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Ego integrity vs despair life review

Erikson (1982) is one of the few personality theorists to explore aging as a stage of development. According to Erikson's theory, personality development goes through a series of eight, hierarchically arranged phases. Associated with each stage is a psychosocial crisis that an individual either successfully solves or fails to solve. Failure results in incomplete personality development and inhibits further personality development. The last stage of Erikson's (1982) theory is later adulthood (age 60 years and older). The crisis posed by this last phase of life is integrity versus despair. Erikson (1982) suggests that this phase begins when an individual experiences a sense of mortality. This may be in response to retirement, the death of a spouse or close friends, or may simply result from a change in social role. Regardless of the cause, this sense of mortality accelerates the final life crisis. The final life crisis manifests itself as an overview of the individual's life of life's career. Similar to Butler's (1963) life review, individuals review their life-careers to see if it was a success or a failure. According to Erikson (1982), this memory or introspection is most productive when it has experience with significant others. The result of this memory of a life career can be either positive or negative. The integrity of the ego is the result of a positive solution to the crisis of last life. The integrity of the ego is considered the key to the harmonious development of personality; the individual looks at his whole life with satisfaction and satisfaction. The ego quality that results from a positive resolution is wisdom. Erikson (1982) defines wisdom as a kind of informed and unbiased interest in life itself in the face of death itself (p. 61). On the contrary, despair is the result of a negative solution or a lack of solution to the final life crisis. This negative distinction manifests itself as fear of death, a feeling that life is too short, and depression. Despair is the last dystonian element of Erikson's theory (1959, 1982). Skip Nav Destination An existing study in eriksonian tradition has found that ego integrity and despair are important indicators of life-span development. The current study concerns the integrity of ego and despair with contemporary theories of personality and mental health. A cross-sectional study was conducted in adults in the Netherlands between the ages of 50 and 95 (N=218), using the Northwestern Ego Integrity Scale, subscales for neuroticism, extraversion, and openness to neo-fli experience, a mental health continuum-short form, and the Center for Epidemiological Studies of Depression Scale-Short Form. Extraversion and Openness to Experience have an indirect relationship to ego integrity that is mediated by well-being. Neuroticism was associated with despair and explained the relationship of depressive symptoms to despair. age did not mitigate these findings. The integrity of the ego seems to be associated with fluctuating states of mental health, while despair is more an expression of general characteristics-like disposition of neuroticism. The implications for further research are discussed. The ego of integrity and despair forms one of the fascinating conceptual pairs that Erik Erikson coined in his theory of human development throughout his life. Unlike identity versus confusion roles (Kroger, 2007) or generativity versus stagnation (McAdams, 2009), it was not the subject of intense empirical research. Existing studies have been conducted primarily in the Eriksonian tradition, related to ego integrity and despair to address past psychosocial crises, to the acceptance of the past and the finality of life. The current study looks at the integrity of ego and the desperation of recent theories of personality and mental health to approach contemporary psychology. We use a cross-sectional study of Dutch adults in their second half of life (50-95 years) to assess hypotheses derived from this broader framework. We are particularly interested in how ego integrity and despair are associated with more stable dispositional traits, as well as on mental health as a more momentary and fluctuating state. Erikson (1950, 1982) distinguished eight phases of his model of life expectancy development, each of which is characterized by a certain psychosocial question. The last stage of life is characterized by the duality of the integrity of ego versus despair. Erikson described the integrity of ego as accepting one