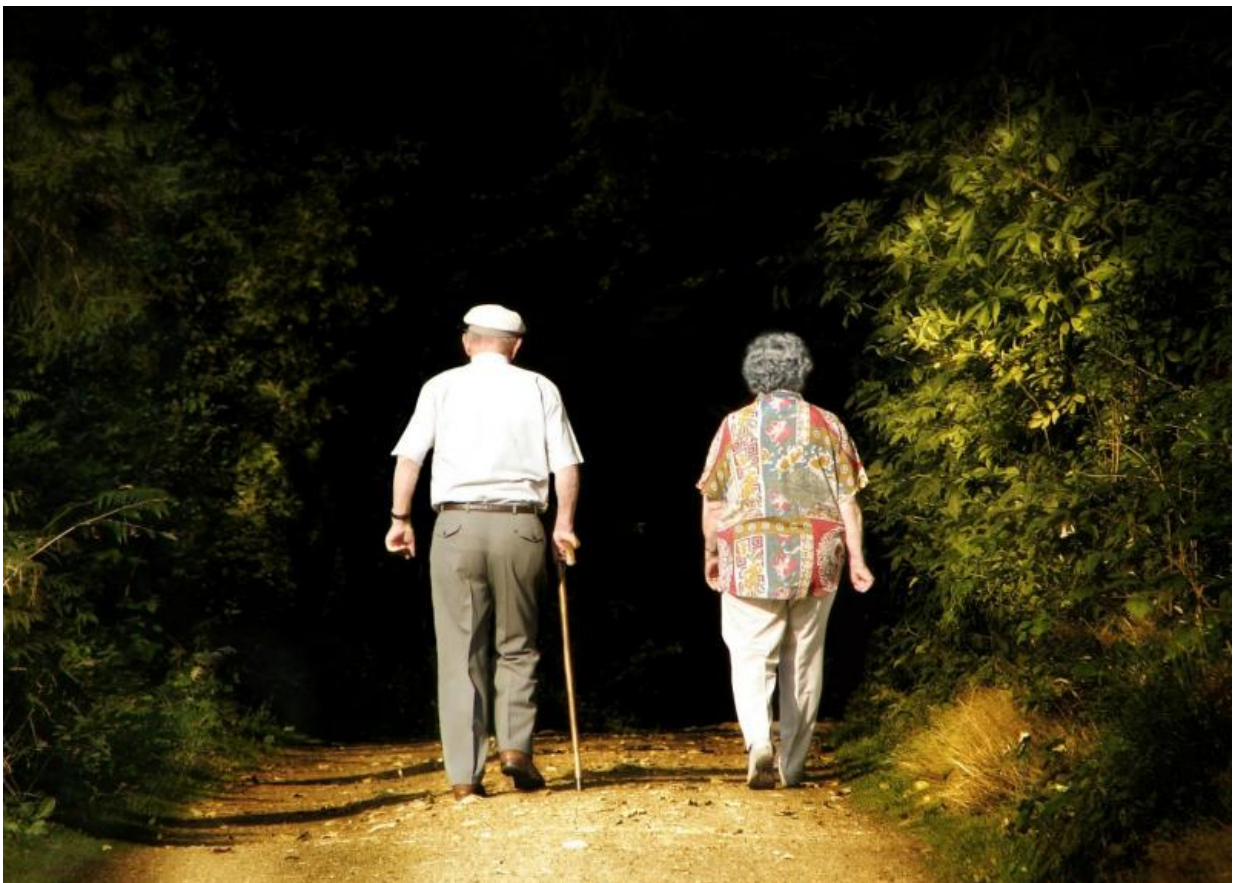


# Depressive symptoms more likely for older adults with elderly parents still living, study finds

August 23 2016, by Ken Branson

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At age 65, caring for elderly parents can be stressful, especially if you didn't feel loved. Credit: Rutgers University

People who have reached age 65 with living parents are more likely to suffer depressive symptoms than their peers whose parents have died, according to new research by Rutgers sociologist Deborah Carr.

In addition, adult children who may have been abused or neglected by their [parents](#) are especially vulnerable to [depressive symptoms](#), both when at least one parent is alive, and when a parent dies.

Carr, who studies the sociology of aging and the end of life, presented her research August 23 at the annual meeting of the American Sociological Association in Seattle.

"Older adults adjust fairly well to the death of a parent, especially a parent who lived a full life," says Carr, a professor of sociology in the School of Arts and Sciences. "But that's if they had a close, warm, supportive relationship with the parent. But if they had a difficult childhood and were neglected emotionally, they have a much tougher time, both when the parent is alive and when the parent dies."

Carr's study is based on her analysis of data from the Wisconsin Longitudinal Study (WLS), an ongoing study of 10,317 men and women who graduated from high schools in Wisconsin in 1957. The participants in that study have been interviewed at ages 36, 54, 65 and 72. Carr's analysis focuses on the 6,140 people interviewed at age 65 in 2004.

Among other things, interviewers asked participants whether their parents were alive; probed the kind of relationship they had with their parents; and then asked questions designed to describe the participants' [mental health](#), such as, "How often in the past week have you felt tired, sad or blue?"

"It's important to understand that we're talking about depressive symptoms such as [sadness](#) – not clinical depression, which is a medical

diagnosis," Carr says.

Carr says her analysis of the WLS data produced some surprises for her.

"I expected people with two living parents to be the best off in mental health terms," she says. "But, no matter how many ways I ran the models, people with two living parents had more sadness than people with one, and people with one living parent had more sadness than people whose parents had died." Carr noted, however, that these living parents were in their mid 80s to mid 90s, and thus the challenges they faced with illness, dementia, and other difficulties of later-life might have taken an emotional toll on their [adult children](#).

Women were more likely than men to suffer stress and depressive symptoms, Carr says. "This makes sense, because women are more often the caretakers for their elderly parents," she says. "And if they think they're caring for parents who were once neglectful or unkind to them, that might add to feelings of resentment and bitterness."

When the formerly abusive parent dies, Carr says, his or her child may feel acute sadness because the issues between them have been left unresolved.

"No matter what, if you didn't feel loved, if you didn't feel safe, when you were a child, you're likely to be depressed and angry about that," Carr says. "And if you take good care of that parent at the end of their life, and they die without those issues having been resolved, you're more vulnerable to depressive symptoms."

"Those who felt loved and protected by their parents when growing up, may certainly miss their parents after they have died, but they are less susceptible to the feelings of deep sadness that neglected children experience," Carr says. "The emotional support one enjoyed in

childhood may provide a sense of solace when grieving for parents in later life.

Provided by Rutgers University

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