Perceived Level and Appraisal of the Growing Expectations for Active Ageing
Among the Young-Old in Germany

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Bios

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Abstract

Demographic change and the call for active ageing impose new demands on older individuals. Using data on German adults aged 56–75 (N = 1468), we investigated perceived level of activation demands (e.g., increased expectations that the young-old will contribute to the public good) and appraisal of them as threatening or challenging by individuals with different health status and socioeconomic backgrounds. Overall, perceived level of demands was moderately high, and they were seen rather as a challenge. East Germans, those with better subjective health, and those unemployed reported a higher level of activation demands whereas retired and widowed individuals reported a lower level. Moreover, East Germans, individuals with lower educational attainment, and those reporting health problems (but not physically handicapped individuals) experienced these demands more as a threat and less as a challenge. We argue that more targeted policy strategies are needed to promote active ageing in disadvantaged groups.

Keywords: social change, activation, young-old, life course, societal expectations
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Many countries are currently undergoing a major demographic transition induced by increased life expectancy, low fertility rates, and ageing of the baby-boomer generations. As such, population ageing is a marker of successful economic development and improved health care. In this regard, World Health Organization (WHO, 2002) makes an important emphasis on active ageing understood as “the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age” (p. 12). However, existing policies and practices are often age-discriminative or inadequate for the promotion of healthy ageing, and many individuals are not prepared to age actively even in the absence of severe health impairments. Accordingly, policy makers are trying to build opportunities for and to enhance commonly held expectations of older adults, which should presumably lead to their activation (Avramov & Maskova, 2003; Overcoming the barriers..., 2006; UN, 2002; WHO, 2002). The present study investigates how such activation demands are perceived by young-old Germans with different health status and sociodemographic backgrounds.

Impact of Social Change at the Individual Level

Population ageing, corresponding reform efforts, and the call for active ageing represent gradual but pervasive social change affecting both current and future generations of ageing individuals. Since Glen Elder’s (1974) seminal research on children of the Great Depression, it has been shown repeatedly that social change affects individuals unequally: Proximal social contexts (e.g., economic hardship experienced in the family) and life-course stage largely determine whether an individual will be able to use new opportunities or to withstand new stressors (see Elder, 1998, for a review). Expanding Elder’s ideas, Silbereisen and colleagues (Silbereisen et al., 2006; Pinquart & Silbereisen, 2004) suggested studying specific manifestations of social change as experienced by individuals, which were labelled
perceived demands of social change. Examples of such demands are the increasing difficulty of career and family planning, the risk of unemployment, and partnership instability; the level of perceived demands is taken to reflect the degree of individual exposure to social change. The Jena Study on Social Change and Human Development was designed to test a model relating macrolevel change to its perceptions, coping responses, and well-being at the individual level (Silbereisen et al., 2006; Pinquart & Silbereisen, 2004). Using data from this survey, Tomasik and Silbereisen (2009) investigated how German adults perceived new demands stemming from globalization and individualization of life-course trajectories (see examples above). Tomasik and Silbereisen found that living in less prosperous regions, being unemployed or without a partner, and having low educational attainment predicted a higher load of perceived demands of social change. Thus, increasing uncertainty in major life domains hit already disadvantaged individuals and disadvantaged regions harder.

The Present Study in the German Context

Continuing with the same line of research, we investigated individual variation in perceived activation demands among the German young-old. In Germany, population is ageing rapidly: The proportion of individuals aged 60–80 increased from 13.6% in 1950 to 20.8% in 2009, and the proportion of those older than 80 increased from 1.0% to 5.1% during the same period (Statistisches Bundesamt Deutschland, 2010). The German government has taken steps towards an active ageing policy, such as raising the statutory retirement age from 65 to 67 years (see Bonin, 2009), fostering the labour force participation of older workers (Büttner, Knuth, Schweer, & Stegmann, 2008) and lifelong learning (Bundesagentur für Arbeit, 2011), encouraging older adults’ civic and political engagement (Bundesministerium für Familie, Senioren, Frauen und Jugend [BMFSFJ], 2009), and promoting healthy lifestyles (Bundesministerium für Gesundheit, 2010). Given the unsustainability of the existing social security system, older Germans, as well as those younger, are urged to assume more
responsibility for their own welfare (Nullmeier, 2006). Many German prime-time TV serials and advertisements portray older adults as resourceful, active, open to experience, and socially integrated (Kessler, Rakoczy, & Staudinger, 2004; Kessler, Schwender, & Bowen, 2010). Advertisements for anti-ageing products also suggest that physical fitness and a youthful appearance are possible and even normative at an older age. Such positive images, albeit often unrealistic, present new role models for ageing individuals (cf. van Dyk & Lessenich, 2009). Meanwhile, healthy and active ageing is indeed becoming more widespread in Germany. For instance, rates of self-reported civic engagement among Germans aged 55–74 rose from 30.5% in 1999 to 34.5% in 2009 (BMFSFJ, 2010b). Further, self-reported involvement in sport activities among the young-old increased steadily whereas the number of health complaints decreased steadily between 1996 and 2008 (BMFSFJ, 2010a). Thus, young-old Germans seem to be responsive to the new demands to age actively.

