A composite vignette of older adults' transitions into old age and their influence on purpose, meaning and identity in later life

Introduction

Older adults experience many transitions that are associated with their physical health, sense of purpose, identity, beliefs about the world around them, and/or their capability to carry out daily tasks (Pettit et al., 2015). Transitions into, and across, later life are major events, including but not limited to, retirement (Barnett et al., 2012; McDonald et al., 2015), bereavement, relocation (Bidonde et al., 2009) and a decline in physical health (Dumas & Laberge, 2005), all of which can increase an individual's awareness that they are becoming old. This awareness of the ageing body is often associated with a decreased sense of purpose and identity (Morgan et al., 2019). As Frank (1995) explained, as life moves forward, this movement causes change within our stories, and our perception of self. In this study, older adults told their stories of how their life has developed through the transition into old age and what this experience means to them at present with particular reference to their experience of health and exercise. Three key themes emerged from the interview data, which we developed into a composite vignette. The three themes were: (i) *Purpose provides a reason to be healthy*; (ii) *Lost meaning* and, (iii) *An inevitable decline*.

The first theme within the composite vignette identifies the importance of purpose and meaning in the motivation of older adults to be healthy in later life. Having meaningful and purposeful facets of their lives increased the value of maintaining good health. Therefore, pursuing positive health behaviours was seen as valuable as it supported parts of their life that were important to them such as relationships with others that provide significance to their lives (Steptoe & Fancourt, 2019).

Second, the transition experiences highlighted the loss of meaning that occurred as the older adults transitioned into old age. The composite vignette highlighted several ways in which the older adults had lost meaning and purpose as they entered old age. These losses lead to feelings that life was no longer worth living. Freeman (2000) defines this life experience as "narrative foreclosure": even though an individual's life continues, the story of life in their own mind has ended.

Finally, the transitions resulted in changes in identity that occurred as a result of losing key

pillars of identity through the transitions, and how they were treated by other people around them as a result. Burke and Stets (2009) state that an identity can provide an individual with personal goals that encourage engagement in corresponding behaviours. These identities had underpinned daily pursuits, which in turn provided a purpose and meaning for the older adults. Based on qualitative interviews of the lived experiences of older adults through the transitions associated with later life, I (first author) created composite vignettes. I used creative nonfiction, a type of creative analytic practice that aims to show, rather than tell, theory, in and through stories in order to resonate more deeply with readers and move them towards new understandings (Smith, 2013; Smith et al., 2015). Cheney (2001) describes creative non-fiction as 'a story using facts but uses many of the techniques of fiction for its compelling qualities and emotional vibrancy' (p. 1). Composite vignettes merge stories from several individuals and different experiences to form a single story that encompasses the experiences from all individuals (Spalding & Phillips, 2007). This approach allowed me to pull together different components of all the participants' experiences of the transitions into old age and display them in a compelling shared account. Therefore, the vignette that follows should be read as singular accounts from an older adult and their experiences transitioning into old age.

I collected stories from older people living on a residential estate in the UK; Table 1 describes the people who took part. I had shared several conversations with the participants throughout the previous two years spending time within the residential estate, which allowed participants to open-up about sensitive topics (e.g., bereavement). During these conversations, I became aware that they had experienced one or more of the transitions into older adulthood and they would be willing to share these experiences with me over several interview sessions. I used semi-structured interviews to collect personal experiences of the participants, ranging from 2-4 per participant and asked predominantly open-ended questions, allowing the participants to lead the conversation. After each interview I listened to and reflected on what had been said to explore and understand the story further in subsequent interviews with the participant.

Table 1Participant profiles of those who took part in the interviews.

Name	Age range	Ethnic background	Experienced	Additional information
	(years)		transitions	
Kevin Taylor	70-75	White, British	Bereavement,	Acts as a carer. Born
			decline in physical	outside of Wales but has
			health, retirement,	since relocated to the
			relocation	residential estate.
Betty Burtis	80-85	White British	Bereavement,	Lives alone and has always
			decline in physical	been a resident of
			health, retirement,	Newport. Reports
			relocation	significant changes in
				physical health in recent
				years.

Peter Parkin	65-70	White, British	Decline in physical	Has suffered severe health
			health, retirement,	complication in recent
			relocation	years.
Cladria Caami	90.95	White Duitich	Domogyamant	Lived along for 20 Lygges
Gladys Seery	80-85	White, British	Bereavement,	Lived alone for 20+ years.
			decline in physical	No close relatives live
			health, retirement,	nearby. Suffers from
			relocation	challenging health
				complications.
Geraldine	70-75	White, British	Bereavement,	Lives alone. Relocated to
Simmons			retirement,	Newport in recent years to
			relocation	live within the residential
				estate.

