Adaptation Patterns among Couples in their Midlife

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ABSTRACT

Aimed at addressing the problematic situation of individuals experiencing crises in midlife. The assumption that approach and resolution to midlife crisis varies from person to person. Some people, therefor, may successfully overcome midlife crises while, others may not be able positively cope with them.

Keywords: Adaptation patterns, couples, midlife

1. INTRODUCTION

Midlife can be a time of great change, not just physically, but emotionally and spiritually, as well. Men and women midlife crises when they reach the ages of forties and sixties. They are dissatisfied with their lives and feelings of, discontent which sometimes, if not oftentimes, lead them to do, things are not in the best interest of themselves and their families and may be detrimental to their marital harmony. In many cases, midlife crisis ends up in the separation or divorce of spouses. But in other cases, couples take this period as a challenge to work out their problems so they are able to save their marriage despite stresses attendant to midlife crisis (Jung, 2010)

Married persons which mostly constitute the population of midlife year, when they begin to realize that their life is no longer what it used to be or what they expect it to be, the feeling of dissatisfaction may pervade their being, think that they are failure or unfortunate. Some would wallow in self-pity; others, others would try to make things better for them by diverting their interest in positive or negative means. With midlife comes the realization that one has grown old with many bridges that had been crossed and a lot of trials that had been hurdled. While before poor diet, lack of exercise and bad sleeping habits seem to have not caused a toll on their physical and emotional midlife-aged people often health, experience symptoms that signal the beginning of significant physical and emotional change. The menopause affects women going through the change in her own way. For men, the change of midlife may be more subtle, but they are happening, nonetheless (Lachman, 2004)

2. DISCUSSION

What's a midlife crisis? It's the stuff of jokes and stereotypes-the time in life when someone does outrageous, impractical things like quit a job, buys a red sports car, or dumps your spouse.

A midlife crisis is experienced between the ages of 40 and 60, characterized by some form of emotional transition and is normal part of the maturing process. Most people seem to pass through this period smoothly without making major life changes. But for some, a midlife crisis is more complicated, emotionally uncomfortable, and may lead to depression (Whitebourne, 2013: 310).

A midlife crisis could be caused by aging self or aging combination with changes, problems or regrets over work or career, spousal relationship, maturation of children, aging or death of parents, and physical changes associated with aging (Spaeder, 2008: 33).

According to Lachman (2004), personality type and a history of psychological crisis are believed to predispose some people to this "traditional" midlife crisis. People going through this suffer a variety of symptoms and exhibits a disparate range of behavior.

On the other hand, certain environmental demands and pressures produce stress in substantial numbers of people and groups differ in their sensitivity and vulnerability to certain types of events, as well as in their interpretation and reaction (Lazarus, 1996: 52)

Individuals in their midlife experience undue stress resulting from the realization that they are no longer young. Schafer defines stress as the arousal of mind and body in response to demands made upon them (Schafer, 2000: 19).

On the other hand, stress can be defined to any event in which the environmental demands, internal demands, or both tax, or exceed the adaptive resources of an individual social system (Monat and Lazarus, 1991: 19)

Indications of stress, whether those experienced in otherwise, maybe physiologic, midlife or psychological, or cognitive. Physiologic indications to stress may vary depending on the individual symptoms of stress resulting from activation of the sympathetic and neuroedocrine system of the body. Psychological manifestations of stress include anxiety, fear, anger, depression and unconsciousness of ego defense mechanism. Cognitive indications of stress are their responses that include problem solving, structuring, self-content or self-discipline, suppression and fantasy (Monat and Lazarus, 1991: 132).

One on-line article is about how one can help him/herself and his/her spouses survive midlife crisis in order to save the marriage without costing to much emotionally on both parties. The following are the advices offered: focus on yourself and your children, set clear boundaries with your spouse, process your anger in a healthy way, don't initiate relationship talks with your spouse, listen without passing judgment, get into therapy and do what is right for you (Mayer, 2017: 19).

Coping is the cognitive and behavioral effort to manage specific internal and/or internal demands that are appraised as taxing or exceeding the resources (Folkman and Lazarus, 1980).

Two types of coping strategies have been described: problem-focused and emotion-focused. Problem-focused coping refers to efforts to improve a situation by making changes in taking some action. Emotion-focused coping includes thoughts and actions that relieve coping do not improve situation, but the person after feels better (Kozier et.al, 1998: 1016-1018).

Coping strategies are also viewed as long-term or short-term. Long-term strategies are constructive and realistic. For example, in certain situations, talking with others and trying to find out more about the situation are long-term strategies.

Short-term coping strategies can reduce stress in tolerable limit temporarily but are ineffective ways to permanently deal with reality. Examples are drinking alcoholic beverages or drugs, daydreaming and

fantasizing, relying on belief that everything will work out, and giving into others to avoid anger (Kozier et.al, 1998: 1016)

Active coping strategies are either behavioral or psychological responses designed to change the nature of the stressor itself or how one thinks about it, whereas avoidant coping strategies lead people into activities (such as alcohol use) or mental states (such as withdrawal) that keep them from directly addressing stressful event (Kozier et.al, 2008: 1016)

Generally speaking, active coping strategies, whether behavioral or emotional, are thought to be better ways to deal with stressful events, and avoidant coping strategies appear to be a psychological risk factor or maker for responses to stressful events (Kozier et.al, 1998).

Findings of some research point out that majority of marriages end in divorce through the emotional change. In such situation, there are several key factors associated with the relationship deterioration, to wit: extra marital affair, lack of communication, financial problems, and depression. Anyone of these manifestations could lead to the eventual need of midlife treatment and counseling, if not divorce or separation (Folkman and Lazarus, 1980)

Shek (1991) examined the linkage between marital quality (marital adjustments and marital satisfaction) and mental health (midlife crisis symptoms and life satisfaction) as perceived health status in 378 Chinese married couples over 2 years. Results showed that marital adjustment and marital satisfaction were concurrently related to midlife crisis symptoms, life satisfaction, and perceived health at time 1 and time 2. Longitudinal and perspective analyses (time 1 predictors predicting time 2 criterion variables) suggest that the relationships marital quality and health measures are bidirectional in nature While marital quality predicted changes in midlife crisis symptoms in husband, but not in wives; marital quality predicted changes in perceived health status in wives, but not in husbands. Results also showed that mental health influenced the marital adjustment of the wives, but not the husbands, overtime.

A study by psychologist Dr. David M. Almeida, an associate professor of family studies and human development at the University of Arizona at Tucson, titled "National Study of Daily Experiences" is an indepth study of the "National Survey of Midlife in the United States" carried out by MacArthur group. He

studied day-to-day stressors- fights with a spouse, work deadlines and the like-that he says give more accurate picture of well-being than such rare life events as divorce or a loved one's death that most stress researchers study.

While younger adults experience these day-to-day stressors more frequently, Almeida has found middle life adults experience more "overload" stressorsbasically juggling too many activities at one time. There are gender differences, however. Midlife women shoulder more "crossover" stressorssimultaneous demands from multiple domains like work and family-then their male counterparts and report higher levels of distress as a result. Socioeconomic status also makes a difference, Almeida has found. He found out that while midlife people with lower educational status report the same number of stressors as those with higher educational status, they are more likely to rate stressors as more severe. According to Almeida, the reason why people have these stressors is that they actually have more control over their lives than earlier and later in life.

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