Chronology Chart

We will begin by asking for a chronicle of events since 1981. Please fill in the chart below as carefully as you can. If you think of more things later, turn back and fill them in. Be sure to include the following:

Changes in relationships with important people
Geographic moves, travels, or changes in living situations
Changes in work
Major changes in income
Changes in health
Births and deaths
Major achievements of your own or important others
Changes in important interests or commitments not included above

1981

1982

1983

1984

1985

1986

1987

1988

1989

Would you consider any of these years among the happiest, unhappiest, busiest, or most confusing or conflicted of your adult life? If so, please write the year or years in the blanks below.

Happiest _____
Unhappiest _____
Busiest _____
Most confusing or conflicted _____

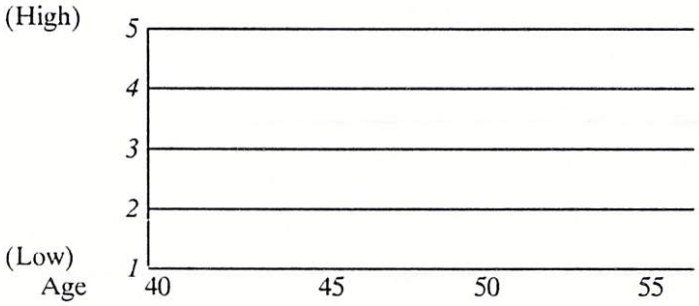
Aspects of Your Life

Everybody is engaged in social roles that change over time. For example, a woman's role as mother changes as her children grow up. Similarly, changes occur in one's role as daughter or marital partner, in one's occupational career, in the course of one's participation in volunteer political, social or religious activity, or the practice of an art or craft. The amount of time and energy involved in any particular role changes over time.

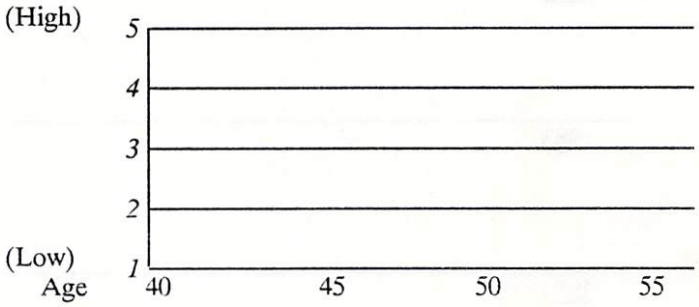
In the space below, please plot the level of involvement that you have felt since age 40, or anticipate in the near future, in the main aspects of your life. By "involvement" we mean expenditure of time and interest. If you have had more than four of these on-going roles, choose the four most important. If you have had fewer than four, leave graphs empty as needed.

Be sure to label clearly what each or role is.

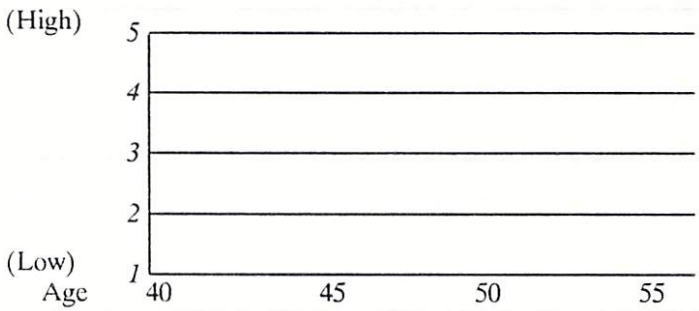
Role #1 _____



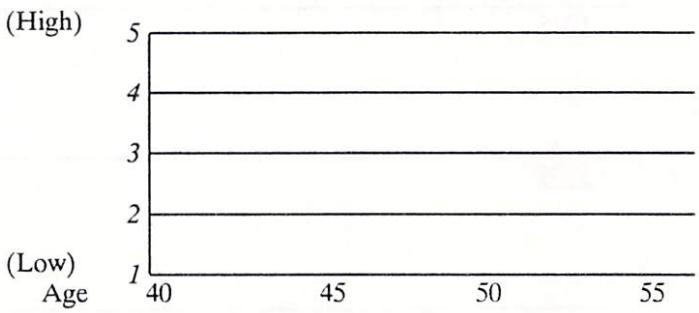
Role #3 _____



Role #2 _____



Role #4 _____



What do you think that people expect you to be doing during your 50s?

What is your personal agenda for your 50s?

How old do you feel most of the time?____ What age would you most like to be?____
To what age would you like to live? ____

Feelings about Life Now and Ten Years Ago

Please rate the items below according to how descriptive they are of your present life experience. Circle 1 to mean not at all descriptive, 2 to mean somewhat descriptive, and 3 to mean very descriptive. After each item, circle + if the feeling is stronger now than it was about 10 years ago; circle - if it is weaker now. Please make circles carefully.

