A CONCEPT OF STYLE OF LIFE INDUCED FROM
A STUDY OF AGING
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Since completing our study of 168 older people in Kansas City which has recently been published as Lives Through the Years: Styles of Life and Successful Aging (6), I became aware of the fact that the term, style of life, had also been used by Alfred Adler. It described one of his key concepts. These two usages should lead to some interesting comparisons.

But first a word as to how the term, style of life, became available to us. Essentially there was no one single source. The writer has been greatly influenced by the work of Talcott Parsons with whom he studied at Harvard during the early days of the development of Parsons' theory of action. He has also been influenced by the work of Max Weber, 1864-1920, and perhaps even more by the work of Max Scheler (4), 1874-1928, although Scheler did not use the term style of life as Weber actually did (5, pp. 187-188, 190-193).

The concept of style of life seems inherent in a theory of action defined as meaningful behavior. Action is a series of projects with means related to goals and governed by certain norms. The over-all pattern of the projects and their interrelationships can well be called style. It is in this sense that the present author has used the term.

The study referred to initially made use of a number of analytical concepts derived in part from the theory of action as developed by Talcott Parsons (3), and in part independently. The focus throughout was on the social systems of individual actors as they move and evolve through time. The study was part of a larger series, done collaboratively with the Committee on Human Development of the University of Chicago, in which various and different approaches were taken to the problem of "successful" and "unsuccessful" aging.

The author developed his concept of successful aging in terms of the balance in the exchange of action "energy" between the actor and his social system, and his likelihood of persisting in this balance. This approach yielded four general categories, or levels, of successful or unsuccessful aging: autonomous-persistent, autonomous-precarious, dependent-persistent, and dependent-precarious. Three levels, high,
medium, and low, were distinguished within each category. Thus, twelve rank orders of successful to unsuccessful aging were used. It was found, in collaboration with Claudine G. Wirths, judgments among these rank orders could be made quite reliably. It then became possible to compare success as defined and measured this way with other measures of success such as life satisfaction as developed by Robert J. Havighurst (2). It was found, for example, that there is little relation between success defined on the autonomy-dependence, persistence-precariousness dimensions and success defined as life satisfaction.

The study as a whole produced a wealth of material about the lives of these people, prospectively over 5½ years, and retrospectively sometimes over the entire life span. We also did a special study of the significant others in the lives of 63 of our subjects.

As the senior author began to order these data, he found, empirically, that the concept of style of life was very useful. It was possible quite clearly to place all subjects in one of six major styles: world of work, familism, living alone, couplehood, easing through life with minimal involvement, and living fully. When they were so placed, a distinct impression of beginning to understand these lives developed. Toward the end of the study several statistical findings emerged which led us to group the six styles into two sets which we called Gemeinschaft (familism, couplehood, and living fully) and Gesellschaft (world of work, living alone, and easing through life with minimal involvement), using the terms of Ferdinand Toennies (6, p. 170 n). This simple taxonomy served to order much of our data with great parsimony. The concept of style of life, which emerged empirically and was at first treated in a descriptive, “common-sense” way was then defined as

a general attribute of the social system of individuals, essentially the structural set of the system, which governs the areas and degree of major investment and involvement. Style can be most readily judged when the individual is faced with major decisions, and particularly if the decisions involve conflicts between two areas of life such as work and family.¹ Each style has its characteristic structural properties, especially in relation to orientation to interaction and types of social relationships (6, pp. 12-13).

¹After the present paper was completed we found in addition to the similarities described below that Adler had also observed that the style of life is most readily assessed when the person is troubled. In Adler’s words, “As long as a person is in a favorable situation, we cannot see his style of life clearly. In new situations, however, where he is confronted with difficulties, the style of life appears clearly and distinctly” (Adler, A. The Individual Psychology of Alfred Adler. New York: Basic Book, 1956, p. 173).
In addition to using the six styles, and the two sets of styles, each individual was given a "name," such as "The Contented Salesman" or "Goodbye Miss Chips," which helped further to delineate their individual variance of the general style.

**Comparison with Adler's Concept**

There are, certainly, several similarities between my development of the concept and that of Adler. (a) The most striking one, in my opinion, is that it emerged inductively, and quite naturally, in a context of a focus on the individual and his social system, as contrasted with the more common sociological focus on groups and institutions. (b) Also, it emerged in a context of a concern with ways in which individuals attempt to live successfully. As Ansbacher puts it, "Adler did not look for any forces behind or underneath the symptom other than the whole individual's unique way of striving for success, his style of life" (1, p. 347). (c) We also think of style of life as a unifying principle or, as Adler would put it, as the "self-consistency" of the actor.

There are some differences in the two usages of the concept. I have not made use of some of the more typically "psychological" concepts in my analysis, such as "perception," "apperceptive schema," and "dream metaphors." (We attempted to elicit some dream material from our respondents, but either the Gestalt of the interview situation was not right for this, or the people of Kansas City seldom, if ever, dream—I lean toward the former explanation.) As I see it, although Adler was fully aware of the great importance of the social context of men's lives, he was relatively more concerned with the internal dynamics of the individual, whereas I have been relatively more concerned with the transactions between the individual and his social system. The two approaches are, I would hope, complementary and not antithetical.

**Common Clinical Implications**

Another major difference is that our study was not a clinical one, in the usual sense. We studied people and tried to keep our influence on their lives at an absolute minimum. Yet, throughout the analyses there are suggestions of some clinical import. It became clear to us that style of life is not related to success in the sense that one of the six styles is significantly any more or any less likely to produce success than the others—"living alone" and "living fully" both produce suc-
cessful agers. But each style produces different requirements for successful aging, and style in general is related to success in such matters as its clarity (or consistency) and saliency. At the end of the study we felt that we could suggest a hierarchy of factors of optimal aging (6, p. 213).

Although we did not use precisely this term, upon reflection now I am convinced that our "clinical" suggestions are consonant with Adler’s very important concept of "mistaken styles of life," and how to rectify them. He characterized a mistaken life style essentially by lack of social interest, by striving on the useless, noncontributive side of life. Treatment involved the strengthening of social interest through offering the patient a good human relationship, and the cure was considered accomplished when the patient was able to connect himself with his fellow men on an equal and cooperative footing, manifesting at the same time greater independence and courage (1, pp. 357-358).

We saw successful aging, as mentioned earlier, importantly represented by the autonomy-dependency continuum. And we described the autonomous person by and large as independent, as one "who can relate well to others, whereas the person who is dependent is often pathetically unable to establish a really good relationship, and confuses leaning with loving" (6, p. 167). Thus we concluded, among other things, that influencing the general situation so that persons can maintain their styles of life as they grow older, yet at the same time cope with the process of disengagement, may be more important and affect more people than direct intervention. This approach should be developed in the earlier years of life so that persons become deeply entrenched in autonomy, develop a clear style, use their action energy in optimal ways, and learn to be flexible. Then, in old age, they will be much more likely to remain autonomous and to follow the motto, "To thine own style be true" (6, p. 216).

REFERENCES


