NEWSLETTER OF THE INSTITUTE ON AGING (IOA)

UNIVERSITY OF WISCONSIN-MADISON

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MIDUS.wisc.edu

Midlife in

the United
States
(MIDUS)
is an ongoing multidisciplinary study
administered by the
Institute on Aging
that is following over
11,000 US residents to
understand factors that
influence their health
and well-being across
the decades of adult life.

Source:

Choi, S. L., Namkung, E. H., & Carr, D. (2022). The effect of physical limitations on depressive symptoms over the life course: Is optimism a protective buffer? Journals of Gerontology. Series B, Psychological Sciences and Social Sciences, 77(9), 1686-1698. https://doi.org/10.1093/geronb/gbac058

Optimism May Help with Depression Linked to Mobility Challenges

Mobility Issues May Promote Depression

As people age, they are more likely to experience mobility issues that may compromise their ability to complete everyday tasks, such as getting dressed. This may undermine their self-image or limit their ability to engage in social activities, which could lead to depression.

When Does Optimism Help?

Optimism has been shown to buffer against depression. Because optimistic people tend to expect positive outcomes, they may work harder to find practical ways to deal with or treat their mobility issues. It is unclear, however, if this is an effective coping resource for everyone, no matter their age or how many mobility issues they may have. Could optimism be detrimental for those oldest adults whose conditions are less likely to be reversible or less easily accommodated? Might optimism instead lead to disappointment for them?

Using Data from Two National Studies

By combining data from the Midlife in the United States (MIDUS) study and the Health & Retirement Study (HRS), researchers were able to look at the effects of optimism on an expanded age range. Participants were put into four age groups: 40–49 years (MIDUS only), 50–64 years, 65–74 years, and 75 years and older (HRS only). Other measures included:

- Optimism: participants' level of agreement to statements such as, "In uncertain times, I usually expect the best."
- Number of Physical limitations: inability to complete daily activities such as carrying groceries or climbing several flights of stairs.

 Depression: whether participants "felt sad, blue, or depressed" or "lost interest in most things" for two weeks or more.

Optimism was Protective Only for Those with Multiple Limitations

Results showed that:

- Persons with 3+ physical limitations reported significantly more depressive symptoms than persons with 0-2 limitations.
- As optimism increased, depression decreased most for those with 3+ physical limitations who were aged 50-64, followed by those aged 65-74.
- Optimism had no effect on depression for those with fewer than three limitations.

This is consistent with stress theories that personal coping resources such as optimism are only helpful at high levels of stress, such as among those with 3+ mobility issues.

Optimism Did Not Help at the Oldest Ages

Optimism had no effect for those who were in the oldest age group (75 & older), regardless of number of physical limitations. These adults may be more susceptible to irreversible health problems, which may not be realistically helped by an optimistic attitude. Thus, interventions that increase positive thinking may not be useful for this age group.

Other Support May be More Helpful for Those 75 and Older

Institutional support, such as increased public funding for purchasing assistive devices, making home modifications, and hiring home health aides, may be more helpful in coping with mobility challenges at advanced ages.





Incontinence affects more than 60% of women, but most do not get help.

Participants in "Mind Over Matter" reported:

- an 8-fold improvement in bladder leakage
- a 3-fold improvement in bowel leakage.

Connecting Communities & Researchers to Improve Bladder & Bowel Health

Dr. Heidi Brown (Associate Professor in UW-Madison's Dept. of Obstetrics and Gynecology) has a research program focused on connecting women with solutions for incontinence (accidental release of urine or stool). In partnership with the Wisconsin Institute for Healthy Aging (WIHA), as well as multiple senior centers and Aging and Disability Resource Centers (ADRCs), Dr. Brown's research team developed a program that improves both bladder and bowel leakage in women who don't ever set foot in her clinic. Mind Over Matter: Healthy Bowels, *Healthy Bladder* is a small-group workshop for women aged 50 or older. Delivered by a trained facilitator in community settings, Mind Over Matter helps women build knowledge and skills to improve bladder and bowel health, without medications or surgery.

Community Collaboration Did Not Happen by Chance: UW-Madison's Community-Academic Aging Research Network (CAARN) employs Community Research Associates (CRAs) who serve as trusted liaisons to community organizations. Since 2014, a CAARN CRA has partnered with Dr. Brown to engage organizations from across Wisconsin to develop *Mind Over Matter*.

Communities Helped with the Research:

In 2017, CAARN's CRA identified six Wisconsin communities to collaborate with Dr. Brown on a randomized controlled trial of *Mind Over Matter*. The community organizations helped recruit participants, delivered the program, and gave feedback about how to make it easier for others to provide the program in the future. In the randomized trial, women who participated in *Mind Over Matter* reported marked improvement in their incontinence compared to controls. And the community organizations continued to deliver the program after the trial was finished, showing its potential for maintenance outside of research.

CAARN Connect Investigators with Wisconsin Communities

- UW-Madison's Community-Academic Aging Research Network (CAARN) has facilitated community-research partnerships involving 62 principal investigators and over 135 community partners, including 1 tribe, in 52 Wisconsin counties.
- These partnerships have resulted in 59 grants for 43 projects, totaling over \$30 million from federal, foundation, and UW sources.
- In 2019, the National Institute on Aging awarded CAARN a five-year grant to expand from primarily focusing on rural areas in Wisconsin to focusing on increasing partnerships with health systems and African American communities.
- To do this, CAARN works with UniteWI, the UW Center for Community Engagement and Health Partnerships, the African American Health Network, and MetaStar.



