

Significance Of Socio-Economic Factors On The Psychological Well-Being Of Retired Older Persons

Dr.K.Maheswari* and R.Maheswari**

*Assistant Professor of Social Work, Centre for Distance and Online Education, Bharathidasan University, Tiruchirappalli, Tamilnadu

** Ph.D. Scholar, Department of Social Work, Government Arts and Science College, Kurumbalur, Perambalur. Affiliated to Bharathidasan University, Tiruchirappalli.

Abstract

Ageing is an inevitable development phenomenon with several changes in the physical, hormonal, psychological, and social. Some dimensions of ageing grow and expand while others decline. The psychological Well-being of Older persons has become a focus of discussion due to the challenges of population ageing and the need to improve the well-being of the ageing population. The socioeconomic factor and psychological well-being of older persons are closely associated with each other and they contribute to the well-being of an individual. As age increases many factors other than health may affect the psychological well-being of retired older persons. Socioeconomic factors play a vital role in deciding the status and quality of life of retired older persons. Psychological well-being and socio-economic status may be protective factor for healthy ageing and also promotes longevity. Thus, the researcher has aimed to study the association between socio-economic factors and the psychological well-being of retired older persons residing in Perambalur District. The snowball sampling method was applied to collect the data from 60 respondents residing in Perambalur District. A standardized tool on psychological well-being developed by Ryff was used in this study. The major findings of the study showed that the majority of the respondents were male (73.3%) and more than half of the respondents had a low level of psychological well-being (55%) and 45 per cent of them had a high level of psychological well-being.

Keywords: Psychological Well-being, Old age, retired Government

employees, Socioeconomic factors.

Introduction

When people enter their 60s and beyond, the aging process leads to drastic changes in their physical, cognitive, social, and economic capabilities and needs, and also the end-of-life process starts. It was projected by World Health Organization(2017), that between 2015 and 2050, the proportion of the world's older adults is estimated to almost double from about 12% to 22% and this is an expected increase from 900 million to 2 billion people over the age of 60. Older people face physical and mental health challenges which need to be recognized. People usually think that older persons are sick, vulnerable, and weak and often act according to such beliefs (Nemmers, 2005). Levy et al (2002) described that older persons with more positive perceptions about aging lived long because of increased life expectancy in the 21st century. One of the major life-changing events is retirement for elderly people and there is a transition from economic independence to dependency. Retirement is a major changeover and older people experience anxiety, depression, and other negative changes in their self-concept and self-identity. Retirement shall also serve as an opportunity for a positive transition from career roles to strong family and community roles. It is said that about one-third of retirees have difficulty adjusting to certain aspects of retirement, such as reduced income, altered social roles, and entitlements.

Retirement may be a relief for people who have worked in boring or physically demanding jobs. Retirement affects physical and mental health and it may differ from person to person. Health and well-being describes psychological well-being as “the combination of feeling good and functioning effectively (Huppert). Studies have discovered that people with higher psychological well-being are more likely to live healthier and longer lives. They are also more likely to enjoy a better quality of life (Kubzansky). Psychological well-being is associated with fewer social problems among the aged and it observed that people with high psychological well-being are less likely to engage in anti-social activities. Gender, health, and living arrangement were considered important factors affecting older adults' health and well-being. As the Indian family structure changes over time, India's older population also needs detailed exploration for its well-being due to living arrangements. Adjusting for socioeconomic factors attenuated the relationships between widowhood and outcomes though most of the estimates remained statistically significant. Previously available literature

established an association between various socioeconomic factors with the health and well-being of older adults in India but the influencing factors have not been studied in detail. Thus, this study has formed an important direction for research on aging to describe the socioeconomic factors that are associated with psychological well-being in later life.

