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Communicative Responses to the Painful Self-Disclosures of Familial and Non-Familial Older Adults

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Abstract

Data from 365 college students were used to assess young adults' communicative responses to older persons' painful self-disclosures (PSDs). Coupland, Coupland, and Giles (1991) proposed that recipients of PSD may respond to such disclosures via a variety of "next moves." These responses may broadly be considered to reflect forms of prosocial engagement, passive disengagement, and active disengagement. We investigated whether young adults' tendency to use certain responses to PSD were influenced by their affective reactions to PSD, their communicative background and characteristics, and the sociorelational context of the encounter in which PSD occurred. Results are discussed with respect to their implications for intergenerational interaction, and interpreted through the lens of communication accommodation theory.

Given the quite negative views young adults hold of seniors (Kite, Stockdale, Whitney, & Johnson, 2005), it is not surprising that young adults feel less satisfied when talking with elders than with age peers. A common recommendation regarding how older adults might adapt their communication to better suit younger persons is that they be less negative (Williams & Giles, 1996). This may reflect that painful self-disclosure (PSD) is more typical of the communication of older adults than of younger ones (Coupland, Coupland, & Giles, 1991). PSDs focus on negative, intimate topics, such as illness, loneliness, and loss. Given

the potential for PSD to result in dissatisfying cross-generational encounters, learning why young adults respond to PSDs in certain ways may enhance our understanding of how interactions featuring PSD may be transformed from negative experiences into more constructive ones.

Painful Self-Disclosures

Seminal studies suggest that despite violating proscriptions against revealing negative information to new acquaintances (Berger & Bradac, 1982), PSD is quite common in cross-generational talk between strangers (Coupland et al., 1991). Given the negative valence of PSD, such talk may both cause distress to listeners and place them in a bind where, regardless of their response, some undesirable consequence may ensue, be it prolonging an awkward encounter, appearing callous, or seeming patronizing (Williams & Nussbaum, 2001). For these reasons PSD is an example of what Communication Accommodation Theory (CAT) calls *under-accommodation* (Giles & Gasiorek, 2011).

CAT explains how interactants manage social distance by adjusting their communication (Coupland et al., 1991; Gallois, Ogay, & Giles, 2005). Appropriateness and affiliativeness are the hallmarks of accommodation, which can be accomplished in various ways, such as matching a fellow interactant's speech rate, adjusting paralanguage to ease their understanding, or self-disclosure (Coupland, 2010). Whereas young adults may *over-accommodate* during cross-generational talk by going beyond the adaptations needed by older persons, seniors are more apt to *under-accommodate* young adults by being insensitive to their conversational preferences via dogmatism, disapproval, inattentiveness, or PSD (Barker, 2007; Williams & Giles, 1996).

Despite often being considered under-accommodative by young adults, PSD may be an important communicative tool for seniors. Seniors who engage in PSD may be talking about significant events in their lives and feel that they are offering "newsworthy" material, even if younger interactants view discussion of personal information as inconsiderate or self-centered (Coupland et al., 1991). Further, by disclosing painful information, older persons lower the expectations held of them, and such "self-handicapping" can preempt negative attributions for perceived inadequacies (Coupland et al., 1991). Perhaps most importantly, it can be cathartic and healthy to talk about painful experiences (Coupland, Coupland, Giles, Henwood, & Wiemann, 1988). Indeed, Magai, Consedine, Fiori, and King (2009) noted that the median effect size of self-disclosure on health is greater than the effect size reflecting the benefit of "taking a daily aspirin in preventing further coronaries following a heart attack" (p. 288). Given the health benefits that may accrue from discussing painful events, it is ageist to treat elderly PSD as a deficient mode of talk to be avoided while urging others toward interpersonal transparency. Although previous studies have examined perceptions and consequences of PSD, investigating young adults' *responses* to PSD may enhance understanding of processual elements of intergenerational talk.

"Next Moves": Responses to PSD

What is said *after* a PSD is significant as it reveals how a listener sees the discloser and shapes the direction of a conversation that can be valuable for seniors (Coupland et al.,

1991). Coupland et al. (1991) identified a range of possible responses to PSD (“next moves”) that in the interest of parsimony we conceptualize as demonstrating passive or active disengagement, or as being prosocial in nature. Passive disengagement may be accomplished by what Coupland et al. (1991) refer to as *minimal moves*, which comprise short utterances conveying affective responses such as sympathy (“Oh dear”) and surprise (“Wow!”). Where they express neutral affect (“hmm”), they are “the closest instance . . . to a zero response” (Coupland et al., 1988, p. 228). More active disengagement may take the form of what Coupland et al. label *moves to end*, which entail trying to steer conversation away from the topic of PSD. Both types of disengaging response may appear to communicate indifference, disinterest, or a lack of compassion.

Coupland et al. (1991) also noted several prosocial responses that engage the content of the PSD. A recipient of PSD may *initiate talk* on the topic of the disclosure. For example, a listener who learns that an older person feels neglected by family might ask why they feel this way. Listeners may also engage the content of a PSD via *focused evaluative responses*. For instance, hearing an older adult mention the difficulty of paying for healthcare may prompt a listener to express outrage that treatment is so expensive. Both kinds of responses risk eliciting more disclosure, which may be undesirable for receivers who have heard enough, and for disclosers who have already revealed as much as they wish to. A third prosocial option is for a recipient of PSD to *reciprocate* with their own PSD. While expressing shared pain can show solidarity and attunement (Coupland, Henwood, Coupland, & Giles, 1990), it also makes it hard for the discloser to pursue his or her line of talk and may seem to be an attempt at one-upmanship (Coupland et al., 1988). Two more responses try to change a discloser’s perspective on events. *Inversion* entails helping a discloser see their situation more positively. For example, on hearing an older person describe the tedium of retirement, a listener might comment that the retiree now has the time to pursue long-dormant goals. Listeners might also *contextualize* a PSD, for example by responding to comments about the difficulty of paying a medical bill by noting that many people have no health insurance at all. We next explore factors that account for why young adults may tend to respond to PSD with passive or active disengagement, or prosocial engagement.