We used data from a large-scale survey of German adults aged 56–75, which was conducted in 2009. Our study was conceptually different from existing research, which focused on individual perceptions and self-evaluations of active ageing (Bowling, 2008; Phelan, Anderson, LaCroix, & Larson, 2004; Schmitt, 2004) whereas we addressed individual experiences of the new societal expectations for active ageing. Such activation demands may be seen as benign as they have a connotation of healthy ageing. However, low-resource individuals who are not able to comply with new expectations may conceive these demands as stressful (cf. Schmitt, 2004). For this reason, we considered not only the level of perceived activation demands (reflecting the degree of exposure to changing expectations) but also the primary appraisal of them (Lazarus & Folkman, 1984) as a challenge (i.e., potentially gainful, evoking excitement and anticipation) or as a threat (i.e., potentially harmful, entailing anxiety and apprehension). Lazarus and Folkman argued that appraising a situation rather as a challenge implies lower stress levels and better adaptation.
Hypotheses

First and foremost, we considered the role of sociopolitical context. As East Germans have been the target of various activation policies since reunification (Lechner & Wunsch, 2009), we expected that the young-old in the East would perceive more activation demands than their Western counterparts (Hypothesis 1a). Furthermore, economic disadvantage and higher uncertainty typical of East Germany may lead to activation demands being seen as more threatening in the East (Hypothesis 1b). With regard to SES, individuals with higher educational attainment and income may be better aware of current political discourse and thereby more exposed to activation demands than their peers with lower SES. Moreover, high SES is known to be a predictor of healthy ageing (Buckley, Denton, Robb, & Spencer, 2004) and may therefore enable individuals to approach activation demands with more confidence. For these reasons, we hypothesized that higher educational attainment and income would be related both to a higher level of perceived activation demands (Hypothesis 2a) and to a stronger appraisal of them as a challenge (Hypothesis 2b).

We used gender and chronological age only as control variables because our items on activation demands were deliberately constructed as age- and gender-neutral (see Method). However, we did expect differences pertaining to health status and life-course stage (see Elder, 1998), which are both age-related. Health is a profoundly important prerequisite of active ageing (WHO, 2002). Like SES, good health may be a resource that both exposes older individuals to activation demands and makes them better prepared to deal with them. Thus, we hypothesized that better health would be related to more perceived activation demands (Hypothesis 3a) and to appraising them more as a challenge (Hypothesis 3b).

Regarding life-course stage, we predicted that retired individuals would perceive fewer activation demands than those in employment, who are confronted with modern labour market conditions that are more demanding for older workers (Hypothesis 4a; e.g., Wood,
Wilkinson, & Harcourt, 2008). By the same token, we hypothesized that retired individuals would perceive activation demands less as a threat (Hypothesis 4b). We also expected an interaction with sociopolitical context in this respect. Given that unemployment rates are much higher and labour market opportunities much worse in the East (Fuchs-Schündeln, 2009), older workers in the East have to withstand more competition and therefore have stronger reasons to be active than their Western counterparts. However, for those in retirement there may be little difference in life situation between the regions as pension benefits are equally guaranteed. Thus, we hypothesized that East–West differences in perceived activation demands and in the primary appraisal of them would be more pronounced in those employed than in those retired (Hypothesis 4c).