Note. Pseudonyms have been given and specific information has been limited to protect the anonymity of the participants.

My analysis of the interviews used a narrative thematic approach, which followed the six steps highlighted by Smith et al. (2009) and Smith (2011). In these steps, I listened to and transcribed the interview recordings and repeatedly read the transcripts to fully immerse myself in people's stories. I then highlighted key quotations throughout the transcripts and labelled each quotation to reflect what the older adults discussed about their experiences of their transitions. Working across all the transcripts, I reviewed these labels for commonalities between them and grouped those that had shared meaning. Based on these groupings, I was then able to identify the major themes that underpinned the older adults' stories of their transitions into and through older adulthood: *Purpose provides a reason to be healthy*; *Lost meaning*, and, *An inevitable decline*. For each theme in turn, I returned to the interview transcripts and used verbatim quotes, connected into a coherent narrative within each theme to tell the story it portrayed and attempt

to reflect its meaning for these older adults. Although quotations were reorganised and words such as conjunctives were added and pronouns changed to create a fluid narrative, direct quotations were maintained from the interview transcripts to ensure the authenticity of my representation of the participants' experiences. My plan at this stage was to provide a singular story of the participants' experiences of the transitions, and how these are situated within a wider social context (Larkin et al., 2006).

Composite Vignettes

Purpose provides a reason to be healthy

I value my health because I value my independence

I value the connection that I have with the people around me. My family, my children and my grandchildren are the most important things in my life. That's why it was most worrying when I got diagnosed with diabetes. The first thing that pops into your head is, 'how long have I got?'. I value the people around me, I have things in my life that I want to do, I want to sell my home and move to Spain. So, I value my health. I value my health because I value my independence, and without good health I can't have these things in my life. Supporting my family and friends, my ability to maintain my independence, being able to move to Spain. These things can't happen if I do not have my health.

'If I do the right things to remain healthy, then I can live a normal life. And that is what I have tried to do'

When I first got diagnosed with diabetes I was about two and a half stone overweight. So that was the first thing I did was lose that. I started exercising every day. Either swimming or going to the gym. And I did that for a couple of years after I retired. It took up quite a bit of my life for a few years. The big thing with diabetes is weight of course. I always tried to stay relatively fit. Even more so when I got diagnosed with diabetes. That was probably another milestone

which made me feel old, was when I sat down in front of the doc and he says, 'you got diabetes'. But after, being told that if I do the right things and remain healthy, that I can live a full and normal life. And that is what I have tried to do.

I tried very hard not to let things get in the way and stop me from exercising, although I had to exercise differently. When I was younger, I used to go to what they used to call keep fit classes. In those you sort of throw yourself around. But as I get older, I had to go over to the yoga and Pilates type of thing. And walking. I do enjoy walking. The pleasure I get out of walking is quite, I love finding little places, exploring different sort of avenues and finding different places. So, I do enjoy the walking. My health doesn't affect the distance I walk, but it does affect the time it takes me. I sort of stroll now.

'We found something new to do, it has got me being busy again'

When you get older, you can find yourself with very little to do. We have a lot more time on our hands. What helps is the connection you have with other people around you. Family and friends. That in itself keeps you occupied and busy. When we moved here with all the new residents, we introduced ourselves and made it clear that we wanted to start a club. It has got me busy again. Arranging trips away, printing things out, delivering leaflets and all that you know. I had a phone call just an hour ago. One of the ladies here wanted some stuff done on my computer, so I said 'yeah, no problem at all'. It gives me something to do and I feel good for being able to help. It does make you feel good.

Looking after my partner was a big part of my life. It gave me the 'I got to be strong anyway, because I am all they have got'. Before they fell ill, we used to walk all the time together. When they came out of hospital, the main thing I was concerned about was to get them walking again. We focussed on it daily, we would try and go walking down the sea front. We would walk to the first bench, then onto the next one, then you're up to two benches and so on. Eventually we

were walking around the town down there you know. Once we had both retired, we also took up family history. We always said that we would love to explore it, so we started doing that. We went to all these various places and all these little villages. And it filled up our time if you like. It was something that we did together. It was all consuming, because the more you found, the more you wanted to know. We had found something new to do.

