

Original Research Paper

# Do Personal Strengths and Weaknesses Impact Subjective Well-Being of Elderly?

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**Abstract:** Everyone gets affected by the challenges of aging, but personal strengths and weaknesses of elderly people influence their well-being the most. The current study is designed to measure the impact of personal strengths (intergenerational social support and self-esteem) and weakness (loneliness) on Subjective Well-Being (SWB) of Malaysian institutionalized elders. A cross-sectional survey design is employed to arrive at the random sample (n = 192). The respondents belong to government operated old-age homes from the four states of Malaysia. There are four measurement instruments are used to assess the relationship among the variables. The hypothesis testing is dealt with SPSS (23.0) and analytical plan comprised of multiple regression analysis and t-Test. The results indicated that personal strengths (intergenerational social support and self-esteem) have significant positive impact on subjective well-being (4.329<sup>\*\*</sup>, 12.440<sup>\*\*</sup>) and the loneliness contains non-significant negative impact on subjective well-being (-1.78) of Malaysian elders. The gender differences indicated that intergenerational social support is higher in male respondents as compared to female cohort. Further, females are experiencing more loneliness than the male elders. Similarly, self-esteem and subjective well-being remained higher in females as compared to male elders. The suggestions and limitations of the study are also cordoned off.

**Keywords:** Intergenerational Social Support, Loneliness, Self-Esteem, Subjective Well-Being, Institutionalized Elders, Malaysia

## Introduction

Aging itself is a challenging condition, especially in developing countries where state support is inadequate and elderly people undesirably rely on their family members for support (Abdullah *et al.*, 2016; Zeng *et al.*, 2006). Historically, in Asian countries, parental care was associated with sons guided by the tradition. Recently, such traditions or traditional norms are changing promptly (Yan, 2003). These altering family dynamics create a difficulty for elders, particularly in developing countries where insufficiency of social support practiced and elders depends on family for their financial assistance and care (Porter, 2016). Therefore, research emphasis on the social needs of elders' and debating intergenerational ties (Chalise *et al.*, 2007).

Intergenerational social support involves supportive behavior, perceived support and resources of support

between generations (Thang *et al.*, 2013). Recently, intergenerational social support programs reported for promoting active aging among older adults (Teater, 2016), prior that intergenerational social support flows downstream in western countries that associated with risky health consequences for old age people (Fingerman *et al.*, 2010; Reblin and Uchino, 2008). The decline of age affecting familial solidarity and orientation, life enjoyment and personal factor to live alone (Leeson, 2016) or developing loneliness.

Loneliness is an important phenomenon for old age people because they are reported neglected. Elders find themselves lonely and suffer its various effects such as physical and mental health in the form of body pain, fatigue, hypertension, motor decline, anxiety, depression and cognitive impairment (Crewdson, 2016). Old age people perceive loneliness as multifaceted feelings

encompassing responses in the absence of intimate and social needs initiated social isolation, which is tremendously dominant among the elderly population (Ernst and Cacioppo, 2000). The prevalence of loneliness in elders is not just confined only to particular countries, it is a growing issue across the globe and researchers highlighted issues that vary from location to location including Asia and particularly in Malaysia. It is the more substantial issue presently (Teh *et al.*, 2014). Amzat and Jayawardena (2015) supported that Malaysian elders are suffering social isolation and loneliness, particularly emotional loneliness that effect psychologically in terms of psychological well-being and self-esteem (Hallford *et al.*, 2013; Latiffah *et al.*, 2005).

Self-esteem is a vital psychological marvel for people of all ages that considered as a person's subjective evaluation of his or her worth and naturally it is a highly desirable personality trait for everyone, particularly in old age the people are more prone towards intergenerational social support, physical and mental health and subjective well-being (Orth and Robins, 2014; Sowislo and Orth, 2013). Self-esteem is strongly connected with positive affectivity and initiative (Baumeister *et al.*, 2003), while self-esteem undergoes systematic developmental changes from childhood to old age (Bleidorn *et al.*, 2015). Nanthamongkolchai and Makapata (2007) reveal that institutionalized older people predicting low self-esteem, that further associated with many other factors such as intergenerational social support, loneliness and subjective well-being (Nanthamongkolchai and Makapata, 2007). Research supported that self-esteem in older people need to be addressed on a priority basis. Further, it is an important question that how to enhance it in institutionalized elders because they are already facing difficulty in financial assistance and intergenerational social support (Noronha and Mathias, 2016). Mirucka *et al.* (2016) indicated that self-esteem is a stronger predictor of positive orientation, satisfaction with life and ultimately subjective well-being in older adults.

Subjective well-being is predicted on the basis of satisfaction with life, social support, physical and mental health. Sorely, subjective well-being inversely correlated with age due to decreasing life satisfaction, social support and loneliness (Namgay, 2015). In old age people, lessening subjective well-being is a solemn challenge for researchers that how to protect and escalate well-being? (Gilles *et al.*, 2015). Presently, subjective well-being ponders as a contentious issue for older people because of insufficiency in intergenerational social support and social connectedness (Moosa, 2016). According to Ng and Confessore (2015) subjective well-being connected

with life satisfaction and it is growing issue in Malaysian older adults that require attention for the betterment of them. Mohamad *et al.* (2016) proves that subjective well-being highly correlated with intergenerational social support and loneliness, particularly in Malaysian institutionalized elders and it is obligated to address.

