

## Life satisfaction level of elderly people: a field study in Sivas, Turkey

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### Abstract

**Objective:** To determine the life satisfaction levels among elderly individuals - age 65 or over - who live with their families and those who dwell in rest house.

**Methods:** The field-based descriptive study was conducted in the Sivas city of Turkey between May and June 2009, and included 71 elderly people. To form sampling group, random sampling technique was used. Using the Socio-Demographic Information Form and the Life Satisfaction Questionnaire, data was collected by interviewing the aged individually. The data was analysed using SPSS Version 130.

**Results:** Of the study population, 21 individuals lived in rest houses, while 50 lived with their families. Of the subjects 70.4 % were men, 52.1% were between 65-74 years of age, 46.2% suffered from unhappiness due to solitude, while 62.0 % preferred to live with their families. It is determined that considerable number (36.6 %) of the subjects were not satisfied with their lives.

**Conclusion:** Interventions need to be planned to improve life satisfaction among elderly people. Proper old age policies containing decisive solutions to the problems of the old people are essential to make them feel part of society.

**Keywords:** Elderly, Socio-economic status, Life satisfaction (JPMA 62: 221; 2012).

### Introduction

Old age, as a relative term, represents the advance stage of a human being's life. The commencement and assessment varies according to the welfare level available in any society. At this point, social and cultural factors gain importance.<sup>1</sup>

Old age, with respect to law and employment, means the era, where the working performance and efficiency of a person decreases.<sup>2</sup> Generally, the age of 65 and above is considered to

be the beginning of elderliness.<sup>3</sup> Neugarten has categorised old age under three divisions chronologically: Young-old (65-74), medium-old (75-84) and old-old (85 and over).<sup>2</sup>

Subjective quality of life can be defined in terms of life satisfaction, subjective well-being and happiness, etc. Life satisfaction, which includes factors such as health, education, interpersonal relationships and socio-economic status, is believed to be an evaluation of life in general.<sup>4-6</sup>

Satisfaction is the feeling caused by the requirements and demands of people. Satisfaction with life, is used in the sense of overall positive assessment by the individual concerned. This issue is considered by social sciences, such as sociology, psychology and economics, and as well as by the science of medicine.<sup>3,7,8</sup> In recent years there has been an increasing interest in the evaluation of quality of life in the aged population. Family and income status affect the perception of quality, and these factors also have an effect on the quality of life. The loss of some social roles and independence, retirement, deaths of friends and relatives, children leaving home, increasing feelings of loneliness, financial difficulties, and various illnesses that arise as a result of these changes have an effect on the quality of life of an elderly individual.<sup>9</sup>

The activity patterns of old people have been the object of study by Gerontology specialists. Interest in daily activity can go beyond its relation with autonomy and propose it as a component of satisfactory ageing.<sup>10</sup> In addition to good health and functional autonomy, a person should engage actively in life in order to age successfully. Such engagement is reflected in productive activities (either paid or unpaid) and satisfactory social activity.<sup>11</sup> This means that performing certain activities every day may be one of the keys to satisfactory ageing.<sup>12</sup>

The concept of satisfaction with life was proposed by Neugarten in 1961 for the first time. The factors affecting satisfaction with life are gender, age, education, income, social origin, marital status, health, social relationships network, social activity level and nursing home life.<sup>13</sup>

By examining the satisfaction levels among the elderly, this study tried to look at steps needed to make old age happy and peaceful.

## Subjects and Methods

The questionnaire-based, cross-sectional study performed at Sivas between May and June 2009 was a descriptive statistical study, using the random sampling technique. The subject population of the study consisted of 71 elderly people, including 21 who had not lost their cognitive and speech abilities with ages 65 and over, under institutional care in Sivas, and 50 randomly selected elderly people in the Sivas province Central County without institutional care (WIC). The ethical approvals of 71 elderly people were taken for the purpose of this study. The universe of the study comprised areas of the Central County of Sivas, a central Anatolian city, in Turkey. The technique including the Socio-Demographic Information Form and the Life Satisfaction Questionnaire, was used for the collection of data. In the preparation of the interview form, used as the data collection tool, attention was paid to prepare the questions in easily comprehensible language so that the process could be

completed quickly. The data collected was then analysed with SPSS 13 for Windows.

