

**AN EXAMINATION OF THE RELATIONSHIP
BETWEEN PASSION AND SUBJECTIVE
WELL-BEING IN OLDER ADULTS***

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ABSTRACT

Activity engagement has long been linked to improved subjective well-being (SWB) in old age. However, recent studies testing Vallerand et al.'s (2003) Dualistic Model of Passion suggest that the type of passionate activity that underlies activity engagement might influence the extent to which individuals benefit from an active lifestyle. In the present article we examined the relationship between harmonious and obsessive passionate activities and subjective well-being in older adults. Results showed that harmonious passion, through its influence on positive affect experienced during activity engagement, is associated with increases in SWB, whereas obsessive passion is associated with decreases in SWB. Engagement in passionate activities might be beneficial for older adults when a passionate activity is harmonious, but detrimental when a passionate activity is obsessive.

*Preparation of this article was facilitated through a postdoctoral fellowship from the Social Sciences and Humanities Research Council of Canada (SSHRC) to the first author, and through grants from SSHRC and the Fonds pour la Formation de Chercheurs et l'Aide à la Recherche to the second author.

The suggestion that older adults who remain active experience greater life satisfaction and subjective well-being (SWB) goes back several decades (e.g., Havighurst & Albrecht, 1953; Lemon, Bengtson, & Peterson, 1972). Over the years, numerous studies have provided empirical support for the positive relationship between activity engagement and SWB in older adults (e.g., Leventhal, Rabin, Leventhal, & Burns, 2001; Menec, 2003; Okun, Olding, & Cohn, 1990). Participation in social activities of all types, including volunteering and community tasks have been associated with higher levels of SWB (Harlow & Cantor, 1996; Searle, Mahon, Iso-Ahola, Sdrolias, & van Dyck, 1995; Warr, Butcher, & Robertson, 2004; Zimmer, Hickey, & Searle, 1995). Harris and Bodden (1978) conducted an intervention program in which they randomly assigned socially disengaged older adults to either an experimental or a control group. At the beginning of the study, both groups reported similar levels of activity engagement, life satisfaction, and anxiety. Older adults assigned to the experimental condition met for two one-hour sessions per week, for six weeks, during which they engaged in various social activities (e.g., socializing with other participants, playing games such as bingo). Participants in the control condition did not take part in these sessions. At the end of the intervention participants in the experimental group reported being less anxious and more active and satisfied with their life than participants in the control condition.

Physical activity has also been associated with greater SWB in older adults (Craft & Landers, 1998; Elavsky et al., 2005; Fukukawa et al., 2004; Lampinen, Heikkinen, & Ruoppila, 2000; Li et al., 2001; Netz, Wu, Becker, & Tenenbaum, 2005). Bravo et al. (1996) randomly assigned older women to either an experimental or control condition. Participants in the experimental condition were asked to engage in three 60-minute sessions of physical exercise per week over a one-year period, and to attend bi-monthly seminars on health. Participants in the control condition attended only the educational seminars. Results showed that at the end of the program women in the experimental condition reported greater SWB than women in the control condition. Similarly, McAuley et al. (2000) found that previously sedentary older adults who participated in an exercise program three times a week for six months reported increased levels of satisfaction with life at the end of the program, even when controlling for amount of social support reported by participants.

On the basis of these and other similar findings, it is tempting to conclude that higher levels of activity engagement necessarily lead to greater SWB. The relationship between activity engagement and SWB, however, is complex and several factors might influence the degree to which activity engagement is beneficial for older adults (Kozma, Stones, & McNeil, 1991). Activity engagement might be most beneficial when an optimal level of participation is reached. Jirovec and Hyduk (1998) reported that older adults who volunteered approximately 500 hours a year reported significantly greater levels of SWB than those who spent fewer (i.e., 100 or 250 hours) or more (i.e., 1000) hours volunteering. The type of activity