As the older unemployed in Germany face additional activation pressure from the state (i.e., policies stimulating re-employment and discouraging long-term unemployment; Jacobi & Kluve, 2007), we expected a positive relationship between being unemployed and perceiving more activation demands (Hypothesis 5a). Tomasik and Silbereisen (2009) have shown that unemployment is associated with higher perceived uncertainty and risks in various life domains. Thus, unemployed individuals may experience activation demands more as a threat in comparison to those employed (Hypothesis 5b). We also predicted that the East–West differences would be more pronounced in those unemployed (Hypothesis 5c) as re-employment prospects of older unemployed are particularly poor in the East.

Concerning partnership status, absence of a steady partner may prompt individuals to pay more attention to their fitness and attractiveness in the hope of finding one, as it has become acceptable to form new intimate relationships at an older age (Cooney & Dunne, 2001). However, absence of a steady partner also means higher vulnerability to stressors (see Tomasik & Silbereisen, 2009). Thus, those without a partner may perceive more activation demands (Hypothesis 6a) but see them as more of a threat (Hypothesis 6b).
Method

Participants and Procedure

We used data from the older adults’ sample of the Jena Study on Social Change and Human Development (Silbereisen et al., 2006). Participants aged 56–75 were drawn from four German federal states (Mecklenburg-Western Pomerania and Thuringia in the East, Baden-Württemberg and Schleswig-Holstein in the West). Sampling points were selected at random from the stratified area sample provided by the Association of German Market and Social Research Institutes (ADM). Within each sampling point, target households (which did not include nursing homes and prisons) were identified with a random route technique. The interviewers (trained personnel of a professional survey agency) made at least three attempts to ascertain whether an eligible individual was available for interview in each household. Standardized computer-assisted personal interviews (CAPI) lasting 1–1.5 hours were conducted in July–August 2009. Proxy respondents (i.e., others helping the target person to fill in the questionnaire) were not allowed. After the main interview, participants were offered a test for cognitive ability (Digit Symbol Test; Tewes, 1994).

Altogether, 1508 individuals took part in the survey (response rate 52.9%). Major reasons for nonresponse at the household or individual level were noncontact (45.3%) and refusal (46.4%). No further information about nonrespondents was collected. In comparison to the German Microcensus 2008, relatively older females and relatively younger males, as well as better educated and unmarried individuals, were slightly over-represented in this sample. Complete data on major sociodemographic variables and categorical health indicators were available for 97.3% of the participants, which resulted in the sample size of $N = 1468$ for the present study. Mean age ($SD$) of the participants was 65.7 (5.9) years; 50.1% of them were from the former East Germany; 52.2% were females.

Measures
Perceived activation demands. The present scale was developed by analysing policy changes and statistical trends (see Introduction) and identifying those that entailed increased expectations of the German young-old. Policy themes that referred purely to obligations of the society towards older adults, such as security and transportation issues or age discrimination, were not considered. Moreover, the focus was on topics pertaining to all young-old, including pensioners; demands specific to the work domain were therefore not included. Ultimately, the scale comprised six questionnaire items (see Table 1) and covered three broad issues: social participation, health and fitness (cf. WHO, 2002), and individual responsibility (cf. Nullmeier, 2006). The restricted number of items was due to time constraints unavoidable in a large-scale survey. To capture perceived change, the items were formulated with reference to the past five years. Before being presented with the scale, participants received the following instruction: “Now think of your everyday life. Here one is often exposed to certain expectations. How have these expectations changed over the past 5 years?” Thus, the items did not refer explicitly to the activation debate in the media and at the policy level. Rather, they aimed to capture the most likely manifestations of changing societal expectations in participants’ everyday lives.

Items 1 and 2 covered social participation with Item 1 reflecting the call for greater involvement of older adults in societal affairs and Item 2 referring to the need of lifelong learning, keeping up with new technologies in particular, which often represents a challenge for older individuals (Boulton-Lewis, 2010). The topic of health and fitness was covered by Items 3 and 4, which tapped into heightened expectations that older individuals should invest in maintaining their physical and mental functioning and attractive appearance. Concerning individual responsibility, Item 5 referred to the need for proactive coping with possible financial insecurity, and Item 6 reflected the shrinking state protection in legal matters.
The six items were measured on a seven-point scale (1 = does not apply; 7 = fully applies). Mean endorsement of the items (see Table 1) was quite high, confirming their relevance to our participants. The items loaded on one factor, and CFA of the measurement model yielded satisfactory fit: \( \chi^2(9, N = 1468) = 106.10, p < .001, \) CFI = .942, RMSEA = .086, SRMR = .036. In subsequent analyses, we used the latent score on perceived activation demands as a summary variable.

