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### The Greatest Veneration: Humor as a Coping Strategy for the Challenges of Aging

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## **The Greatest Veneration: Humor as a Coping Strategy for the Challenges of Aging**

RONALD A. BERK, PhD

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*One hundred and thirty million Traditionalists and Baby Boomers are tackling the reality of aging. It may be captured by the lyrics to the Alan Menken–Tim Rice song “A Whole New World.” The salient characteristics and experiences of these two generations are examined along with a few of the mental and physical challenges they are encountering. Then the research on and applications of humor and laughter to these challenges are reviewed. Particular attention is given to the psychological, physiological, and medical studies that have specific implications for seniors. Coping strategies to deal with daily life challenges are described in terms of detachment from crises and problem situations and coping with interpersonal conflict. The Coping Humor Scale is provided for readers to assess their own coping skills. Then a list of techniques seniors can use to improve their own coping skills, including how to search for humor opportunities, is provided. Despite the potential research-based benefits of humor and laughter, their application to the lives of seniors are not well known. Those benefits should be part of the trend toward complementary or alternative medical treatments over the past two decades. It does not get any more “alternative” than “humor.”*

**KEYWORDS** *health care, geriatrics, education, mental health, older adult, psychosocial intervention, humor, stress management, coping strategies*

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## WARNING

This article contains humor, which may not be appropriate for some of you, particularly if you have the sense of humor of a rutabaga. You will miss this trailblazing, earth-shattering contribution to the humor-gerontological literature. But that's okay. To accommodate your "serious" perspective, this article is *closed captioned for the Humor-Impaired*. After each attempt at jocularly, the punch line will be explained in ( ) so that you can laugh along with the rest of us.

## WHO IS AGING? SOME DEFINITIONS

Technically, everybody on earth, including your pets and livestock, as well as extraterrestrials on various planets are aging; if not, they would be expired or preserved in a cryogenics storage cylinder. For the purposes of this article, "aging" refers to "older to reeally OLD people." Now I bet you're really confused. Me too. It's all relative. Just ask your kids who they consider to be old. It's probably easier to define "old" in terms of generations.

### Generational Definition

The literature on the multigenerational workplace has defined "age cohorts" that share unique, collective life experiences, values, attitudes, behaviors, and memories that are different from one another (Dencker, Joshi, & Martocchio, 2008; Eyerman & Turner, 1998; Lancaster & Stillman, 2002; Schuman & Scott, 2004). Each generation has a set of characteristics circumscribed by specific birth years and significant life events (Kupperschmidt, 2000; Twenge & Campbell, 2008). Although there is not perfect agreement on these years and events, there is consensus and sufficient evidence among most published sources on the characteristics presented in this article.

Those generations closest to the concept of "old" are the Traditionalists and Baby Boomers. The characteristics and life-shaping events of those two generations (adapted from DelCampo, Haggerty, Haney, & Knippel, 2010; Junco & Mastrodicasa, 2007; Magnuson & Alexander, 2008; Patota, Schwartz, & Schwartz, 2007) are listed in Table 1 (Berk, 2013).

### Traditionalists (Silent Generation)

The Traditionalists (born 1922–1945) have been partitioned into two groups by Magnuson and Alexander (2008): Civic/GI (1922–1931) and Adaptive (1932–1945).

**TABLE 1** Characteristics and Life-Shaping Events of Traditionalists and Boomers

Traditionalists Born 1922–1945	Baby Boomers Born 1946–1965
Characteristics	Characteristics
Patriotic	Reject Authority
Conservative	Individualistic
Respect Authority	Competitive
Honor/Loyalty	Workaholics
Conformity	Career Focus
Disciplined	Politically Correct
Collaborative	Social Causes
Civic Pride	Optimistic
Personal Sacrifice	Idealistic
Hard Work	Questioned Core Values
Patience	
Life-Shaping Events	Life-Shaping Events
Great Depression	Vietnam War
WWII	Watergate
New Deal	Civil Rights
Radio	Women's Rights
GI Bill	Gas Crisis
B & W TV	Man on the Moon
	Woodstock
	Ralph Nader
	Color TV
	Computers
	Kennedy/Nixon
	Assassinations:
	Kennedys & MLK, Jr.