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1 2 3 Being selective in what I do. + -
1 2 3 Liking an active social life. + -
1 2 3 Being treated as an older person. + -
1 2 3 Feeling established. + -
1 2 3 A sense of being my own person. + -

1 2 3 Intense interest in inner life. + -
1 2 3 Rebellion against constriction. + -
1 2 3 Feeling my life is moving well. + -
1 2 3 Being very interested in sex. + -
1 2 3 Feeling secure and committed. + -

1 2 3 Excitement, turmoil, confusion about my impulses and potential. + -
1 2 3 Coming near the end of one road and not yet finding another. + -
1 2 3 Feeling incompetent or not as strong as other people. + -
1 2 3 Feeling the limits of what I will be able to accomplish. + -
1 2 3 Discovering new parts of myself. + -

1 2 3 Focus on reality--meeting the needs of the day and not being too emotional about them. + -
1 2 3 A new level of productivity or effectiveness. + -
1 2 3 Anxiety that I won't live up to opportunities. + -
1 2 3 Feeling the tension between young and old. + -
1 2 3 Concern about the health of those close to me. + -

1 2 3 Religious or philosophical interests. + -
1 2 3 Bringing both feeling and rationality into decisions. + -
1 2 3 Feeling needed by people. + -
1 2 3 A new level of intimacy. + -
1 2 3 Looking old. + -

1 2 3 Thinking a lot about death. + -
1 2 3 Appreciating my complexity. + -
1 2 3 Influence in my community or area of interest. + -
1 2 3 Doing things for others and then feeling exploited. + -
1 2 3 Interest in my family background. + -

1 2 3 More involvement with my parents or siblings. + -
1 2 3 Appreciation and awareness of older people. + -
1 2 3 Feeling optimistic and cheerful about the future. + -
1 2 3 Worry about the children. + -
1 2 3 Effort to ensure that younger people get their chance to develop. + -

1 2 3 Searching for a sense of who I am. + -
1 2 3 Fears of competition with other women. + -
1 2 3 Wishing I had a wider scope to my life. + -
1 2 3 Feeling angry at men and masculinity. + -
1 2 3 Feeling the importance of time's passing. + -

1 2 3 Feeling my personality is set. + -
1 2 3 Feeling very much alone. + -
1 2 3 Realizing larger patterns of meaning or relationship. + -
1 2 3 Reducing the intensity of my achievement efforts. + -
1 2 3 More satisfied with what I have, less worried about what I won't get. + -

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In the space below, please tell us in what ways you feel you have changed most since your early 40s:

Difficult Times, Times of Change

All of us have times of personal difficulty. Please think of the most unstable, confusing, troubled, or discouraged time in your life since college--the one with most impact on your values, self-concept, and the way you look at the world.

How old were you? _____ About how long did this period last? _____

After a few questions, we will ask you to write an account of this period. In the blanks below, please put an "X" by each word or phrase that describes your experience.

Were you at this time ___ angry, ___ restless, ___ conflicted, ___ anxious, ___tense, ___ self-absorbed, ___ mistrustful, ___ uninterested in usual activities, ___ infatuated, ___ unable to get started at things, ___ irritable or quarrelsome, ___ excited, ___ depressed, ___ slow in thinking, ___ inefficient or blocked at work, ___ looking for something, ___ lonely, ___ self-punishing?

Did you have ___ feelings of being unable to cope, ___ trouble in concentrating, ___ trouble sleeping, ___ excessive need for rest, ___ vivid dreams, ___ lack of appetite, ___ lack of sexual desire, ___ obsessive sexual desire, ___ unusual thoughts or images, ___ dreamlike states of mind, ___ unaccountable mood changes, ___ nasty surprises, ___ insights, ___ fears (of what?), ___ physical symptoms (what were they?)

Did you find others ___ irrelevant, ___ intensely relevant, ___ unable to help, ___ helpful, ___ insensitive, ___ uninterested, ___ critical, ___ unaware, ___ other (what?).

Did you want ___ to be by yourself, ___ to be loved, ___ to die, ___ to sleep, ___ to drink, ___ to fight, ___ to read, ___ to be a different person, ___ to brood, ___ to fly, ___ other (what?)

Did you feel then that you knew what was wrong? ___Yes, ___No, ___ Only in part
If yes or in part, what did you think?

Did you talk with anyone about your condition? ___ Yes, ___ No.
If yes, with whom?

If a physician or therapist, was your condition given a name?

How long were you in therapy?
What medication or treatments were you given?

Have you experienced frequent depressions (___ yes, ___ no), are you often tense and anxious (___ yes, ___ no), and have you been inclined to outbursts of rage (___ yes, ___ no)?

On the next page, tell the story of what led up to the troubled time you have described--what features of your life situation, what transition or unusual events. Tell how you felt and what you did. If you had dreams, images, or states of mind that capture your experience, please describe them. If there were different phases in this troubled time, please tell us about them.

Tell us whether there were negative or painful consequences, such as loss of partner or job, illness, rash decision, etc. Tell also whether there were consequences you regard as positive, such as a decision reached, new coping techniques developed, new perspective attained, new interests or goals, a needed change. If you see this experience in relation to other troubled times, explain briefly. Please use additional sheets of paper as needed.

(Start your story here.)

Have you had a major change in self-concept or direction of interest or way of seeing or experiencing or evaluating the world that did <u>not</u> come in the context of a troubled time? If so, please describe briefly the change, why you think it happened, and your age at the time.

Goals and Values

What were your goals for yourself in your 20s and 30s?

What are your goals for yourself now? If your goals have changed, why?

Do you feel that you have found good use for your talents? How so?

What do you feel were the values you lived by in your 20s and 30s?

What values do you think you will live by from here on? If your values have changed, why?

To what extent have you been able to express your values?