Factors Differentiating Responses to PSDs

We propose that the tendency to gravitate toward certain ways of responding to PSD will be a function of: (a) affective responses to PSD, (b) the communicative background and characteristics of the listener, and (c) the social-relational context of the encounter.

Affective Response to Painful Self-Disclosure

Thakerar, Giles, and Cheshire (1982) noted that linguistic acts which could objectively be considered accommodative (e.g., moving closer to another person’s speech rate) could still be subjectively judged as psychologically nonaccommodative (cf. Gallois et al., 2005). The separation of act from appraisal means that PSD is not inherently under-accommodative. Rather, and consistent with reports that the impact of negative social interactions depends on appraisals of them (Newsom, Rook, Nishishiba, Sorkin, & Mahan, 2005), PSD is underaccommodative only insofar as it is judged as problematic in some respect; for example,

by being seen as a source of discomfort. Fowler and Soliz (2010) determined that as grandchildren became more uncomfortable with grandparents' PSD, their general communication with grandparents was characterized by more reluctant accommodation (e.g., avoidance). This suggests that finding PSD to be a source of discomfort may also shape the way young adults respond to specific episodes of communication featuring PSD. Consequently, we predict:

- H1: Discomfort is (a) positively associated with the tendency to use disengaging next moves, and (b) inversely associated with the tendency to follow PSD with prosocial responses.

Communicative Characteristics of Listeners

We expect that the communicative background and abilities of the listener influence the tendency to respond to PSD in different ways. We focus on two communicative characteristics: *communicative responsiveness* and *conversation-orientation*.

Communicative Responsiveness

Communicative responsiveness is the ability to "listen . . . and communicate effectively to others . . . experiencing distress" (Stiff, Dillard, Somera, Him, & Sleight, 1988). Because the content of elderly PSD is often age-specific, it can be hard for young adults to "relate to losses that are foreign to them" (Fingerman, Miller, & Seidel, 2009, p. 30). This can hamper the ability to connect with seniors (Fingerman et al., 2009), and make it hard to know how what to say in response. Fowler and Soliz (2010) found that people who saw themselves as able to respond appropriately and sensitively to others reported lower levels of discomfort as a result of PSD. As communicative responsiveness has been linked to positive interpersonal behavior (Meyer, Boster, & Hecht, 1988; Stiff et al., 1988), the ability to "say the right thing" may explain the interactional responses exhibited by recipients of PSD, as well as their affective responses.

- H2a: Communicative responsiveness is positively associated with the tendency to respond prosocially to PSD and negatively associated with the tendency to respond with disengagement.

Whereas H1 predicts that discomfort with PSD will increase the likelihood of using next moves that passively or actively disengage from the conversation, this link may depend on one's level of communicative responsiveness. If a person feels uncomfortable hearing PSD and is incapable of responding appropriately, the course of the conversation may be different from what might occur if he or she feels uncomfortable but able to express empathy.

- H2b: Communicative responsiveness moderates the link between discomfort and active/passive disengagement, such that the positive relationship between these variables is amplified when respondents report low levels of communicative responsiveness.

Conversation-Orientation

The development of communication skills in adolescents and young adults may be facilitated when families have strong conversation orientations (Koerner & Fitzpatrick, 2006). Families high in conversation orientation freely discuss diverse topics (Koerner & Fitzpatrick, 1997), and children who grow up in such families score higher on measures of communication competence such as the ability to self-disclose and offer emotional support (Koerner & Fitzpatrick, 1997; Koesten, 2004). In this vein, Fowler and Soliz (2010) learned that grandchildren from families with high levels of conversation-orientation found grandparents' PSD less troubling, perhaps because they were used to discussing difficult experiences or negative emotions. This suggests a positive association between conversation-orientation and the tendency to respond with prosocial engagement to PSD. Conversely, persons raised in families lower in conversation-orientation seem to be more reticent (Kelly, Keaton, Finch, Duarte, Hoffman, & Michels, 2002) and thus may be apt to respond to PSD via disengagement. This idea is supported by Fowler and Soliz's (2010) discovery that grandchildren reporting high levels of conversation-orientation were less apt to feel constrained in interactions with grandparents or to suppress comments.

H3a: Conversation-orientation is positively associated with the tendency to respond prosocially to PSD and negatively associated with active and passive disengagement.

Rather than directly accounting for how people respond to PSD, conversation-orientation may exert its influence by facilitating the development of communicative responsiveness. Kelly et al. (2002) argued that in families with low levels of conversation-orientation, having limited opportunities to discuss emotions and sensitive topics inhibits development of emotional intelligence, which reflects "the degree to which an individual is sensitive to the emotions of others and able to assess emotional cues accurately, and . . . the ability to use emotional knowledge to promote functional relationships" (Keaten & Kelly, 2008, p. 107). Thus, we predict:

H3b: Communicative responsiveness mediates associations between conversation-orientation and each type of next move.

Sociorelational Context of Encounter

Contextual variables may also shape how young adults respond to PSD. For example, the tendency to respond to intergenerational PSD in certain ways may be affected by general attitudes held toward older adults, by the type of social relationship that exists between the discloser and the listener, and by the quality of that relationship.