1. *Civic/GI*: This group is what Tom Brokaw profiled as the “Greatest Generation” (2004). These oldies are the children of the Depression and many are World War II veterans, dying at an estimated rate of 1,000 a day. They are also called the “Silent Generation” because they bottled up their emotions and kept silent, even about their war experiences. Some are still working beyond their retirement years. Celebrity examples include Barbara Walters, Warren Buffet, Betty White, Angela Lansbury, Henry Kissinger, and Ruth Bader Ginsburg. Among the 20 million Civic/GIs, 8% are in the workforce.
2. *Adaptive*: This companion group shares a lot in common with the Civic/GI, except the Depression and World War II. Instead, many are veterans of the Korean and Vietnam Wars. They experienced major social changes, moving between the “old world” of the hardworking Civic/GIs and the “new world” of civil rights, feminism, and Vietnam War protests. Among the 30 million in this group, the 12% still in the workforce are well past the traditional retirement age. Many were 1960s cultural pioneers

(now in their 70s), like Gloria Steinem, Colin Powell, Ralph Nader, Mel Brooks, Neil Diamond, and Tina Turner. Combined with the Civic/GIs, there are 50 million Traditionalists, 69 or older.

### Baby Boomers (Me Generation)

Now it's Boomer time (born 1946–1964). Most grew up in the '50s and '60s. Nearly 50 to 68 in age, the Boomers were the largest generation of 80 million (1 in 4 Americans) until the Net Generation (aka Millennials) popped out. Boomers are remembered, mostly by other Boomers, for rocking the '60s with Vietnam War protests on college campuses, Woodstock, experimenting with hallucinogens, and the Broadway musical *Hair* (based on the TV program *The Brady Bunch*). They demanded that college administrators give them a voice in educational decisions that affected them, such as the food in the cafeteria. They expressed their collective voice, not always on key, by singing social commentary folk songs like "Michael Row the Boat Ashore" and "Puff," while sitting in the entrances to administration buildings.

In addition to their social and political activism and ubiquitous bell-bottom pants from Army-Navy surplus stores, Boomers are highly competitive and workaholics. Their commitment to careers coupled with the Women's and Civil Rights Movements led to dual careers by many parents, struggles to balance careers with family, and married women retaining their last names or hyphenating them with their husbands'. These struggles and hyphens increased divorce rates (36%).

Now they are turning 65 at the rate of more than 10,000 per day (Social Security Administration, 2012), which is driving MEDICARE government workers nuts, but their ideas about retirement are redefining what it means to age, which is really good because we still haven't been able to define it. They comprise a third of the current workforce and, for a variety of reasons, including commitment to careers, many are not retiring. Boomers Bill Clinton, Hillary Rodham Clinton, Bill Gates, Oprah Winfrey, Jerry Seinfeld, Bill Crystal, Christiane Amanpour, and a ginormous chunk of world-wide faculty and administrators are still producing.

### Target Aging Population

So the aging, but not necessarily retiring, group of 130 million, aged 50 to infinity (and older) is our target population. Five million of those 65 and over are still working, and 80% of the Boomers envision working in some form during their retirement years. According to the Administration on Aging of the U.S. Department of Health and Human Services, there is a significant increase in the numbers of people who live to old age, which has been attributed to the advances in science, technology, and medicine, and

improvements in nutrition, education, and Viagra®. In other words, with increased life expectancy and buckets of pharmaceuticals, these oldies may be kickin' for quite some time. Rockette-wise, how can humor contribute to this kickin'?

## DO SENIORS HAVE A SENSE OF HUMOR?

You bet, but not all. Checkout this blog site: <http://seniorcitizenhumor.blogspot.com>. You will find "Geezer Planet: Life in the Slow Lane." It is chock full of humor. For example, since more and more seniors are texting and tweeting, there appears to be a need for STC (Senior Texting Codes). Here are a half dozen to get us started:

ATD: At The Doctor's  
 BYOT: Bring Your Own Teeth  
 DWI: Driving While Incontinent  
 GGPBL: Gotta Go, Pacemaker Battery Low!  
 ROTFL. . .CGU: Rolling On The Floor Laughing. . .and Can't Get Up  
 TTYL: Talk To You Louder

There are heads for the Gray Knights Motorcycle Club, Geezers Gone Wild, Memory Lane, GP Blog Buddies, and Columnist, Arthur Ritis, and a list of hilarious bumper stickers, such as

- CONTINGENCY DOCTORS: If you don't live . . . You don't pay
- I'm speeding because I have to get there before I forget where I'm going
- Florida: God's waiting room
- Over What Hill? Where? When? I don't remember any hill.