Many people hope to become wiser as they grow older. Would you give an example of a bit of wisdom you have acquired and how you came by it?

Marriage & Marriage-Like Relationships

What have been the satisfactions, challenges, troubles, in your couple relationship over the past 10 years?

What changes have taken place in how you and your partner spend time now, compared with 10 years ago? (Put "m" next to each number you circle for yourself ("me"), and "p" next to the numbers you circle for your partner.)

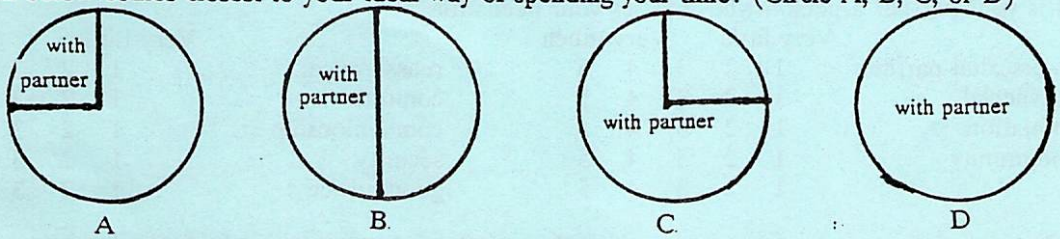
	Much less now				Much more now
Work	1	2	3	4	5
Family	1	2	3	4	5
Community Service	1	2	3	4	5
Time as a Couple	1	2	3	4	5
Social Life	1	2	3	4	5
Recreation/leisure apart from partner and children	1	2	3	4	5

How many hours each week are spent in household tasks by you? _____
By your partner? _____ By others? _____ If others, who are they ? _____

How satisfied are you with these arrangements?
Very _____, Fairly _____, Somewhat _____, Not very _____, Not at all _____.

	Not at all				Very Well
How well does your partner understand you--your feelings, likes and dislikes, problems you may have?	1	2	3	4	5
How well do you understand your partner?	1	2	3	4	5
How much do you enjoy spending time with your partner?	1	2	3	4	5
How often do you disagree about how much to spend on various things?	1	2	3	4	5
How satisfied are you with the way decisions are made?	1	2	3	4	5
Overall, how satisfied are you with this relationship?	1	2	3	4	5

Which graph below comes closest to your ideal way of spending your time? (Circle A, B, C, or D)



A B C D

Which graph best describes the way you actually spend your time? _____

Your Partner

What are your partner's distinctive characteristics? How has he/she changed as a person over the past ten years? What have been the central concerns in your partner's life during this period?

What is you partner's age? ____. Occupation? _____. Income? _____.

Most of our partners have times of trouble or distress. During your life together please indicate whether such times in the life of your partner were:

very rare	1	2	3	4	very frequent
very brief	1	2	3	4	very long
very mild	1	2	3	4	very severe

What was wrong and what were the effects on you?

To what extent do you feel that your partner is fulfilled or actualized in terms of your partner's own needs and expectations?

1--------2--------3--------4--------5
Unfulfilled Fulfilled

Please explain the reasons for your rating:

To what extent is your partner a person who satisfies your needs for:

	Very little				Very much		Very Little				Very Much
appreciation as a sexual partner	1	2	3	4	5	reassurance	1	2	3	4	5
making me feel special	1	2	3	4	5	comfort	1	2	3	4	5
intellectual stimulation	1	2	3	4	5	companionship	1	2	3	4	5
status in the community	1	2	3	4	5	security	1	2	3	4	5
vitality	1	2	3	4	5	good advice	1	2	3	4	5

Many couples find that their sexual experience together changes through the years. Please describe this evolution in your relationship, and indicate how frequent and how satisfying your sexual experience is currently.

Couples Conflict Checklist

Please indicate how true each of the following items is in your relationship by putting the appropriate number next to the item:

1 = not, 2 = slightly, 3 = somewhat, 4 = very

___ Partner is too bossy or controlling
___ You are too bossy or controlling
___ Partner wants too much affection
___ You want too much affection
___ Partner is not sociable
___ You are not sociable
___ Partner is too dependent
___ You are too dependent
___ Partner is too independent
___ You are too independent
___ Partner is tense and irritable
___ You are tense and irritable
___ Partner's views differ from yours
___ Your views differ from partner's
___ Partner not happy in sexual relations
___ You are not happy in sexual relations
___ Partner does not respect you
___ You do not respect partner
___ Partner is sloppy or disorganized
___ You are sloppy or disorganized
___ Partner is unpredictable
___ You are unpredictable
___ Partner is jealous
___ You are jealous
___ Partner not affectionate and personal enough
___ You are not affectionate and personal enough
___ Partner doesn't make enough money
___ You don't make enough money
___ Partner spends too much money
___ You spend too much money
___ Partner doesn't carry out responsibilities
___ You don't carry out responsibilities
___ Partner resents your admired qualities
___ You resent partner's admired qualities
___ Partner resents your lack of admired qualities
___ You resent partner's lack of admired qualities
___ Partner is boring.
___ You are boring.
___ Other (what?) _____
_____

Your Couple Relationship and the "Empty Nest"

How is your relationship with your partner different now that the children are growing up? Do you treat each other differently? Have your "roles" changed or been modified? If so, how?

Is the atmosphere in your home: ___ more relaxed, ___ not very different, ___ somewhat dull, ___ more tense? How are any changes manifested?