Attitudinal Context

When young adults interact with seniors, they do so partly on the basis of group memberships (Giles, 2012). They may therefore communicate not on the basis of another person's unique needs but on the basis of that person's elderly identity (Hummert, 2011), which

may evoke negative stereotypes of seniors (Hummert, Garstka, Ryan, & Bonnesen, 2004). This is problematic, for communication based on these stereotypes often has undesirable qualities (Hummert, Shaner, Gartska, & Henry, 1998). While interactions with grandparents are more enjoyable, young adults' views of grandparents are similar to those they hold of generalized seniors (Anderson, Harwood, & Hummert, 2005). However, Fowler and Soliz (2010) found that having positive attitudes toward seniors was linked to grandchildren feeling less discomfort with grandparents' PSD. This suggests that regardless of whether a young adult is interacting with a grandparent or a non-familial elder, attitudes toward seniors may shape responses to PSD.

- H4: Holding positive attitudes toward older adults is negatively associated with the tendency to use disengaging next moves and positively associated with the tendency to respond to PSD with prosocial next moves.

Relational Context

In non-familial encounters, PSD may be seen as inappropriate (Bonnesen & Hummert, 2002) and even in GP-GC contexts, some reports suggest PSD is linked to reduced closeness and satisfaction among grandchildren (Fowler & Soliz, 2010; Harwood, Raman, & Hewstone, 2006). However, others suggest that young adults' positive regard for their grandparents makes PSD less troubling (Harwood, 2000) and that kinship may buffer "many of the barriers of ageist separation and . . . neutralize or even override generational differences" (Ng, Liu, Weatherall, & Loong, 1997, p. 106). Despite these equivocal findings, we predict that:

- H5a: Young adults report greater tendencies to respond with prosocial next moves to grandparents' PSD compared to the PSDs of non-kin seniors.
- H5b: Young adults report greater tendencies to respond with passive and active disengagement with non-kin older adults vs. grandparents.

In the context of grandparent-grandchild relationships, we suspect that though discomfort may elicit passive or active disengagement, this will be true only if grandchildren feel low levels of closeness with their grandparent. When grandchildren consider themselves to be close with grandparents, we expect this closeness to buffer the effects of discomfort on responses to PSD.

- H6: Discomfort is positively associated with active and passive disengagement when grandchildren report low levels of closeness with their grandparent.

Finally, to explore any effects of the relational context on the role of affective response (H1), communicative characteristics (H2, H3), and attitudes (H4) in shaping next moves, we ask:

RQ1: Do associations between next moves and i) affective responses, ii) communicative characteristics, and iii) attitudes differ depending on whether the painful self-discloser is a grandparent or non-familial senior?

Methods

Participants

Students at a university in the western United States earned a small amount of course credit for filling out an online survey. Respondents were predominantly female (69.1%), young ($M = 19.24$ years, $SD = 2.05$), and ethnically diverse. Caucasians were the largest subgroup (35.5%), followed by Hispanics (27.0%), Asian Americans (19.1%), African Americans (4.4%), and Middle Eastern students (1.1%). Multiple/other heritages were claimed by 12.8% of respondents.

Procedures and Materials

Participants completed a survey about a living grandparent ($n = 199$) or a non-family older adult over the age of 60 ($n = 200$). For the grandparent sample, participants were randomly assigned to answer questions about a specific grandparent relationship (e.g., maternal grandmother, paternal grandfather) to alleviate concerns about a target selection bias (i.e., answering questions about a “favorite” grandparent). Thirty-four students noted that the selected grandparent was deceased, and these cases were excluded from hypothesis testing, leaving an n of 165 for the grandparent target group. These participants answered questions about a maternal grandmother ($n = 73$), maternal grandfather ($n = 51$), paternal grandmother ($n = 26$), paternal grandfather ($n = 10$), step-grandmother ($n = 2$), step-grandfather ($n = 2$), or great grandmother ($n = 1$). Participants in the non-familial elder condition were informed that the purpose of the study was “to learn more about the experiences you have when you communicate with older persons (i.e., people aged 60 or older) who are *not* family members.” Descriptive statistics and reliability statistics for all variables are provided in Table 1 and intercorrelations between variables are provided in Table 2.

Table 1. Means, Standard Deviations, and Reliability Statistics

Scale	Grandparents			Non-familial seniors		
	<i>M</i>	<i>SD</i>	α	<i>M</i>	<i>SD</i>	α
Closeness	5.48	1.49	.92	—	—	—
Discomfort	2.22	.66	.82	2.40	.54	.70
Passive disengagement	2.93	.93	.80	3.20	.87	.78
Active disengagement	2.55	.91	.94	2.67	.86	.93
Prosocial next moves	3.38	.68	.94	3.39	.53	.88
Communicative responsiveness	3.78	.62	.79	3.76	.57	.79
Conversation-orientation	3.32	.85	.93	3.37	.82	.93
Attitudes toward seniors	5.67	.86	.86	5.78	.80	.85

Table 2. Intercorrelations between Variables

	1	2	3	4	5	6	7
1. Attitudes	—	.336**	.296**	-.446**	-.255**	-.196**	.399**
2. Communicative responsiveness	.172*	—	.361**	-.333**	-.109	-.111	-.497**
3. Conversation-orientation	.241**	.343**	—	-.263**	-.128	-.080	.257**
4. Discomfort	-.275**	-.263**	-.407**	—	.299**	.353**	-.526**
5. Disengagement (Active)	-.122	-.164*	-.108	.320**	—	.166*	-.111
6. Disengagement (Passive)	-.181*	-.142	-.280**	.478**	.324**	—	-.340**
7. Prosocial response	.100	.280**	.325**	-.585**	.051	-.277**	—

Notes: Correlations below the diagonal correspond to the “grandparent target” sample ($N = 165$). Correlations above the diagonal refer to the non-familial seniors sample ($N = 200$).