performed might also play a role. In a study conducted with older adults, Reich, Zautra, and Hill (1987) found that engagement in desired activities (e.g., doing a hobby) was positively related to well-being, while engagement in non-desired activities (e.g., having to keep up with correspondence) was unrelated to well-being. Finally, in a study on the relationship between SWB and the reasons that underlie older adults' participation in activities, Everard (1999) reported that activity engagement performed to meet people was associated with higher levels of SWB, whereas activity engagement performed with the purpose of spending time was associated with lower levels of SWB. Taken together, these results point to the need to go beyond the "more-is-better" approach about activity engagement, and to identify variables that increase the likelihood that older adults will benefit from an active lifestyle. Such an endeavor could lead to important advances, including the development of strategies to help older adults maintain their SWB, and help shape intervention programs to allow older adults to reap as many benefits out of their activity participation, and ultimately experience greater quality of life. Vallerand et al. (2003) developed a Dualistic Model of Passion that has the potential to offer a better understanding of the relationship between activity engagement and SWB in older adults.

The Dualistic Model of Passion

Vallerand et al. (2003) defined passion as a strong inclination toward an activity that one likes, finds important, and in which one invests time and energy. Passions help define individuals because they are central features of individuals' identity. For instance, people with a passion for volunteering do not say that they volunteer; they *are* volunteers. Vallerand et al. also proposed the existence of two types of passion, harmonious and obsessive, that can be distinguished by the way the passionate activity has been internalized in the identity of the individual (i.e., either in an autonomous or a controlled manner). An autonomous internalization occurs when individuals freely accept an activity as important for them. No contingencies are involved in the autonomous internalization process. This type of internalization produces harmonious passion, which leads an individual to choose freely to practice an activity, and to be in control of the activity. As the name indicates, harmonious passion is in harmony with the person's other activities. Consequently, it occupies a significant but not overpowering part of the person's identity.

A controlled internalization of the activity into an individual's identity, on the other hand, gives rise to obsessive passion (Vallerand et al., 2003). This type of internalization occurs when individuals internalize an activity they greatly enjoy and value but to which are attached contingencies (e.g., self-esteem). As a result, these people find themselves in the paradoxical position of feeling obligated or pressured to engage in an activity they enjoy. Whereas individuals with a harmonious passion are in control of their passionate activity, individuals with an

obsessive passion are controlled by their passionate activity, cannot imagine their life without it, and may even come to be emotionally dependent upon it. Because the passionate activity controls the individual, it may come to occupy disproportionate space in that person's identity and may result in conflicts arising from the person's desire to engage in a passionate activity and that person's obligations in other life domains.

According to Vallerand et al. (2003), harmonious and obsessive passion should lead to different outcomes. More specifically, harmonious passion should result in adaptive outcomes, but obsessive passion should be associated with maladaptive outcomes. Individuals with a harmonious passion are in control of their activity. They can organize their life in a way that keeps conflict between their passionate activity and their other obligations absent or minimal. They should therefore experience adaptive outcomes such as positive emotions during and after activity engagement. Harmonious passion might be said to be associated with optimal levels of activity engagement, with individuals participating in passionate activities only to the extent that their participation is good for them. Obsessive passion, on the other hand, is characterized by lack of control over the activity. The internal pressure to engage in the activity experienced by individuals with an obsessive passion should result in a more rigid form of task engagement, characterized by conflicts between the different areas of individuals' lives. Consequently, individuals with an obsessive passion are more likely to experience negative emotions during and after task engagement. For instance, an older person with an obsessive passion toward the game of bridge might feel guilty for devoting so much time every day to this activity instead of spending more time with his or her spouse. Similarly, an individual with an obsessive passion toward golf might continue playing despite being injured, thus running the risk of aggravating the injury. In other words, obsessive passion could be associated with suboptimal levels of participation due to an inappropriate overinvestment of time and/or energy in the passionate activity, and consequently result in maladaptive outcomes.

Although no study has examined the Dualistic Model of Passion with older participants, empirical studies conducted with young and middle-aged adults have provided support for these hypotheses. Harmonious passion has been associated with better interpersonal relationships (Séguin-Lévesque, Laliberté, Pelletier, Blanchard, & Vallerand, 2003) and higher levels of positive emotions, concentration, flow (Mageau, Vallerand, Rousseau, Ratelle, & Provencher, 2005; Vallerand et al., 2003, Study 2), as well as higher levels of SWB experienced in sport and globally (Vallerand et al., 2006, 2007). Obsessive passion, on the other hand, has been associated with higher levels of negative emotions, conflict with other aspects of one's life, and hazardous and self-defeating behaviors (Vallerand et al., 2007, Studies 3 and 4).