and a single life cycle as something that had to be (1950, p. 268) and later as a sense of cohesion and integrity (1982, p. 65). At the same time, late life provides reasons for experiencing despair, such as aspects of the past, present, and future that are difficult to integrate into a meaningful whole. Late life is therefore characterized by both integrity and despair as alternating states that need to be balanced. According to the epigenetic principle of ego integrity versus despair, it will be related to the resolution of past crises (Erikson, 1982). Indeed, cross-cutting studies have demonstrated the relationship of ego integrity to generativeness and identity (Domino & Affonso, 1990; Hannah, Domino, Figueredo, & Hendrickson, 1996; Ryff & Heincke, 1983; Webster, 2003). Longitudinal studies have also found that ego integrity is related to addressing identity crises 45 years earlier in life (James & Zarrett, 2005) and generativeness 9 years earlier (Torges, Stewart, & Duncan, 2008). However, most cross-sectional studies did not find age differences (Hannah et al., 1996; Ryff & Heincke, 1983; Webster, 2003; see, however, Domino & Affonso, 1990). The Longitudinal Study of Rochester also found no evidence of an increase with age (Sneed, Whitbourne & Culang, 2006; Whitbourne, Sneed, Therefore, ego integrity and despair are more a matter of solving the previous dilemmas of human development than of the chronological age. In Erikson's model, the integrity of ego is achieved through the process of remembering the past, which contributes to the wisdom and acceptance of death. Cross-sectional studies have found that remembering the past is related to the integrity of ego (Santor & Zuroff, 1994; Taft & Nehrke, 1990). The resolution of regret on the past has both a cross-cutting and longitudinal relationship to the integrity of the ego (Torges et al., 2008, 2009). Studies have also found a slight negative relationship between ego integrity and death anxiety (Hui & Coleman, 2013) as well as a positive relationship to wisdom (Webster, 2010). Most of the studies mentioned earlier in this article address ego integrity and despair as two poles on one continuum, building on instruments such as the Ryff scale and Heincke (1983) that have a one-dimensional structure. Instruments that measure the integrity and desperation of egos as two separate dimensions have shown that there are different combinations of ego integrity and despair (Walaskay, Whitbourne, & Nehrke, 1983) and that the two dimensions have different relationships with other variables, such as to achieve goal and well-being (Van Hiel & Vansteenkiste, 2009). In Erikson's Theory (1950, 1982), each psychological phase is truly characterized by duality that can be solved in terms of virtue. Wise people are not characterized by a constant state of ego integrity, but experience the integrity of ego and despair. It is therefore important to distinguish the integrity of ego and despair as two dimensions. In conclusion, existing studies have shown systematic relationships that correspond to Erikson's theory of life expectancy: a sequence of resolutions to dilemmas in adult development, memories, and acceptance of death. Thus, the integrity and desperation of egos could be considered important indicators of development throughout life. In this study, we add to these findings by studying ego integrity and despair in relation to personality traits and mental health. There is a lack of studies regarding ego integrity and despair at personality traits. Personality traits such as neuroticism, extraversion or openness to experience are conceived as a fairly stable disposition to feeling, mind and acting in a certain way (McCrae & Costa, 1986; Denissen, van Aken, & Roberts, 2011). Although it is known that changes in the course of life can initiate changes in personality traits, the personality perspective basically treats individual differences in adaptation and growth over the course of life due to relatively stable characteristics. Therefore, personality traits may be related to life-length developmental indicators such as ego integrity and despair. Studies show that personality traits of neuroticism, extraversion, and openness to experience are associated with and the life review, given that there is less evidence of a relationship to these processes with friendliness and conscientiousness (Cappeliez & O'Rourke, 2002; Cully, LaVoie, & Gfeller, 2001). Therefore, we focus on the first three features in this study. More neurotic individuals tend to be more emotionally vulnerable and confident