input model by investigating adult children's coping strategies in response to parents' aging process. Our findings suggest that adult children consider parents' age and disability to cope with parent-child tensions. Furthermore, this study found different implications of adult children's emotions (i.e., guilty feelings and worry) for their coping strategies with tensions with their aging parents. Thus, our findings suggest that family counselors and family conflict resolution programs pay more attention to disabled aging parents, whose children may respond to family problems in a passive way. Also, for adult children who are current or future caregivers for their parents, intervention programs are needed to help them navigate their emotions in order to foster better parent-child relationships.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The authors disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: This study was supported by grants from the National Institute on Aging, R01AG027769, *Family Exchanges Study II* (Karen L. Fingerman, Principal investigator) and R03AG048879, *Generational Family Patterns and Well-Being* (Kyungmin Kim, Principal investigator). This research also was supported by grant, 5 R24 HD042849 awarded to the Population Research Center at The University of Texas at Austin by the Eunice Kennedy Shriver National Institute of Child Health and Human Development.

Supplemental Material

Supplemental material for this article is available online.

References

- Amirkhanyan, A. A., & Wolf, D. A. (2003). Caregiver stress and noncaregiver stress: Exploring the pathways of psychiatric morbidity. *The Gerontologist, 43*, 817–827. doi:10.1093/geront/43.6.817
- Bassett, S. S., & Folstein, M. F. (1991). Cognitive impairment and functional disability in the absence of psychiatric diagnosis. *Psychological Medicine, 21*, 77–84. doi:10.1017/s0033291700014677
- Baumeister, R. F., Stillwell, A. M., & Heatherton, T. F. (1994). Guilt: An interpersonal approach. *Psychological Bulletin, 115*, 243–267. doi:10.1037/0033-2909.115.2.243
- Belsky, J., Jaffee, S., Hsieh, K. H., & Silva, P. A. (2001). Child-rearing antecedents of intergenerational relations in young adulthood: A prospective study. *Developmental Psychology, 37*, 801–813. doi:10.1037//0012-1649.37.6.801
- Birditt, K. S., Fingerman, K. L., & Almeida, D. M. (2005). Age differences in exposure and reactions to interpersonal tensions: A daily diary study. *Psychology and Aging, 20*, 330–340. doi:10.1037/0882-7974.20.2.330
- Birditt, K. S., Jackey, L. M. H., & Antonucci, T. C. (2009). Longitudinal patterns of negative relationship quality across adulthood. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences, 64*, P55–P64. doi:10.1093/geronb/gbn031
- Birditt, K. S., Miller, L. M., Fingerman, K. L., & Lefkowitz, E. S. (2009). Tensions in the parent and adult child relationship: Links to solidarity and ambivalence. *Psychology and Aging, 24*, 287–295. doi:10.1037/a0015196
- Birditt, K. S., Polenick, C. A., Van Bolt, O., Kim, K., Zarit, S. H., & Fingerman, K. L. (2017). Conflict strategies in the parent–adult child tie: Generation differences and implications for well-being. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*. Advance online publication. doi:10.1093/geronb/gbx057

- Birditt, K. S., Rott, L. M., & Fingerman, K. L. (2009). "If you can't say something nice, don't say anything at all": Coping with interpersonal tensions in the parent-child relationship during adulthood. *Journal of Family Psychology*, 23, 769–778. doi:10.1037/a0016486
- Blanchard-Fields, F., Stein, R., & Watson, T. L. (2004). Age differences in emotion-regulation strategies in handling everyday problems. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*, 59, P261–P269. doi:10.1093/geronb/59.6.P261
- Borkovec, T. D. (1994). The nature, functions, and origins of worry. In G. Davey & F. Tallis (Eds.), *Worrying: Perspectives on theory, assessment and treatment* (pp. 5–34). Oxford, England: John Wiley & Sons.
- Branje, S. J. T. (2008). Conflict management in mother-daughter interactions in early adolescence. *Behaviour*, 145, 1627–1651. doi:10.1163/156853908786131315
- Caughlin, J. P., & Malis, R. S. (2004). Demand/withdraw communication between parents and adolescents: Connections with self-esteem and substance use. *Journal of Social and Personal Relationships*, 21, 125–148. doi:10.1177/0265407504039843
- Cichy, K. E., Lefkowitz, E. S., & Fingerman, K. L. (2012). Conflict engagement and conflict disengagement during interactions between adults and their parents. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*, 68, 31–40. doi:10.1093/geronb/gbs046
- Cicirelli, V. G. (1988). A measure of filial anxiety regarding anticipated care of elderly parents. *The Gerontologist*, 28, 478–482. doi:10.1093/geront/28.4.478
- Clark, M. S., Pataki, S. P., & Carver, V. H. (1996). Some thoughts and findings on self-presentation of emotions in relationships. In F. Garth & F. Julie (Eds.), *Knowledge structures in close relationships: A social psychological approach* (pp. 247–274). Mahwah, NJ: Lawrence Erlbaum Associates.
- de Hooge, I. E., Mohiyeddini, C., Eysenck, M., & Bauer, S. (2013). Moral emotions and prosocial behaviour: It may be time to change our view of shame and guilt. In C. Mohiyeddini, M. Eysenck, & S. Bauer (Eds.), *Handbook of psychology of emotions: Recent theoretical perspectives and novel empirical findings* (pp. 255–276). Hauppauge, NY: Nova Science Publishers.
- Fingerman, K. L. (1998). Tight lips? Aging mothers' and adult daughters' responses to interpersonal tensions in their relationships. *Personal Relationships*, 5, 121–138. doi:10.1111/j.1475-6811.1998.tb00163.x
- Fingerman, K. L. (2003). *Mothers and their adult daughters: Mixed emotions, enduring bonds*. Amherst, NY: Prometheus Books.
- Fingerman, K. L., & Charles, S. T. (2010). It takes two to tango: Why older people have the best relationships. *Current Directions in Psychological Science*, 19, 172–176. doi:10.1177/0963721410370297
- Fingerman, K. L., Chen, P.-C., Hay, E., Cichy, K. E., & Lefkowitz, E. S. (2006). Ambivalent reactions in the parent and offspring relationship. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*, 61, P152–P160. doi:10.1093/geronb/61.3.P152
- Fingerman, K. L., Hay, E. L., Dush, C. M. K., Cichy, K. E., & Hosterman, S. J. (2007). Parents' and offspring's perceptions of change and continuity when parents experience the transition to old age. In T. J. Owens & J. J. Sutor (Eds.), *Advances in life course research* (pp. 275–306). San Diego, CA: Elsevier.

