

Generational Differences in Adjustment Problems Among Early, Middle-Aged, and Late Adults

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ABSTRACT: To investigate the generational differences in adjustment problems among early, middle-aged, and late Adults. It was a cross-sectional research design. The 300 adult participants' data were gathered from Gujrat and Jhelum. The sample selection was executed through convenience sampling, i.e., a non-probability sampling technique. In the demographic sheet, the age of participants was requested, whereas psychological adjustment was examined by the Scale of Adjustment for Adults by Naz, Bano & Leghari. In all three groups of adults, i.e., early, middle-aged, and late adults, the number of participants was the same. Most of the adults encounter fewer adjustment issues, $n=195(65\%)$ of adjustment problems. The Scale of Adjustment for Adults gives the cut-off score of 71 or more. Anyone who scored above 71 was considered maladjusted or not adjusted. About 21% ($n=63$) were maladjusted. The comparison of three adult groups was done by One-way Analysis of Variance. The result specified a difference in the psychological adjustment issues confronted by different adult groups. The Means and SD of the three groups indicated that early adulthood (64.85 ± 10.35) has more adjustment issues than late (62.07 ± 10.07) and middle adulthood (60.59 ± 9.35). The study findings indicated that adults had a low level of adjustment problems, whereas the prevalence of adjustment problems was 21%. Furthermore, the three groups of adulthood experience different psychological adjustment issues.

KEYWORDS: Adult, Cross-sectional study, Maladjusted, One-way ANOVA, Prevalence

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Introduction

Since the moment humans were born, they have been in a continuous state of adjustment. They were changing so rapidly and so constantly, there is no way to have successfully adjusted to the changing situation, because something will always be about to change and require further adjustment. Humans are unique among all species because of their abilities like adjustable behavior, logical thinking, and a sense of morality, authenticity, goal-oriented, optimistic behavior, and their intelligence. By adjusting themselves to developmental stages and every situation, they survive successfully; therefore, adjustment plays a great importance in a human's life. The focus of this research was to measure the generational differences in the psychological adjustment of adults.

Adulthood

The adults are considered the most important part of a fully functioning society. Adults can be defined as the individual older than the age of 19 years unless the National law defines a person as earlier being an adult (World Health Organization, 2013).

Stages of Adult

Adjustment problems, defined as difficulties adapting emotionally, socially, or behaviorally to life's challenges, present numerous challenges that are unique to adult-aged individuals. Adjustment problems may consist of stress/injury-related issues, relationship problems, changes in expected role performance, welfare issues (depression), and active transition issues, and they may manifest differently in adults during development and generation. It is important to understand the developmental stage and generational differences in adjustment when planning culturally competent intervention strategies for each life stage.

There are three life developmental levels of adulthood: early adulthood (20–35 years), middle adulthood (35–65 years), and late adulthood (65 years and beyond) (Roundy, 2019). Dewey (1944) highlighted psychosocial tasks for each level of adulthood: early adulthood is typically characterized by identity realization, career establishment, and the establishment of intimacy with a partner; middle adulthood is characterized by generativity, being involved with children and a career; later adulthood includes retirement, life health changes, and the aging process, as an individual may experience role loss or less desired autonomy (Santrock, 2019).

In the early stages of adulthood, it is common for individuals to experience higher attachment anxiety and more relationship instability as compared to older individuals, highlighting their struggles with emotional adjustment (Holmes & Johnson, 2019). As individuals enter the middle adulthood stages, personality becomes increasingly stable over a period of time, with conscientiousness and agreeableness increasing, and neuroticism decreasing. This reorganization helps individuals better regulate their emotional and stress-related experiences (Roberts et al., 2006). However, during this phase of life, individuals also experience increasing stress in regard to their multiple roles in life, particularly for the "sandwich generation" who are thereby tasked with navigating both their children and aging parents (Lachman, 2015). In late adulthood, the emotional state of individuals begins to improve overall. As both support and evidence, socioemotional selectivity theory argues that older individuals generally invest more effort into nurturing and sustaining their emotionally meaningful relationships and emotionally less stressful experiences therein, ultimately protecting themselves against more emotionally challenging experiences in life (Carstensen, 2006).