Review of Literature

Patel et al (2022) have examined the gender differences in psychological health and subjective well-being among older adults, focusing on childless older adults. This study has utilized data from Building a Knowledge Base on Population Aging in India (BKPAI). Psychological health and subjective well-being were examined for 9541 older adults aged 60 years and above. The findings of the study revealed that around one-fifth (21.2%) of the men had reported low psychological health, whereas around one-fourth (25.5%) of the women had reported low psychological health. Additionally, around 24 per cent of men and 29 per cent of women reported low subjective well-being. Higher education, community involvement, good health, wealth quintile, and residing in urban areas significantly decrease the odds of low subjective well-being and low psychological well-being among childless older adults. **Boro, Srivastava, and Saikia, (2021)** study investigated the association between the change in living arrangements after reaching the age of 60 years with subjective well-being and psychological health among older adults in India. The researchers have used the survey data "Building Knowledge Base on Population Ageing" in India conducted in 2011. The effective sample size for the study was 9231 older adults. Descriptive and bivariate analysis was done to present sample distribution and unadjusted estimates, respectively. The results showed that older adults with a change in living arrangement after turning 60 years had a higher prevalence of poor psychological health (27.5%) and low subjective well-being (36%). It was found that older adults with a change in living arrangement after turning old had 84% and 54% higher likelihood to report worst psychological health and worst subjective well-being compared to older adults who did not change their living arrangement after turning old. **Ladusingh and Ngangbam (2016)** proposed a well-being index of older adults that integrated five domains, namely, activities of daily living, health status, psychological strength, life accomplishment, and social ties, and examined potential socio-demographic, living arrangement, lifestyle and religiosity determinants of well-being. The present study used microdata of 1255 older adults from the recent pilot survey for the Longitudinal Aging Study in India

(LASI) conducted in 2010. The results suggest that normal activities of daily life, health, and social ties decline with advancing age, while life accomplishment remains stable over age. While smoking has a deterrent effect on well-being, better economic status, literacy, living in a joint family with the spouse, religiosity, and regular physical exercise have a statistically significant positive effect on the well-being of older adults in India. **Smith and Mather (2015)** revealed the relationship between savoring positive experiences and psychological well-being for older adults with higher and lower levels of resilience. A sample of 164 (74% female) older adults living in a large metropolitan area participated in this study. Participants were recruited from a continuing care retirement community and community centers in the surrounding area. In older adults, a greater ability to savor positive experiences and higher resilience both predicted greater happiness, lower depression, and greater satisfaction in psychological well-being. Savoring is associated with positive outcomes for people with higher and lower levels of resilience. However, the relationship between savoring and psychological well-being is stronger for people with lower resilience. **Chokkanathan (2013)** examined the relationship between religiosity, psychosocial resources, and psychological distress. Data was collected from 321 randomly selected older adults in Chennai, India. Structural equation modeling (SEM) was conducted to test the direct effect and the mediation models. The direct-effect model posited a direct inverse relationship between religiosity and psychological distress. The mediation model posited that psychosocial resources mediate the influence of religiosity on psychological distress. The results supported a partial mediation model. Psychosocial resources partially mediated the influence of religiosity on psychological distress. Various studies have shown that the socio-economic factors and psychological well-being of older persons are closely associated with each other and they contribute to the well-being of an individual.

Materials and Methods

In the present study, the researcher has adopted a descriptive research design and aimed to study the socioeconomic conditions of retired older persons and the psychological well-being experienced by them. The universe of the study consisted of all the retired older persons residing in Perambalur district. The sample unit was a person aged 60 years or above and the sample size was 60 retired older persons living in and around Perambalur District. The snowball sampling method was applied to collect the data from 60 respondents residing in Perambalur District. The interview schedule was considered the most suitable tool for data

collection and the interview technique was used to gather information from the retired older persons. The interview schedule covered the personal profile, family background, socioeconomic status, and facilities available at their homes and a standardized tool on psychological well-being developed by Ryff (1995) was used in this study. The psychological well-being scale consists of 42 items with 6 dimensions namely acceptance, positive relations, autonomy, environmental mastery, purpose in life, and personal growth. After data collection, each interview schedule was checked for errors if any. The raw data was analyzed using SPSS and statistical tests were applied to find out the association, difference, and relationship between the variables.