Has sacrifice been an important aspect of your experience in the child-rearing years? If so, when and under what circumstances? Is sacrifice still a theme in your relationship to your family?

Divorce
(Ending a Relationship)

Please write a brief history of your divorce. How and why did your marriage end, and what was that process like for you?

What were your circumstances at the time--where were you living, working, etc.?

How much time elapsed between your first thoughts of ending the relationship and the actual separation? _____. If applicable, between separation and divorce? _____. Please describe ways in which you changed during this interim period.

What immediate changes did you make in your life?

What have been your main worries or concerns?

Have you changed your ideas about what you want from a relationship? How are your intimate relationships different?

How has your self-concept changed as a result of your divorce? Are there aspects of your personality that have changed as a consequence?

Divorce in Perspective

The upheaval of divorce happens to women at many ages, who are leaving very different kinds of relationships, and who then pursue varied paths. Please consider the impact of your divorce experience in shaping your subsequent life.

What long-term changes in your life do you see as a consequence of divorce?

To what extent do you feel the divorce was your choice? 1----2----3----4----5
My choice Imposed on me

What did you find the hardest?

What, in retrospect, are you glad for?

How did the divorce process change you as a person, if at all?

What aspect of yourself was most in need of mending or comfort as a result of the divorce?

How, if at all, did your divorce change your ideas or hopes about couple relationships?

How would you rate your former partner as a person? 1----2----3----4----5
Please comment on your rating. Quite low Quite high

Describe briefly the arrangements you and your former partner now have with regard to finances, child contact, and contact with each other.

Being Single

What have been the satisfactions and dissatisfactions, the challenges and troubles in your experience as a single person over the past ten years?

Have you had important romantic or couple relationship(s) since 1981? If so, please write a brief history, including: What is/was your partner like? What are/were the best and worst aspects, the high and low points of that relationship? What is the status of this relationship now?

Would you like to enter into a marriage or marriage-like relationship in the future? Why or why not? What are the concerns for single women in their 50s in forming and maintaining such a relationship?

Friends and Attachment Style

People have different kinds of friendships. There are old friends, friends important to us at a crossroads, people with whom we share leisure of work interests, neighbor friends, confidants, best friends, among many others. Please describe your current pattern of friendships. Tell us what needs your friendships fill for you and what you provide for your friends.

How has your pattern of friendships changed over the last ten years? Why?

Has your relationship with siblings and other relatives changed in the last 10 years? If so, how?

As you look back across your life (not just now), which of the following paragraphs most typically describes your feelings? (Please choose only one.)

____ I have found it relatively easy to get close to others and have been comfortable depending on them and having them depend on me. I have not often worried about being abandoned or about someone getting too close to me.

____ I have been somewhat uncomfortable being close to others; I have found it difficult to trust them completely, difficult to allow myself to depend on them. I have been nervous when someone gets too close, and often, love partners have wanted me to be more intimate than I have felt comfortable being.

____ I have found that others are reluctant to get as close as I would have liked. I have often worried that my partner didn't really love me or wouldn't have wanted to stay with me. I have wanted to merge completely with another person, and this desire has sometimes scared people away.

Work and Work-like Commitments

Please list below the main facets of your work history since 1981. List your positions or activities in chronological order.

Approximate Dates	Paid/ Unpaid	Hours per week	Job Title and Nature of Your Work

Your earned income:

___ not currently working for pay
___ under $5000
___ $5,000-$9,999
___ $10,000-$19,999
___ $20,000-$29,000
___ $30,000-$39,000
___ $40,000-$49,000
___ $50,000 and over

Are personal investments, trust funds, etc. a source of your income?
___ substantial; ___ moderate; ___ minor; ___ no

How important is work now in your sense of self?
___ very important; ___ important; ___ somewhat important; ___ not very important

Has work changed in its personal significance for you since 1981? If so, how has it changed? If not, please describe its ongoing significance.

Overall, how satisfied are you with your current work? Circle 1 to mean very dissatisfied up to 5 to mean very satisfied. Then rate the relative satisfaction you feel with various aspects of your work. Cross out any that are inapplicable.

1 2 3 4 5	All aspects of my work, taken together.
1 2 3 4 5	Challenge or opportunity for achievement.
1 2 3 4 5	The usefulness of my work.
1 2 3 4 5	Control over what I do - autonomy.
1 2 3 4 5	The impact of my work on others.
1 2 3 4 5	Level of complexity of thought processes required.
1 2 3 4 5	Financial remuneration.
1 2 3 4 5	Status in my organizational hierarchy or field.
1 2 3 4 5	Liking for the concrete activities I engage in.
1 2 3 4 5	Security, including benefits.
1 2 3 4 5	Appreciation from the people I help.
1 2 3 4 5	Interest, stimulation, and variety.
1 2 3 4 5	Relationship with my boss, or the people for whom I work.
1 2 3 4 5	Relationship with the people over whom or with whom I work.
1 2 3 4 5	Pleasantness of the physical work environment.
1 2 3 4 5	The way my work combines with other areas of life.

Please put an asterisk by the three aspects of work most important to you.

At present, are you ___beginning a new career, ___continuing to build a career, ___maintaining a career, ___reducing your career involvement, ___retired, ___not really a careerist? (Check all that apply.)