This self-deprecating humor about the aging process based on the common experiences geezers share is really healthy. Let's examine what the research evidence reveals.

## RESEARCH ON HUMOR AND LAUGHTER

The health care literature is larded with unpublished papers, articles, and books on the benefits of humor and laughter. However, while there are thousands of papers, only a measly 100 are published scientific studies that were conducted over the past half century. Several critical reviews of these studies appeared within the last decade (Berk, 2001, 2002, 2004b; Martin, 2001, 2003, 2006; McGhee, 1999, 2010; Provine, 2000). Those reviews furnish

a somewhat sobering, realistic assessment of the evidence to pinpoint precisely what we know and what we don't know (but would like to know). Martin (2006) provides the most comprehensive review.

The research domain on humor is considerably broader than you might imagine. There are two primary streams of research: the psychological and the physiological. The *psychological effects* relate primarily to “humor” as a coping mechanism and, to a lesser extent, its enhancement of interpersonal relationships; the *physiological effects* relate to the impact of “laughter” on the body: central nervous, muscular, respiratory, circulatory, endocrine, immune, and cardiovascular systems.

Martin (2006) partitions the “humor” research into four categories: (1) affiliative (positive—facilitates relationships), (2) self-enhancing (positive—using humor to cope), (3) aggressive (criticize or manipulate others), and (4) self-defeating (self-deprecating). The remainder of this article will focus primarily on the *positive psychology* of humor that can contribute to improving the mental and physical well-being of our aging population. Aggressive forms of humor, such as put-downs, sarcasm, ridicule, and cruel and disparaging jokes, are not the most appropriate techniques to help seniors cruise through their close encounters with their caregivers and prolong life. In fact, these forms can prematurely shorten their lives, if you get my drift.

Given the previous reviews with research citations which are readily available, there is no point in reiterating what these reviews have contributed. Instead, let's consider a *CliffsNotes*® version of the conclusions (Berk, 2004a). I have summarized the results in the form of a *NEW* prescription for the (fictitious) medication called “MIRTHIUM II” (see Figure 1). There is a top 10 list of the “benefits” of humor and laughter and top 10 “warnings” of areas where definitive evidence doesn't exist yet. The latter list addresses the enthusiastic claims by the media and even members of the medical community, which is based more on wishful thinking than incontrovertible evidence. These lists are real; everything else is for your entertainment. Perhaps, many of us could profit from a dose of MIRTHIUM II® every day.

## SAMPLE OF MEDICAL STUDIES WITH SENIORS

Among the studies of the effects of humor included in the previous reviews and MIRTHIUM II, there are several that specifically employed seniors as subjects (McGhee, 2010). The conclusions from those studies include the following:

1. Lower levels of depression and anxiety among older patients with chronic obstructive pulmonary disease (Lebowitz, 2002)



*“Oscar makes me take Mirthium II® every day before I go to work.”  
—Felix Unger (The Odd Couple)*

**MIRTHIUM II®**  
(Generic: Laughtilyouplotz)

If you have been diagnosed with chronic humor impairment, jocularitis, jesticulosis, or just plain “seriousness,” talk to your humor professional about Mirthium II®. This is the more potent, turbo-charged version of Mirthium®.

Reported benefits are based on randomized, quadruple-blind (even the researcher doesn’t have a clue what’s happening), placebo, controlled clinical trials worldwide on 9 semi-human HMO CEOs, conducted by several disreputable, highly stressed university researchers. Those results were replicated in studies with 3 blind mice, 5 Chinese hamsters, and a partridge in a pear tree, plus a convenience sample of sheep from New Zealand.

