

## LIFE SATISFACTION AMONG OLD AGED PEOPLE ATTENDING FAUJI FOUNDATION HOSPITAL

Mehwish Riaz, Abida Sultana, Aisha Tariq

Foundation University Medical College Islamabad, Pakistan

### ABSTRACT

**Objective:** To determine life satisfaction in old age people attending Fauji Foundation Hospital and to assess relationship of socio-demographic variables on life satisfaction of old aged people.

**Study Design:** Cross sectional study.

**Place and Duration of Study:** Fauji Foundation Hospital Rawalpindi, from Feb to Aug 2018.

**Methodology:** A total of 347 individuals were included by using non-probability consecutive sampling. The participants of the 60 years or more attending Fauji foundation hospital, being mentally sound and having comprehensive understanding without hearing aid were included in the study. Questionnaire was given to respondents including demographic profile and Urdu version of Life Satisfaction Scale for assessing the life satisfaction in old age.

**Results:** The total sample mean life satisfaction score was  $14.95 \pm 6.54$ . 5 (1.5%) people were extremely satisfied, 27 (8.4%) were satisfied, 117 (36 %) were dissatisfied and 63 (19.1%) were extremely dissatisfied.

**Conclusion:** Life satisfaction was found statistically significant with female gender, older age 70-80 years, being un married, primary education, monthly income of less than 10,000 and being unemployed.

**Keywords:** Fauji foundation hospital rawalpindi, Life satisfaction, Life satisfaction scale, Old age.

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### INTRODUCTION

Due to decreasing fertility and increasing life expectancy, nations are greying as the elderly population is growing much faster than the overall population.<sup>1</sup> At present, 8.5 percent of the world's Population is 60 years above.<sup>2</sup> According to a recent report, 'An Aging World: 2015', this figure will escalate to nearly 17% of the world's population by 2050.<sup>3</sup> In the Eastern Mediterranean Region it is forecasted that by 2025, elderly will make up nearly 8.7% of the population<sup>1</sup>. In present, Pakistan is going through the demographic transition.<sup>4</sup> It is expected that in 2025, Pakistan will have 42.8 million elderly people, which makes the ratio 12.4% of its population. Despite its political and economical issues, Pakistan has succeeded in improving life expectancy, a fact clearly evident of its growing elderly.<sup>5</sup> In general, the age of 65 and above is considered to be the inception of senility.<sup>6</sup>

Initially the notion of satisfaction with life was suggested by Neugarten in 1961. For assessing successful aging most widely used concept is satisfaction with life.<sup>7</sup> A strong association between subjective well-

being and life satisfaction is present in the matter of successful or active ageing<sup>8</sup>. According to Easterlin, significant correlates of high level of life satisfaction are, positive life events, good jobs, healthy interpersonal relationships, better physical and mental health and high income.<sup>9</sup> Life satisfaction generally remained stable throughout the life span, showing just a slight increasing trend between the ages of 20 and 80 years.<sup>10</sup>

The objective of our research was to determine the life satisfaction in old people visiting Fauji Foundation Hospital Rawalpindi and to assess relationship of socio demographic variables on life satisfaction of old aged people. We attempted to find the socio-economic and psychological effect of living standards on an old person's mind to analyze his level of satisfaction in life. In Pakistan, past studies were done to know life satisfaction in institutionalized old age people but there was lack of research on a community level. There is a dire need for planning interventions to improve satisfaction of life in our senior citizens. Our research aimed to highlight the factors responsible for improving the life satisfaction in elderly which will eventually lead to a greater number of satisfied old members of the community and a healthier environment for them to live in.

**Correspondence:** Dr Mehwish Riaz, Dept of Community Medicine, Foundation University Medical College, Islamabad Pakistan

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**METHODOLOGY**

This cross sectional study was conducted on patients attending OPD Fauji Foundation Hospital from February to August 2018 using non-probability consecutive sampling.

**Inclusion Criteria:** Old age people of 60 years or greater, mentally sound and having comprehensive understanding without hearing aid.

**Exclusion Criteria:** Non-consenting patients were excluded.

Sample size by calculated by using WHO sample size calculator by inserting confidence level of 95%, pooled standard deviation of 5.7, population mean score of 15.7,<sup>11</sup> sample size of 347 was calculated. Individuals who were <60 years of age, had severe cognitive dysfunction or any chronic disease were excluded from the study. Acceptance was taken from ethical review committee of institution (no.217/FF/ FUMC/ ERC). After signing the informed consent form, a questionnaire was given to respondents including demographic pro-file and Urdu version of Life Satisfaction Scale 11 for assessing life satisfaction in old age.