If you have stopped working, decreased your amount of paid work or changed to a less demanding job since 1981, what were the reasons? (Circle 3 to mean that the item below is very true, 2 to mean that it is somewhat true, and 1 to mean it is not true.)

1 2 3 I wanted less strain or pressure at work.
1 2 3 I wanted more time for personal interests.
1 2 3 I wanted more time for partner.
1 2 3 Partner wanted more of my time.
1 2 3 I needed more time to care for relatives or other family responsibilities.
1 2 3 It was what I could find after the termination of a previous job.
1 2 3 Other (what?)

Since 1981, if you have increased your involvement in work, or been promoted, or changed to a type or pattern of work that is no less demanding than your former work--what have you gained through the change? Have you lost anything through the change?

Since 1981, if you have not made a change in your work life, tell us whether you would like to make a change. Why and/or why not?

If you are working now, at what age do you expect to retire? (Best guess.)
___ 50-55; ___ 56-60; ___ 61-65; ___ 66-70; ___ over 70.

Since 1981, have you encountered, or do you expect to encounter, age or sex discrimination in your attempts to get started in work, change fields, or progress?

Are there aspects of your work or interactions with work associates that make you aware that you are getting older? If so, please describe these aspects and whether they are pleasant or unpleasant.

How have you changed in the way you do your work over the last 10 years? (Higher or lower ratio of head to heart, more/less delegation of responsibility to others, more/less confidence, different relation between home and work or partner and work?)

What challenges have you encountered or what recognition or setbacks have you received in your work in the last 8-10 years?

Does recognition have good, bad, or mixed effects on your work? How so?

How satisfied are you with your attainment in work up to now? 5 4 3 2 1
happy unhappy

Please describe why you feel as you do.

Do you have particular goals or aspirations for your work in the future?

What personal tension or conflict (fear of failure, competitiveness, attachment to family, etc.) has been most important in relation to your entering the labor force or carrying on your work life? How had your partner (present or past) contributed (if at all) to this conflict, its worsening or amelioration? How have you used, or coped with, this conflict? Has its importance changed over time?

How does time-allotment rank as a problem in your present life?

_____very pressing now, _____no worse than during most of my adult life, _____not as bad as it has been at other times, _____not very pressing at all.

How do you handle the problem of time pressures? Use 1 = not very true, 2 = somewhat true, and 3 = very true.

1 2 3 I schedule my life.
1 2 3 I make lists.
1 2 3 I enjoy pressure.
1 2 3 I delegate.
1 2 3 I tell myself the pressure will not last forever.
1 2 3 I often feel overloaded, under too much pressure.
1 2 3 I pay for services that reduce demands on me.
1 2 3 I give up sleep.
1 2 3 I am not a perfectionist.
1 2 3 I have a clear set of priorities.
1 2 3 I give up time for myself.
1 2 3 I try to do it all despite stress or fatigue.
1 2 3 I avoid getting involved in too many things.
1 2 3 Those I live with are flexible and helpful.

1 2 3 I do what I am interested in and let most other things wait.
1 2 3 I am well organized and get things done with reasonable efficiency.
1 2 3 If I have to disappoint someone, I try to make it up to them later.
1 2 3 I make sure that expectations of others are reasonable.

What is most likely to be short-changed when you are too busy?

What are you careful not to short-change?

Do you consider that you had one or more mentors (people in your field of work who encouraged and facilitated your development and success)?

_____ yes; _____ to some extent; _____ not much; _____ not at all

If yes, are you still in contact with your mentors, or how did the relationship(s) end?

Have you been a mentor? _____ yes; _____ to some extent; ____ not much; _____no

If you have been a mentor, how much have you enjoyed it? _____ not at all; _____ a little; _____ quite a bit; _____ very much

Please comment on your experiences (satisfactions, frustrations, etc.) with younger people in your work.

Health

General state of health

How would you rate your health compared to ten years ago?

1----------2----------3----------4----------5
Much worse Same Much better

To what extent do you expect your health to worsen in the next ten years?

1----------2----------3----------4----------5
Very little Very much

In what ways and how severely do health problems interfere with your life?

In the past year:

How many times did you visit doctors? _____ Why?

How many colds, flus, etc. did you have? _____

How many visits to dentists? _____ Why?

Do you have symptoms, such as headaches, indigestion, back pain, for which you often use medications? What are the symptoms?

What medications do you use for these symptoms, or for other health conditions?

To what extent do aches and pains make your life less pleasant?

(little effect) 1---2---3---4---5 (large effect)

In the past 10 years:

Have you been hospitalized? ___ Yes, ___ No. If yes, why, when, and for how long?

Have you had surgery? ___ Yes, ___ No. If yes, why and when?

Have you had cosmetic surgery? ___ Yes, ___ No. If yes, what kind and when?

Have you been in counseling or psychotherapy? ___ Yes, ___ No. If yes, why, when, and for how long?

Taking care of yourself:

Do you have a regular physician? ___ Yes, ___ To Some Extent, ___ No.
Do you have regular check-ups? ___ Yes, ___ To Some Extent, ___ No.
Do you perform breast self-exams regularly? ___ Yes, ___ To Some Extent, ___ No.
Do you tend to postpone seeing a physician? ___ Yes, ___ To Some Extent, ___ No.

How much control do you feel you have over your health?

5-----4-----3-----2-----1
Very Much None at all

Do you have health worries--for yourself, your parents, your partner, your children? If so, what are these? Do your parents, or others in your family, have health problems that you worry about getting? Please describe.