than less neurotic individuals (McCrae & Costa, 1986). They don't just experience more negative emotions (Steel, Schmidt, & Shultz, 2008), but they also have a strong tendency to ponder what went wrong (Nolen-Hoeksema, Wisco, & Lyubomirsky, 2008). When they think about their past lives, they continue to revive bitter experiences (Cappeliez & O'Rourke, 2002; Cully et al., 2001). Thus, stronger neuroticism may be related to a higher level of despair. More extraverted individuals tend to be more outgoing and self-assertive (McCrae & Costa, 1986). They tend to experience more positive emotions (Steel et al., 2008) and use more effective coping strategies such as positive thinking (McCrae & Costa, 1986). When they think about their lives, they tend to share them with others, which could also help to find meaning in their past (Cappeliez & O'Rourke, 2002; Cully et al., 2001). The extraversion can thus have a positive relationship to the integrity of the ego. People who are more open to knowledge tend to be more interested in discovering new ideas, values and experiences (McCrae & Costa, 1986). This could help in finding new meanings in past experiences. When people who are more open to the instilling reminiscing about their lives are more inclined to search for their identity, look for ways to solve problems earlier in life, and prepare for life finitude (Cappeliez & O'Rourke, 2002; Cully et al., 2001). Therefore, for their view of themselves and greater integrity of the ego, it will be easier to adapt to both positive and negative life events. In addition to their relationship to personality traits, we also study the relationships of ego integrity and despair to mental health. In terms of life span development, the traditional view of mental health, such as the absence of mental disorders such as depression or anxiety, is rather minimal (Westerhof & Keyes, 2010). More recently, mental health has been defined more positively as the presence of positive feelings in combination with optimal psychological and social functioning (Keyes, 2007; WHO, 2005). The commissioning of this positive view of mental health is mainly based on research that has expressed differing views on well-being (Keyes, 2005). Subjective or emotional well-being is based on a hedonistic perspective and deals with well-being as the presence of positive emotions and positive evaluations of life (Diener et al., 1999). Eudemonic well-being refers to the aristocratic view of virtuous self-realization and addresses well-being as functioning of personal and social life (Ryff, 1989; Keyes, 1998). Aristotle's view includes not only optimal functioning, but also a positive approach to life events and disappointments in later life, such as acceptance and compassion (Westerhof & Bohlmeijer, 2014). An important question is how the absence of mental disorders is related to the presence of well-being. Recent evidence supports the dual model of continua. Analyses of confirmatory factors have shown that the absence of mental illness and the presence of well-being are two related but different dimensions (Keyes, 2005, 2007; Lamers, Westerhof, Glas, & Bohlmeijer, 2015). People with mental illness can have a high level of well-being and vice versa. For example, a representative Dutch study showed that among

the 10% of people with the highest psychiatric complaints, one in six people had optimal levels of well-being (Westerhof & Keyes, 2010). Further evidence for the dual continua model comes from studies showing that mental illness and well-being have different and independent relationships with demographic variables, health care use, labour productivity and psychosocial functioning (Keyes, 2005; Keyes & Grzywacz, 2005). Thus, complete mental health consists both in the absence of mental illness and in the presence of well-being (Keyes, 2005; Westerhof & Keyes, 2010). The theoretical and empirical difference between mental illness and well-being nicely fitted a dualistic concept of ego integrity and despair. A number of studies have found ego integrity and despair to be related to feelings of depression and anxiety (James & Zarett, 2005; Santor & Zuroff, 1994; Van Hiel & Vansteenkiste, 2009), as well as feelings of well-being and meaning of life (Dezutter, Wiersmann, Apers, & Luyckx, 2013; James & Zarett, 2005; Phillips & Ferguson, 2013; Torges et al., 2009; Van Hiel & Vansteenkiste, 2009; Webster, 2010; Wiersmann & Hannich, 2011). However, these studies did not use a more inclusive dual continua model. Since ego integrity refers to the importance of both triumphs and disappointments