* $p < .05$; ** $p < .01$.

Measures

Closeness of the Grandparent-Grandchild Relationship

Using a 1–7 scale developed by Harwood et al. (2006), participants rated how well they got along with the grandparent, how emotionally close they felt to this grandparent, and provided a global rating of the quality of the relationship. Higher scores indicate more closeness.

Discomfort with Painful Self-Disclosures

Barker’s (2007) six-item scale assessed affective responses to hearing painful self-disclosures from grandparents or non-familial older adults (e.g., “If my grandparent [an older person] discloses private or painful things, I’m glad that he/she confides in me”). Items were presented in Likert form (1–5) and higher scores indicated greater levels of discomfort.

Next Moves

Based on Coupland et al.’s (1991) description of the various next moves we discussed earlier, we generated items to capture possible next moves of participants when they encountered PSD from a grandparent or non-familial older adult. Instructions to participants stated that “we would really like to know how you respond and what you say when they [your grandparent/older people] reveal these kinds of things [painful information] to you or you sense that they are talking about something that is painful for them.” A confirmatory factor analysis verified convergent and divergent validity of the final 25 items and supported the proposed three-factor solution (prosocial responses, active disengagement, passive disengagement): $\chi^2 (267) = 627.248$, $\chi^2/df = 2.35$, $p < .001$, CFI = .93, RMSEA = .061 (95% CI: .055 to .067). Items used a 5-point Likert format, and higher scores indicated greater use of a specific communicative response. Items are presented in Table 3.

Table 3. Items Included in Next Moves Subscales

When my grandparent talks about painful things with me . . .	
Passive disengagement	I typically just make brief comments such as "oh dear" I don't really say much except to make noises that show I am listening (e.g., "uh-huh") I keep my comments pretty short, e.g., "wow," or "my goodness"
Active disengagement	I try to steer the topic toward something different I try to change the topic of conversation I try to get them to talk about something else I begin talking about something different that is not such a serious topic
Prosocial next moves	I encourage him/her to say more about things they are talking about I see if they want to go into more detail about what they are saying I try to give them the chance to continue talking about their experiences I ask questions so I can better understand what has happened and how they feel about it I offer my own thoughts about their situation I focus my response on complimenting them on how they have handled themselves under difficult circumstances I make sure I say something that shows I feel sympathy for what they have been through I try to show that I understand how they are feeling about their experience I try to think of a similar experience of my own so I can tell them about that I share a painful experience that I have been through I talk about a time when I had something similar happen to me I try to find ways to help them look on the "bright" side of their experiences I try to say something that would help them see the positive aspects of what they have been through I try to focus on something positive that is taking place in their life I try to help them see what has happened in the context of other events I try to point out how what took place fits into the big picture I try to show them how something negative fit into a broader picture of more positive things I try to help them see how their experience is not as bad as it could be

Male and female respondents did not significantly differ with respect to their tendencies to use prosocial next moves, $t(362) = 1.636, p > .05$, passive disengagement, $t(362) = 1.697, p > .05$, or active disengagement, $t(362) = .550, p > .05$. A MANOVA was used to determine whether participants reporting a single ethnic identity (Caucasian, Hispanic, Asian American, African American) differed in their propensity to use prosocial next moves, passive disengagement, and active disengagement. The MANOVA was nonsignificant, Wilks $\lambda = -.973, F(9, 752.18) = .928, p = .500$.

Communicative Responsiveness

Stiff et al.'s (1988) five-item Likert scale (1–5) tapped the felt ability to respond appropriately to others and to express empathy (e.g., "Others think of me as a very empathic person"). Higher scores indicate greater responsiveness.

Conversation-Orientation

We used Ritchie and Fitzpatrick's (1990) 15-item scale to measure conversation-orientation. This instrument asks respondents to reflect on the communication climate in their family of origin ("I usually tell my parents what I am thinking about things"). Higher scores on this Likert measure (1–5) indicate more open communication environments.

Perceptions of Older Adults

Harwood et al.'s (2006) seven-item semantic differential assessed respondents' feelings about people over the age of 65 (e.g., admiration-disgust). Higher scores (range 1–7) indicate more positive attitudes toward older adults.

Results

To address RQ1, we tested hypotheses separately with the *grandparent as target* sample ($N = 165$) and *older adult as target* sample ($N = 200$) and used post-hoc analyses to examine potential differences between these two groups.

We found full support for H1, which predicted that discomfort with PSD would be positively associated with the tendency to respond using next moves that reflect passive or active disengagement, and inversely associated with the tendency to respond to PSD with prosocial engagement. The predicted relationships were found both for respondents considering painful disclosures from grandparents and those considering such disclosures from non-family elders (see Table 2). We used a Steiger's Z test to examine whether there were differences in the strength of the associations between discomfort and each of the next moves. Because this post-hoc analysis required three comparisons within each target group, Bonferroni adjustment was used to control for Type 1 error ($p = .016$). For both the *grandparent* and *older adults* samples, the correlation between discomfort and prosocial responses was significantly stronger than the correlation between discomfort and active disengagement, $Z_{grandparents} = 2.97$ and $Z_{older adults} = 2.77$. There was no significant difference between the remaining correlations. To address RQ1, we compared correlations across the two samples using Fisher's Z . There were no significant differences in the correlations across the two target groups.