Health related personal habits:

Please check the box that best describes your personal habits.

	never	1/week	2-3/week	4-5/week	more
Eat red meat					
Eat fish					
Eat desserts/sweets					
Exercise vigorously					
Exercise moderately					

	none	rare	2-3/week	1/day	2/day	3/day	more
"Sinful snacks" (e.g, chips)							
Drink "real" coffee or tea							
Drink a glass of beer or wine							
Drink a glass of other alcohol							
Smoke a pack of cigarettes							
Smoke marijuana							

	never	rare	1/week	2/week	1/day	more
Use recreational drugs What?						
Take tranquilizers						
Take sleeping pills						
Take diet pills/stimulants						

How many hours of sleep do you need? _____. How many do you get? _____
Do you have trouble sleeping? ___ Often, ___ Sometimes, ___ Rarely. If often please describe.

Do you take medicines or drugs that affect your mood or energy level? If yes, what are they and how often do you take them?

Do you follow any special dietary recommendations? If yes, what are they?

If you have changed any of the personal habits listed above, what did you change? What were the circumstances of your change and when did it occur?

Current Relationship with your Parents

	Mother	Father
In what setting do your parents live? (family home, retirement community, retirement hotel, care facility, your home, etc.)		
If not in your home, how far from you do they live	_____	_____
We talk by phone? (please circle one)	daily, weekly, monthly, yearly, less than yearly	daily, weekly, monthly, yearly, less than yearly
We see each other	daily, weekly, monthly, yearly, less than yearly	daily, weekly, monthly, yearly, less than yearly
He/she would like to see me	daily, weekly, monthly, yearly, less than yearly	daily, weekly, monthly, yearly, less than yearly
I would like to see him/her	daily, weekly, monthly, yearly, less than yearly	daily, weekly, monthly, yearly, less than yearly
How much help do your parents need?	1 2 3 4 5 (little … much)	1 2 3 4 5 (little … much)

What kind of help do they need?

If help is needed, who provides it?

If you help to care for your parent(s), how many hours a week do you spend? _____
What do you do?

What decisions have had to be made about care of your parents? How were they made?

How do you feel about helping them?

Your Parent's Aging

What have been, or what were, the main problems and issues for your parents in their later years?

To what extent do you feel your mother and father did, or have done, a good job of getting older? (Circle a number between 1-5, where 5 is best.)

	Mother	Father
Developing greater maturity/integrity	1 2 3 4 5	1 2 3 4 5
Keeping up interests and relationships	1 2 3 4 5	1 2 3 4 5
Maintaining physical health	1 2 3 4 5	1 2 3 4 5
In the way they meet adversity	1 2 3 4 5	1 2 3 4 5
In financial planning	1 2 3 4 5	1 2 3 4 5
Being satisfied with self and life	1 2 3 4 5	1 2 3 4 5

Please comment on your ratings:

In what ways will you be like your mother or father when you are 75? How might you be different? How do you want <u>not</u> to be at age 75?

What has their aging process been like for you?

Looking back over your lifetime, to which parent did you feel closest? Why?

Which parent did you most value being appreciated by? Why?

In what ways did each parent show how valuable you were to them?

Mother:

Father:

Which parent did you feel calmest with? Why?

Which parent gave you most toward your ideals? In what respect?

Which parent did you most enjoy working at things or sharing projects with? Why?

Since you left college, how much financial support have you received from your parents?
Please comment.

(none) 1 ---- 2 ---- 3 ---- 4 ---- 5 (a great deal)

Deaths

Please describe the circumstances of the death of . What was most difficult for you? What was most helpful? What have been the consequences of this death for the way you have lived your life since? Have you changed in personality or sense of self? (If so, how?)

Family Ties

To what extent are you connected with relatives in an extended family network?

(Not at All) ___ 1 ___ 2 ___ 3 ___ 4 ___ 5 (Very Much)

Who in your family and/or your partner's family takes the responsibility for maintaining family ties?

Have relatives (other than parents) helped you out when you needed it? How?

Have you helped out relatives (other than parents) when they needed it? How?

Has a relative been an important positive or negative role model for you or your children? More generally, do the lives of the older members of the extended family have relevance for the younger members? How so?

Political Attitudes

How do you see yourself politically?

Quite Conservative	Moderately Conservative	Slightly Conservative	Slightly Liberal	Moderately Liberal	Quite Liberal

What position best expresses your view on these issues?

Right to Abortion

Oppose ---------- Favor

Capital Punishment

Oppose ---------- Favor

Equal Rights Amendment

Oppose ---------- Favor

Military Spending

Oppose ---------- Favor

Religion and Spiritual Seeking

In what religion, if any, were you raised? _____
Was your family ___ very, ___ somewhat, ___ slightly, ___ not at all religious?

What, if any is your religion or spiritual belief now? _____
If there has been a change, how and when did it take place?

How important is religion in your life? ___ very, ___ somewhat, ___ mainly nominal, ___ no religious conviction.

(If appropriate.) How important is religion to your partner and/or children?

Are you ___ very, ___ somewhat, ___ slightly, ___ not at all active in the program of a religious or spiritual organization? If appropriate, please describe the nature of your participation. What about this activity and affiliation do you value most?