## Results

Of the study population 50 (70.4%) were men. In terms of age, 37 (52.1%) of the subjects were young-old between 65-74 years of age, 31 (43.7%) were medium-old between 75-84 years of age, and 3 (4.2%) were old-old, which means 85 years or over. With regard to the marital status, 38 (53.5%) were widow(er)s, 27 (38.1%) were married, 3 (4.2%) were single/never married, and 3 (4.2%) were divorced.

As for the educational status, 25 (35.2%) subjects had not received any formal education (Table). Illiteracy was 19.7% in women subjects, and 15.5 % in men.

Of the total, 38 (53.5%) lived on pension, 24 (33.8%) lived on public-sector assistance (Social Services Children Protection Institution, Social Assistance and Solidarity Foundation, Municipality), 5 (7.0%) lived on estate revenues and rental income, and 4 (5.6%) lived on the aid by their children and relatives.

Income was stated to be "sufficient" by 33 (46.5%) subjects, "less than sufficient" by 26 (36.6%), "insufficient" by 8 (11.3%) and "more than sufficient" by 4 (5.6%).

As for the satisfaction of the elderly people from their respective social security institutions, 43.7% responded "not satisfied." A great majority, 65 (91.5%) subjects did not have memberships to any non-profit organisation, and only 6 (8.5%) had such a membership and participated in social activities.

On the Life Satisfaction front, the subjects were asked:

"How happy you are considering life as a whole?" To this, 56.4% subjects responded "happy."

When the reasons for unhappiness were examined, 12 (46.2%) said solitude, for 6 (23.1%) it was old age, 3 (11.5%) had health problems, for 3 (11.5%) lack of interest by the children was the cause, while 2 (7.7%) had economic hardships.

For the response to the question "Do you think that old age is an opportunity for being respected and for things, which could not be carried out previously?" 36 (50.7%) responded as "No", 24 (33.8%) as "don't know" and 11 (15.5%) as "Yes".

As for the level of satisfaction among WIC people, 50 (58%) stated that they were "satisfied", 11 (22%) "very satisfied", 1 (2%) "unsatisfied" and 9 (18%) lived alone.

Another factor which increases satisfaction among elders is the frequency of seeing children and satisfaction with relationships. Among the elders who had children, 67

**Table: The educational status, the life satisfaction and the satisfaction status from their respective social security institutions of the elderly people.**

<b>The educational status of the elderly subjects</b>	<b>n</b>	<b>%</b>
Never received any formal education and no literature	25	35.2
Graduated from primary school	19	26.8
Never received any formal education but literature	14	19.7
Graduated from high school or equivalent	6	8.5
Graduated from secondary school	5	7.0
Graduated from vocational school or university	2	2.8
<b>Life Satisfaction of Elderly</b>		
Happy	39	56.4
Unhappy	25	35.2
No opinion	4	4.2
Very happy	2	2.8
Very unhappy	1	1.4
<b>The satisfaction status of the elderly people from their respective social security institutions</b>		
Dissatisfied	31	43.7
Satisfied	27	38.1
Very satisfied	5	7.0
Very dissatisfied	4	5.6
No opinion	3	4.2
Never used any social security institution	1	1.4
Total	71	100.0

(26.8%) saw the children 1-2 times per year, 16 (23.9%) everyday, 15 (22.4%) 1-2 times a week, 15 (22.4%) 1-3 times a month and 3 (4.5%) did not see their children at all.

In response to the question, "Do your children listen to you?" 41 (61.2%) responded "sometimes", 17 (25.4%) responded "always", 9 (13.4%) responded "never". When asked, "Are you pleased with your relationships with your children", 42 (62.7%) responded "pleased", 11 (16.4%) "not pleased", 6 (9.0%) "very pleased", 5 (7.4%) "not pleased at all" and 3 (4.5%) said "don't know".