in life, we expect this to be related to the well-being. Since despair is characterized by feelings of regret and failure, it will be related to the symptoms of mental illness. The final question concerns the role of well-being and mental illness – as conditions are emerging more recently – in relation to relatively stable dispositions to the integrity and despair of ego. Meta-analysis has shown that personality traits are consistently associated with well-being and mental illness (Malouff, Thorsteinsson, & Schutte, 2005; Steel, Schmidt, & Shultz, 2008). Following the dual continua model, we found that extraversion and openness to experience are related to well-being, while neuroticism is related to mental illness (Lamers, Westerhof, Kovács, Bohlmeijer, 2012). Well-being and mental illness could play the role of mediation in relation to ego integrity and despair. In this article, we study depressive symptoms as the most wide spread symptoms of mental illness in the Dutch population (De Graaf, Ten Have, & van Dorsselaar, 2010). We expect neuroticism to be indirectly related to despair through depressive symptoms, while extraversion and openness to experience have an indirect relationship to ego integrity through well-being. To sum up, we are testing the following hypotheses: (1) Neuroticism is related to despair and extraversion and openness to experience to the integrity of ego. (2) Depressive symptoms are related to despair and well-being with the integrity of the ego. (3) Depressive symptoms mediate the relationship between neuroticism and despair, while well-being mediates the relationship of extraversion and openness to the integrity of the ego. Participants in this study involved 218 Dutch adults aged 50 to 95 years. These adults were recruited by first-year psychology students enrolled in an introductory personality psychology course at the University of Twente in the Netherlands. Students earned course credits to get one or two people over the age of 50 on their social network. Most students asked grandparents (45%) or parent (44%) to participate, but some asked other relatives (5%), neighbors (3%) or known (3%). Table 1 shows that the sample is quite diverse in terms of age, gender, level of education and marital status. Participants were between 50 and 95 years of age with an average of 67 years (SD = 13.0). Most are women and most of the participants are married. Almost half of the participants had 10 years of education or less. Table 1. Demographic characteristics of participants (N = 218) Variable . Value. Distribution. Age 50-95 years Average = 67.4 SD = 13.0 Sex Male 37.2% Female 62.8% Married woman 64.2% Never married 3.2% Widowed 27.2% Divorced 5.0% Education level ≤10 years 47.7% 11-14 years 22.0% ≥15 years 30.3% Tool participants filled out a questionnaire with various tools using Survey Monkey. Respondents had to reply to all tool items before continuing with the next tool, so there were no missing values. Ego integrity was measured with the Northwestern Ego Integrity Scale (NEIS; Janis, Canak, Machado, Green, & McAdams, 2011). This 15-point scale has been translated into Dutch and back into English to obtain a Dutch version equivalent to the English version. The rubric graph in the exploratory analysis of factors indicated that NEIS is a two-dimensional scale. Nine items loaded higher than 0.50 on one of the two dimensions. We used these items in the confirmatory analysis of factors (LISREL 9.10). We found that the structure with two unrelated factors well assembles the data ($\chi^2(26) = 55.7, p = 0.001; RMSEA = 0.072, p(RMSEA \leq .05) = SRMR = 0.055; CFI = 0.95; GFI = 0.95; AGFI = 0.91$) and significantly better than single-factor solution ($\Delta\chi^2(18) = 193.4, p < .05$). We also assessed factorial invariances between the younger age group (50-64 years; n=100) and the older age group (65-95 years; n=118). The model fit, which limited the load of factors and deviations of item errors to be identical, had a similar fit to the model that leaves these parameters free ($\Delta\chi^2(18) = 24.029, p < .05; \Delta CFI = .01; \Delta RMSEA = 0.003, p > .05; CFI = 0.95; Cheung & Rensvold, 2002$). Therefore, items have the same quality as measures of ego integrity and desperation for both age groups. A fully standardized solution for the overall group is shown in Table 2. The internal consistency is satisfactory (Cronbach alpha is 0.74 for ego integrity and 0.75 for desperation). Table 2. Confirmatory factor analysis of the Northwest Ego Integrity Scale (a fully standardized solution; N = 218) Item . Ego integrity . Despair. 