**BENEFITS**

Based on nearly 100 scientific studies of the psychophysiological effects of humor and laughter conducted over the past half century, the major benefits follow:

***Humor***

- 1. Reduces negative emotional consequences of stress, anxiety, and tension
- 2. Decreases depression, loneliness, and anger
- 3. Improves mood
- 4. Increases self-esteem
- 5. Promotes a sense of empowerment

***Laughter***

- 6. Increases pain tolerance and threshold
- 7. Improves respiration and breathing (exercises lungs and raises blood oxygen levels)
- 8. Improves mental functioning (alertness, creativity, and memory)
- 9. Exercises facial, abdominal, and thoracic muscles
- 10. Relaxes muscles/decreases muscle tension

**WARNINGS**

There are certain claims or common beliefs about the effects of Mirthium II® which are false. Research has been conducted on all of the following topics. However, the scarcity of studies, weaknesses in design and execution, or conflicting results render their conclusions as questionable. Seriously, despite the encouraging direction of the findings, there is insufficient research evidence to support the following claims:

***Humor***

- 1. Decreases symptoms of illness and medical problems
- 2. Enhances interpersonal relationships, intimacy, and marriage satisfaction
- 3. Increases longevity

***Laughter***

- 4. Stimulates the production of endorphins which decrease pain

**FIGURE 1** MIRTHIUM II: A prescription for humor.

5. Prevents or alleviates pain
6. Lowers heart rate
7. Lowers blood pressure
8. Decreases heart disease
9. Decreases stress hormones (serum cortisol, dopac, and epinephrine)
10. Boosts immune system functions to fight viral and bacterial infections and disease
  - increases immunoglobulin A(IgA), M(IgM), and G(IgG)
  - increases natural killer cell activity (NKA)
  - increases number of activated T-lymphocytes (T4 and CD4 cells)
  - increases T-cell helper/suppressor ratio
  - increases levels of Complement 3
  - increases number of B-cells
  - increases gamma-interferon levels

## DOSAGE

Place 1 delayed-release, red transdermal patch on the tip of your nose every 24 hours

- Recommended by the American Association of Polymorphous Prescriptions
- #1 choice of professors, physicians, nurses, administrators, accountants, engineers, IT specialists, lawyers, insurance brokers, IRS auditors, FBI agents, and TSA personnel
- **FAST RESULTS:** Laugh within 30 min. after 1st dose, as patch dissolves in your nose

## CONTRAINDICATIONS

Mirthium II® is contraindicated in humans and assorted livestock who have a known hypersensitivity to anything or with nail fungus, a hernia, humongous prostate, cataracts, or irritable howl syndrome. Tell your humor professional about any over-, under-, or around-the-counter medications. Mirthium II® interacts with every medication.

## SIDE EFFECTS

No severe allergic reactions other than convulsive hysteria and shrieking like a banshee. If laughter continues for more than 48 hours, you should be so lucky. Side effects include: trichinosis, halitosis, gingivitis, hallucinations, drooling, erectile dysfunction (of course), sleep apnea, athlete's foot, urge to smoke, memory loss, gangrene, incontinence, and necrophilia.

## QUESTIONS

Ask your humor professional about Mirthium II® today. Call 1-555-YO-FUNNY for your free information guide on Mirthium II® or visit <http://www.mirthium.com>.

## BERK PHARMACEUTICALS

*(A name you used to be able to trust!)*

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FIGURE 1 (Continued).

2. Lower distress levels among breast cancer patients before and after surgery (Carver et al., 1993; Johnson, 2002; Roussi, Krikeli, Hatzidimitriou, & Koutri, 2007; Wong, 2005)
3. Fewer depressive symptoms among chronic arthritic patients (Skevington & White, 1998) and older recent widows (Ong, 2004)
4. Better adaptation of elderly when moved to a new residential care facility (Meiselman, 2003)
5. Reduce chronic pain, keep BP down, reduce inflammation, and boost spirits (Adams & McGuire, 1986)
6. Improves mood of patients in a rehabilitation hospital with brain and spinal cord injuries, severe arthritis, neurological disorders, and amputations (Schmitt, 1990)

## COPING STRATEGIES TO DEAL WITH DAILY LIFE CHALLENGES

Over half of the published studies on humor and laughter have concentrated on how to conquer the consequences of stress, anxiety, and tension. The self-enhancing uses of humor as a coping mechanism have, perhaps, the greatest potential for seniors. Considering all we know about these benefits, how can Traditionalists and Boomers leverage this information as they encounter the barrage of mental and physical challenges during the aging process?