These results suggest that activity engagement, at least with respect to passionate activities, can result in either positive or negative outcomes, depending on the type of passion that individuals have (Vallerand et al., 2003). Because the

Dualistic Model of Passion has the potential to provide a better understanding of the role of activity engagement in the aging process, we conducted a study to examine the relationships between harmonious and obsessive passion and SWB in older adults. In addition, we aimed at examining the underlying psychological mechanisms between passion and SWB. In order to explain the role of passionate activities in older adults' lives, it is necessary to know what variables are involved in the relationship between passion and SWB. Two variables that might help explain this relationship are positive and negative affect. Positive emotions resulting from the practice of activities have been linked not only short-term satisfaction and pleasure, but, when experienced repeatedly, to long-term benefits in the form of increased SWB (see Diener, Sandvik, & Pavot et al., 1991; Fredrickson, 2001). Negative life events that can give rise to experiences of negative emotions or negative affect can, over time, result in maladaptive psychological outcomes such as depression and decreased SWB (Chang & Sanna, 2001; Kraaij, Arensman, & Spinhoven, 2002; Krause, 1991). In other words, positive and negative affect can, over time, influence individuals' SWB. As for the relationship between passion and affect, Mageau et al. (2005) found that harmonious passion was associated with higher levels of positive affect experienced during activity engagement, while obsessive passion was associated with lower levels of positive affect and higher levels of negative affect (see also Vallerand et al., 2003, Study 1). Taken together, these results suggest that passion could influence older adults' affective experiences during activity engagement, which could in turn influence their SWB.

THE PRESENT RESEARCH

Past research has started to assess the relationship between passion and SWB (e.g., Vallerand et al., 2003, Study 2; Vallerand, Salvy et al., 2007). However two points are in order. First, no research to date has looked at that relationship with older adults. Second, research has not studied the nature of the processes involved in the link between SWB and passion. Thus, the purpose of the present study was to address these two issues. Specifically, we wished to test whether harmonious and obsessive passion differentially affect SWB in older adults, as well as to examine the nature of the psychological processes underlying the relationship between passion and SWB using a three-wave prospective design. A model involving passion, positive and negative affect experienced during activity engagement, and SWB was tested. It was hypothesized that harmonious passion at T1 would be associated with higher levels of positive affect at T2, which would in turn be associated with increases in SWB at T3. Obsessive passion at T1, on the other hand, was hypothesized to be associated with higher levels of situational negative affect at T2, which would in turn be associated with decreases in SWB at T3. Finally, SWB at T1 was hypothesized to be associated with lower levels of negative affect at T2 and higher levels of positive affect at T2 and SWB at T3.

METHOD

Participants and Procedure

Participants were members of the “Club d’Activités Physiques pour l’Âge d’Or” (APADOR), which offers various physical activity programs to older adults from the Montreal area. One of the activities consisted of an exercise class aimed at improving flexibility, coordination, and muscle strength. Each section for that activity had between 10 and 25 people. Potential participants were contacted immediately after a class and were invited to take part in a study on physical activity and health. Individuals who were interested in participating in the study were given an envelope that contained a cover letter describing the study, a questionnaire, and a return (i.e., stamped and pre-addressed) envelope. Older adults were asked to complete the questionnaire within the following days and to mail it back when they were done. Three hundred and seventy-eight people agreed to take a questionnaire home. Of these participants, 239 completed and returned their questionnaire for a response rate of 63.2%. Five weeks later these 239 participants were asked to fill-out a short questionnaire immediately following one of their classes. One hundred and twenty participants completed the questionnaire on site, for a response rate of 50.2%. Finally, three weeks later these 120 participants were mailed a questionnaire at home and were asked to complete and return it as soon as possible using the return envelope. All 120 participants returned their questionnaire. Data from one participant was deleted from the analyses due to its unacceptable contribution to multivariate non-normality. Final analyses were therefore conducted with 119 participants. The sample included 70 women and 49 men aged 52 to 80 years ($M = 65.92$, $SD = 6.12$). On average, participants had 12.56 years of education ($SD = 2.96$), and an annual income of \$31,002.35 (CAN) ($SD = \$14,506.95$).

