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Self-Regulatory Strategies and Well-Being. Retaining a Sense of Mastery and Satisfaction in Old Age

Anja Leist, Dieter Ferring

University of Luxembourg, Walferdange, Luxembourg

Sigrun-Heide Filipp

University of Trier, Germany

It is well known that well-being remains stable in old and very old age despite numerous challenges, e.g. the loss of loved ones and physical decline that turn the balance of gains and losses more and more negative. Several suggestions have been made to explain this paradoxical finding, mainly by the motivated use of specific self-regulatory strategies, e.g. downward social comparisons. The objective of our research was to explore the differential adaptiveness of self-regulatory strategies in old age and to identify variables that might play a moderating role between self-regulatory strategies and well-being. A total of $N = 133$ participants, $N = 41$ nursing home residents and $N = 92$ non-institutionalized individuals, aged between 65 and 98 years ($M = 76.02$, $SD = 7.35$) reported via questionnaire different facets of well-being (mastery, autonomy, life satisfaction, self-esteem, satisfaction with social relationships, self-reported cognitive and health status) and rated a current problem of their life situation (e.g. health, financial or living situation) with regard to various self-regulatory strategies (e.g. goal engagement, positive reappraisals). Factor analyses showed that self-regulatory strategies could partly be grouped into two broader categories that allowed for differentiation in problem- and emotion-focused coping. With gender, institutionalization and age as control variables, regression analyses and structural hierarchical modeling revealed distinct relationships between self-regulatory strategies and measures of well-being. In addition, we could identify several variables that moderated these relationships: The more individuals reported perceived self-changes and satisfaction with social relationships, the higher the impact of self-regulatory strategies on well-being.