The Satisfaction With Life Scale (SWLS) by Diener is a short 5-item instrument designed to measure global cognitive judgments of satisfaction with one's life. Scale consisted of five questions i.e. In most ways my life is close to my ideal, The conditions of my life are excellent, I am satisfied with life, So far I have gotten the important things I want in life, If I could live my life over, I would change almost nothing. Responses varied from 1-7 ranging from strongly agree to strongly disagree. Following cut offs were used to assess level of life satisfaction. About 31-35 Extremely satisfied, 26-30 satisfied, 21-25 slightly satisfied, 20 neutral, 15-19 slightly dissatisfied, 10-14 dissatisfied, 5-9 extremely dissatisfied<sup>12</sup>.

Data was analyzed using Statistical Package of Social Sciences (SPSS-23). descriptive statistics were carried out for demographic variables. Mean life satisfaction score with standard deviation was calculated. Independent sample t-test was used to compare life satisfaction score with age, gender, employment status, residence and family structure while ANOVA was used for comparing life satisfaction score with education status, monthly income and marital status.

**RESULTS**

A total of 325 participants were included in the study. Out of 85 performas which were incomplete were excluded from the study Mean life satisfaction

score was found to be  $14.95 \pm 6.5$ . Among these, 142 (43.7%) were self-employed. 59 (18.2%) had pension as their source of income, 103 (31.7%) were corporate employed and 21 (6.5%) earned through armed forces. Majority were having 3 or 4 children i.e 78 (24%) and 65 (20%) respectively. Other important demographic characteristics of sample were given in Table-I. Out of 325 participant 5 (1.53%) were Extremely satisfied, 62 (19.07%) extremely dissatisfied, 27 (8.30%) satisfied, 117 (36 %) dissatisfied, 26 (8.03%) slightly satisfied, 76 (23.38%) slightly dissatisfied and 12 (3.69%) Neutral Table-II.

**Table-I: Demographic characteristics of respondent.**

Demographic Characteristics	n (%)
<b>Gender of Respondent</b>	
Male	199 (61.2)
Female	126 (38.8)
<b>Age of Respondent</b>	
60 -70 years	260 (80.0)
70-80 years	65 (20.0)
<b>Education of Respondent</b>	
Primary	116 (35.7)
Secondary	69 (21.2)
Inter	62 (19.1)
Bachelors	41 (12.6)
Higher education	37 (11.4)
<b>Monthly Income</b>	
<10,000 Rs	83 (25.5)
11,000-20,000 Rs	61 (18.8)
21,000-30,000 Rs	58 (17.8)
31,000-40,000 Rs	50 (15.4)
41,000-50,000 Rs	30 (9.2)
>50,000 Rs	43 (13.2)
<b>Marital Status</b>	
Single	22 (6.8)
Married	275 (84.6)
Divorced	6 (1.8)
Widowed	22 (6.8)
<b>Employment of Respondent</b>	
Yes	140 (43.1)
No	185 (56.9)
<b>Residence of Respondent</b>	
Rural	118 (36.3)
Urban	207 (63.7)
<b>Family Structure</b>	
Nuclear	161 (49.5)
Joint	164 (50.5)

**Table-II: Categorization of life satisfaction score.**

Categorization of score	n (%)
Extremely satisfied	5 (1.53%)
Satisfied	27 (8.30%)
Slightly satisfied	26 (8.03%)
Neutral	12 (3.69%)
Slightly dissatisfied	76 (23.38%)
Dissatisfied	117 (36 %)
Extremely dissatisfied	62 (19.07%)

Life satisfaction score was found to be statistically significant with older age 70-80 years ( $p$ -value 0.007), female gender ( $p$ -value 0.001), monthly income less than 10,000 ( $p$ -value <0.001), being single ( $p$ -value <0.001), unemployment ( $p$ -value 0.04). Education of respondent showed that there was a significant difference between primary education and other education levels ( $p$ <0.001).  $F(4,317)=11.420$ ,  $p$ -value <0.001.

Gamez Howell of marital status revealed that there was statistically significant difference of mean score between single ( $19.63 \pm 9.04$ ,  $p$ -value=0.05), widowed  $18.77 \pm 7.28$ ,  $p$ -value=0.04). Gamez Howell of monthly income showed significant difference of monthly income <10,000 ( $M=19.57 \pm 6.60$ ,  $p$ -value  $\leq 0.001$ ) with other monthly income groups shown in Table-III.