Measures

The first questionnaire (T1) contained a 10-item version of the Passion Scale (Vallerand et al., 2003), with five items measuring harmonious passion and five items measuring obsessive passion. Participants were asked to respond to the 10 items according to the physical activity they practiced at the APADOR club. A sample item for harmonious passion is “This activity is in harmony with the other activities in my life,” and a sample item for obsessive passion is “I cannot help but engage in that activity.” Possible responses ranged from “Do not agree at all” (1) to “Very strongly agree” (7). Cronbach alphas in this study were .82 and .84 for harmonious and obsessive passion, respectively. The Passion Scale provides each participant with a score on the harmonious subscale and a score on the obsessive subscale. Since individuals can experience both types of passion, albeit generally to varying levels, both the harmonious and the obsessive passion scores for all participants are used for data analyses (see Mageau et al., 2005; Vallerand et al.,

2003; Vallerand et al., 2006). SWB at T1 was measured using the Satisfaction With Life Scale (SWLS; Blais, Vallerand, Pelletier, & Brière, 1989; Diener, Emmons, Larsen, & Griffen, 1985). The SWLS is a five-item instrument that assesses participants' judgment of their global life satisfaction (a sample item is "I am satisfied with my life"). Possible responses ranged from "Do not agree at all" (1) to "Very strongly agree" (7). Results from Blais et al., (1989) showed that the French version of the SWLS has high levels of reliability and validity with younger and older adults. The internal reliability coefficient at T1 for this scale was .88. Participants also completed a one-item measure of their general subjective physical health ("How would you rate your health at the present time?"; see Idler & Benyamini, 1997). Possible answers ranged from "Very poor" (-5) to "Very good" (+5). Mean average was 3.76 ($SD = 1.01$). Finally, participants provided demographic information (i.e., age, sex, income, and education).

At T2, positive affect was measured using the Positive Engagement subscale of the Exercise-Induced Feeling Inventory (EFI; Gauvin & Rejeski, 1993), an instrument that was developed specifically to assess feeling states in relation to physical activity. The Positive Engagement subscale consists of three items: enthusiastic, happy, and upbeat (in this study $\alpha = .80$). Participants were asked to indicate how they had felt during their physical activity class a few minutes earlier. Possible responses ranged from "Did not feel" (0) to "Felt very strongly" (4). Negative affect at T2 was measured using five items from the negative subscale of the Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen et al., 1988). Participants were asked to indicate the extent to which the five adjectives described how they felt a few minutes earlier during their physical activity class (sample item: irritable). Possible responses ranged from "Very little or not at all" (1) to "Extremely" (5). In this study, the internal coefficient reliability for the negative subscale of the PANAS was .61. Finally, at T3 participants completed the SWLS a second time ($\alpha = .88$).

RESULTS

On average, participants reported engaging in physical activity at the APADOR club 2.48 times per week ($SD = 1.06$), each time for a period of 66.51 minutes ($SD = 90.98$). Means, standard deviations and Cronbach alphas for the various subscales are presented in Table 1, and Pearson correlations are presented in Table 2. Harmonious and obsessive passion were positively correlated ($r = .63, p < .001$), which blurred the relationships between both types of passion and SWB.¹ In order

¹ A positive relationship between harmonious and obsessive passion has been reported in several other studies (e.g., Mageau et al., 2005; Ratelle et al., 2004; Rousseau, Vallerand, Ratelle, Mageau, & Provencher, 2002; Vallerand et al., 2003; Vallerand et al., 2006), and can be explained by the common elements shared between the two types of passion, including the fact that both harmonious and obsessive passion refer to an activity that people like, find important, and in which they invest time and energy.