The first objective of the study is to measure intergenerational social support, loneliness, self-esteem and subjective well-being among Malaysian institutionalized elders. The second objective is to compare gender differences among intergenerational social support, loneliness, self-esteem and subjective well-being of Malaysian institutionalized older people.

Hypotheses of the study aligned with objectives are, it was hypothesized that intergenerational social support, loneliness, self-esteem would significantly predict SWB of Malaysian elders. The second hypothesis is; male cohort would receive greater levels of intergenerational social support as compared to female cohort. Furthermore, loneliness is higher in female as compared to male elders. Finally, self-esteem and subjective well-being would remain higher in males as compared to female institutionalized elders.

## Materials and Methods

The current study is carried out by using cross-sectional survey method to investigate the relationship among intergenerational social support, loneliness, self-esteem and subjective well-being among Malaysian elders. The research sample is determined through random sampling from the four states of Malaysia (Kelantan, Perak, Selangor and Melaka). Subjects of the study were institutionalized elders (n = 192) comprising both genders (male = 98, female = 94).

There were four instruments were used to collect the data. First one is The Lubben Social Network Scale-Revised (LSNS-R) edition (Lubben *et al.*, 2002) to measure the intergenerational social support of Malaysian elders. It is 12 items Likert scale from never (0) to always or more (5) options. For this study, only family network (6 items sub-scale) employed and score range is 0-30 by summing up all items. A higher score indicates stronger social support from the family network. The second scale is The De Jong Gierveld Loneliness Scale (Pinquart and Sorensen, 2001) for measuring loneliness of Malaysian elders. It is 11 items scale from positive (5 items) to negative (6 items) choices. The score range of this scale is 0-11 and higher score shows more loneliness. The third scale is a Self-esteem Scale by Rosenberg (1965). It is self-rated Likert scale that consists of 10 items including reverse items.

The score range is 0-30. A higher score indicated high self-esteem. The last scale is The Memorial University of Newfoundland Scale of Happiness (MUNSH) by Kozma and Stones (1980). It is 24 items scale with 'yes = 2' or 'no = 0' responses (Some responses 'don't know=1', 'present location = 2, other location = 0' 'satisfied = 2, not satisfied = 0') to measure subjective well-being of Malaysian elders (equate subjective well-being to happiness) (Li *et al.*, 2012). There are four sub-scales of MUNSH including positive affect (5-items), negative affect (5-items), generally positive experience (7-items) and generally negative experience (7-items). The total scale score is 0-48 but above 32 is considered a high level of subjective well-being.

The data were analyzed through Statistical Package for Social Sciences (SPSS V.23.0) and multiple regression was employed to estimate the impact of intergenerational social support, loneliness and self-esteem on subjective well-being among institutionalized Malaysian elders. The t-Test was performed to calculate gender wise comparison among variable.

Furthermore, ethical considerations executed by taking formal permission from the respective authors for using the scales. A formal permission has taken from Malaysian institutions for data collection. Informed consent (written) taken from all subjects and further handed over the scales to the respondents to fill up. All subjects filled up the scales from their willingness and forced choice did not apply to anyone and gave them the opportunity to drop or skip the participation at any time if they don't want to participate anymore. There was no financial assistance provided to the subjects.

## Results

The results of the study predicting the impact of intergenerational social support, loneliness and self-esteem on subjective well-being of Malaysian elders through multiple regression analysis and t-Test distribution and gender differences remained in focus.

The Table 1 shows three predictors' model was able to account for 50% of the variance in subjective well-being. The value of F is (62.617) and B = -29.41, value of  $p < 0.01$ , which shows significant impact (strength) on subjective well-being. The value of  $R^2 = 0.50$  and the confidence interval is 95%. The results show that intergenerational social support and self-esteem is significantly positively impact on subjective well-being, while, loneliness is non-significant negative impact on subjective well-being.

Table 2 shows gender differences among all variables. Results show that intergenerational social support is higher in male elders as compared to female elders, the values are  $M = 9.168$  with a standard deviation (7.19) and  $M = 6.02$  with a standard deviation (4.76) respectively. As a contrast, loneliness is higher in female as compared to male elders, values are  $M = 8.32$  with a standard deviation (2.45) and  $M = 7.90$  with a standard deviation (2.70) respectively. Similarly, self-esteem and subjective well-being are high in female as compared to male elders, values are  $M = 17.41$  (SD = 3.90),  $M = 16.92$  (SD = 3.66) and  $M = 27.72$  (SD = 6.79),  $M = 25.95$  (SD = 6.22) respectively. Lastly, it is proved that gender playing a significant role of difference in intergenerational social support and subjective well-being.