Hypothesis H2a predicted that communicative responsiveness was positively associated with the tendency to use prosocial responses to PSD and inversely associated with the tendency to use passive and active disengagement. The hypothesis was largely supported for both target groups (see Table 2). Communicative responsiveness was positively associated with prosocial responses for each group. However, the magnitude of the correlation was larger for grandparent targets compared to older adult targets, $Z = 2.38$. For those reporting on grandparents, communicative responsiveness was also significantly and negatively associated with active disengagement, but not passive engagement. For those reporting on older adults, communicative responsiveness was unassociated with passive and active disengagement.

H2b proposed that communicative responsiveness would moderate the association between discomfort and both active and passive engagement in such a way that the strength

of these associations would be attenuated when respondents reported high levels of communicative responsiveness. The prediction was tested using Hayes' (2013) PROCESS tool for mediation and moderation analysis. For moderation analysis, the output given by PROCESS provides estimates of the conditional effect of the independent variable on the criterion variable at different percentile levels of the moderator. Although the overall models were all significant, examining interaction effects provided only partial support for H2b. For grandparents, there was a significant interaction for passive disengagement, $\Delta R^2 = .02, p = .037$. Decomposing the interaction revealed that when grandchildren reported being higher in communicative responsiveness, the positive association between discomfort and passive disengagement grew weaker (see Table 4). There was no significant interaction when a similar equation was computed for grandchildren's active disengagement ($p > .50$) or for either disengaging response for older adults (p 's $> .40$ and $.80$).

Table 4. Summary of Moderation Effects

Percentile for level of moderator	Discomfort → Passive disengagement moderated by Communicative responsiveness	Discomfort → Passive disengagement moderated by Closeness	Discomfort → Active disengagement moderated by Closeness
10th	.983	.425	.334
25th	.844	.560	.480
50th	.704	.661	.589
75th	.635	.783	.698
90th	.426	.797	.735

Hypothesis 3a anticipated that conversation-orientation would be positively associated with the tendency to respond to PSD with prosocial engagement, and negatively associated with the tendency to use either passive disengagement or active disengagement. The hypothesis received partial support (Table 2). For participants reporting on grandparents, conversation-orientation was positively associated with prosocial responses and inversely associated with passive disengagement. There was not a significant correlation with active disengagement. For older adult targets, conversation-orientation was positively associated with prosocial responses. There was no significant association with passive or active disengagement, although the correlation with active disengagement approached significance ($p = .074$).

There were no significant differences in the magnitude of the correlations across the two target groups, although the conversation-orientation-passive disengagement comparison approached significance, with the correlation being stronger for participants reporting on grandparents, $Z = 1.93$.

H3b predicted that communication responsiveness would mediate associations between conversation-orientation and next moves, and was tested via a PROCESS model for mediation. Direct and indirect effects were estimated through bootstrapping, and the kappa-squared (κ^2) statistic was calculated for the effect size of the indirect effect (Preacher & Kelley, 2011). Standardized betas, 95% confidence intervals, and κ^2 are provided in Table

5. For participants reporting on grandparents' PSD, communicative responsiveness mediated the relationship between conversation-orientation and their active disengagement. The effect size was small to moderate. Conversation-orientation increases communicative responsiveness which, in turn, decreases likeliness of disengaging responses. This mediation effect was not evident in the older adult target sample. There was no significant mediation for passive disengagement.

Table 5. Summary of Indirect Effects

Path	Beta _[95% CI]	SE	κ ²
CO → CR → Active disengagement _{grandparents}	-0.07 _{[-0.15: -0.02]*}	0.03	.06
CO → CR → Active disengagement _{seniors}	-0.02 _[-0.08: 0.03]	0.03	.02
CO → CR → Passive disengagement _{grandparents}	-0.03 _[-0.11: 0.02]	0.03	.03
CO → CR → Passive disengagement _{seniors}	-0.04 _[-0.12: 0.02]	0.03	.04
CO → CR → Prosocial next moves _{grandparents}	0.05 _{[0.00: 0.11]*}	0.03	.05
CO → CR → Prosocial next moves _{seniors}	0.17 _{[0.10: 0.26]*}	0.04	.17

Notes: Indirect effects are completely standardized.

CO = conversation-orientation, CR = communicative responsiveness

*Significant mediation effect

For the prosocial response, communicative responsiveness emerged as a significant mediator for both target samples, although with a much larger effect size for the older adult sample. Conversation orientation is both directly and indirectly linked to prosocial responses via a positive relationship with communicative responsiveness which, in turn, is directly linked to a stronger propensity to respond to PSD with prosocial next moves.

Hypothesis 4 predicted that holding positive attitudes toward older adults would be associated with greater propensity to respond to PSD with prosocial engagement, and reduced tendencies to respond to PSD with passive and active disengagement. The hypothesis was partially supported. For both targets, attitudes toward older adults were negatively associated with passive disengagement. There was no difference in the magnitude of this association for those reporting on grandparents versus those reporting on non-familial elders. For participants reporting on older adult targets, holding more positive attitudes toward older persons was associated with a higher likelihood of responding to PSD with prosocial next moves and a lesser likelihood of responding with active engagement. These associations were not significant for grandparent targets.

Hypothesis 5a predicted that participants reporting on grandparents would report a greater tendency to respond to PSD with prosocial engagement than would participants reporting on PSD from non-familial elders. In contrast, H5b argued that the tendency to respond to PSD with passive disengagement (minimal moves) or active disengagement (moves to end) would be stronger for participants reporting on non-familial elders than for those reporting on grandparents. Hypothesis 5a was not supported as the grandparent sample ($M = 3.38, SD = .68$) did not differ from the non-familial sample ($M = 3.39, SD = .53$) in their tendency to use prosocial next moves, $t(363) = .121, p = .904$. H5b was partially supported. There was no significant difference in active disengagement between the

grandparent ($M = 2.55$, $SD = .91$) and older adult ($M = 2.67$, $SD = .86$) samples, $t(363) = 1.250$, $p = .212$. However, participants indicated more passive disengagement with older adults ($M = 3.20$, $SD = .87$) than with grandparents ($M = 2.93$, $SD = .93$), $t(363) = 2.830$, $p < .01$.