Table 1. Means, Standard Deviations and Cronbach Alphas for Subscales

	Means	SD	Alphas
1. Harmonious passion (T1)	4.92	1.09	.82
2. Obsessive passion (T1)	3.35	1.39	.84
3. Subjective well-being (T1)	5.44	0.91	.88
4. Positive affect (T2)	3.18	0.70	.80
5. Negative affect (T2)	1.13	0.29	.61
6. Subjective well-being (T3)	5.37	0.95	.88

Note: All means are on a 1 to 7 scale, except for positive affect, which is on a 0 to 4 scale, and negative affect, which is on a 1 to 5 scale. T1 = Time 1; T2 = Time 2; T3 = Time 3. *N* varies between 114 and 119.

to examine the unique relationship between each type of passion and SWB, partial correlations were conducted. Results showed that after controlling for harmonious passion, obsessive passion was negatively and significantly related to SWB at T3 ($pr = -.30, p < .001$). After controlling for obsessive passion, harmonious passion was positively associated with SWB at T3 ($pr = .38, p < .001$).

Results from a MANOVA comparing women ($n = 70$) and men ($n = 49$) on the various subscales revealed significant sex differences, Wilks' $\lambda = .90$, exact $F(5, 109) = 2.40, p < .05$. Univariate F -tests showed that men reported slightly higher scores than women on obsessive passion, $F(1, 117) = 4.75, p < .05$, and SWB at T1, $F(1, 117) = 6.46, p < .05$. These results have not been obtained in previous studies on passion and thus require replication. A MANOVA comparing participants aged 65 years or less ($n = 58$) and participants aged 66 years or more ($n = 61$) on the various subscales revealed no significant age differences, Wilks' $\lambda = .92$, exact $F(6, 104) = 1.50, p = .18$. Finally, a MANOVA comparing participants who completed only the first questionnaire and participants who took part in all three phases of testing revealed no significant differences on the various subscales, Wilks' $\lambda = .99$, exact $F(3, 227) = 0.68, p = .57$.

Next, the adequacy of the hypothesized model was assessed through a path analysis. All hypothesized paths were modeled, and harmonious passion, obsessive passion, and SWB at T1 (all exogenous variables) were allowed to covary. Results showed that although all fit indices were acceptable [$N = 119; \chi^2(5) = 7.94, p = .16$; CFI = 0.985; NNFI = 0.956; RMSEA = .071], three of the hypothesized paths were not significant. SWB at T1 was not significantly related to positive affect or negative affect at T2, and the hypothesized path between negative affect at T2 and SWB at T3 was not significant. Furthermore, Lagrange multipliers indices suggested that a path between obsessive passion at T1 and SWB at T3 be added. A modified model was thus tested after deleting the three non-significant paths and adding a path between obsessive passion at T1 and SWB at T3. Results

Table 2. Pearson Correlations Among Study Variables

Variables	1	2	3	4	5	6	7	8	9	10	11	12
1. Age												
2. Sex	.12											
3. Income	-.09	.42***										
4. Education	-.32***	.04	.40***									
5. Subjective physical health (T1)	.19*	.03	-.08	-.11								
6. Frequency of engagement (T1)	-.05	.02	-.05	.07	.06							
7. Length of engagement (T1)	-.08	.06	.23	.12	.05	-.08						
8. Harmonious passion (T1)	.11	.13	-.11	-.21*	.18*	-.02	-.12					
9. Obsessive passion (T1)	.24**	.20*	-.19	-.26**	.03	-.02	-.06	.63***				
10. SWB (T1)	.11	.13	.24*	-.04	.17	.08	.02	.32***	.00			
11. Positive affect (T2)	.06	.01	-.03	-.15	.11	.01	-.07	.39***	.31***	.13		
12. Negative affect (T2)	.02	.14	-.11	-.15	-.08	.03	-.02	.12	.22*	-.04	-.04	
13. SWB (T3)	-.03	.15	.28**	.08	.24**	-.04	.06	.25**	-.05*	.74***	.32***	-.04

T1 = Time 1; T2 = Time 2; T3 = Time 3. N varies between 85 and 119. * $p < .05$, ** $p < .01$, *** $p < .001$.

showed that all fit indices were acceptable [$N = 119$; $\chi^2(7) = 3.48$, $p = .84$; CFI = 1.000; NNFI = 1.038; RMSEA = .000] and that all paths were significant (see Figure 1). Specifically, results showed that harmonious passion at T1 was positively associated with positive affect at T2 ($\beta = .38$), which was in turn positively associated with SWB at T3 ($\beta = .27$), controlling for SWB at T1 ($\beta = .70$). Thus, the more participants reported having a harmonious passion, the more they experienced positive affect during the practice of their passionate activity. In turn, situational positive affect was positively associated with increases in SWB between T1 and T3. Obsessive passion, on the other hand, was positively associated with negative affect at T2 ($\beta = .21$) and negatively associated with SWB at T3 ($\beta = -.13$). This suggests that higher levels of obsessive passion at T1 were associated with greater levels of situational negative affect at T2, and with greater decreases in SWB between T1 and T3. The design used in the present study (i.e., three phases of measurement) did not allow to test for alternative models.