**Primary appraisal.** Perceiving activation demands as a threat or as a challenge was assessed with two separate items: “These changes represent a threat to me” and “In these changes, I see a challenge to me” (1 = does not apply; 7 = fully applies). These items were only weakly correlated (\( r = -.10, p < .001 \)), which justified their separate assessment. On average, activation demands were experienced rather as a challenge than as a threat: 

\[ M_{\text{threat}}(SD) = 2.87(1.82), M_{\text{challenge}}(SD) = 4.37(1.77), t_{\text{paired}}(1458) = -21.48, p < .001. \]

**Sociodemographic indicators.** We considered sociopolitical context (1 = East, 0 = West), age in years, gender (1 = female, 0 = male), educational attainment with three levels (9.1% of participants had only a school leaving certificate, 59.7% had traineeship/college education, and 31.2% had a university or equivalent degree), employment and partnership status, and net income per person in the household in euro.

With respect to employment status, we distinguished among those employed (24.1%), those unemployed (i.e., not working and looking for a job; 3.9%), those outside the labour market (i.e., not working, not looking for a job, but not yet retired; 6.5%), and those retired (including those in the exemption phase of part-time employment prior to retirement; 65.5%). Retired individuals who were looking for a job (\( n = 16 \)) were coded as unemployed. Concerning partnership status, we looked at those with a steady partner (irrespective of legal status; 67.0%), singles (5.4%), separated or divorced individuals without a steady partner (11.5%), and widowed individuals without a steady partner (16.1%). As to income,
participants specified to which income bracket their household belonged, and the mean value of the respective bracket was divided by the number of people in the household.

**Health indicators.** *Physical handicap* was measured with one item (“Are you permanently physically handicapped either since birth or due to an accident?”; 0 = no, 1 = yes; reported by 6.1% of the participants). *Severe illness in the past five years* was represented by one item from a list of stressful life events. Participants specified whether they had experienced own severe illness or injury (e.g., cancer or stroke) within the past five years (0 = no; 1 = yes; reported by 19.3% of the participants). As no more objective health indicators were available in the survey, we also used subjective health measures, specifically two subscales from the Subjective Aging Perception Scale (de Gracia Blanco, Olmo, Arbonès, & Bosch, 2004), each comprising three items: *perceived physical fitness* (e.g., “I think I am pretty fit for my age”; 1 = does not apply; 7 = fully applies; α = .87) and *perceived cognitive fitness* (e.g., “I think my memory is still very good”; α = .75).

**Results**

To test our hypotheses, we regressed perceived activation demands (latent score), the threat appraisal, and the challenge appraisal on the sociodemographic and health indicators (bivariate correlations among the study variables are available from the first author upon request). Both threat and challenge appraisals were associated with a higher level of perceived activation demands ($r_{demands-threat} = .25, p < .001$; $r_{demands-challenge} = .36, p < .001$) but were negatively intercorrelated ($r_{threat-challenge} = -.10, p < .001$). To take these correlations among the dependent variables into account, we conducted regression analyses using SEM. Here, the latent score on perceived activation demands served as a control variable in the regression analyses of the threat and challenge appraisals (as perceived activation demands logically precede the appraisal of them), and the latter were allowed to correlate. Furthermore, to disentangle the effects of objective and subjective health, we regressed
perceived physical and cognitive fitness on physical handicap and severe illness in the past five years and used unstandardized residual scores instead of original variables as predictors in the main analyses. This procedure enabled us to reveal the effects of more objective health indicators, which might be weak but logically antecedent to the effects of subjective health, on the dependent variables. Analyses were conducted in Mplus v.6 (Muthén & Muthén, 2010), wherein missing values on covariates (perceived physical and cognitive fitness and income) were handled using the FIML method. To compensate for the non-normality of some continuous variables, we used logged scores on income and employed bootstrap estimation (1000 draws). When we controlled for cognitive ability (i.e., scores on the Digit Symbol Test), estimates from our analyses changed only marginally.