Hypothesis 6 predicted that discomfort is positively associated with active and passive disengagement when grandchildren reported little closeness with their grandparent. Again, we tested this moderation effect using Hayes' (2013) PROCESS utility. The interaction term was marginally significant for passive engagement, $\Delta R^2 = .02$, $p = .06$. Decomposing the interaction revealed that rather than being attenuated by elevated levels of closeness, the positive association between discomfort and passive disengagement grew stronger at higher levels of closeness. For active disengagement, the interaction term was again marginally significant, $\Delta R^2 = .02$, $p = .06$. Decomposing the interaction again suggested that the positive association between discomfort and active disengagement was amplified at higher levels of closeness.

Discussion

The purpose of this study was to enhance our understanding of the nature of painful self-disclosure (PSD) in intergenerational interactions. The revelation of painful information is presumed to be communicatively insensitive because it may place listeners in the position of not knowing how to respond appropriately and therefore make them uncomfortable. Further, it may contribute to young adults' feelings of communication dissatisfaction with intergenerational talk (Williams & Giles, 1996). Our study leads us to propose a conceptual model of factors that shape how young adults respond to PSD that has, as its end point, "psychosocial outcomes" (see Figure 1). The culmination of the model in psychosocial outcomes reflects that the manner in which young people respond to the painful disclosures of seniors, familial or otherwise, is consequential.

As PSD is a form of communication with the potential to yield positive health outcomes for older adults (Coupland et al., 1991; Magai et al., 2009; Pennebaker, 1997), younger recipients of elderly PSD may act, to some degree, as gatekeepers for the opportunity to reap the benefits of self-disclosure. Whether by attempting to cut short disclosive episodes by changing the topic, or by taking over the conversation with a disclosure of one's own, young adults' choice of response to elderly PSD may have health implications for the older speaker. Lest this sound far-fetched, it should be remembered that well-established perspectives such as the Communicative Predicament Model of Aging (CPMA) (Ryan, Giles, Bartolucci, & Henwood, 1986) explicitly link the nonaccommodative behaviors of young adults to declines in well-being for older adults. In the same way, our model recognizes that the selection of next moves—prosocial responses, active disengagement, and passive disengagement—may also result in perceptions of non-accommodation and consequently produce negative outcomes.

We argue that these "next moves" are dependent on general affective responses to the PSD, communicative characteristics of the listener (communicative responsiveness, conversation-orientation), and the social-relational context of the encounter (general attitudes toward older adults, the nature and quality of the intergenerational relationship between interactants). In the following, we propose the model within the framework of the findings

of this study followed by a discussion of theoretical implications of “next moves” in response to PSD.

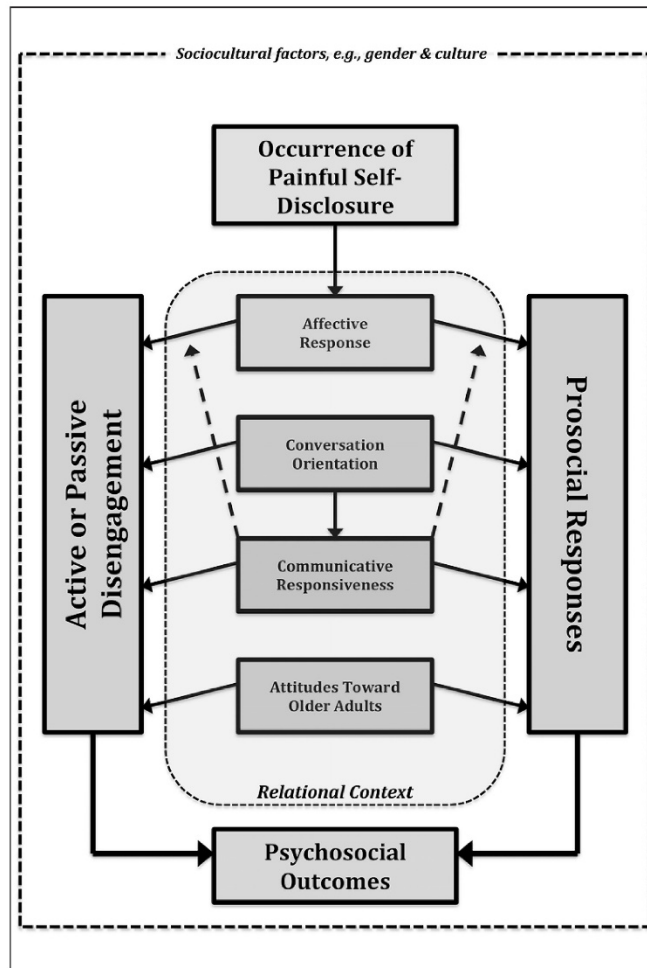


Figure 1. Conceptual model of responses to painful self-disclosures in intergenerational interactions.

Affective Responses

The findings of the current study affirmed that the tendency to report certain kinds of responses was a function of *discomfort* with PSD. Regardless of whether young adults were considering the painful disclosures of grandparents or older adult, they were more likely to report offering minimal responses or attempting to end conversations featuring PSD if they found such disclosures discomforting. Conversely, feeling low levels of discomfort was associated with comparatively prosocial response tendencies (e.g., continuing to discuss the theme of the disclosure). Associations between discomfort and next moves ranged from modest to substantial and were broadly comparable for each subsample.