- Fingerman, K. L., Miller, L., Birditt, K., & Zarit, S. (2009). Giving to the good and the needy: Parental support of grown children. *Journal of Marriage and Family, 71*, 1220–1233. doi:10.1111/j.1741-3737.2009.00665.x
- Fingerman, K. L., Miller, L., & Charles, S. (2008). Saving the best for last: How adults treat social partners of different ages. *Psychology and Aging, 23*, 399–409. doi:10.1037/0882-7974.23.2.399
- Fingerman, K. L., & Pitzer, L. M. (2007). Socialization in old age. In P. D. Hastings & J. E. Grusec (Eds.), *Handbook of socialization* (pp. 232–255). New York, NY: Guilford Press.
- Gonyea, J. G., Paris, R., & de Saxe Zerden, L. (2008). Adult daughters and aging mothers: The role of guilt in the experience of caregiver burden. *Aging and Mental Health, 12*, 559–567. doi:10.1080/13607860802343027
- Guerrero, L. K., & La Valley, A. G. (2006). Conflict, emotion, and communication. In J. Oetzel & S. Ting-Toomey (Eds.), *The Sage handbook of conflict communication: Integrating theory, research, and practice* (pp. 69–96). Thousand Oaks, CA: Sage.
- Hagestad, G. O. (2003). Interdependent lives and relationships in changing times: A life-course view of families and aging. In R. A. Settersten, Jr. (Ed.), *Invitation to the life course: Toward new understandings of later life* (pp. 135–159). Amityville, NY: Baywood Publishing.
- Hay, E. L., Fingerman, K. L., & Lefkowitz, E. S. (2008). The worries adult children and their parents experience for one another. *The International Journal of Aging and Human Development, 67*, 101–127. doi:10.2190/AG.67.2.a
- Kalmijn, M. (2018). Guilt in adult mother-child relationships: Connections to intergenerational ambivalence and support. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences*. Advance online publication. doi:10.1093/geronb/gby077
- Kim, K., Bangerter, L. R., Liu, Y., Polenick, C. A., Zarit, S. H., & Fingerman, K. L. (2017). Middle-aged offspring's support to aging parents with emerging disability. *The Gerontologist, 57*, 441–450. doi:10.1093/geront/gnv686
- Lachman, M. E., & Weaver, S. L. (1997). *The Midlife Development Inventory (MIDI) Personality Scales: Scale construction and scoring. Technical report*. Waltham, MA: Department of Psychology, Brandeis University.
- Little, R. C., Milliken, G. A., Stroup, W. W., & Wolfinger, R. D. (1996). *SAS system for mixed models*. Cary, NC: SAS Institute Inc.
- Liu, Y., Wang, M., Chang, C. H., Shi, J., Zhou, L., & Shao, R. (2015). Work-family conflict, emotional exhaustion, and displaced aggression toward others: The moderating roles of workplace interpersonal conflict and perceived managerial family support. *Journal of Applied Psychology, 100*, 793–808. doi:10.1037/a0038387
- Luong, G., Charles, S. T., & Fingerman, K. L. (2011). Better with age: Social relationships across adulthood. *Journal of Social and Personal Relationships, 28*, 9–23. doi:10.1177/0265407510391362
- Miller, L. M., Charles, S. T., & Fingerman, K. L. (2009). Perceptions of social transgressions in adulthood. *The Journals of Gerontology, Series B: Psychological Sciences and Social Sciences, 64*, P551–P559. doi:10.1093/geronb/gbp062