Results and Discussion

The raw data was processed and descriptive data analysis using basic statistics were used to understand the socio-demographic and economic background characteristics of the respondents' various tests were applied to know the association, difference, and relationship between variables. It is known from the study that nearly the majority of the respondents (56.6%) fall in the 'young old category' of 60 to 70 years of age. The majority of them are males (73.3%) and from the results, it is clear that the majority of the male respondents have worked with government/ organized sectors and as Indian culture expects, in this study too women were homemakers and 26.7 per cent had worked in state government jobs. and the literacy rate of women also worsens the conditions.

Regarding the marital status of the respondents, the majority of them are married and living with a spouse (71.7%) and it is also alarming to see that 30 per cent of them are living alone and widowhood changes the well-being of the elderly and it decides their living arrangements. It is evident from the study that 43.3 per cent of the respondents have two children and a majority of them (78.3%) are living in urban areas of Perambalur district. When it comes to income, they earn Rs.10,000 to 20,000/- per month and they have more than three dependents to share their income. All the respondents were government employees and they were working as teachers, clerks, electricity board employees, police departments, post office, etc. It is also found in the study that the majority of them (61%) had immovable and immovable properties such as a house, and agriculture land but after retirement, their status changed and the majority of them occupied rental houses. Almost all have said that they have drinking water, electricity, and toilet facilities at home.

Psychological Well-Being and Socio-Demographic Characteristics

When we see the various dimensions of psychological well-being of the respondents, it is revealed from the study that the majority of the respondents (63.3%) have a low level of autonomy in decision-making, though they have their own opinion they are influenced by others usually and 36.7 per cent of them have a high level of autonomy in decision making and this is due to the economic power, family headship, and family status. Regarding the environmental mastery dimension, little more than half of them (53.3%) have a low level of environmental mastery i.e., they are unable to do their daily living activities promptly and take up responsibilities whereas 46.7 per cent of them can maintain their activity levels and take up the duties to be done.

Regarding the personal growth dimension of psychological well-being, the majority of the respondents (61.7%) have a low level of personal growth and 38.3 per cent had a high level of personal growth and the respondents hesitated to take up new challenges and had not tried anything new for several years and they had been in a comfort zone as they were all employed. It is found in the study that little more than half of the respondents (51.7%) had a low level of positive relations and nearly half of them had a high level of positive relations and the respondents were able to maintain and develop a new relationship with friends, and family members and this may be due to their work experience it is easy for them to develop new acquaintance. This positive relations quality enhances the psychological well-being of the elderly and the rural elderly can maintain it more than the urban group.

It is evident from the study that, the majority of the respondents had a low level of purpose in life dimension (60%) of psychological well-being whereas 40 per cent of them had a high purpose in life and they have a feeling of accomplishment and think that this life has a purpose and its God's call. Regarding the self-acceptance of the respondents, more than half of the respondents (56.7%) had low self-acceptance and 43.3 per cent had a high level of self-acceptance the respondents accepted themselves and their personalities and this created positive well-being among the respondents. Regarding the overall score of psychological well-being of the respondents, more than half of them (55%) have a low level of psychological well-being whereas 45 per cent of them had a high level of psychological well-being. It is shown in the present study that there is no significant difference between gender, ownership of a house, and various dimensions of psychological well-being. There is a highly significant difference among the educational qualification of the respondents and various dimensions of well-being such as autonomy, environmental mastery, personal growth, positive relations, purpose in

life, and self- acceptance. From the mean score, it is understood that the higher the educational qualification higher will be the psychological well-being. There is no significant association between income, or age concerning various dimensions of psychological well-being of the respondents but there is a significant relationship between the income of the respondents and monthly expenditure, positive relation, personal growth, and self-acceptance. Thus, from the study, it is concluded that socioeconomic factors play a vital role in deciding the psychological well-being of retired older persons.

Social Work Interventions

- (1) Therapy interventions such as music therapy, progressive muscle relaxation, problem- solving therapy, psychosocial care, laughter therapy, peer counseling, etc. can be applied based on needs.
- (2) Exercise interventions -aerobic exercises, muscle strengthening, relaxation exercise, physical fitness training. Sports activities are the best medicine to keep people engaged and relaxed.
- (3) Educational interventions - these interventions can cover a range of topics including basic knowledge about diseases, mental health, exercise, healthy diet, sleep hygiene, and emotion regulation.
- (4) Social engagement interventions- intergenerational programmes, community-based day care, home visits by trained local volunteers, and social engagement groups. Socialization is very important to make older persons active and promotes longevity.
- (5) Multi-component -health care providers approved the multidisciplinary team-based approach comprising village doctors, ageing workers, and psychiatrists for providing integrated health care including the promotion of mental health. These interventions can improve symptoms, functioning, quality of life, and social inclusion when used in the treatment of people with poor mental health conditions.