Results of regression analyses for each dependent variable are presented in Table 2, where Model 1 comprises main effects and Model 2 adds the interactions of sociopolitical context and employment status. As standardized regression coefficients are not meaningful when interaction effects are tested (Aiken & West, 1991), we report unstandardized coefficients showing the amount of change in the dependent variable for a one-unit change in a predictor. Note that the latent score on activation demands had a standardized scale whereas the threat and challenge appraisals had an unstandardized scale ranging from 1 to 7.

In line with Hypothesis 1a, living in the former East Germany was associated with a higher level of perceived activation demands. Hypothesis 1b was also fully supported because East Germans scored higher on the threat appraisal and lower on the challenge appraisal in comparison to West Germans. Educational attainment and income had no significant effect on the level of perceived activation demands, so that Hypothesis 2a was not confirmed. Hypothesis 2b was partially supported as higher educational attainment was related to experiencing activation demands less as a threat. Furthermore, participants with a
university or equivalent degree scored higher on the challenge appraisal than those with lower educational attainment. However, no significant associations of income with the threat and challenge appraisals emerged.

Gender had no relation to the level of perceived activation demands or to the threat appraisal. However, females experienced activation demands significantly less as a challenge than males. Age had a weak negative association with the level of perceived activation demands and had no significant relation to the primary appraisal. With regard to health indicators, neither physical handicap nor severe illness in the past five years was related to the level of perceived activation demands whereas residual scores on perceived physical and cognitive fitness (i.e., with more objective health indicators partialled out) were both associated with a higher level of perceived activation demands. Thus, Hypothesis 3a was supported only for subjective health. Moreover, physical handicap was associated with lower scores on the threat appraisal, which was against Hypothesis 3b. Otherwise, as severe illness in the past five years was related to higher scores on the threat appraisal, and perceived physical and cognitive fitness were related to lower scores on the threat appraisal, Hypothesis 3b was supported. Higher scores on the challenge appraisal were predicted only by perceived physical and cognitive fitness.

Concerning life-course stage, Hypothesis 4a was fully supported as retired individuals reported a significantly lower level of activation demands than those employed. In contrast, there were no significant differences between retired and employed individuals with regard to the threat and challenge appraisals, which did not support Hypothesis 4b. One significant interaction with sociopolitical context emerged (see Table 2, Model 2), and its direction was in accordance with Hypothesis 4c. Analysis of simple slopes (see Aiken & West, 1991) showed that employed East Germans reported a much higher level of activation demands than employed West Germans \[B(SE) = .61(.12), p < .001\] whereas retired East Germans
differed only slightly from retired West Germans in this respect \[ B(SE) = .21(.09), p < .05 \]. No significant interactions with sociopolitical context emerged for the threat and challenge appraisals. Thus, both employed and retired East Germans experienced activation demands more as a threat and less as a challenge than did their counterparts in the West.

In line with Hypothesis 5a, being unemployed was related to a higher level of perceived activation demands. However, there were no significant differences between unemployed and employed individuals with regard to the threat and challenge appraisals, so that Hypothesis 5b was not confirmed. Moreover, there were no significant interactions with sociopolitical context (see Table 2, Model 2). Thus, Hypothesis 5c was not supported either. Note that we did not formulate any hypotheses concerning those outside the labour market but not yet retired, and no significant effects emerged for this category.

As to partnership status, the only significant effect we found was that widowed individuals without a steady partner reported a lower level of activation demands than those with a steady partner. This effect was in the opposite direction to what we had expected, namely that individuals without a steady partner would perceive more activation demands. With regard to the threat and challenge appraisals, no significant effects of partnership status were observed. Thus, neither Hypothesis 6a nor Hypothesis 6b was supported.

Discussion

The starting point for our study was the current policy trend towards activation of older adults in Western societies, which is prompted by population ageing, health care improvement, withdrawal of the welfare state, and other factors (Avramov & Maskova, 2003; van Dyk & Lessenich, 2009; WHO, 2002). Such social change may be experienced differently by individuals, depending on their SES, employment and partnership status, life-course stage, and the local context (Elder, 1998; Pinquart & Silbereisen, 2004). Indeed, we found that variation in perceived activation demands and in the primary appraisal of them
(i.e., as threatening or challenging; see Lazarus & Folkman, 1984) in German adults aged 56–75 was systematically related to socioeconomic and health indicators.