- Parker, M. W., Call, V. R. A., Dunkle, R., & Vaitkus, M. (2002). "Out of sight" but not "out of mind": Parent contact and worry among senior ranking male officers in the military who live long distances from parents. *Military Psychology, 14*, 257–277. doi:10.1207/S15327876MP1404_3
- Parks, S. H., & Pilisuk, M. (1991). Caregiver burden: Gender and the psychological costs of caregiving. *American Journal of Orthopsychiatry, 61*, 501–509. doi:10.1037/h0079290
- Roberts, W., Strayer, J., & Denham, S. (2014). Empathy, anger, guilt: Emotions and prosocial behaviour. *Canadian Journal of Behavioural Science, 46*, 465–474. doi:10.1037/a0035057
- Robertson, S. M., Zarit, S. H., Duncan, L. G., Rovine, M. J., & Femia, E. E. (2007). Family caregivers' patterns of positive and negative affect. *Family Relations, 56*, 12–23. doi:10.1111/j.1741-3729.2007.00436.x
- Rovner, B. W., Zisselman, P. M., & Shmueli-Dulitzki, Y. (1996). Depression and disability in older people with impaired vision: A follow-up study. *Journal of the American Geriatrics Society, 44*, 181–184. doi:10.1111/j.1532-5415.1996.tb02436.x
- Rusbult, C. E., Bissonnette, V. L., Arriaga, X. B., Cox, C. L., & Bradbury, T. N. (1998). Accommodation processes during the early years of marriage. In C. E. Rusbult, V. L. Bissonnette, X. B. Arriaga, C. L. Cox, & T. N. Bradbury (Eds.), *The developmental course of marital dysfunction* (pp. 74–113). New York, NY: Cambridge University Press.
- Savundranayagam, M. Y., Montgomery, R. J., & Kosloski, K. (2011). A dimensional analysis of caregiver burden among spouses and adult children. *The Gerontologist, 51*, 321–331. doi:10.1093/geront/gnq102
- Scott, E. L., Eng, W., & Heimberg, R. G. (2002). Ethnic differences in worry in a non-clinical population. *Depression and Anxiety, 15*, 79–82. doi:10.1002/da.10027
- Silverstein, M., Gans, D., & Yang, F. M. (2006). Intergenerational support to aging parents: The role of norms and needs. *Journal of Family Issues, 27*, 1068–1084. doi:10.1177/0192513X06288120
- Tangney, J. P., Stuewig, J., & Mashek, D. J. (2007). Moral emotions and moral behavior. *Annual Review of Psychology, 58*, 345–372. doi:10.1146/annurev.psych.56.091103.070145
- Umberson, D. (1992). Relationships between adult children and their parents: Psychological consequences for both generations. *Journal of Marriage and Family, 54*, 664–674. doi:10.2307/353252
- van Kleef, G. A., De Dreu, C. K., Pietroni, D., & Manstead, A. S. (2006). Power and emotion in negotiation: Power moderates the interpersonal effects of anger and happiness on concession making. *European Journal of Social Psychology, 36*, 557–581. doi:10.1002/ejsp.320
- Wester, S. R., Vogel, D. L., Pressly, P. K., & Heesacker, M. (2002). Sex differences in emotion: A critical review of the literature and implications for counseling psychology. *The Counseling Psychologist, 30*, 630–652. doi:10.1177/00100002030004008
- Wong, Y., & Tsai, J. (2007). Cultural models of shame and guilt. In J. L. Tracy, R. W. Robins, & J. P. Tangney (Eds.), *The self-conscious emotions: Theory and research* (pp. 209–223). New York, NY: Guilford Press.

Author Biographies

Haowei Wang, MS, is a PhD candidate in Gerontology at the McCormack Graduate School of Policy and Global Studies, University of Massachusetts Boston. Her research interests include parent–child relations in later life, psychosocial aspects of aging, and social determinants of healthy aging.

Kyungmin Kim, PhD, is an assistant professor of Gerontology at the McCormack Graduate School of Policy and Global Studies, University of Massachusetts Boston. Her research focuses on dynamic aspects of adult child and parent ties across various group levels (dyad, family, and culture/society) and time levels (daily and short-/long-term interval).

Kira S. Birditt, PhD, is a research associate professor in the Institute for Social Research, University of Michigan, Ann Arbor. Her research focuses on how people react to interpersonal problems and whether those reactions vary across the lifespan. Her research also examines the circumstances under which positive and negative aspects of relationships are associated with physical and psychological well-being.

Steven H. Zarit, PhD, is a professor of Human Development and Family Studies at Pennsylvania State University. His research includes family caregiving for the elderly, health and functioning of the oldest old, development of prevention and treatment programs for mental health problems in later life, and cross-national comparisons of old age care systems.

Karen L. Fingerman, PhD, is a professor of Human Development and Family Sciences at University of Texas at Austin. Her research includes various topics on adult development/aging and family ties, focusing on social and emotional processes across adulthood, health, and well-being.