Examination of the correlation matrix revealed that two variables, income and subjective physical health at T1, were positively and significantly related to SWB at T3, ($r = .28$, $p < .01$, and $r = .24$, $p < .01$, respectively). Consequently, an additional step was taken to examine if the addition of demographic variables would change the structure of the obtained model. The model shown in Figure 1 was re-run after adding paths from income and subjective physical health at T1 to SWB at T3. Although results revealed acceptable fit indices [$N = 119$; $\chi^2(11) = 5.57$, $p = .90$; CFI = 1.000; NNFI = 1.066; RMSEA = 0.000], neither income at T1 nor subjective physical health at T1 were significantly related to SWB at T3 ($\beta = 0.10$ in both cases). Adding these two demographic variables did not meaningfully change the values of the other paths, which suggests that the theoretical variables of passion and affect included in the model play a central role in the SWB experiences reported by older adults.

DISCUSSION

The present study, which is the first study to consider the role of passionate activities in older adults, makes an important contribution to the field of SWB by showing that taking part in a passionate activity in a harmonious manner can lead older adults to experience greater SWB, while taking part in a passionate activity in an obsessive manner can lead older adults to experience decreased SWB. Furthermore, results also show that the relationship between harmonious passion and SWB is best understood by considering older adults' experiences of positive affect during activity engagement. More specifically, engaging in a passionate activity in a harmonious manner can lead to increased positive affect, which can over time result in increases in well-being (Diener et al., 1991; Fredrickson, 2002). The present results are in line with findings from previous studies conducted with younger adults that showed that harmonious passion is associated with adaptive outcomes, including SWB (Vallerand et al., 2003; Vallerand et al., 2006; Vallerand et al.,

