Dear Participant,

Do you remember being in the Harvard Survey of Health and Quality of Life back in 1995-96? I am pleased to send you an update on this major national study. First, I would like to remind you of what our study was about. We conducted interviews with over 7,000 Americans between the ages of 25 and 74. All of these people were good enough to share with us a lot of information about their health, work experiences, family life, and many aspects of their outlook on life and personal concerns. Since this time, scientists from many fields have been analyzing the data, and more than a hundred articles and papers have appeared in books and professional journals. We thought you would be interested in knowing what we have learned about the health and well-being of midlife Americans. This newsletter highlights some of the findings from our study and also informs you about our future plans.

Second, we are happy to report that thanks to a grant from the National Institute on Aging, we hope to contact as many of you as possible to carry out another round of this exciting study. The new study is known as MIDUS (Midlife in the U.S.) and will involve 40 investigators from 16 different universities. All of the research activities will be coordinated from the study’s central headquarters—The University of Wisconsin-Madison. Our goal is to investigate “pathways to health and illness” as people age. We want to understand what factors (biological, psychological, social) explain why some individuals remain healthy and well across the decades of adult life, while others become physically or mentally ill. We are also very interested in resilience—why some are able to respond well to difficulties and life challenges, while others are not.

We hope you will enjoy this brief sketch of MIDUS findings. And, we hope you will continue with us as we seek to learn about the changes that have occurred in your lives since we last interviewed you. During the coming year you will hear from us again about the new study. If you would like more information in the meantime, please contact us at the locations listed on the last page.

Sincerely,

Carol D. Ryff, Director
MIDUS National Study of Health and Well-Being

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What did you tell us about yourselves?

Our study asked about more aspects of midlife than any other study of its kind. The circles on the left show some of the kinds of information collected. These questions were answered by more than 7,000 individuals between the ages of 25-74. Participants in the study came from across the continental United States. They varied in terms of their education, income, occupations, and racial/ethnic background.

Not only did we conduct a telephone interview and two comprehensive mail surveys with our respondents, we also carried out several "satellite" studies built around the main project. Approximately 1,500 of you participated in an eight-day daily diary study of daily stress and another 724 of you participated in a study on "turning points" in your lives, and 83 of you participated in longer interviews about your well-being. We also recruited some of your siblings to participate in the study to understand family influences on health and well-being. A separate sample of twins (998 pairs) was involved to study genetic influences. Our success in collecting all of this information is unprecedented. It is because of your generosity that we were able to accomplish this broad study of Americans at midlife. Thank you!
Surprisingly, although women report devoting more effort toward their health, men report better health overall.

As we grow older, we are more likely to develop health problems and more of our time is devoted to maintaining our health. We were interested in how men and women differ in this regard. Although both men and women reported having more health problems as they aged, this was truer for women, even though women reported devoting more effort toward their health than men. We also found that men were more likely to report having alcohol or drug problems, which may contribute to poorer health conditions. So although men may have higher incidence of drug or alcohol problems, they didn’t report having as many health problems as women did. Is this because men are actually healthier, or is it because women are more willing to report their health problems? We will need further studies to answer that question.

For many of us, the research tells us what we already know—as we go up in years, so does our waistline. During midlife, there is a high percentage of people who are overweight and we find that many people are not exercising.

What about smoking?

We found that only 40% of current smokers believe they have higher-than-average risk for cancer. Similarly, only 29% of smokers believe they have greater risk for heart disease. This is cause for concern!

Did you know that menopause occurs at markedly different ages for women; and most women report feeling relief when they reach their menopausal years?

Your aging mind is quicker than you might think.

“Midlife is a time of high cognitive functioning!” say MIDUS researchers. Although we commonly believe that it takes us longer to recall or process information as we age, this may not happen until old age and, even then, not in all areas. Middle-aged adults, on average, showed little or no decline in mental speed, reasoning, and short-term memory compared to younger adults and they also performed better than the elderly in these same areas. What’s even more striking is that middle-aged and elderly adults both outperformed younger adults in vocabulary tests!
During our lifetime we are faced with many events that draw out both our positive and negative emotions—birth of a child, marriage, divorce, or death in the family. As we age, we expect that most of us will have to deal with one or more of these kinds of events, and our research tells us that for many, our emotions even out over time. We may be less likely to overreact and more likely to handle issues with increased confidence. MIDUS researchers found that our older respondents reported more positive emotions (like feeling cheerful or proud) and fewer negative emotions (like sad or angry) relative to younger adults. Perhaps it takes more to get some of you upset as you age.