Generational research further reveals important differences. During the COVID-19 pandemic, older adults demonstrated greater psychological resilience and less affective reactivity compared to younger adults. Moreover, longitudinal data suggest that today's older cohorts show better cognitive functioning and adaptability than previous generations of late adults, likely due to improved education, healthcare, and lifestyle (Drewelies et al., 2019).

Further, the adult stages can be divided into early adulthood, which lasts from 20 to 35 years, followed by the middle stage of adulthood, which is from 35 to 65, and finally, the late adulthood, which starts at the age of 65 (Roundy, 2019).

Among other problems faced by adults, adjustment could be one. Adjustment issue is linked with an inability that hinders giving a successful and adequate response to some environmental needs (Srivastava & Singha, 2017). According to the Manual of Mental Disorders, adjustment disorder can be characterized by symptoms that are based on emotion and behavior, with a duration of 3 months after encountering a stressor. The adjustment disorder criteria provide specifiers that are depressive and anxious mood, or mixed depressive and anxious symptoms, conduct problems, and both emotional and conduct problems (American Psychiatric Association, 2013). There could be a number of reasons that can lead to maladjustment in individuals, like an introspective personality, neurotic or psychotic characters, commanding parenting style, less accepting, more attention and care (Lung et al., 2006).

The psychological adjustment can be measured with depressive, anxiety, and conduct problems (APA, 2013). There were various studies available that established these issues in adults. A study confirmed that the prevalence of anxiety disorder in women was in the range of 8.7%-4.3% whereas the prevalence of substance use was 2.0%-7.5% in men (Steel et al., 2014). Further, a study conducted in India checked out the adjustment issue of first-year students of a nursing college. Although all areas of students' lives are affected by adjustment issues, students mostly during the 1st year face more adjustment problems during the first year. 100 students were selected using a convenience sampling technique with an age range of 15 to 30 years. The result depicted that most of the students had mild (69%) adjustment issues, followed by moderate (22%) and severe (9%) adjustment problems (Devi et al., 2016). Another conducted study in the setting of Pakistan foresaw the prevalence of adjustment disorder. The prevalence rate of adjustment disorder was 11.5%. The common stressors were illness and love affairs. Individuals with both anxiety and depression show a high rate of adjustment (Yaseen, 2017). A study based on the data of Cambridge Delinquent Development examines the adjustment of adults and how adults encounter adjustment issues at the ages of 32 and 48. Moreover, it was more persistent in adults relative to adolescents (Jennings et al., 2016). Further, another recent study from Zelviene & Kazlauskas reported that there was a 12.4% and 9.2% prevalence of major depression and adjustment disorder, respectively. Further, 50% of psychiatrists at least once a week use the adjustment disorder diagnosis with other mental disorders. Furthermore, there was about a 1-2 % prevalence of adjustment problems present in the general population (Zelviene & Kazlauskas, 2018).

Adults are the substantial entity of society that can play an important part in managing society. The total population of adults (15-64 years) in Pakistan is 60.62% of the total population (Trading Economics, 2019). hence, confirming their role as important in the functioning of the country. Adjustment is a problem that is faced by many people around us. On the other hand, well-adjusted individuals can handle their lives more functionally. The well-settled or adjusted people have strong and stable patterns of behavior that include consciousness about their powers, giving value to others and oneself, basic needs satisfaction, positive attitude, easily changeable behavior, the ability to handle problematic circumstances, world insight, a feeling of comfort with the situation, and a stable attitude of life (Sharma, 2016). The study under consideration can help in the better understanding of the psychological adjustment issues faced by adults. The core objective of the research was to examine the generational differences in psychological adjustment issues among adults.

Material and Methods

The research design in the study was cross-sectional. Participants of this study were comprised of 300 adults recruited from educational institutions and homes. A convenient non-probability sampling technique was

used for the collection of data from district Jhelum and Gujrat. The adult respondents were included in the study, whereas respondents with any physical or psychological disability were excluded.