■ See: CAARN.wisc.edu or contact: CAARN@medicine.wisc.edu

Mind Over Matter Became Available Across Wisconsin in Under Five Years & Continued in Spite of the Pandemic: Because of this close collaboration, WIHA was able to start disseminating *Mind Over Matter* to community organizations across WI in April of 2019, less than 5 years after the program was initially conceived. When most community-based programs for older adults were halted during the COVID-19 pandemic, WIHA was able to pivot to supporting virtual delivery of Mind Over Matter. Because WIHA had been involved in Mind Over Matter's development from the beginning, the program had been built to be streamlined for easy implementation. Despite the pandemic, over 60 facilitators from more than 45 organizations have been trained to deliver *Mind Over* Matter, and over 700 women have completed the program. See: https://wihealthyaging. org/programs/live-well-programs/mom/



Supportive Social Networks May Boost the Well-being of Older Adults with Exceptional Parenting Responsibilities

Parenting Children with Developmental Disabilities Can Be Challenging:

The difficulties involved in parenting a child with developmental disabilities (such as autism or Down syndrome) are not specific to young parents, since some people with developmental disabilities (DDs) need daily assistance even after they reach adulthood. Their parents, therefore, may continue to face unique stressors, even into midlife and older age, such as managing their child's symptoms, working with their service providers, and dealing with stigma and isolation. This study looked at whether different types of social networks could promote better well-being among parents of children with DDs despite exposure to chronic stress.

Parents Had Two Types of Social

Networks: Robert Dembo (Post-doctoral trainee from 2020-2022 at the UW–Madison Waisman Center) and IOA Affiliate Marsha Mailick (Prof. Emeritus, UW–Madison School of Social Work), along with other colleagues, used data from the MIDUS study (Midlife in the United States) to compare 363 midlife and aging parents of children with DDs to over 4900 parents of children without DDs. Their research showed that parents had two types of social networks:

Restricted/Unsupported Social Networks: Parents of children with DDs were more likely to be in this group. They reported having:

- less frequent contact with friends & family
- less support and more strain in their relationships with friends & family (they felt their friends & family didn't really care about them and were too critical)
- lower levels of social integration (they volunteered less, socialized less with neighbors, attended fewer meetings, and were less involved in religious congregations).

Diverse/Supported Networks: Parents of children without DDs were more likely to be in this group. They reported the opposite: they were more integrated into their communities and had more support and less strain from family & friends.

Social Support Was More Important to Parents of Children with DDs: Results further showed that support from family and friends mattered more to parents of children with DDs. This may be because social support can be more helpful to those experiencing significant life challenges. In contrast, participation in social activities (meetings, volunteering), was most important to classifying the network type of parents in the comparison group. This may be because community participation can be helpful to anyone by providing meaning and purpose regardless of one's exposure to stress. In both parent groups, social support was more important than strain, and contact with friends was

Networks May Affect Mental Health:

more important than contact with family.

Parents of children with DDs showed worse mental health (more depression and worse self-reported mental health) than those in the comparison group. However, some parents of children with DDs were in diverse/ supported networks (about 4 in 10), and they showed no statistically significant difference in the probability of having poor mental health when compared to parents of children without DDs. In spite of having exceptional parenting responsibilities, they were able to be active in their communities and have supportive relationships with friends and family. This suggests that helping all parents of children with DDs create diverse/supported social networks may improve their mental health and help them cope with the chronic stressors they may continue to face even into older age.



Support from friends and family was more important to parents of children with developmental disabilities than how involved they were in social activities.

Source:

Dembo, R. S., Huntington, N., Mitra, M., Rudolph, A. E., Lachman, M. E., & Mailick, M. R. (2022). Social network typology and health among parents of children with developmental disabilities: Results from a national study of midlife adults. Social Science and Medicine, 292, Article 114623. https://doi.org/10.1016/j.socscimed.2021.114623

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I have reached an age when, if someone tells me to wear socks, I don't have to.

~ Albert Einstein



Our Annual Colloquium Returns:

Our 32nd Annual Colloquium was held this September after a two-year hiatus due to the pandemic. We welcomed back over 400 participants to campus, along with exhibitors from local aging organizations, poster presenters, and four speakers, including a keynote about existential views on aging authentically. You can see resources from the event, as well as videos of the presentations, at our website below.

Synergies in Longitudinal Studies Conference:

IOA hosted this event in October to showcase highly-visible and widely used, multi-year studies being conducted at UW-Madison. Presentations focused on how combining data from these studies can help address important societal challenges such as health inequalities. The larger objective was to bring more researchers, especially junior investigators, into these efforts to improve health for people in Wisconsin and across the nation.

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What's Happening at the Institute on Aging?

Six More Years of Funding for MIDUS:

We are happy to announce that our Midlife in the United States (MIDUS) study has received another round of funding from the National Institute on Aging. MIDUS:

- began in 1995 and is now following over 11,000 Americans as they age through the decades of adult life
- was one of the first national studies to link psychosocial and behavioral factors to biomedical and neurological assessments obtained in laboratory settings
- allows researchers to integrate data from domains normally studied separately, in order to look at why some face the challenges of aging better than others.

With the upcoming round of assessments, MIDUS will have 30 years of data on the health & well-being of Americans, which will be publicly available to all researchers. New to this round will be a focus on identifying risk factors for Alzheimer's disease and examining the impact of the COVID-19 pandemic.

You can view details about the many contributions that MIDUS has made to the science of aging in a newly released report called *MIDUS Achievements*, here:

AGING.wisc.edu/calendar

MIDUS.wisc.edu/newsletter