The research evidence suggests several strategies to deal with the daily stressors seniors will encounter. The easiest one to apply was described over a century ago: The primary psychological function of humor is “[T]o detach us from our world of good and evil, of loss and gain, and enable us to see it in proper perspective. It frees us from vanity on the one hand and from pessimism on the other by keeping us larger than what we do and greater than what can happen to us” (Kline, 1907, p. 438).

### Detachment from Crises and Problem Situations

#### DETACHMENT

First, you should know that *detachment* is derived from two Latin root words, “de,” meaning, “remove,” and “tachmentus,” meaning, “this javelin from my skull.” It is one of the most effective techniques for coping with the day-to-day tasks and challenges one must tackle. Using humor to distance oneself from distasteful, harmful, or scary situations enables one to disengage mentally and, albeit temporarily, escape from reality. It puts all that we do into a broader perspective.

This function of detachment, which considers humor as an adaptive coping mechanism, is the conceptualization of humor adopted by psychological theorists such as Sigmund Freud, Gordon Allport, Rollo May, and Dr.

Phil. Stepping back and seeing humor in a situation liberates us from our own negative emotional responses to that situation. It promotes a sense of objectivity that buffers those responses. Although humor may not always eliminate them, at least it can temporarily suppress them.

### *M\*A\*S\*H*

Here's one test for seniors to determine their ability to use humor to detach the next time they do anything. Consider the classic rambunctious character of Hawkeye Pierce on *M\*A\*S\*H*. Imagine playing his role in the workplace, home, assisted living facility, or hospital. See, now you're smiling. Some seniors may have already assumed that role. Hawkeye's constant joking with his colleagues and patients, even the banter in the operating room (OR), permitted him to distance himself from his primary stressor, the Korean War, and all the other daily stressors. (NOTE: "banter" is derived from the French word, *kibbitz*, meaning literally, "to torment Frank Burns.")

### BANTER

Do seniors normally fool around, joke, tease, or kid the people or pets with whom they come in contact? "No." Well, maybe they should. This *banter* is non-threatening and easy to execute any time in any place. It creates a *fun persona*. When colleagues or friends run into them, they will expect them to joke. Whether they are working, collecting their mail, shopping, or engaging in criminal activity, it's possible to set the tone of any conversation or gesture with banter, hopefully before they are arrested.

Banter in the workplace can forge the organizational culture by facilitating the socialization of employees (Lynch, 2010; Plester, 2009; Plester & Orams, 2008; Plester & Sayers, 2007). Plester and Sayers (2007) identified six functions of banter in the information technology (IT) industry: (1) making a point, (2) boredom busting, (3) socialization, (4) celebrating differences, (5) displaying the culture, and (6) highlighting and defining status. Personal characteristics were often the target of the banter. Although banter can produce negative effects by jocular abuse to deflate someone else's ego, it also can serve as a positive vehicle for socialization.

This type of banter establishes a personal rapport, positive connection, and mirthful expectation with everyone, and a playful atmosphere in the doctor's office or hospital room. No preparation, no practice, no affectation, and no jokes are required. A senior is just being his or her lovable self. This type of humor will set the stage for other forms of humor, which will be successful because of the relationships that have been built with their friends, doctors, and nurses.

## BANTER BENEFITS

- Builds humor confidence
- Chops down barriers with family, friends, colleagues, and medical staff
- Facilitates interpersonal connections
- Reduces stress, anxiety, and tension
- Increases improvisation and ad-libbing skills
- Creates a playful tone or atmosphere anywhere

## BANTER CAUTIONS

- DO NOT tease people about personal characteristics or sensitive issues that could be hurtful
- DO NOT put down anybody
- DO NOT joke using sarcasm

The coping benefit is derived from “positive” bantering with a significant other, aide, colleagues, friends, and, especially, all medical personnel encountered during routine office visits, treatment regimens, and hospital stays. It is also helpful in dealing with difficult people and situations that drive you nuts. Although the banter may be annoying to a few of the bantees, especially those who are humor-impaired, its therapeutic value may be worth that cost.