15. As I get older, my life story makes more sense to me. .72 — .06. I have reached the point where I can accept the events in my life as necessary. .70 — .10. I see a meaningful thread running through many events in my life. .60 — .13. Even my suffering made sense. .52 — .07. As I get older, I understand people more. .49 — .02. It hurts me to think about the dreams and goals I had that I didn't meet. — .69 .05. I wish I loved more in my life. — .67 .14. I wish I had more time to go the other way in life. — .64 .08. I'm bothered by mistakes I've made in the past. — .63 .08. Three personality traits (neuroticism, extraversion and openness to experience) are measured with the Dutch version of NEO-FFI (Hoekstra, Ommel, & de Fruyt, 1996). The internal consistency (Cronbach alpha) of the subselection scales in this sample was 0.86 for neuroticism, 0.75 for extraversion, and 0.76 for openness to experience. Well-being was measured using a short mental health form (Keyes et al., 2008), a reliable and well-proven tool in the Netherlands (Lamers, Westerhof, Bohlmeijer, Ten Klooster, & Keyes, 2011). The scale includes emotional well-being (3 items, e.g. in the past month, how often you felt satisfied), social well-being (5 items, e.g. in the last month you felt you had something important to contribute to society), and psychological well-being (6 items, e.g. Good at managing the responsibility of your daily life). Each item represents a theoretically proven sense of well-being, of which the frequency in the last month is evaluated (0 = never to 5 = every day). We used an average score of over 14 items, a higher score means better well-being. The balance had good reliability in this sample (Cronbach alpha = .88). Depressive symptoms were evaluated using a short center Epidemiological Studies Depression Scale (Cole, Rabin, Smith, & Kaufman, 2004; Haringsma, Engels, Beekman, & Spinhoven, 2004). The scale is highly reliable in our sample (Cronbach alpha = .83). Participants also completed a brief demographic questionnaire assessing age, gender, marital status and education (Table 1). The results of the First Hypothesis stated that neuroticism is related to despair and extraversion and openness to experience to the integrity of the ego. First, we analyzed bivariate relationships of personality traits to ego integrity and despair (Table 3). More neuroticism has a significant relationship to greater despair, but not to ego integrity. More extraversion is related to more ego integrity and less desperation. Finally, higher levels of openness to experience are significantly related to more ego integrity, but not to despair. Since some features are related (Table 3), we also performed a common regression analysis of the smallest squares with ego integrity and despair as dependent variables (Table 4). At the same time, we entered demographic characteristics (age, being female, being married and education level) as control variables and the three personality traits. Multivariate relationships of ego integrity and despair with personality traits are somewhat different from bivariate correlations. More neurotic and more open people experience higher levels of despair. The integrity of the ego is not significantly related to demographic variables or personality traits. The first hypothesis gains stronger support for despair than the integrity of ego. Table 3. Relationships of ego integrity to personality traits and mental health indices . Range. M. Sd. 1 . 2 . 3 . 4 . 5 . 6 . 7 . Ego integrity and despair 1 . Ego integrity 1-6 4.2 0.8 2. Despair 1-6 2.9 1.0 .13 Personality traits 3. Neuroticism 1-5 2.4 0.6 -.07 .44* 4. Extraversion 1-5 3.3 0.5 .16* -.17* -.36* 5. Openness 1-5 3.0 0.6 .14* .12 .09 .27* Mental health 6. Depressive symptoms 1-4 1.7 0.5 -.12 .32* .60* -.33* -.15* 7. Well-being 1-6 3.9 0.9 .38* -.06 -.29* .43* .36* -.44* Table 4. Ordinary smallest squares Regression of ego integrity and despair on demographic characteristics and personality traits . Model 1a . Model 1b . Model 2a . Model 2b . Ego integrity . Despair. Ego integrity . Despair. B SE Beta B SE Beta B SE Beta B SE Beta Demographics Age .01 .01 .00 .00 .01 .01 .01 .09 .00 .00 .00 .00 0.1 .01 .01 .01 .01 .01 .01 .01 .01 .01 .01 .01 .01 .01 .01 .01 .00 Gender (female) .11 .14 .06 -.35 .14 -.17* .05 .13 .03 -.36 .36 .35 .14 -.17* .05 .13 .03 -.36 .36 .3614 -.18* Married -.11 .14 -.06 .03 .15 .02 -.20 .14 -.11 .04 .15 .02 Education .06 .08 .06 .03 .08 .02 .01 .01 .03 .08 .02 Personality Health Wellbeing -.03 .15 .40*** .30 .17 .15 Depressive symptoms .40 .08 -.02 .09 .09 .08 Explained the dispersion Adjusted R2 .02 .23*** .14*** .23*** the second hypothesis was, that depressive symptoms are related to despair and well-being to ego integrity. Bivariate relationships (Table 3) show that more depressive symptoms are significantly related to more despair but not ego integrity. A more well-being has a significant relationship to greater ego integrity, but not to despair. Just as well as well-being and depressive symptoms have a relationship (r = -.44; Table 3), we also assessed partial correlations that control the supplemental continuum. Again, we found that depressive symptoms are related to despair (partial r =0.32, p<0.001), but not to ego integrity (partial r=0.05, p=0.215) when checking well-being. Well-being remains associated with ego integrity (partial r = 0.37; p <0.001), but not to despair (partial r =0.09; p=0.200). These findings support the second hypothesis. The third hypothesis was that depressive symptoms mediate the relationship between neuroticism and despair, while well-being mediates a relationship of extraversion and openness to ego integrity. First, we added the well-being and depressive symptoms of the regression model in Table 4. The relationship of depressive symptoms to despair is no longer significant in controlling personality variables. Well-being still has a relationship to the integrity of ego. We conducted mediation analyses with macro SPSS mediate (Preacher & Hayes, 2004), using bootstrapping procedures (n=5000 bootstrap resampling) in order to assess the indirect relationship of personality traits through well-being and depressive symptoms. Neuroticism had no significant indirect relationship to despair through depressive symptoms (r =-.02; 95% confidence interval (CI) = -.05 to 0.18). The extraversion had an indirect relationship to ego integrity through well-being (r=0.22; 95% CI = 0.12-.36). The openness of experience also had a significant indirect relationship to ego integrity through well-being (r=.12; 95% CI=.04-.24). None of the other indirect relationships of the three personality traits to the despair and integrity of ego through depressive symptoms and well-being was significant. These findings support the hypothesis of ego integrity, but not for despair. Since the age range of the sample was wide, we also assessed whether age alleviated relationships of personality traits and well-being and depressive symptoms of ego integrity and despair. Therefore, we added age interactions as a continuous variable with all other variables (demographic characteristics, personality traits and well-being and depressive symptoms). Since five mitigated tests were performed for each dependent variable (three for personality traits and two for well-being and depressive we used Bonferroni correction and used p<0.01 instead of p<0.05 as the materiality level. Age did not significantly reduce the relationships of other variables to the integrity of ego or despair. The findings regarding relationships of personality traits and well-being and depressive symptoms of integrity and despair of ego thus apply to people with different chronological ages in the second half of life. Discussion previous studies in eriksonian tradition have shown that ego integrity and despair are important qualities in later life that are related to solving previous dilemmas, reminiscence, and acceptance of death. The current study is the first to take a broader view of personality and mental health to study the integrity of ego and despair. Extraversion and openness to experience had an indirect relationship to the integrity of ego, which was mediated by well-being. Neuroticism was related to despair and explained the relationship between depressive symptoms and despair. Previous studies have shown that the integrity of ego and despair do not have strong relationships to age (Hannah et al., 1996; Ryff & Heinke, 1983; Webster, 2003; see, however, Domino & Afonso, 1990). We also found that chronological age is not related to the integrity and despair of ego. Age also did not alleviate the relationships of integrity and despair of ego to personality traits and well-being and depressive symptoms. Finally, indirect and direct relationships of ego integrity and despair to relatively stable personality traits were found. Taken together, these findings suggest that the integrity of ego and despair may be a matter of individual personality traits rather than chronological age. However, this conclusion fits the findings of despair better than those of ego integrity. In fact, the different relationships