Conclusion

Psychological well-being and socio-economic status may be protective factors for healthy ageing and also promotes longevity. In the present scenario and increased mental health

problems in the general population and older adults, developing and implementing sustainable and effective psychosocial interventions to support good psychological well-being are more important. Meaningful psychosocial activities followed by older persons should be given importance to enhance their routine life and improve psychological well-being. From this study, it is concluded that socioeconomic factors such as age, marital status, gender, income, property, and educational qualification play a crucial role in deciding the social status and psychological well-being of the individual older persons.

References

- ② Boro, B., Srivastava, S. & Saikia, N. Is There an Association Between Change in Old- Age Living Arrangements and Older Adults' Psychological Health and Subjective Well- Being in India? Evidence from a Cross-Sectional Study. *Ageing Int* **48**, 281–300 (2023). <https://doi.org/10.1007/s12126-021-09470-6>
- ② Bosse, R., Aldwin, C. M., Levenson, M. R., Workman-Daniels, K., Ekerdt, D. J. (1990). Differences in social support among retirees and workers: Findings from the Normative Aging Study. *Psychology and Aging*.
- ② Calvo, E. (2006). Does working longer make people healthier and happier? Retrieved June 26, 2007, from <http://www.bc.edu/centers/crr/issues/wob>.
- ② Cantor, M. H. (1983). Strain among caregivers: A study of experience in the United States. *The Gerontologist*, 23,597-604.
- ② Diener, E. (2000) Subjective wellbeing: The science of happiness and a proposal for a national index. *American Psychologist*, 55, 34-43.
- ② · Diener, E., & Suh, M. E. (1998). Subjective well-being and age: An international analysis. In K. W. Schaie & M. P. Lawton (Eds.), *Annual review of gerontology and geriatrics. Focus on emotion and adult development* (Vol. 17, pp. 304–324). New York: Springer.
- ② Huppert FA: Psychological well-being: evidence regarding its causes and consequences. *Applied Psychology: Health and Well-Being*. 2009;1: 137–164. doi:10.1111/j.1758-0854.2009.01008.x
- ② Jennifer L. Smith* and Linda Hollinger-Smith Mather. *Aging & Mental Health*, 2015 Vol.19, No. 3, 192200, <http://dx.doi.org/10.1080/13607863.2014.986647>.
- ② Kubzansky LD, Huffman J, Boehm J, Hernandez R, et al. Positive psychological well- being and cardiovascular disease: JACC health promotion series. *Journal of the American College of Cardiology*. 2018;72:1382-1396. doi:10.1016/j.jacc.2018.07.042
- ② Ladusingh, L., Ngangbam, S. Domains and Determinants of Well-Being of Older Adults in India. *J Cross Cult Gerontol* **31**, 89–111 (2016). <https://doi.org/10.1007/s10823-016- 9279-z>
- ② Ratna Patel, Shubham Kumar, Shekhar Chauhan. Exploring the association between food insecurity and depression among older adults in India,

Dialogues in Health, Volume 1,2022,100042,ISSN 2772-6533,<https://doi.org/10.1016/j.dialog.2022.100042>.

- ② Ryff, C. D. (1989a). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57, 1069–1081. doi:10.1037/0022-3514.57.6.1069.
- ② Ryff, C.D., Singer, B.H. and Love, G.D. (2004) Positive health: connecting wellbeing with biology. *Philosophical Transactions of the Royal Society*, 359, 1383-1394.
- ② Srinivasan Chokkanathan (2013) Religiosity and well-being of older adults in Chennai, India, *Aging & Mental Health*, 17:7, 880-887, DOI: 10.1080/13607863.2013.790924