**Table-III: Comparison of life score with sociodemographic variables.**

	n	Mean $\pm$ SD	$p$ -value
<b>Age of Respondent</b>			
60-70 years	259	14.47 $\pm$ 6.53	0.009*
70-80 years	65	16.90 $\pm$ 6.27	
<b>Gender of Respondents</b>			
Male	199	13.82 $\pm$ 5.89	<0.001*
Female	126	16.73 $\pm$ 7.13	
<b>Education of Respondents</b>			
Primary	115	18.02 $\pm$ 6.84	<0.001**
Secondary	69	13.50 $\pm$ 5.47	
Inter	62	13.90 $\pm$ 5.81	
Bachelors	41	12.02 $\pm$ 6.04	
Higher education	37	13.21 $\pm$ 5.77	
<b>Monthly Income</b>			
<10,000 Rs	83	19.57 $\pm$ 6.60	<0.001**
11,000-20,000 Rs	60	15.11 $\pm$ 6.40	
21,000-30,000 Rs	58	13.68 $\pm$ 5.39	
31,000-40,000 Rs	50	12.24 $\pm$ 5.43	
41,000-50,000 Rs	30	13.63 $\pm$ 5.36	
>50,000 Rs	43	11.67 $\pm$ 5.28	
<b>Marital Status</b>			
Single	22	19.63 $\pm$ 9.04	<0.001**
Married	274	14.21 $\pm$ 6.01	
Divorced	6	18.33 $\pm$ 5.35	
Widowed	22	18.77 $\pm$ 7.28	
<b>Employment of Respondent</b>			
Yes	140	13.20 $\pm$ 5.80	<0.001*
No	185	16.27 $\pm$ 6.77	
<b>Residence of Respondent</b>			
Rural	118	15.30 $\pm$ 6.59	0.43*
Urban	207	14.74 $\pm$ 6.52	
<b>Family Structure</b>			
Nuclear	161	14.70 $\pm$ 7.03	0.57*
Joint	164	15.18 $\pm$ 6.03	

\*independent sample  $t$ -test, \*\*ANOVA

## DISCUSSION

Life satisfaction among geriatric population has become an important issue in elderly care. Elderly population is neglected now a days by communities

and families due to demanding jobs, Change in life styles, a shift to nuclear family structures.<sup>12</sup> The objective of our study was to assess life satisfaction in elderly population of Rawalpindi Pakistan in relation with sociodemographic variables. The expansion of modernization and the increased aging population throughout the world has made it important to investigate in the field of gerontology.<sup>11</sup>

Life satisfaction is a multi-dimensional issue.<sup>13</sup> In this study 78% population was found to be dissatisfied from their life including 23% slightly dissatisfied, 36% dissatisfied and 19.1% were extremely dissatisfied, These results were far more alarming than the study conducted in Turkey by Beyaztas et al, where 36.6% were not found to be satisfied with their lives. The difference in responses might be due to better living standards in Turkey.<sup>14</sup>

In this study Life satisfaction score was higher in females as compared to males ,this might be due to better socialization and stress coping by females in our sample population .These results were consistent with results of Sheung-Tak and Chan,<sup>15</sup> who discovered that social networking has more influence upon female Life satisfaction comparing to male and Vinsi M.S also revealed the findings that the life satisfaction level was high and satisfactory in female old age populations in comparison to males geriatrics staying in old age home (Z test score greater than tabulated value 5.8 >1.96).<sup>16</sup>

In this study, Life satisfaction score was statistically significant with monthly income. Mean score of life satisfaction decreases as monthly income increases, these results were contrary with research work of Jiménez *et al*, which suggested that life satisfaction increases as moving to high income group ( $p$ <0.01)<sup>17</sup>. Current study showed life satisfaction was high in those individuals who have primary education ;while a cross country survey by De-Neve *et al*. found positive effect of high education on life satisfaction<sup>18</sup>, these both results might be due to psychological acceptance of people regarding their education and income.

In present study statistically significant relationship was found between life satisfaction and marital status. Score was highest in single person these results were contrary to researches done by Zakaria *et al* which showed ore life satisfaction with being married ( $p$ -value <0.05),<sup>19</sup> the difference might be due to marital status affecting their life decisions and positions. Our study showed statistically significant relationship between un employment and life satisfaction score, unemployed individuals were more satisfied with their

lives these results were very surprising as study in China showed that employment in general, and certain work, were related to life satisfaction among middle- and old-aged Chinese.<sup>20</sup> More studies are required to explore this variable.

This study has certain limitations that data was collected short period of time and in hospitals, more better results can be obtained if carried out in a with large sample size to generalize the results other aspects of life satisfaction in old age must be explored in our population.

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#### CONCLUSION

Life satisfaction was found statistically significant older age, female gender, being un married, primary education, monthly income of less than 10,000 and being unemployed. These results are quite different from other researches published in past, more studies have to be done to explore these variables in detail to obtain local data.

**Conflict of Interest:** None.

#### Authors' Contribution

MR: Substantial contribution to the conception of the work, data analysis, Interpretation of data for the work; Drafting it critically for important intellectual content; Agreement to be accountable for all aspects of the work, AS: Substantial contribution to the conception of the work, contribution in final manuscript and final approval of the version to be publication and agreement to be accountable for all aspects of the work, AT: Contribution to the conception of the work, data entry and agreement to be accountable for all aspects of the work.

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