Sociopolitical Context, Individual Resources, and Perceived Activation Demands

We found that East Germans reported a higher level of perceived activation demands and experienced them more as a threat and less as a challenge than did West Germans. This was in line with our expectations, indicating a mismatch between well-meant suggestions and incentives put forward by policy makers and the willingness of individuals from disadvantaged regions to use them. This situation may stem partly from a lack of structural opportunities in the East and partly from its inhabitants being overtaxed by incessant external demands and ideas for improvement to which they have been exposed since reunification.

With regard to individual socioeconomic standing, we found that neither educational attainment nor income was associated with the level of perceived activation demands. Given the high average endorsement of these demands, this suggests that change in societal expectations of the young-old is felt at all levels of the social ladder. However, individuals with higher educational attainment, especially those with a university or equivalent degree, did experience these demands more as a challenge and less as a threat, which was in line with our predictions. Highly educated older adults may find benefits in activation demands: recognition of their competence and usefulness, a chance to stay in a high-prestige occupation for longer, an opportunity of political participation. As to income, it showed no significant effects when all other predictors were included in regression analyses. An additional test of mediation suggested that income was related to perceived activation demands and the primary appraisal of them indirectly, via perceived physical fitness (cf. Buckley et al., 2004).

With respect to gender, we found that females appraised activation demands less as a challenge than did males. Probably females, complying with their gender role, reacted to activation demands with less assertiveness and competitiveness (Wood & Eagly, 2009).
Otherwise, as our items were age- and gender-neutral, these control variables had little relation to perceived activation demands and the appraisal of them. For instance, chronological age was much less important than indicators of biological and social ageing (i.e., health status and life-course stage). Specifically, perceived physical and cognitive fitness, but not more objective health indicators (i.e., physical handicap and severe illness in the past five years), were related to a higher level of perceived activation demands. Perhaps poor subjective health, which may reflect anxiety about one’s health, as well as “real” health problems (e.g., a chronic condition) that we could not assess otherwise, makes individuals less exposed to activation demands: Significant others naturally adjust their expectations, and the activation debate in mass media appears irrelevant. Moreover, individuals with poorer subjective health, as well as those reporting severe illness in the past five years, experienced activation demands as rather threatening (cf. Schmitt, 2004). These findings not only confirm that health is a key prerequisite of active ageing (see WHO, 2002) but also caution against the marginalization of less healthy individuals as a consequence of activation rhetoric, which may overstate individual responsibility for own health (Holstein & Minkler, 2003). However, we also found that physically handicapped individuals saw activation demands as less of a threat, possibly because they perceived them as offering an opportunity for better social inclusion (cf. Balandin, Llewellyn, Dew, Ballin, & Schneider, 2006).

Concerning life-course stage, retired individuals reported a much lower level of activation demands than those employed. Given that our items did not directly pertain to work, this finding suggests that the modern labour market poses challenges for older workers that go beyond immediate work-related issues. These challenges may be due to competition from younger workers (e.g., Wood et al., 2008), which is especially tough in the former East Germany. That is, we found that employed East Germans perceived more activation demands than their counterparts in the West whereas this regional difference was much less
pronounced among retired individuals. Nevertheless, the primary appraisal of activation demands did not differ significantly between those retired and those employed, which indicates that the latter are not particularly daunted by the enhanced expectations of them.

Moreover, our unemployed participants reported even more activation demands than those employed. This fitted our expectations because unemployed in Germany are the main target of activation policies, especially the older unemployed, who are now offered more incentives to re-enter the labour market (Jacobi & Kluve, 2007). Contrary to our predictions, the East–West difference in the level of perceived activation demands was not larger among those unemployed than among those employed. If anything, it was smaller, although this trend was insignificant. This result coincides with earlier findings of Tomasik and Silbereisen (2009), who concluded that the situation of those unemployed in the East and in the West is highly comparable (e.g., the same necessity to interact with the labour office). Further, individuals who were not working and not looking for a job, but not yet retired, did not differ significantly from those employed in the level of perceived activation demands and the appraisal of them. We did not expect any effects here because of the heterogeneity of this rather small group, which included homemakers, registered unemployed with a varying length of unemployment, and individuals who did not specify their reasons for not working.