of ego integrity and despair to well-being and depressive symptoms support the dual continua model (Keyes, 2005; Westerhof & Keyes, 2010), as well as conceptualizing the integrity of ego and despair as duality rather than as two poles on the continuum, as we mentioned earlier. Although despair was related to more fluctuating states of depressive symptoms, neuroticism explained this relationship. The latter finding is consistent with studies of neurotic cascade (Suls & Martin, 2005): neurotic people are more sensitive to negative influences, generally experience more negative life events and interpret them more negatively. In contrast, well-being had a significant relationship to ego integrity when checking for personality traits and mediated relationship extraversion and openness to ego integrity. The integrity of the ego seems to be more than an expression of dispositional features, but it is also related to more volatile states. Further research should address processes that play a role beyond personality traits and mental health. These studies could shed light on the question of whether the ego and despair belong to the realm of more flexible characteristic adaptations throughout life, rather than being an expression of a fairly stable personality trait feature (Hooker & McAdams, 2003; McAdams & Pals, 2006). We see an important role for accepting death and reviewing life here. Awareness of life's tail can trigger feelings and knowledge of death that are related to the integrity and despair of ego (Hui & Coleman, 2013; Van Hiel & Vansteenkiste, 2009). However, this existential theme goes beyond stable personality traits and fluctuating mental health conditions, and can thus provide greater insight into the function of integrity and despair of ego. Similarly, ego integrity may depend on a life review as a process of evaluating one's life based on autobiographical reasoning (Freeman, 2010; Randall & McKim, 2008; Westerhof & Bohlmeijer, 2014). These studies could point to whether the integrity and desperation of egos are related to the life review as an important process in the field of developmental regulation throughout its lifetime (Pasupathi, Weeks, & Rice, 2006; Webster & Gould, 2007; Westerhof, Bohlmeijer, & Webster, 2010). Our study has some limitations. First, like almost all studies on the integrity and desperation of ego, it had a cross-cutting design. Only longitudinal studies can shed light on how personality traits, two continua mental health, and ego integrity and despair are linked over time. Secondly, students recruited an ad hoc sample, which consisted mostly of close relatives. The sample contains an excessive representation of women and educated participants compared to the Dutch population. Given that gender and education played a minor role in regression analyses, this selective effect will not be strong. Although we have reached a diverse group of participants, the recruitment strategy could lead to a more homogeneous sample. This may, for example, explain the lack of age differences. It would therefore be interesting to test hypotheses in a more representative survey as well as in more specific samples, such as people who are faced with death from an incurable disease. Third, we rated only three of the big five personality traits and only depressive symptoms as a measure of mental illness. Other studies should look at whether other traits, such as friendliness and conscientiousness, as well as other aspects of mental illness, such as anxiety, have similar relationships with ego integrity and despair. In the end, we did not add measures to deal with other psychosocial crises, such as generativeness versus stagnation or identity versus role confusion. Other studies of erikson tradition have not only found that ego integrity is more related to the resolution of previous crises than to chronological age (e.g. Torges et al., 2008). They also suggest that other dualities, such as identity versus role they are important not only in adolescence, but refer to a continuous process of consolidation and revision in relation to age-graduated life contexts (Kroger, 2007; Westerhof, 2010; Whitbourne, 1986). Adding measures for further crises would make it possible to better demonstrate the added value of adding personality traits and mental health variables to the Eriksonian model. Despite these limitations, we conclude that our study sheds new light on the integrity of ego and despair from current models of personality and mental health. References , & . . (). 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