Have there been times when the church or religion or spiritual concerns or spiritual experiences were particularly important to you? If so, please describe.

Impact of Social and Historical Events

How different has your life been from what you expected as a college senior?
(not very different) 1 2 3 4 5 (very different)

Were your ambitions and values in college different from those of your daughter (or a female relative or friend at the same age)? How so?
(not very different) 1 2 3 4 5 (very different)

Are the ambitions and values you hold now different from those your mother held at age 50? If so, how?
(not very different) 1 2 3 4 5 (very different)

What social condition or event (move from country to city, being an immigrant, the Depression, World War II, etc.) seems to you to have had the most influence on your parents' life style and values? In what way?

What social conditions or events have had the most influence on your life style and values? (World War II, the 50s, some of the various aspects of the 60s, and early 70s, etc.) In what way?

So far, what social conditions or events are having the most influence on the life style and values of your children (or young people you know in their 20s)?

Have there been social, literary, or political statements or events that were especially important in leading you to crystallize or articulate your personal point of view, or to reevaluate your basic personal assumptions? If so, please describe. (Give your approximate age at the time.)

(Not at Home)

Your Child _____

Please tell us the educational and occupational history of this child from high school to the present.

When this child left home, was the leaving process difficult? Why or why not?

Has his/her relationship to you changed since then? If so, how?

Are there ways this child feels dissatisfied about the relationship with his/her parents? Are there ways in which you feel dissatisfied?

Please describe your child's relationship to you. Use 3 = very, 2 = somewhat, 1 = not very.
___ affectionate, ___ appreciative, ___ companionable, ___ competitive, ___ compliant, ___ confident, ___ confiding, ___ considerate, ___ demanding, ___ headstrong, ___ independent, ___ mature, ___ rejecting, ___ responsible, ___ touchy.

How much does this child have in common with each parent? Are there ways in which you have treated this child differently from the others?

	Not close				Very close
How close do you feel to this child?	1	2	3	4	5
How close does your partner feel?	1	2	3	4	5

If he/she is married or with a steady partner, how do you feel about this? ___ very pleased; ___ fairly well pleased; ___ don't know yet; ___ not happy.
If there are grandchildren, please tell what this has meant for you.

Overall, what makes you happiest in the life of this child? What concerns you?

	Very often	Often	Occasionally	Rarely
How often do you see this child?	1	2	3	4
How often do you talk by telephone?	1	2	3	4

What do you provide for this child? (Income, emotional support, advice, etc.)

What does this child give to you? (Emotional support, stimulation etc.)

(Still in Household)

Your Child _____

Please tell us where this child is in school. Describe his/her talents and plans (or your expectations) for the future.

How much does this child have in common with each parent? Which parent is he/she more like?

Are there ways in which you have treated this child differently from the others? If so, why?

Are there ways in which he/she feels dissatisfied about the relationship with you? Are there ways in which you feel dissatisfied?

Please describe your child's relationship to you. Use 3 = very, 2 = somewhat, 1 = not very.
___ affectionate, ___ appreciative, ___ companionable, ___ competitive, ___ compliant, ___ confident, ___ confiding, ___ considerate, ___ demanding, ___ headstrong, ___ independent, ___ mature, ___ rejecting, ___ responsible, ___ touchy.

When this child leaves home, will the leaving process be difficult? Why or why not?

	Not close				Very close
How close do you feel to this child?	1	2	3	4	5
How close does your partner feel?	1	2	3	4	5

Overall, what makes you happiest about this child, and what concerns you?

Physical Appearance

Compared to other women your own age, how attractive were you.....

	Not at all				Very
As a teenager?	1	2	3	4	5
In college?	1	2	3	4	5
In your 30s?	1	2	3	4	5
In your 40s?	1	2	3	4	5
How attractive are you now?	1	2	3	4	5

What age-related physical changes have you noticed in your appearance? How have you reacted to them? Have you done anything to minimize or avoid them?

To what extent has your ideal of physical attractiveness for yourself changed since you were in college? If it has changed, in what ways?

Very little 1 2 3 4 5 Very much

What role has your physical appearance played in your identity, sense of femininity, sexuality or sexual relations? Please comment.

Very little 1 2 3 4 5 Very much

Of the various factors that contribute to self-esteem, how important for you is physical appearance?

Not very 1 2 3 4 5 Very

How are important to you are each of these aspects of physical appearance?

Being well-dressed	1	2	3	4	5
Having an attractive body	1	2	3	4	5
Having an attractive face	1	2	3	4	5

		Very rarely				Often
How often do you...	Feel unattractive?	1	2	3	4	5
	Feel dissatisfied with your face?	1	2	3	4	5
	Worry about your appearance?	1	2	3	4	5
	Worry about your weight?	1	2	3	4	5

		No tendency				Strong tendency
How strong has your tendency been toward...	anorexia?	1	2	3	4	5
	bulimia?	1	2	3	4	5

Menopause

Have you had a menstrual period in the last 3 months? ___ Yes, ___ No.
If no, have you had a menstrual period in the last 12 months? ___ Yes, ___ No.
If no, have you had a menstrual period in the last 2 years? ___ Yes, ___ No.

Would you classify yourself as ___ still having fairly regular menstrual periods, ___ currently menopausal, ___ finished with a natural menopause, ___ surgically menopausal now, ___ finished with a surgical menopause?