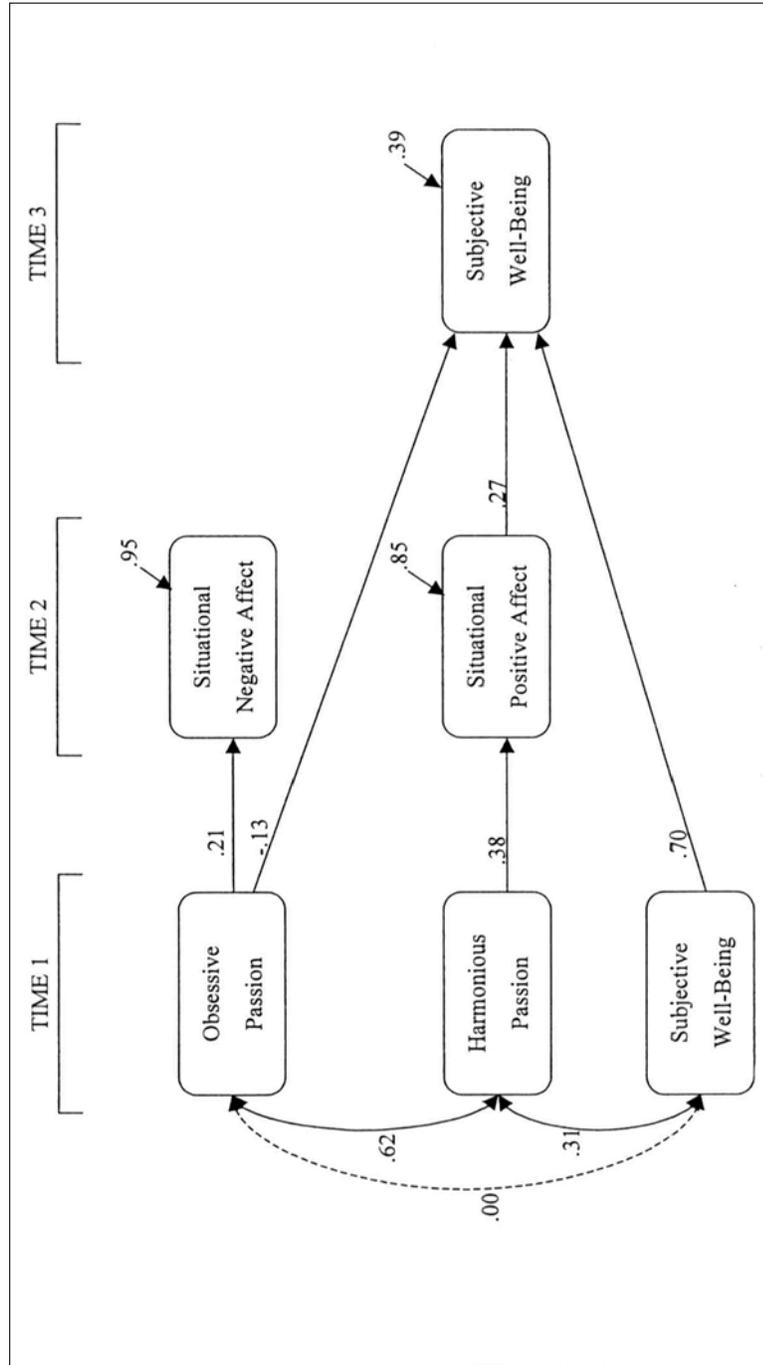


Figure 1. Final path analytic model for the relationships among passion (Time 1), positive and negative affect (Time 2), and subjective well-being (Time 3). All parameters are significant at $p < .05$. Nonsignificant paths are represented by dashed lines.

2007), but provide further information by showing that positive affect experienced within the purview of the activity mediate the relationship between harmonious passion and SWB.

The present results also showed that obsessive passion was related to higher levels of negative affect at T2, but contrary to the hypothesis, negative affect at T2 was not significantly related to SWB at T3. One explanation for this finding is that participants experienced little negative affect during activity engagement, as indicated by the low mean value for negative affect ($M = 1.13$). The low internal reliability coefficient for negative affect ($\alpha = .61$) might also have contributed to the lack of significant relationship between negative affect at T2 and SWB at T3. The significant relationship between obsessive passion and SWB at T3 suggests that another variable explains the relationship between these two variables. One such variable could be participants' experiences of negative affect *after* activity engagement. Because individuals with an obsessive passion come to be controlled by their activity, they might have to neglect or postpone doing other important activities (e.g., they might miss an appointment) in order to satisfy their need to perform their passionate activity. Doing so might lead these people to experience guilt or anxiety (Mageau et al., 2005), which could in turn undermine their SWB. Future research should ascertain this hypothesis.

The present results have practical implications, particularly with respect to the role of passionate activities during certain events in old age. Aging is likely to be marked by the occurrence of stressful life events (e.g., health problems, death of spouse or friends) that could result in decreased SWB (Krause, 1991). Having a harmonious passion might be particularly important during these times, as it could offer older adults a source of positive affect and, as a result, allow them to cope better during difficult times. Empirical evidence suggests that treatment strategies that emphasize behavioral activation, or activity engagement in desired activities, are effective in increasing SWB and reducing feelings of depression in younger and older adults (Sacco & Beck, 1995; Swallow & Segal, 1995). Considering the role of harmonious and obsessive passion could optimize the benefits of such interventions. Future research should examine the role of passion in SWB during stressful life events.