Communicative Responsiveness

An individual high in communicative responsiveness is one who conveys empathy and effectively listens to another, especially when that person is discussing distressing events (Stiff et al., 1988). As indicated in the model and supported in our findings, people high in communicative responsiveness are more likely to respond to PSD with prosocial engagement, and less likely to disengage. Further, we found communicative responsiveness to be more strongly associated with next moves to PSD in non-familial contexts than in grandparent-grandchild relational context. This suggests that, when the buffer of familial in-group status is absent, communicative responsiveness becomes more influential in shaping responses to PSD. Further, communicative responsiveness moderates the impact of discomfort on next moves, at least for those considering PSD in the grandparent-grandchild context. We found that the relationship between discomfort with PSD and tendency to employ passive disengagement grew stronger as individuals reported lower levels of communicative responsiveness. This does not necessarily mean that those high in communicative responsiveness did not experience discomfort. Rather, it suggests that responses to PSD are less affected by discomfort than are responses of people less skilled at communicating empathetically.

Conversation-Orientation

People who grow up in families with high levels of conversation-orientation are accustomed to discussing a wide range of topics, including those that might be considered challenging, upsetting, or likely to elicit discomfort. Consequently, young adults raised in such families are less apt to try to disengage from interactions featuring PSD and likely focusing more on responding to PSD in a prosocial manner; e.g., by asking follow-up questions or offering assessments of these disclosures. Further, communicative responsiveness mediates the relationship between conversation-orientation and next moves suggesting that conversation-orientation helps develop emotional intelligence (Keaten & Kelley, 2008) and communicative competencies such as the ability to offer social support (Koesten, 2004)—both of which are key elements of communicative responsiveness.

Attitudes

The Communication Predicament Model of Aging (Ryan et al., 1986) predicts that stereotyped expectations of seniors color young adults' responses to their communication. Consistent with this proposition, attitudes toward older adults are associated with responses to PSD for participants considering how they typically react to the PSD of non-familial seniors. For this group (though not for participants reporting on grandparents) attitudes were consistently related to responses to PSD. This suggests that when older adults clearly belong to an age-based outgroup, young adults' attitudes may play a more important role in determining responses to PSD than when the disclosing older adult shares an ingroup membership that compensates for generational differences.

Relational Context

Our preceding discussion points to some potential differences between interactions with grandparents and interactions with non-familial elders. Previous work suggests that PSD

and negativity from *non-familial* older adults may be viewed unfavorably and as inappropriate (Bonnesen & Hummert, 2002; Williams & Giles, 1996), whereas evidence is mixed as to whether PSD in the grandparent-grandchild context is associated with undesirable relational qualities (Fowler & Soliz, 2010; Harwood et al., 2006). We therefore examined the possibility that the relational context within which PSD occurs might shape the type of response elicited. We found almost no difference in how young adults reported responding to the PSDs of grandparents and non-kin older adults. However, although similar response tendencies were reported by each group, it remains possible that the same responses were driven by different reasons. For instance, perhaps when young adults encounter PSD from grandparents, personal qualities such as empathy might prompt the same responses that are warranted by social convention in conversations between young adults and non-familial elders.

Although the presence of marginally significant interactions between discomfort and grandchildren's closeness with grandparents suggests the relationship between discomfort and specific response tendencies was moderated by grandchildren's closeness to grandparents, the nature of the conditional effect was contrary to that which was predicted. Specifically, whereas closeness had been expected to buffer the relationship between discomfort and passive/active disengagement, closeness instead seemed to magnify the strength of these associations.

The emergence of findings that were the opposite of those we expected led us to reconsider the possible role of closeness. Our original hypothesis was informed partly by our awareness of the buffering role of positive relational characteristics on negative interaction in other relational contexts. For example, Caughlin and Huston (2002) determined that demand-withdraw, an interactional sequence usually considered highly problematic for married couples, lost much of its potency when couples were highly affectionate. On further reflection we recognize that although closeness and other positive relational features might protect against the negative relational consequences of demand-withdraw sequences (Caughlin & Huston, 2002), it does not necessarily follow that husbands who feel close to their wives but uncomfortable during episodes of demand-withdraw will be disinclined to offer "pseudo-responses" or to disengage from these encounters. Nor does it follow that such husbands are more apt to respond prosocially during this type of challenging exchange. An alternative possibility is that closeness is an antecedent condition that explains the degree of discomfort felt, rather a contextualizing variable that moderates the impact of discomfort. The results of a *t*-test comparing the degree of closeness reported by the grandchildren in the 33rd vs. 66th percentiles for closeness suggest this may be the case, as those who were closest to grandparents were less uncomfortable ($M = 1.94$) with grandparents' PSD than those who were less close ($M = 2.65$), $t(108) = 5.85$, $p = .001$. Thus, closeness may still affect grandchildren's responses to PSD, but not in the way we predicted.