Our predictions that those without a steady partner would perceive more activation demands due to their need to find a new partner were not substantiated. Quite the contrary, widowhood was associated with a lower level of perceived activation demands, which may be explained by the loss of a spouse often leading to reduced social involvement (Bennett, 2005). Single and divorced or separated individuals did not differ significantly from those with a steady partner in the level of perceived activation demands. Perhaps existing partnerships and the family obligations associated with them provide no fewer stimuli to age actively than the task of forming a new partnership in later life (cf. Garfein & Herzog, 1995).
Finally, neither employment nor partnership status was significantly related to the primary appraisal of activation demands, which ran contrary to our predictions. However, this may be taken as a positive finding, implying that young-old Germans who are unemployed or do not have a steady partner are not particularly distressed by the current activation debate. Other resources, such as health, educational attainment, and sociopolitical context, turned out to be more predictive of the threat and challenge appraisals.

**Limitations and Future Directions**

Although we used a stratified probability sample of young-old German adults, our findings should be generalized to the target population with caution as the response rate was low and certain groups were over-represented in the sample. Also, we relied on self-report measures, which was a particular disadvantage with regard to health indicators. Future research on perceptions of active ageing and related societal expectations will benefit from employing more differentiated health indicators and multiple sources of information.

Our central measure of perceived activation demands was based on temporal comparisons. This method implies not a precise recollection of autobiographical data but a reconstruction of the subjective experience of change, which nevertheless constitutes reality. However, individuals tend to over-report growth and positive change (Westerhof & Keyes, 2006), which could have resulted in the overestimation of growth in activation demands. This was unlikely for two reasons. Firstly, our participants had to specify the degree of agreement with that certain expectations had increased over the past years, but did not have to estimate the amount of change. Secondly, we showed that activation demands could be construed in either way, that is, as a threat or as a challenge. Nonetheless, prospective studies would help to address the difference between perceived and actual change in activation demands.

Further, social change is translated into individual perceptions through a chain of embedded social contexts and daily life experiences (Elder, 1998; Pinquart & Silbereisen,
We have shown that sociopolitical context, as well as socioeconomic and health resources, may mould individual perceptions of activation demands. How these perceptions actually arise remains a question for future studies. For instance, what are the roles of mass media, advertising, daily interactions with colleagues, relatives, or neighbours of different ages, and experiences at public offices? Which characteristics of neighbourhood are conducive to active ageing? Finally, the implications of perceived activation demands for individual well-being and adaptation also need to be addressed in the future.

Conclusions

In the present study, we introduced a measure to assess individual experiences of the growing societal expectations for active ageing. Despite some limitations, we can conclude that the young-old in Germany are aware of new demands to contribute to the public good, to take care of their health and appearance, and to assume responsibility for their own welfare, especially if they are not yet retired. Moreover, on average these demands are experienced more as a challenge than as a threat. However, certain disadvantaged groups appear to be somewhat distressed by activation demands: East Germans, individuals reporting health problems, and those with lower educational attainment see them as rather threatening.

To improve this situation, policy makers need to promote opportunities for active or at least dignified ageing for everyone. This may be achieved by developing targeted activation strategies, such as featuring the members of disadvantaged groups as role models in the media and encouraging self-help movements for older individuals with financial difficulties or particular health problems. Furthermore, policy makers may take note of our finding that retired and widowed individuals seem to be least exposed to activation demands. As remaining productive and socially integrated is essential for the physical and mental health of older individuals experiencing the loss of work and/or family roles, additional efforts to foster their community involvement may be warranted.
References


Table 1

Perceived Activation Demands

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<tr>
<th>Item</th>
<th>M(SD)</th>
<th>Standardized factor loadings</th>
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<tr>
<td>(1) ...I am faced today with greater expectations to contribute in some way to the public good</td>
<td>3.72(2.00)</td>
<td>.57*</td>
</tr>
<tr>
<td>(2) ...it is expected more of me today that I keep up to date with technical developments</td>
<td>4.42(2.10)</td>
<td>.69***</td>
</tr>
<tr>
<td>(3) ...the demands to stay physically and mentally fit are greater today</td>
<td>4.97(1.91)</td>
<td>.66***</td>
</tr>
<tr>
<td>(4) ...I have to devote more attention today to keeping up an attractive appearance</td>
<td>4.03(2.02)</td>
<td>.59***</td>
</tr>
<tr>
<td>(5) ...it is more likely today that I’ll have to look for another way to supplement my income in order to make ends meet</td>
<td>3.09(2.25)</td>
<td>.46***</td>
</tr>
<tr>
<td>(6) ...it is more important today that I look out for my own rights</td>
<td>5.36(1.80)</td>
<td>.47***</td>
</tr>
</tbody>
</table>