The age of the adults was asked in the demographic form along with other information. The Scale of Adjustment for Adults was used to measure the psychological adjustment of adults. The scale was based on the DSM criteria of adjustment disorder with three domains of depression, anxiety, and conduct issues American Psychiatric Association, 2013) and the cognitive theory of Beck (Beck, 1964). This scale was based on 48 items with the 8 subscales in 3 domains of depression, anxiety, and conduct issues (Naz et al., 2018). Further, it was on 3 3-point Likert with a Cronbach's alpha of .938. The scale also had good convergent and divergent validity. The scale cut-off point was 71 (Naz et al., 2022).

The research was approved by the supervisor. The permission to use the scale was taken from the author via email. After that, data collection was started. The questionnaires were distributed to adults above 19 years of age. For this purpose, educational institutions and homes were visited after taking permission from the authorities. The participant's verbal and oral informed consent was acquired, after which their adjustment was measured with demographic information. The face-to-face interview or self-reported questionnaire was used as a method for data collection. The adults were asked to fill in the questionnaire with care by ticking the most suitable or appropriate response. The answers were recorded in a booklet. Persons who were not willing to provide data were kept out of the study. Further, confidentiality and privacy were also ensured.

Data Analysis

After the data collection, analysis on IBM statistics SPSS (Statistical Package for Social Sciences, version 21) was run using descriptive statistics and one-way ANOVA

Results

A total of 300 adults participated in the current research. The age of the adults was between 19 and 80 years, with a mean age of 40.21. The participants were equally distributed among the categories: early, middle, and late adults.

Table 1

Prevalence of Adjustment Issues (n=300)

Score	Levels	n%
Above 113	High Adjustment Issues	0(0%)
81-112	Moderate Adjustment Issues	105(35%)
≤ 80	Low Adjustment Issues	195(65%)

Table 1 indicates the prevalence of adjustment issues in adults. The majority of the respondents (65%, n=195) encountered low adjustment problems, followed by (35%, n=105) moderate adjustment problems, and there was no participant with a high adjustment problem (0%, n=0).

Table 2*Cut-off Point for Scale of Adjustment for Adults (N=300)*

Cut-Points	n%
70 or less	237(79%)
71 and more	63(21%)

The cut-points of the adjustment scale were 71 (Naz et al., 2022). A total score of 71 or more will be declared as maladjusted or not adjusted; on the other hand, a score of less than 71 will be shown as adjusted. The table indicated that among the adults, approximately 1/4th (21%, N=63) were maladjusted.

Table 3*ANOVA*

	Early Adult		Middle-aged Adult		Late Adults		F(2,297)	P
	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation		
Adjustment Problems	64.85	10.35	60.59	9.35	62.07	10.07	4.73	.009

The table indicates that there are statistically significant differences in adjustment problems faced by various groups of adults ($F(2, 297) = 11.02, p < .05$). The Means and SD indicated that the early adult group (64.85 ± 10.35) has more adjustment problems than the late adult group (62.07 ± 10.07) and the middle adult group (60.59 ± 9.35).

Table 4*Post HOC Analysis*

I	J	Mean Difference (I-J)	Sig
19-30	31-50	4.26000	.007
	51 above	2.78000	.119
31-50	19-30	-4.26000	.007
	51 above	-1.48000	.544
51 above	19-30	-2.78000	.119
	31-50	1.48000	.544

Table IV indicated a statistically significant difference present in the psychological adjustment of the age groups of 19-30 and 31-50 ($p=.007$), whereas there is no difference in the psychological adjustment of the 19-30 ($p=.119$) and 31-50 ($p=.544$) age groups with the 51 and above age group.

Discussion

The present study was done on adults to check the prevalence and generational differences of psychological adjustment among adults. The sample of the study consisted of 300 adults from Jhelum and Gujrat through a convenience sampling technique.