Lost meaning

'My roles and responsibilities are vastly different from what they used to be'

I really loved my last job. I always liked what I did, but I...You don't appreciate it till you get older. You usually think 'oh god, I don't want to do this for the rest of my life' but then when time goes on, I really loved my job. And I was so glad that I had the discipline of something in my life. Something to get me up in the morning. Once that had gone, I started to feel a bit useless. Although I chose to retire, I still felt abandoned. It is a bit strange. You have no structure to your life. You have to sort of move on from it. When you become older, you lose people around you, then you don't have your job. That's what you're all about really. You do become a bit lost. You lose the daily structure. You wake up and you don't have to get up for work. You're not tied to the routine of work and that in itself is difficult to deal with, just that change alone. It can be a novelty at first, but it can get very boring. You don't only get away from the job. It is the people who work there. You know when you move on in your life, your gap closes with those people, I mean they have always kept in touch. But it is not the same as being friendly and included. I lost that day to day contact with so many people.

My roles and responsibilities are vastly different from what they used to be. It started quite young. Because when your children leave home, that's when you got to remind yourself when you go shopping. You haven't got to buy that great big bag of potatoes and you don't buy that stuff. You know, you lose that. It was the same when my partner died. They never bought any

clothes. They wouldn't by a shirt or even a pair of underpants even. That was my job, I bought everything. I would see there is a sale on and you sort of, you got to pull yourself up and adjust your mind to it. As you don't have those responsibilities anymore.

'I had become a widow as well as an orphan'

You lose the people around you as you become older too. First my mother passed away, but that was expected as she was 105 (years old). That left a hole. It was such a big blow. It was like an abandonment you know. I used to visit her several times a week, so once she passed it was like something was missing. Whilst she was well and lived independently, I would visit her 2-3 times per week. Then once she went into a home, I would visit her around every other day. I felt I had a responsibility as her child, because you see, she didn't have many others around her. So, I used to go to keep her company and make sure she was ok. But it was a challenging time seeing her struggle with her health and everything. The passing of my partner was more challenging. That was a result of cancer, where they got diagnosed two months after my mother died and then passed away the following January. That was very challenging because I had become a widow as well as an orphan. We used to do everything together. It was the first time I have lived on my own ever, because I had moved out of my family home, to live together and I lived with them ever since. We used to do everything together. We used to go on lots of holidays, and we would do something every day, even if it were just to go for a coffee. We would always do something. They would go to bowls, sometimes I would join them. But I wouldn't go anymore now. It was a lovely hobby for the two of us to do. It wouldn't be the same anymore.

It took a long time to get over bereavement. I'd say you never fully get over it, but I think about two to three years before I felt myself again. Before my partner passed away I used to have my kids to look after, but they have moved far away now. Then my partner passed. I got no

grandchildren. My sons don't live locally, one is in New Zealand, so I don't get to see him very often. And the other is in London. I am very much on my own. I spend a lot more time in the house than I used to. When J***e moved on, that was my eldest, I locked myself in the bathroom and cried my eyes out. You know, it was devastating. I had lost half of my family in a way. I only had the two children.

'I don't do the things that I loved doing'

I always had plenty of hobbies. The last place we lived in, I built a workshop there. I mean I could go in there at 8 o'clock in the morning and still be in there 8 o'clock at night. Without having to sit down even. I would just carry on until I would finish what I was doing. I'll be honest with you, I would love to do that again, but I haven't got the opportunity since having to downsize. Since relocating, we are a bit restricted to be honest with you. I don't drive. So, living in a hilly place, I can't get out much. I manage to get up the shop on the scooter. But that is as far as I can go on it really. Back then I could walk along the sea front, I could go on for miles. I miss not having a garden as well. I have the patio there, but it is not the same. I miss my little workshop, it was ideal for me. It became my main hobby I suppose.

Since relocation, my life has changed greatly. I used to go out in the morning and have a walk down the town or go on the scooter. I went out every day. Just around the town or around the shops, but I don't do that here. I can't do that here. I really miss that. I never realised the hills were so steep around here. I walked down to the Tesco one day, and I was walking back up and I had to stop, I was leaning on the bridge pretending I was looking out at the scenery, when in actual fact, I was trying to catch my breath. I have COPD, so that limits what I can do a lot. A few years ago, it was diagnosed, I mean, I smoked for 50 years, so that is probably the reason. You know, I can't go for walks, I can't do much physically. I get very tired and out of breath. So, it does limit me, although I got inhalers, it does limit me a lot what I can do. I don't do the

things that I loved doing. I used to do the gardens, but I can't do that now. It is very limiting, very limiting. I did enjoy doing the planting and doing the flowers, but I can't do it now.