## Coping With Interpersonal Conflict

The emotional response to an uncomfortable or threatening situation with a colleague or friend as well as an emergency medical technician (EMT) in the ambulance or doctor or nurse in the emergency room (ER) is typically negative, such as feelings of anxiety, tension, stress, worry, embarrassment, anger, frustration, hostility, grief, and incontinence. Those reactions can submerge you so deeply IN a problem that you can't see the problem. They can cripple your ability to function (aka “speak coherently” or “do your job”) in your workplace, condo on the beach, or home office.

Well-known psychiatrists like Drs. Leo Marvin (*What About Bob?*), Sidney Freedman (*M\*A\*S\*H*), and Hannibal Lecter (*The Silence of the Lambs*) report that people with severe mental disorders, such as Michael Myers, Freddy Krueger, Norman Bates, and guests on *The Jerry Springer Show*, lack a sense of humor. They can't detach from their issues. You have to detach, unless you want to be on *Jerry Springer*.

Almost any distraction can take your mind off of the negative stressor momentarily. Remember the rhythmic breathing exercises during your Lamaze classes? “No.” Sure you do. Those exercises were designed to distract you from the excruciating pains during labor. Did they work? “Maybe a tiny

bit. But screaming really evil words at my significant other was more effective.” Had you known about the effects of humor, labor would have been a breeze (with a little help from the epidural). (*SIDEBAR*: Many women “practice” conscious breathing during every day stressful situations, like being caught in traffic, running late for an important meeting, or worrying about any number of things [Lothian & De Vries, 2010]).

Other than breathing, humor can systematically distance you from these same stressors and threats to our sanity. Humor can jolt us out of our habitual frame of mind. Within this context, being “out of your mind” promotes a sense of control, self-protection, empowerment, and superiority OVER the problem. In other words, *you* rule. You’re Rambo or Ramboette in Bermuda shorts and black socks.

## DO SENIORS USE HUMOR TO COPE?

If humor can be used as a coping technique for doctors and nurses dealing with horrific injuries in the ER (Keller & Koenig, 1989; Rosenberg, 1991), it can certainly be used to cope with a senior’s daily challenges as well as the accidents, disease, pestilence, plague, locusts, and so on encountered in the aging process. Positive humor, such as good-natured joking and banter, can help them cope with stressors, reduce interpersonal tensions, and improve social relationships, especially if they laugh at themselves. It is important to cultivate a playful attitude and sense of fun in all that they do. Using humor will make them more resilient, emotionally more flexible, and give them the ability to bend without breaking.

The most important message of this article is (Isn’t this exciting? Are you on the edge of your keyboard?): Having a great sense of humor is fantastic, but what’s most critical is that *SENIORS MUST USE THAT HUMOR TO COPE WITH LIFE’S CHALLENGES*. If they store their humor in a shoebox and don’t use it, they’ve wasted its potential to help when they need it most. It’s when they face a crisis or the pain and suffering on your aging journey, that humor counts. That’s when it can make a difference in surviving the event. It’s how they respond to aversive stimuli with “*Equanimity, plus humor, under duress*.” That’s the most valuable takeaway from this paragraph.

## Coping Humor Scale

Do seniors use humor to cope with difficult people or situations in their lives? Let’s find out. Please have a senior nearby in your office, house, or neighborhood complete the *Coping Humor Scale* (see Figure 2) (Martin, 1996, 2003; Martin & Lefcourt, 1983). Add up the seven scores corresponding to the answers. That total score indicates the extent to which that senior is actually

**DIRECTIONS:** The purpose of this scale is to measure the degree to which you use humor to cope with stressful situations. Indicate the extent to which you agree or disagree with the following 7 statements. *Circle* your responses using these choices:

- SD** = Strongly Disagree
- MD** = Mildly Disagree
- MA** = Mildly Agree
- SA** = Strongly Agree

1. I often lose my sense of humor when I'm having problems.	<b>SD</b> (3)	<b>MD</b> (2)	<b>MA</b> (1)	<b>SA</b> (0)
2. I have often found that my problems have been greatly reduced when I tried to find something funny in them.	<b>SD</b> (0)	<b>MD</b> (1)	<b>MA</b> (2)	<b>SA</b> (3)
3. I usually look for something comical to say when I am in tense situations.	<b>SD</b> (0)	<b>MD</b> (1)	<b>MA</b> (2)	<b>SA</b> (3)
4. I must admit my life would probably be easier if I had more of a sense of humor.	<b>SD</b> (3)	<b>MD</b> (2)	<b>MA</b> (1)	<b>SA</b> (0)
5. I have often felt that if I am in a situation where I have to either cry or laugh, it's better to laugh.	<b>SD</b> (0)	<b>MD</b> (1)	<b>MA</b> (2)	<b>SA</b> (3)
6. I usually find something to laugh or joke about even in trying situations.	<b>SD</b> (0)	<b>MD</b> (1)	<b>MA</b> (2)	<b>SA</b> (3)
7. It has been my experience that humor is often a very effective way of coping with problems.	<b>SD</b> (0)	<b>MD</b> (1)	<b>MA</b> (2)	<b>SA</b> (3)