Of the 65 subjects who had grandchildren, 2 (3.1%) stated that they did not see their grandchildren, 24 (36.9%) 1-2 times a year, 16 (24.6%) everyday, 12 (18.5%) 1-3 times a month, 11 (16.9%) 1-2 times a week. As for the question, "Are you pleased with your relationships with your grandchildren", 20 (30.7%) responded "very pleased", 35 (53.8%) "pleased", 4 (6.2%) "not pleased", 4 (6.2%) "not pleased at all" and 2 (3.1%) "don't know".

In response to the question, "What makes you pleased most in life" 28 (39.5%) said "children", 17 (23.9%) "grandchildren", 15 (21.1%) "spouse", 8 (11.3%) "friends", 2 (2.8%) "none" and 1 (1.4%) as "relatives".

In the examination of the frequency of seeing friends and neighbours, 43 (60.5%) said "everyday", 21 (29.6%) said "1-2 times a week", 7 (9.9%) said "1-3 times a month". For the question concerning satisfaction with friends and neighbours, 45 (63.4%) said "pleased", 16 (22.5%) "very

pleased", 6 (8.5%) "not pleased" and 4 (5.6%) "not pleased at all". Major topics of discussion were religion (98.6%), health and financial issues (97.2% each) and family issues (78.9%).

For the question in connection with things done in the spare time, 33 (46.5%) said "praying," 13 (18.3%) "conversations with friends," 7 (9.9%) "visits to neighbours," 6 (8.5%) "going to the park," 6 (8.4%) "taking a walk," 3 (4.2%) "care of grandchildren," and 3 (4.2%) "watching television."

As response to a question regarding whether the subjects had any chronic diseases, 64 (90.1%) answered in the positive, while 7 (9.9%) stated in the negative.

In response to a question related with the pleasure from the city of residence, 55 (77.5%) answered "Yes," and 16 (22.5%) responded "No".

As a result of the examination of the problems of WIC people, 44 (62.0%) stated that they had no problems with the residence, 12 (24.0%) were not pleased with the residence due to proximity to health services, 4 (8.0%) to friends and relatives, and 3 (6.0%) to children's residence.

In response to a question regarding whom they preferred to live with, 44 (62.0%) said with the family, 21 (29.6%) with the person with whom they used to live before, 4 (5.6%) in the nursing home, 2 (2.8%) in homes designed specially for the elderly.

Among WIC people, 47 (94%) answered "No" to the

question asking if they wanted to stay in a nursing home, while 3 (6%) answered "Yes". As for the reasons for not wanting to stay in nursing homes, 37 (74%) said, "Staying with my family makes me happy", 4 (8%) "My neighbors/society will criticize", 3 (6%) said, "I don't want to live with others", 2 (4%) said, "I like living alone", and 1 (2%) said, "Institutional environment will disturb me".

## Discussion

Life satisfaction among the elderly has become an important issue in geriatric care. The available literature shows that it is affected by various physical, emotional, social and mental conditions.<sup>13,14</sup>

The satisfaction of the elderly with life depends on subjective and objective variables. Objective variables are factors such as economic income and social security. Subjective variables are the psycho-social factors, related to the satisfaction of the person with social environment (spouse, child, grandchild, relatives, neighbours, etc) and the satisfaction with health status.<sup>7,16</sup> In this study, 36.6% of the subjects stated that they were not satisfied with life. Among the reasons for non-satisfaction, solitude (46.2%), old age (23.1%) and health problems (11.5%) were the most prominent ones. In general, the elderly people thought that their unhappiness was caused by a feeling of loneliness.

In another study,<sup>17</sup> among 1,300 participants of age 65 years and over, the question "Whether old age meant solitude or not", was responded to by 49.8% as "Yes" and the question "Whether old age meant dependence on others", 40.9% had responded "Yes". While 84.4% believed that "Old age means being respected", only 35.7% believed that "Old age is an opportunity for things, which were not carried out before".

In a study,<sup>18</sup> performed with 3,500 elderly people in seven regions of Turkey, the rate of the people fearing from becoming dependent on care was found to be 67%. Of the elderly people in our country, 38% are desperate about the future and complain about solitude; 55% of these have been isolated from society and 42% have stated that they wished death.