'They start helping you across roads, whether you want the help or not'

People treat you differently when they think you're old. One person in the hospital ward when I was there before, she was playing up a bit. And I had asked her to do something. And one of the nurses said 'Oh that's what we need, a little old person in every corner of every ward'. Oh my god. I thought who was she talking about! I don't see myself as old. Until I look in the mirror. I feel like I look like my parents. It is only looking in the mirror that you feel old. You don't feel it so much inside you. People always remind you. Even back when I was in my 50s and 60s. People would call you the old one. It is other people who do that, not you. They start helping you across roads, whether you want the help or not. Or telling you to be careful. That sort of thing. And you think, oh shut up.

'Who am I now? What is the reason for me?'

You spend the last few years of your working life leading up to retirement, so it doesn't come unexpectedly, it doesn't come as a surprise. But, it still is a surprise when you wake up one morning, the morning after retirement and your life has changed completely. You find you're sitting at home watching TV far more than what is good for you, you know. It is a feeling of worth. There is no feeling of worth, when you feel all that you have done is sit down and watch TV. You don't feel like you have achieved anything, you don't feel like you have added value to anybody's life. All you have done is watch TV.

I don't really have anything that I would like to achieve anymore. Nothing I can think of. I have got no ambition or anything like that. Not really. In the future I will only need more care probably. Going somewhere where I will have care, rather than living alone. I am just a waste of space now. That's how I feel. I got no grandchildren. My sons don't live locally, I am very

much on my own. So, yes. I have got no reason for being actually. Well, I mean there is nothing left to really live for, to be honest. As much as nobody wants to die too soon. There is not a lot to live for, if you know what I mean. You sort of, you, I know people say this a lot, but you disappear. If I went and robbed a bank now, nobody would be able to describe me you know. I am just an old person. You know, sometimes I do sit back and think, what is the reason for me. I used to have kids to look after, but they have moved far away now. Then when my partner passed, that was another one. What is the reason for me now? I mean, maybe being a friend to other people, but apart from that I don't think I have a reason anymore. You become a sort of, my identity has gone. You're like a bit of a nobody really. Perhaps that is a bit harsh but that's how I feel. I don't do this and I don't do that.

An inevitable decline

'You're only going to get worse, and that is what it is I am afraid'

I retired because of relocation. Because of the job I had to work until around 10 o'clock in the evening, which is quite late to be out walking in certain areas. And I moved further away. Because I was only around the corner from my job before. And although I didn't move very far away, it was too far to be walking late at night. And the truth of the matter is, you got a lot of problems when you are working in an off licence and the family put a bit of pressure on me to get out of there. But I was 70 then. Although I was definitely not happy to retire, you come to a time when you know you have to do certain things. Even when you don't want to do them. After my partner had the stroke and I was a bit restricted then. I came back to Newport because we were being pestered by our children. They said we were living too far away, and if anything happened. So that was the reason. I miss living by the sea. You know, even with the lockdown I could have just walked out the door there and walked along the sea front no problem. Not bumping into anyone or anything. You can't do it here. I have started walking much less here.

Back then we had a lot more housework to do too, as it was a big house with a rather large garden. I don't do the things that I loved doing. I used to do the gardens, but I can't do that now. It is very limiting, very limiting. My partner was feeling like he couldn't cope with all the garden and the repairs, so we decided to downsize.

As you become older, you start to lose your physical capabilities too. It didn't change the way I do things, but it did change the way that I think about things. You forget your memory and you forget the names of things. It is so annoying. There is nothing you can do about it. I remember things from long ago. Ask me what I had for lunch yesterday and it is difficult every now and again. It makes you feel older. As if 'oh well, this is the end'. You're not going to get better from it, you're only going to get worse. And that is what is happening I am afraid. It is so annoying. There is nothing you can do about it. I remember things from long ago, but nothing. Ask me what I had for lunch yesterday and it is difficult every now and again. In the future I will only need more care probably. Going somewhere where I will have care, rather than living alone. It doesn't feel very nice. I mean, I think if I were to start to exercise, that I wouldn't really improve at my age.