**TOTAL SCORE:** \_\_\_\_\_

**Scoring:** Add the numbers under your responses to the 7 items. The score range is 0–21. Scores *14 and higher* indicate you

- are less adversely affected by stressful life events
- show a greater ability to cope more effectively with various stressors
- do not take yourself too seriously

(Norm sample: Mean = 13, SD = 3.5; coefficient alpha = .60–.70)

**FIGURE 2** *Coping Humor Scale (CHS).*

using humor to cope. On the 0–21 scale, if the score was 14 or above, that senior is on track to using humor to cope when it counts. But there is always room for improvement. If the score was less than 14, the humor skills can be improved to better cope.

How Can Seniors Improve Their Coping Skills?

Is it possible to become a better humor copier? Absolutely. In fact, a study of a group of seniors taking an 8-Step Humor Skills Program demonstrated that the group that actively worked on improving their sense of humor was better at using humor to cope with daily stressors than the passive humor group (Gunderson, 1998).

The first step toward CopingWorld is for every senior to discard any negative joke baggage they may still possess. Toss it out. If anyone tried to be funny and bombed, he or she should fawgetaboutit. I had the same experience, but I kept doing it, only to be rejected over and over again. What was I thinking?

Stand-up jokes are very difficult to execute effectively. It is so tempting to tell a joke you heard that was sooo funny. But few of us can deliver it the same way we heard it. So it's best not to think about past joke-telling and failures. Instead, seniors should be natural and tell real stories that are funny, not the joke they heard on Fallon last night. The anecdote is one of the lowest risk and most common forms of humor, whether about sports, doctor visits, parties, or other experiences.

### Searching for Humor Opportunities

Here are a few opportunities to get seniors in the humor mood and laughing:

1. Spend more time around colleagues, friends, family, and enemies who laugh a lot and make you laugh
2. Watch comedies (TV, YouTube videos, and films), such as classic "Cosby" shows
3. Watch your favorite comedians regularly, such as Fallon's or Kimmel's monologue before going to sleep
4. Set up scheduled humor activities in the workplace (see Berk, 2003, 2009)
5. Join a humor club at your senior center
6. Banter with positive uplifting thoughts with everyone with whom you come in contact, even if they don't respond
7. Find humor in everyday situations, especially those that created stress in the past, such as standing in long lines, sitting in gridlock traffic, or waiting for surgery

Here are a few places where you can test your humor coping skills for a dry run:

- Home
- Workplace
- Senior Center
- Ambulance
- Hospital ER
- Hospital Room
- Rehabilitation Center
- Long-term Care Facility
- Shopping & Bank



- Pharmacy
- Doctors' Offices
- Clinics
- Restaurants
- Post Office

## CONCLUSIONS

There has been a trend toward complementary or alternative medical treatments over the past two decades (Bennett & Lengacher, 2006). It doesn't get any more "alternative" than "humor." With a solid research base that keeps growing, the applications of humor and laughter to the stressors and challenges of the aging process have greater use now and potential than ever before. The 130 million Traditionalists and Boomers who are tackling the reality of aging—whether at 50, 65, or 95—have some decisions to make daily in their attitudes and behaviors. Adding a mega-dose of humor or MIRTHIUM II to the buckets of pharmaceuticals many are already taking can change their lives forever. The positive psychology of banter alone can help them deal with mental and physical infirmities of every kind plus difficulties in their professional and personal relationships. That's significant. In fact, inserting humor and laughter into one's current arsenal of coping tools should be worthy of consideration by anyone who is aging. Did you hear the one about—"Two geezer professors and a Shetland pony walk into Starbucks® and . . ."?

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