Note. Item order in the questionnaire was (3), (1), (2), (5), (6), (4).
* The reference item.
*** p < .001.
Table 2

Results From Multiple Regression Analyses

<table>
<thead>
<tr>
<th>Predictor/Dependent variable</th>
<th>Latent activation demands score</th>
<th>Threat appraisal</th>
<th>Challenge appraisal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Model 1</td>
<td>Model 2</td>
<td>Model 1</td>
</tr>
<tr>
<td>Latent activation demands</td>
<td>–</td>
<td>–</td>
<td>.43(.07)***</td>
</tr>
<tr>
<td>Female</td>
<td>.08(.07)</td>
<td>.08(.07)</td>
<td>.01(.10)</td>
</tr>
<tr>
<td>Age</td>
<td>-.02(.01)*</td>
<td>-.02(.01)*</td>
<td>-.01(.01)</td>
</tr>
<tr>
<td>East Germany</td>
<td>.33(.07)***</td>
<td>.61(.12)***</td>
<td>.33(.10)**</td>
</tr>
<tr>
<td>No vocational training(^a)</td>
<td>-.04(.12)</td>
<td>-.04(.12)</td>
<td>.45(.18)*</td>
</tr>
<tr>
<td>University or equivalent degree(^a)</td>
<td>.06(.07)</td>
<td>.05(.07)</td>
<td>-.26(.10)*</td>
</tr>
<tr>
<td>Net income (logged)</td>
<td>-.03(.08)</td>
<td>-.03(.08)</td>
<td>-.15(.11)</td>
</tr>
<tr>
<td>Physical handicap</td>
<td>.00(.14)</td>
<td>.01(.14)</td>
<td>-.40(.19)*</td>
</tr>
<tr>
<td>Severe illness in the past 5 years</td>
<td>.09(.08)</td>
<td>.09(.08)</td>
<td>.31(.12)**</td>
</tr>
<tr>
<td>Perceived physical fitness(^b)</td>
<td>.11(.03)***</td>
<td>.11(.03)***</td>
<td>-.19(.04)***</td>
</tr>
<tr>
<td>Perceived cognitive fitness(^b)</td>
<td>.09(.03)***</td>
<td>.09(.03)*</td>
<td>-.29(.04)***</td>
</tr>
<tr>
<td>Unemployed(^c)</td>
<td>.36(.17)*</td>
<td>.65(.27)*</td>
<td>.23(.26)</td>
</tr>
<tr>
<td>Outside the labour market(^c)</td>
<td>-.08(.14)</td>
<td>-.15(.21)</td>
<td>-.35(.24)</td>
</tr>
<tr>
<td>Retired(^c)</td>
<td>-.63(.10)***</td>
<td>-.46(.12)***</td>
<td>-.19(.14)</td>
</tr>
<tr>
<td>Single(^d)</td>
<td>-.09(.15)</td>
<td>-.11(.15)</td>
<td>-.01(.21)</td>
</tr>
<tr>
<td>Divorced/separated(^d)</td>
<td>.18(.10)</td>
<td>.16(.10)</td>
<td>-.15(.15)</td>
</tr>
<tr>
<td>Widowed(^d)</td>
<td>-.30(.09)***</td>
<td>-.29(.09)***</td>
<td>.17(.13)</td>
</tr>
<tr>
<td>East Germany x Unemployed</td>
<td></td>
<td></td>
<td>-.56(.32)</td>
</tr>
<tr>
<td>East Germany x Outside lab. market</td>
<td>.09(.27)</td>
<td></td>
<td>-.45(.46)</td>
</tr>
<tr>
<td>East Germany x Retired</td>
<td></td>
<td></td>
<td>-.40(.15)***</td>
</tr>
</tbody>
</table>

\(^{R^2}\) .212 .220 .148 .153 .206 .207

Note. Cells represent unstandardized regression coefficients with standard errors in parentheses. \(N = 1468.\)

\(^a\) Reference category: traineeship or college education.

\(^b\) Unstandardized residual scores from the OLS regression with physical handicap and severe illness in the past 5 years as predictors.

\(^c\) Reference category: employed.

\(^d\) Reference category: with a steady partner.

\(* p < .05. \, ** p < .01. \, *** p < .001.\)