If you had a surgical menopause, please give date and type of surgery, and tell us whether you elected the surgery and whether you think it was the right decision.

Which of the following symptoms sometimes associated with the menopause are you experiencing now, or which did you experience when you were menopausal?

	Often	Sometimes	Rarely
Hot flashes			
Night sweats			
Dizziness			
Nausea			
Numbness			
Weakness			

	Often	Sometimes	Rarely
Headaches			
Sleep disturbance			
Tension, "jitters"			
Mood swings			
Depression			
Other (what?)			

Did you, or do you intend to, have estrogen replacement? ___ Yes, ___ No.
Why or why not?

If you are having it, what has been your experience with it?

What does/did the menopause symbolize to you? (end of a major period of life, end of a chance to have children, freedom for a new beginning, loss of creative potential, approaching loss of physical attractiveness, release from the body, etc.) Did you have any dreams, images, or preoccupations that help to answer this question? (If so, please describe.)

What advantages or disadvantages have you experienced, or do you expect to experience, after finishing the menopause? Do you expect men to pay less attention to you, treat you with more respect, feel differently toward you?

FS

_____

FACETS OF THE SELF

Please rate yourself on the following phrases and adjectives, using the 1-8 scale. When rating yourself, imagine how the adjectives and phrases describe you in general. When you are through, please turn the page over and complete the questionnaire on the back.

1----------2----------3----------4----------5----------6----------7----------8

Extremely Uncharacteristic | Somewhat Uncharacteristic | Somewhat Characteristic | Extremely Characteristic

____ supportive
____ irritable
____ flexible
____ feeling bored
____ effective
____ assertive
____ organized
____ being stimulated
____ taking pleasure
____ insecure
____ creative
____ feeling unappreciated
____ irresponsible
____ cynical
____ feeling supported
____ imperceptive

Participants with children completed this version.

_____ FSP

On this page please describe yourself in the major roles of your life, using the 1-8 point scale below. Take a moment and imagine yourself in each role, then rate whether the adjective or phrase is characteristic or uncharacteristic of you in that role. Please rate yourself on the roles which you are currently in or have enacted in the past. If any of the roles do not apply to your life, please cross them out. Make sure that you rate every term on every role that applies to your life.

1----------2----------3----------4----------5----------6----------7----------8

Extremely Uncharacteristic | Somewhat Uncharacteristic | Somewhat Characteristic | Extremely Characteristic

SUPPORTIVE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

IRRITABLE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

FLEXIBLE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

FEELING BORED
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

EFFECTIVE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

ASSERTIVE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

ORGANIZED
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

BEING STIMULATING
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

TAKING PLEASURE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

INSECURE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

CREATIVE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

FEELING UNAPPRECIATED
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

IRRESPONSIBLE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

CYNICAL
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

FEELING SUPPORTED
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

IMPERCEPTIVE
___ as a daughter
___ as a partner
___ as a friend
___ in my work
___ as a parent

Participants with no children completed this version ("as a parent" changed to "as a sibling").

_____ FSS

On this page please describe yourself in the major roles of your life, using the 1-8 point scale below. Take a moment and imagine yourself in each role, then rate whether the adjective or phrase is characteristic or uncharacteristic of you in that role. Please rate yourself on the roles which you are currently in or have enacted in the past. If any of the roles do not apply to your life at all, please cross them out. Make sure that you rate every term on every role that applies to your life.

1----------2----------3----------4----------5----------6----------7----------8

Extremely Uncharacteristic | Somewhat Uncharacteristic | Somewhat Characteristic | Extremely Characteristic

SUPPORTIVE	IRRITABLE	FLEXIBLE	FEELING BORED
___ as a daughter	___ as a daughter	___ as a daughter	___ as a daughter
___ as a partner	___ as a partner	___ as a partner	___ as a partner
___ as a friend	___ as a friend	___ as a friend	___ as a friend
___ in my work	___ in my work	___ in my work	___ in my work
___ as a sibling	___ as a sibling	___ as a sibling	___ as a sibling

EFFECTIVE	ASSERTIVE	ORGANIZED	BEING STIMULATING
___ as a daughter	___ as a daughter	___ as a daughter	___ as a daughter
___ as a partner	___ as a partner	___ as a partner	___ as a partner
___ as a friend	___ as a friend	___ as a friend	___ as a friend
___ in my work	___ in my work	___ in my work	___ in my work
___ as a sibling	___ as a sibling	___ as a sibling	___ as a sibling

TAKING PLEASURE	INSECURE	CREATIVE	FEELING UNAPPRECIATED
___ as a daughter	___ as a daughter	___ as a daughter	___ as a daughter
___ as a partner	___ as a partner	___ as a partner	___ as a partner
___ as a friend	___ as a friend	___ as a friend	___ as a friend
___ in my work	___ in my work	___ in my work	___ in my work
___ as a sibling	___ as a sibling	___ as a sibling	___ as a sibling

IRRESPONSIBLE	CYNICAL	FEELING SUPPORTED	IMPERCEPTIVE
___ as a daughter	___ as a daughter	___ as a daughter	___ as a daughter
___ as a partner	___ as a partner	___ as a partner	___ as a partner
___ as a friend	___ as a friend	___ as a friend	___ as a friend
___ in my work	___ in my work	___ in my work	___ in my work
___ as a sibling	___ as a sibling	___ as a sibling	___ as a sibling