'It weakens you, it makes you feel older'

As I got older, you probably hear this a lot, you still think like an 18 or 20-year-old. You go through life thinking like you were when you were young you know. But when something like that happens it really does make you think about, well it makes you realise that you are getting old. You never really think about what is to come. But when you confront, having the stroke really confronted me with my own mortality. And it made me think about things. It made me realise that I am no longer a 21-year old. It does tend to change your outlook and the way that you see things. Everything that happens to you physically, it weakens you. Makes you feel older.

It is all the normal old age things that start to creep in. I look in the mirror and I see the wrinkles; I think to myself Christ. Look at my stomach sticking out like my father's did. Because I never had a pot belly before. When I wake up in the morning and have a wash, my hair is wet and I brush it back and think, jeeez, I am looking like my parents. It is difficult to know when things start. Because they happen so gradually some of the changes. But you go a long time without doing one particular thing, then you go to do it because you know you can do it, then you find you can't. Like moving things around, you know. When you're young you throw your furniture around and clean behind it and all the rest of it. Then one day you go to do it and sort of 'Oh, this is hard work', it happens so subtly and so gradually.

When you are walking about late and there is a streetlight on, then it goes dark, then there is a street light. The changes throw you if your sight is bad. My worst thing is steps. Pavements, getting up and down pavements. I always have to pause. And crossing roads of course. I was out for a walk and I asked somebody for directions. About 20 minutes later, the police turned up. Somebody phoned the police to say that I was wandering. That made me feel really old. I didn't want to go out, I didn't want to go for a walk after that. I wanted to hit them. I felt really, really upset that they had done that. What people don't realise is, if they see someone struggling, you can say do you want any help or are you ok? And if they want help they will probably say yes. And you also get the people, you're waiting to cross the road and they will put their arm into yours and drag you across the road. And that is not helpful because it throws you all off balance. There is a happy medium, you always need to ask if someone needs help. It is surprising how many people will force their help on you, especially when you are older.

The only difficulty I find is, I walk, I can walk for probably four to five miles, but if I go up hill. I can walk up hill, I can walk up quite steep hills sometimes. But it is very hard. I have to stop. But of course, the ageing process and the COPD are two separate things aren't they. Although they're both together in me. But the ageing process does that to you as well. It stops

me being able to walk or do the things that I enjoy doing. I mean, I can't even walk to the bus stop without having my stroller with me. Very limiting, very limiting. I suppose I can't expect anything else at this age.

It definitely makes you think, 'oh well, this is the end'. And that is what is happening I am afraid. Just a month ago, the youngest, she was on holiday in Wales actually, she had a heart attack and died. That was it. I was only talking to her the week before. My mother and father both died in their 70s, all my siblings are gone. I suppose I am the lucky one. I thought 'Oh well, I haven't got much time left now'. So, I need to do something. I used to have six siblings, now I am the only one left. That was the main thing that changed for me was, you start to think about the end. When I never did before, especially when my last sister died. You start to think about the chest pain and think, jeez, is this it? When I never used to think like that. Whether that starts to happen naturally at my age, I don't know.

Discussion

Becoming old is a process whereby an individual typically passes through several transitions including retirement, bereavement, relocation, and/or a decline in physical health (Barnett et al., 2012; McDonald et al., 2015; Bidonde et al., 2009; Dumas & Laberge, 2005) which can contribute to a lost sense of purpose. For example, the loss of a lifelong partner can result in profound grief and feelings of isolation, as a meaningful source of companionship is suddenly absent. Retirement from employment, which can act as a strong source of identity for an individual, can strip individuals of their daily routines and social connections, leaving them with a lack of meaningful roles and purposeful activities. Changes in identity, which may occur due to health limitations or shifts in social dynamics, can lead to a struggle to define one's self-worth and purpose.

Although purpose, meaning, and identity are separate constructs, as our vignettes illustrate, they largely overlap. Identity relates to the development of one's sense of self, whereas purpose relates to the development of what one hopes to accomplish in life (Bronk, 2011). This study highlights the importance of the transitions into old age and their potential influence on meaning, purpose, and identity in later life. Transitions into old age can result in breaks in significant social and psychological involvement (e.g., lack of social connection and meaningful goals), which can deprive an individual of important sources of purpose in life (Baumeister, 1991; Nies & Munnichs, 1987). Purpose is a central, self-organising life aim, which is a key feature of an individual's identity (Kashdan & McKnight, 2009) and a healthy identity development. Thus identity formation and purpose development reinforce one another (Thoits, 2012). The self-organising nature of purpose means it provides a framework for systematic behaviour patterns in everyday life that reflect this purpose and identity, reinforcing purposeful commitment to meaningful activities. Telling our own story can be a means of asserting both our identity and our purpose.