Theoretical Considerations and Implications of "Next Moves"

As we discuss in the rationale for this study, it is the subjective appraisal of a stimulus that renders it under-accommodative (Thakerar et al., 1982). This emphasis on interpretation accounts for why young adults are divided as to whether PSD is problematic (i.e., under-

accommodative) or a particularly intimate and authentic form of communication (Coulpland et al., 1991; Harwood, 2000). Prior research demonstrates both that there is similar ambiguity regarding how seniors may appraise the communication of younger adults, and that these judgments are crucial determinants of the outcomes of communicative acts. For instance, O'Connor and Rigby (1996) discovered that seniors who perceived younger adults' babytalk (e.g., speech that used exaggerated intonation shifts, simplified syntax and vocabulary, or overly familiar terms of address) to be over-accommodative experienced negative mental health outcomes as a result, whereas those who perceived it as an appropriate accommodation actually experienced improved mental health outcomes. Although we have labeled one set of responses to PSD as "prosocial" and others as forms of disengagement, the same noninherent properties of accommodation apply to young adults' next moves, and an older adult's feelings regarding a younger person's response to their disclosure of painful information may be shaped by the appraisals of next moves and the attributions they make for the young adult's response.

Although some older persons may appreciate a young adult's efforts to contextualize PSD or to empathize by reciprocating with a painful story of their own, others may see this as patronizing (i.e., over-accommodative). Similarly, whereas some seniors may interpret passive disengagement as expressing indifference or inattention (i.e., as under-accommodative), others may be grateful that they are being allowed to continue to talk relatively uninterrupted. Even active disengagement may function accommodatively if older persons recognize that efforts to change the subject are driven by the desire to prevent them wallowing in their unhappiness. Gasiorek and Giles' (2012) discovery that both perceived intentionality and the attribution of a positive or negative motive for communication influenced perceptions of a speaker suggests that even if an older person finds a young adult's next move to be suboptimal, the impact of a clumsy or ill-chosen remark (or indeed, the absence of any verbalized response) may be attenuated either by the belief that their effort was well-meant, or at least not deliberately insensitive.

It is also likely that seniors' interpretations of younger person's responses to their disclosures may depend upon their reasons for disclosing painful information. For instance, if an older adult is disclosing a painful event for therapeutic reasons, they may value minimal moves that show attentiveness but that do not disrupt the account. Conversely, if they are striving to offer insight into what it is like to be old, or how to cope with difficult circumstances, they may welcome the engagement shown by evaluative remarks.

Motivation may play an additional role in conversational sequences featuring PSD, as whether or not a person evaluates a fellow communicator favorably or unfavorably, or judges that communicator's behavior as accommodative or non-accommodative depends upon whether he or she infers a positive or negative motive for that individual's behavior (Gasiorek & Giles, 2012). It seems reasonable to suppose, then, that the motives young adults attribute to an older adult who engages in PSD might also affect their choice of response. For example, if young adults imagine that an older person is revealing something painful to them in an effort to contribute to the conversation in an interesting way, or to pass on some kind of life-lesson (e.g., resilience, optimism), their responses may be different from those that would be offered if the older person is simply imagined to be complaining, or "doing what old people do."

Finally, how a young adult orients himself or herself to a senior's PSD is also important because the young adult's response may be shaping or reinforcing the older adults' perceptions of young adults. In the same way that the communication predicament model of aging posits that elderly communicators may behave in such a way as to "confirm" younger persons' suspicions about the mediocrity of seniors' communication, our model suggests that young adults' responses to PSD may perpetuate older persons' negative stereotypes of the young. For example, Hummert (1990) found that one prototype of young adults held by seniors was the "loner": an individual who is "emotionless," "unable to communicate," and "bored." Should younger adults respond to elderly PSD with disengagement, for example, this response may deter older adults from approaching future interaction with younger persons.

Limitations and Future Directions

We recognize several limitations of our study. First, examining PSD from a self-report, quantitative perspective, we lose the rich perspective offered on intergenerational talk that is offered in discourse analytic work such as that of Coupland et al. (1991). For example, our data tells us nothing about the *kinds* of painful disclosures experienced by our respondents, how such disclosures were introduced, whether they were offered for a specific purpose, expressed in the form of a complaint or as part of a broader narrative, or even whether they were revealed in one-on-one interactions. Moreover, Coupland et al.'s original explorations of PSD were able to examine paralinguistic cues such as pauses, vocal stress, and overlapping speech, and thus were able to draw inferences regarding the intended meaning of even short responses to PSD. For example, extracts of speech that appear in Coupland et al.'s transcripts are annotated with "astonished" (p. 86) and "sympathetically" (p. 89) even if they consist of a single syllable. Although we have assumed that minimal moves reflect passive disengagement, we recognize that the nonverbal cues accompanying these very brief utterances may have a profound effect on the affective meaning they are understood as conveying. Consequently, we would like to see future efforts attempt to capture more contextual information about specific incidences of conversations featuring painful disclosures, and to see researchers return to the observational methods that characterized the earliest studies of PSD.

A specific contextual feature worthy of further exploration is that of culture. Although we found no differences in how young adults responded to PSD as a function of their ethnicity, Magai et al.'s (2009) experimental study revealed that disclosing sad events resulted in health improvements only for African-American participants. Their work suggests that considering ethnicity is important if we are to fully understand the process and outcomes of PSD.

A second limitation to which we wish to draw attention reflects an ideological concern. Specifically, we recognize that our study continues to privilege the perspective of young recipients of PSD, while ignoring the viewpoints of older persons. Although Williams and Giles' (1996) study found that younger persons' primary criticism of older adults' communication was its negativity, a similar study of older adults could just as well find that they were disturbed and dissatisfied by younger persons' reluctance to listen to them, or lack of engagement when they talk about things that are of importance to them. Thus, both

generations share the responsibility of creating satisfying cross-generational encounters, and future studies should address this privileging of young adults.

Finally, we would welcome efforts to more carefully explore PSD in intragenerational encounters and its potential to facilitate intimacy. For instance, if young adults reciprocate stories of relational break-ups or of difficult relationships with parents, or older persons share experiences of bereavement or health problems, these encounters may build a sense of cohesion.

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