The results of the research comprehensively recognized the fact that most of the adults faced a minor level of adjustment problems, $n=195(65\%)$. Further, if we examine the cut-point of psychological adjustment

scale, i.e., 71 or more, the prevalence of adjustment issues in adults was 21%. Previous research also indicated various prevalence rates in adults. (Esmael, et al., 2018) Conducted the study on adjustment problems among first-year students of a university in Ethiopia with a sample of 422 by using random sampling. The prevalence of adjustment problems was 30.1%. The psychological adjustment can be comprehended as depression, anxiety, and conduct problems. Further, Casey and Bailey (2011) studied adjustment disorders in various clinical settings. It has been reported that about 3 times adjustment disorder is as common as major depression. About 31.8% diagnosed with adjustment disorder. The study confirmed that the most common mental disorder is adjustment disorder. A study was conducted to assess the prevalence of anxiety in adults. The prevalence of anxiety was 8.2% (Maideen et al., 2015). While in the case of conduct issues, it was witnessed that adults who encounter conduct problems may have trouble in doing their job, balancing a relationship, and being involved in unlawful or risky behavior (Dresden, 2017).

The differences in adjustment problems faced by different adult groups (early, middle, and late adulthood) were also explored. The results show that early adulthood (64.85 ± 10.35) encounters more adjustment problems compared to late (62.07 ± 10.07) and middle adulthood (60.59 ± 9.35). Previous researches support the findings that depression, anxiety, and conduct issues were common in early adulthood. It has been witnessed that young adults face more mental health issues. It was seen that 1 in five young adults has mental health issues, including depression and anxiety. These young adults try to help out with these mental health problems through alcohol and drug use and may encounter conduct disorder (Smith, 2019). The problem of adjustment comes across due to some stressors of life, genetic reasons, a person's life experiences, and temperament (Mayo Clinic, 2019).

The problem of adjustment related to adults must be attended by all the stakeholders. The problems directly affect society, so there must be supportive assessments and interventions to help adults. In the future, adjustment of children and adolescents can also be studied. A qualitative study may be helpful for an in-depth investigation of the problem.

Conclusion

Hence, it was concluded that mostly the adults experience low levels of adjustment problems, and the prevalence rate of adjustment problems in adults was 21%. The early adults face more adjustment issues compared to the late and middle adult groups.

References

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed.)*. Arlington, VA: American Psychiatric Publishing.
- Beck, A. (1964). Thinking and Depression. *Archives of General Psychiatry*, 10(6), 561–571. <https://doi.org/10.1001/archpsyc.1964.01720240015003>
- Carstensen, L. L. (2006). The Influence of a Sense of Time on Human Development. *Science*, 312(5782), 1913–1915. <https://doi.org/10.1126/science.1127488>
- CASEY, P., & BAILEY, S. (2011). Adjustment disorders: the state of the art. *World Psychiatry*, 10(1), 11–18. <https://doi.org/10.1002/j.2051-5545.2011.tb00003.x>
- Devi, A. N., Alias, B. K., & Thomas, M. M. (2016). A study to determine the prevalence of adjustment problems among 1st year B. Sc (N) students in Narayana Nursing institution at Nellore district. *IJAR*, 2(7), 823–828p.
- Dewey, J. (1944). *Democracy and Education: An Introduction to the Philosophy of Education*. Text-Book Series in Education, Free Press.
- Dresden, D. (2017). Conduct disorder: What you need to know. <https://www.medicalnewstoday.com/articles/320386.php>
- Drewelies, J., Huxhold, O., & Gerstorf, D. (2019). The role of historical change for adult development and aging: Towards a theoretical framework about the how and the why. *Psychology and aging*, 34(8), 1021. <https://doi.org/10.1037/pag0000423>
- Esmael, A., Ebrahim, J., & Misganew, E. (2018). Adjustment Problem among First Year University Students in Ethiopia: Across-Sectional Survey. *Journal of Psychiatry*, 21(5). <https://doi.org/10.4172/2378-5756.1000455>
- Holmes, S. C., Johnson, N. L., & Johnson, D. M. (2022). Understanding the relationship between interpersonal trauma and disordered eating: An extension of the model of psychological adaptation. *Psychological Trauma: Theory, Research, Practice, and Policy*, 14(7), 1175. <https://psycnet.apa.org/doi/10.1037/tra0000533>
- Jennings, W. G., Rocque, M., Fox, B. H., Piquero, A. R., & Farrington, D. P. (2016). Can they recover? An assessment of adult adjustment problems among males in the abstainer, recovery, life-course persistent, and adolescence-limited pathways followed up to age 56 in the Cambridge Study in Delinquent Development. *Development and psychopathology*, 28(2), 537–549. <https://doi.org/10.1017/S0954579415000486>
- Lachman, M. E. (2015). Mind the Gap in the Middle: A Call to Study Midlife. *Research in Human Development*, 12(3–4), 327–334. <https://doi.org/10.1080/15427609.2015.1068048>
- Lung, F.-W., Lee, F.-Y., & Shu, B.-C. (2006). The Premorbid Personality in Military Students With Adjustment Disorder. *Military Psychology*, 18(1), 77–88. https://doi.org/10.1207/s15327876mp1801_5
- Maideen, S. F. K., Sidik, S. M., Rampal, L., & Mukhtar, F. (2015). Prevalence, associated factors and predictors of anxiety: a community survey in Selangor, Malaysia. *BMC Psychiatry*, 15(1), 64. <https://doi.org/10.1186/s12888-015-0648-x>
- Mayo Clinic. (2019). *Adjustment disorders - symptoms and causes*. Mayo Clinic. <https://www.mayoclinic.org/diseases-conditions/adjustment-disorders/symptoms-causes/syc-20355224>