Some limitations need to be considered. First, the present study was based on a correlational design. Despite the use of a prospective design, results cannot be described in terms of causality. Second, since participants were taking part in physical activity classes, it is likely that they were healthier than the general population of older adults. It would be informative to replicate the present findings with older adults living in residences or nursing homes to determine if they, too, could benefit from having a harmonious passion. Third, although the present results are in line with the hypothesis that repeated experiences of positive affect can lead to greater SWB, the design used did not allow for a direct test of this assumption because affect was measured only once. In future studies, positive affect should be measured on several occasions over time to test the cumulative role of affect on

SWB. Fourth, positive and negative affect were measured using two different instruments. The two types of affect might be more easily comparable if two subscales from a same instrument were used. Furthermore, other measures of affect, such as behavioral measures (e.g., facial display of affect), might provide additional information to that obtained via paper and pencil tests. Finally, an issue that we were unable to resolve in the present article deals with the psychological processes involved in the relationship between obsessive passion and SWB. Neither positive nor negative affect experienced during activity engagement could explain the relationship between obsessive passion and SWB. We suggested that negative affect experienced after activity engagement (for instance, in the form of guilt), might help elucidate this relationship, but future studies will need to test this hypothesis.

In addition to the ideas discussed above, at least three issues deserve to be examined in future studies. First, aging is accompanied by physical and/or cognitive changes that can diminish older adults' capacity to perform certain activities (Baltes & Baltes, 1990; Baltes & Smith, 1999). Most older adults must, sooner or later, reduce or even put an end to the practice of some activities. This might include passionate activities. Future research should examine the adjustment process involved in dealing with activity termination as a function of the type of passion involved. If an activity is central in one's life, stopping it may have some negative effects on one's SWB. However, empirical evidence suggests that individuals who can disengage from their goals when these goals have become impossible to reach, and re-engage in new goals, show better psychological adjustment (Wrosch, Heckhausen, & Lachman, 2000; Wrosch, Scheier, Carver, & Schulz, 2003). If they have to terminate their passionate activity, older adults with an obsessive passion might be more likely to experience negative psychological outcomes than those with a harmonious passion. Because individuals with an obsessive passion experience a pressure, or an urge, to engage in their passionate activity (Vallerand et al., 2003), they might persist in trying to engage in their activity even when they should abandon it. In turn, this misplaced persistence might lead them to experience greater levels of distress. Individuals with a harmonious passion, on the other hand, are believed to have control over their activity (Vallerand et al., 2003). They might therefore be more flexible and open to the idea of terminating their participation in their passionate activity and entertain the idea of engaging in other activities. Harmonious passion might allow older adults to deal with activity termination in a healthier way than obsessive passion. Future research on this issue might prove fruitful.

Because the aging process can be shaped and influenced by individuals' previous experiences, a second area for future research on passion should focus on passion across the life span. Throughout their life, most individuals go through several major stages such as getting a first full-time job, getting married, having children, and retiring. Such events can require important adjustments that may influence many spheres of one's life, including the practice of passionate

activities. What happens to people's passionate activities as they go through important life events? For instance, do recent retirees regain passion for an old activity or do they develop a passion toward a new activity? And what is the impact of such changes in passion on SWB? Future research is needed on these issues as it would further our knowledge on the role of passion in the aging process.

Finally, also in order to gain a better understanding of the role of passionate activities in the aging process, future studies should examine the relationship between passion and physical health. Harmonious passion might be expected to positively contribute not only to older adults' psychological health, but also to their physical health. Harmonious passion seems to facilitate the experience of positive affect (Mageau et al., 2005; Vallerand et al., 2003; the present research), which has been shown to shorten the duration of negative emotional arousal, and as a result, contributes to increased physical health (Fredrickson, 2001; Salovey, Rothman, Detweiler, & Steward, 2000). Obsessive passion, on the other hand, may undermine physical health because of its relationship to negative affect (Mageau et al., 2005; Ratelle, Vallerand, Mageau, Rousseau, & Provencher, 2004; Vallerand et al., 2003; the present research). We believe that future research on this issue could yield both theoretical and applied benefits.

CONCLUSION

By focusing on passionate activities that people highly value, find interesting, and to which they devote time and energy, Vallerand et al. (2003) have identified an area of research that has long been overlooked despite its potentially important role in individuals' lives. Results from the present study extend the existing literature on activity engagement and psychological health by demonstrating that passion can play an important role in determining outcomes associated with activity engagement in older adults. Because this study is the first to examine the relationships between harmonious and obsessive passion and SWB among older adults, much remains to be done. However, theoretical and practical implications from these studies demonstrate the potential usefulness of the conceptualization of passion for the field of aging. It is hoped that future research on passion will provide further information that will help older adults fully enjoy their life.

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