As we move forward, it is imperative for future research to delve deeper into the development of interventions that can effectively provide older adults with a range of meaningful activities, ultimately enhancing their sense of purpose and quality of life. By addressing these fundamental aspects, we can work towards ensuring that older adults continue to enjoy fulfilling and more purposeful lives. In this study, the use of creative non-fiction enabled us to gain insight into the experiences that older adults face as they pass through transitions associated with later life. Continuing to listen to older people's stories of their transitions is central in our future attempts to develop interventions to support them through these life changes.

References

- Barnett, I., van Sluijs, E., & Ogilvie, D. (2012). Physical activity and transitioning to retirement: a systematic review. *American Journal of Preventative Medicine* (43), 329-336.
- Bidonde, M., Goodwin, D., & Drinkwater, D. (2009). Older Women's Experiences of a Fitness Program: The Importance of Social Networks. *Journal of Applied Sport Psychology*, 21, 86-101.
- Bronk, K. (2011). The role of purpose in life in healthy identity formation: a grounded model.

 New Direction to Youth Development, 132, 31-44.
- Burke, P., & Stets, J. (2009). *Identity theory*. Oxford University Press.
- Cheney, T. (2001). Writing creative nonfiction: Fiction techniques for crafting great nonfiction. Ten Speed Press.
- Dumas, A., & Laberge, S. (. (2005). Social class and ageing bodies: understanding physical activity in later life. *Social Theory and Health*, *3*(3), 183-205.
- Frank, A. (1995). The wounded storyteller—Body, illness and ethics. University of Chicago Press.
- Freeman, M. (2000). When the story's over. In M. Andrews, S. Day Scatler, C. Squire, & A. Treacher, *Lines of Narrative. Psychosocial Perspectives*. Routledge.
- Kashdan, T., & McKnight, P. (2009). Origins of purpose in life: Refining our understanding of a life well lived. *Psychological Topics*, *18*, 303-316.

- Larkin, M., Watts, S., & Clifton, E. (2006). Giving voice and making sense in interpretative phenomenological analysis. *Qualitative Research in Psychology*, *3*, 102-120.
- McDonald, S., O'Brien, N., White, M., & Sniehotta, F. (2015). Changes in physical activity during the retirement transition: A theory-based, qualitative interview study.

 *International Journal of Behavioural Nutrition and Physical Activity, 12(2), 25.
- Morgan, G., Willmott, M., Ben-Shlomo, Y., Haase, A., & Campbell, R. (2019). A life fulfilled: positively influencing physical activity in older adults a systematic review and metaethnography. *BMC Public Health*, 362.
- Nies, H., & Munnichs, J. (1987). Purpose in life and old age. DZA.
- Pettit, B., Barclay, J., & Needham, J. (2015). *Transitions in later life: Summary of research and consultation*. Calouste Bunkenkian Foundation.
- Smith, B. (2013). Sporting spinal cord injuries, social relations, and rehabilitation narratives:

 An ethnographic creative nonfiction of becoming disabled through sport. *Sociology of Sport Journal*, *30*, 132-152.
- Smith, B., McGannon, K., & Williams, T. L. (2015). Ethnographic creative non-fiction: Exploring the what's, why's and how's. In G. Molnar & Purdy, L. (Eds.), *Ethnographies in Sport and Exercise Research* (pp. 59-73). Routledge.
- Smith, J. (2011). Evaluating the contribution of interpretive phenomenological analysis. *Health Psychology Review*, *5*, 9-27.
- Smith, J., Flowers, P., & Osborn, M. (2009). *Interpretative phenomenological analysis:*Theory, method and research. Sage.
- Spalding, N., & Phillips, T. (2007). Exploring the use of vignettes: From validity to trustworthiness. *Qualitative Health Research*, 17, 954–962.

- Steptoe, A., & Fancourt, D. (2019). Leading a meaningful life at older ages and its relationship with social engagement, prosperity, health, biology, and time use. *Proceedings of the National Academy of Sciences of the United States of America*, 116(4), 1207-1212.
- Thoits, P. (2012). Role-identity salience, purpose and meaning in life, and well-being among volunteers. *Social Psychology Quarterly*, 75(4), 360-384.