- Naz, I., Bano, Z., & Anjum, R. (2022). Construct and criterion validity of adjustment scale for adults using the correlation and Receiver-Operating Characteristics Analysis. *Rawal Medical Journal*, 47(1), 89-89. <https://www.rmj.org.pk/fulltext/27-1582280908.pdf>
- Naz, I., Bano, Z., & Leghari, N. U. (2018). Construction of scales on depression, anxiety and conduct disturbance of adjustment for adults: developing a reliable measure. *Isra Med J*, 10(5), 310-314.
- Roberts, B. W., Walton, K. E., & Viechtbauer, W. (2006). Patterns of mean-level change in personality traits across the life course: A meta-analysis of longitudinal studies. *Psychological Bulletin*, 132(1), 1-25. <https://doi.org/10.1037/0033-2909.132.1.1>
- Roundy, L. (2019). *Physical, Psychological and Emotional Changes in Adults Video with Lesson Transcript* | Study.com. Study.com. <https://study.com/academy/lesson/physical-psychological-and-emotional-changes-in-adults.html>
- Santrock, J. W. (2019). *Life-span development* (17th ed.). McGraw-Hill.
- Sharma, S. (2016). Adjustment: process, achievement, characteristics, measurement and dimensions. *International Journal of Academic Research*, 3(1), 42-45.
- Smith, K. (2019). *Conduct disorder: Definition, symptoms, and treatment options*. <https://www.psycom.net/conduct-disorder/>
- Srivastava, P. S., & Singha, P. (2017). Adjustment problems of high and low academic achievers. *International Journal of Advanced Education and Research*, 2(4), 175-181.
- Steel, Z., Marnane, C., Iranpour, C., Chey, T., Jackson, J. W., Patel, V., & Silove, D. (2014). The global prevalence of common mental disorders: a systematic review and meta-analysis 1980-2013. *International Journal of Epidemiology*, 43(2), 476-493. <https://doi.org/10.1093/ije/dyu038>
- Trading Economics. (2019). Pakistan - Population. <https://tradingeconomics.com/pakistan/population-ages-15-64-percent-of-total-wb-data.html>
- World Health Organization. (2013). Definition of key terms. <https://www.who.int/hiv/pub/guidelines/arv2013/intro/keyterms/en/>
- Yaseen, Y. A. (2017). Adjustment disorder: Prevalence, sociodemographic risk factors, and its subtypes in outpatient psychiatric clinic. *Asian Journal of Psychiatry*, 28, 82-85. <https://doi.org/10.1016/j.ajp.2017.03.012>
- Zelviene, P., & Kazlauskas, E. (2018). Adjustment disorder: current perspectives. *Neuropsychiatric Disease and Treatment*, Volume 14(14), 375-381. <https://doi.org/10.2147/ndt.s121072>