Table 1. Summary of multiple regression analysis with intergenerational social support, loneliness, self-esteem and subjective well-being as a dependent variable (n = 192)

Predictors variables	B	B	t	$\Delta R^2$	F
(Constant)	-29.41		-7.344	0.500	62.617
Intergenerational social support	0.414	0.231	4.329**		
Loneliness	-0.281	-0.064	-1.178		
Self-esteem	1.988	0.665	12.440**		

\*\*p < 0.01

Table 2. Independent sample t-test utilized for gender differences among intergenerational social support, loneliness, self-esteem and SWB (n = 192)

Variable	Male	Female	t	95%CI	
	(n = 98)	(n = 94)		LL	UL
Intergenerational social support	9.168 (7.19)	6.02 (4.76)	3.580**	1.41	4.87
Loneliness	7.90 (2.70)	8.32 (2.45)	-1.133	-1.15	0.31
Self-esteem	16.92 (3.66)	17.41 (3.90)	0.890	-1.56	0.59
Subjective well-being	25.95 (6.22)	27.72 (6.79)	-0.053**	-3.33	3.15

Note. CI = Confidence Interval, LL = Lower Limit, UL = Upper Limit,  $p^{**} < 0.01$ ,  $df = 190$

## Discussion

The overarching aim of the study is to gauge the impact of personal strengths and weaknesses of Malaysian institutionalized older people on their SWB. The personal strengths (intergenerational social support and self-esteem) and weaknesses (such as loneliness) play a significant role to predict subjective well-being of Malaysian elders. Hence, the results proved that positive strength (4.329\*\*, 12.440\*\*) positively predict the subjective well-being. The hypothesis is accepted. Similarly, a study supported that subjective well-being is significantly positively correlated with intergenerational social support (Mohamad *et al.*, 2016).

Meanwhile, there is a non-significant negative relationship between subjective well-being and loneliness (-1.178) of Malaysian institutionalized elders. First Hypothesis partially accepted. A supportive study reveals that subjective well-being is negatively correlated with loneliness (-0.263\*\*) but the relationship is significant (Mohamad *et al.*, 2016). Study results revealed that male receives higher intergenerational social support as compared to female (M = 9.168, M = 6.02) respectively. The hypothesis is approved. Similarly, a study supported that males receive more intergenerational social support as compared to female elders (M = 26.6) respectively (Khan, 2014).

Moreover, study results verified that level of loneliness is higher in female as compared to male Malaysian elders (M = 8.32, M = 7.90) respectively. The hypothesis is accepted. Similarly, a study supported that females are more suffering feelings of loneliness as compared to male elders (M = 23.8, M = 16.5) respectively (Teh *et al.*, 2014). Meanwhile, self-esteem is higher in female as compared to male (17.41, M = 16.92). The hypothesis is rejected. A contrast study conducted by Bleidorn *et al.* (2016) reveals that the male has high self-esteem as compared to female elders (M = 52.86, M = 51.16).

Finally, subjective well-being is higher in female as compared to male Malaysian institutionalized elders (M = 27.72, M = 25.95). The hypothesis is rejected. A contrast study explored that subjective well-being is higher in male as compared to female older adults (M = 19.54, M = 19.01) respectively (Ladusingh and Ngangbam, 2016). Similarly, the study indicated that level of subjective well-being is higher in male as compared to female elders (36.3, 35.8) respectively (Li *et al.*, 2012).

## Conclusion

The study concluded that intergenerational social support, loneliness and self-esteem are significant predictors of subjective well-being among institutionalized elders. The male elder cohort is

receiving more intergenerational social support as compared to females. On the other hand, females are experiencing a higher level of loneliness as compared to the male, while, females have higher self-esteem and greater subjective well-being as compared to male elders. Conclusively, these findings compel us to think further, why mothers are so lonely?

## Contribution

The current study encompasses the current plight of elderly people in terms of their subjective well-being, whom are institutionalized in different old-age homes in Malaysia. As narrated above, the female cohort facing more loneliness and less intergenerational support. This study established an urgent need to address this issue on priority. The Govt. of Malaysia and concerned ministry should consider these findings as a serious note and necessary steps to take care the female elderly be taken without any delay. Further, these findings are also eye-opening for the caregivers of these elderly; they should spare some time to deliver quality time to them so that they feel relieved.

## Limitations and Suggestions

Like every study, the current study is also limited in its scope. The study addressed only intangible variables rather than physical or tangible variables. It is suggested to consider concrete variables in the prospective studies. The sample of the study merely comprised of institutionalized elders; whom belong to four states of Malaysia. It is also recommended to include a broad-spectrum sample for the greater generalizability. Finally, the study relied on institutionalized elders rather than their family members. To consider the perceptual differences (biases), family members or informants should be included in the upcoming studies for the holistic picture.

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## Authors' Contribution

The first author conceived the idea and contributed majorly. The second to fifth authors extended their help in data analysis and manuscript preparation.

## Conflict of Interest

There is no conflict of interest prevailed related to this study.

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