Some of us spend a great deal of time cultivating our homes, families, and jobs so that they are emotionally supportive. Relationships and work play a role in our emotional state as well as the events referred to above. Researchers have found that both relationship and work stresses have a greater impact on emotions during midlife than any other time in our lives.

We found that minority respondents tended to report a high-level of well-being.

Data about children, marriage, work, finances, and overall life show that most Americans report having a high quality of life and that older people report higher overall quality of life compared to younger adults.
Our findings show that many of you have married and have children—in fact, 9 of 10 women and 7 of 8 men have married during their lives and approximately 90% of you have children.

Stress is something we handle better with age.

We all know that stress in our lives can affect our health and that it might even make us age more quickly. Stress in our work, at home, and within our relationships may do harm if we don't react well to it and adapt our behavior in order to relieve it. All of us react differently to stress and stressful events—it may be more or less difficult for some to face deadlines at work or conflicts with a spouse, or moving their entire family across the country. However, on average, it seems we become better equipped to handle stress as we age. Older men and women reported fewer daily stressors and compared to younger and midlife adults, older adults did not find stress they experience nearly as disruptive and unpleasant.

So who is feeling more stressed out and, what exactly are they are stressed about? Well, for middle-aged adults, stress about finances occurs more often than it does for younger and older adults. Women also reported feeling more overloaded, had more stress around household work, children, and whether they felt respected, than did men. Men, on the other hand, reported more stress related to co-workers, job procedures, and disciplining employees, and reported that stress posed more of a risk to their financial situation.

Is your glass half full or half empty?

Do you feel confident that you can meet your goals in life or do you feel that there are just too many obstacles to overcome? Are there certain areas in your life that you have more control over than others? MIDUS researchers wanted to learn more about this phenomenon—what they refer to as "sense of control." Our study found that older adults, on average, reported that they had greater control over their lives than did younger or middle-aged adults. However, even though older adults reported the highest level of control over their lives, they also said they encountered the most obstacles. We also probed adults’ sense of control in a number of different life domains. The graph below shows age differences in these responses. Some areas show gains in sense of control with age while other areas show decline.
Workers who felt that work had a positive impact on their health had a variety of work and personal characteristics.

**WORK**
- Less job pressure
- Work required physical demands
- Less repetitive
- More likely to work part-time

**PERSONAL**
- Greater decision ability and job skills
- More likely to be a minority member
- Greater intelligence aptitude
- Older adults (on average)
- Less education
- More outgoing

Did you know that having a good job may improve your mental health?
Gardens go with good health.

Having a good job is important to us because jobs can provide us financial stability, allow us to interact socially with others, provide structure to our lives, and contribute to our personal identity. MIDUS investigators wanted to find out how people rate their jobs—are they good or bad? And based on these ratings, they were also interested in links to their health.

The MIDUS findings show that a majority of you are employed in adequate jobs, which means that your jobs generally meet the "good job" criteria above. However, approximately 10% of you reported that you were in barely adequate jobs (above poverty level, but did not provide basic economic resources), or that you were inadequately employed (made a poverty wage). Women, people with less education, and older workers were the ones most likely to be in barely adequate or inadequate jobs. People of color also reported being inadequately employed more often than whites.

Is having a bad job linked to poorer health? The results tell us that those of you who reported having a good job were less likely to report poor health than those of you in inadequate jobs, or those of you who were unemployed. Other studies have shown that better health is linked with having a job, higher income, and more education, but our research tells us something different. Our research tells us that people whose jobs are good have better health—whether they have higher or lower levels of education, income, and wealth, or whether they are black or white, male or female.

H ave you experienced discrimination?

Take a look at the list on below. Have you experienced any of these events in your life? We found that one third of you reported that you experienced an occurrence of at least one of these events in your lifetime. People ages 22-44 reported the highest prevalence of these events, whereas those of you 65 and older reported the lowest, and blacks reported a higher prevalence than whites.

Men reported that they experienced discouragement by a teacher, being denied a bank loan, and being hassled by police more often than women. Women, on the other hand, reported being denied or receiving inferior service more often than men. Men reported experiencing these events on a daily basis more than women did, and blacks experienced more of these events daily than did whites.

- Not hired for a job
- Not given a promotion
- Denied/received inferior service
- Discouraged from seeking higher education
- Denied a bank loan
- Hassled by police
- Fired from a job
- Prevented from renting/buying a home
- Denied a scholarship
- Denied/received inferior medical care
- Forced to leave neighborhood

O ur study showed that those who experienced higher levels of discrimination were more likely to report higher levels of depression and anxiety.
The MIDUS Study has produced several publications in books and scholarly journals. To find out more go to:
http://midmac.med.harvard.edu/publist.html

If you would like more information about the project, feel free to contact us at:

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