Despite the frequency of seeing children/grandchildren, the obedience of the children and the problems in family relationships, the first degree relatives and among these, their children, make the elderly happy. In addition, a very large portion of the elderly is happy with their friends and neighbours. In general, the elderly people share their problems with their friends and neighbours and try to increase their satisfaction with life.

In this study, the elderly people spent most of their time (46.5%) by praying. Psychological processes, which emerge as death nears, bind the person more to praying and, therefore, the person feels more comfortable deep inside.

As a result of the examination of the attitudes of the subjects towards accommodation facilities, as a response to the question "Where do you prefer your peers to live in?" 62% said "with the family". Of the WIC persons, 94% said they did not want to stay in a nursing home, which is a clear indication that the elderly did not have a positive opinion concerning such facilities. They preferred living in their family environment and, hence, the continuation of the elderly living with their families should be encouraged.

An earlier study,<sup>19</sup> found that women who had higher education received higher mean scores of life satisfaction. In this research, there is a significant difference resulting from women and men's higher mean scores of life satisfaction who were executive managers living in nursing homes. The mean scores of life satisfaction of women who were executive managers and business administrators were found to be high in the said study,<sup>19</sup> but that of men who were office workers and service personnel were found to be low.

Studies performed among the elderly show that people do not want to go to a nursing home or hospice. While going or "being obliged to" a nursing home is an undesired thing in Turkey; this is the same in Europe. According to a study in Germany, the people from whom the elderly expect help in the process of care, are spouses, children and relatives.<sup>20</sup>

The changes and developments in the quality of life improve the average life expectancy, increasing the number of elderly people and thereby causing problems.<sup>1</sup> The most common social problems associated with the elderly are poverty and low income, changes in social security policies, increase in the number of the elderly, living alone, inappropriate residential conditions, decreases in family care, negative opinions concerning old age and the problems in accepting positive roles.<sup>21</sup> Naturally, these problems negatively affect the satisfaction with life. The satisfaction and social adaptation of the elderly vary depending on the ability to cope with these factors.

Few studies have examined the association between life satisfaction in the old-old and, not only health-related, but also psychological and socio-economical factors. According to one such study,<sup>22</sup> the clinical implications are that attention should be paid to recognising and treating factors that effect life satisfaction and are reachable for medical intervention.

Old age policies are essential that may contain decisive solutions to the requirements of old and retired people and the problems experienced in the process of adaptation to old age and retirement and social, cultural and economic hardships. These regulations must adapt to the changing conditions and be equipped with modern features. The remunerations given to the elderly are not enough to ensure a minimum level of happiness, peace and honour life.

The remunerations of the elderly must be increased according to the changing conditions of the day.

First of all, since the elderly must be cared for within the family, the economic, social and psychological supporting means of the family members must be addressed. In addition, the institutional care services for the elderly must be developed according to the conditions of the day. Although not welcomed due to traditional values, the institutional care service, considered as a last resort, must be diversified. In Turkey, nursing homes are associated strongly with institutional care. Other than this, alternative centres, such as elderly solidarity centres, and elderly clubs must be common across the country. However, despite positive developments, the social adaptation of the elderly is hindered and "active elderly" image is seen as negative. Therefore, the action of the elderly, resembling young people, is considered strange. For example, a second marriage by the elderly is not welcomed.

In addition, in the field of healthcare, geriatric services must be made more common. Geriatric physicians, geriatric nurses, the orderlies for care of the elderly and administrative personnel must be employed in the field of geriatrics.

To present effective and permanent solutions for the elderly, scientific studies and administrative interventions are required to show the existing situation in this field and to rectify the maladies on a long-term basis. Negligence and abuse cases, seen from time to time in old age, also stress the necessity to solve the problem with a multi-disciplinary approach. Along with inter-disciplinary cooperation in the universities, the cooperation of non-governmental organisations and professional organisations and, in particular, the relevant local administrations, is essential.

## Conclusion

The study showed that half the elderly were unhappy due to solitude, whereas 60 percent preferred to live with their families. One-third were not satisfied with their lives.

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