

## Psychological and emotional well-being in non-institutionalized population

<sup>1</sup> Anjali Rathaur, <sup>2</sup> Sunita Mishra

<sup>1</sup> M.Phil Scholar, Department of Human Development and Family Studies, School for Home Science, Babasaheb Bhimrao Ambedkar University Lucknow, Uttar Pradesh, India

<sup>2</sup> Professor and Dean, Department of Human Development and Family Studies, School for Home Science, Babasaheb Bhimrao Ambedkar University Lucknow, Uttar Pradesh, India

### Abstract

The main purpose of this research was to find out the psychological and emotional well-being in non-institutionalized. The total samples 120 were taken out which 60 institutionalized and 60 non-institutionalized elderly people. The research tool psychological scale and emotional well-being scale. Here lucknow adaption used. test was applied to check psychological and emotional well-being relationship in non-institutionalized. And ANOVA test and Karl-person 'r' method used to check correlation. Result reveals that significant difference in psychological and emotional well-being.co-relation between psychological and emotional well-being reveals.

**Keywords:** non-institutionalized, psychological, emotional well-being, elderly people

### 1. Introduction

Health-related quality of life constitutes a broader concept than health status. As developed in gerontology, it is defined in older age as "goodness of life, good life, successful ageing, and satisfaction with life" (Bowling 1997) [2].

Well-being in old age also requires universal and equal access to a full continuum of health care services that are tailored to each community's needs and meet appropriate legal, regulatory, and professional standards. Lack of services and un-affordability are primary barriers to access, especially in low- and middle-income countries. Regardless of location or cost, many older adults cannot access services due to discriminatory attitudes and practices based on age, gender, race, ethnicity, language, sexual orientation, gender identity and expression, physical, psychological, or cognitive disability, or other diversity factors—or forego using available services that are not culturally appropriate or physically accessible.

the study of psychological well-being has been guided by two primary conceptions of positive functioning.

One formulation, traceable to Bradburn's (1969) [3] seminal work, distinguished between positive and negative affect and denned happiness as the balance between the two. Conceptual and methodological refinements built on this early operationalization of well-being.

Physical, social and emotional health are all important aspects of our overall health and wellbeing. Keeping active in older age is vital for each of these aspects of our wellbeing. This may mean being physically or socially active, or keeping the mind active. Everyone has different interests and activities they like to pursue, and these may change from time to time as circumstances change. However, it is important that we continue to pursue things of interest that give purpose to our lives, regardless of our age or ability. This can help us feel positive and lift our mood when we are feeling flat or low. The aim of this booklet is to assist you to reflect on positive.

Old age can be broadly characterized by time-altered changes

in an individual's biological, Psychological and health related capabilities and its implications for the consequent changes in the individual's role in the economy and the society (Irudaya Rajan and Misra, 1995) [5].

Old age as such cannot be identified with ill health or disparity, although advancing age tends to bring increased health problems, There is after a gradual decline in physical strength, hearing less, visual improvements, and lower immunities to illness, hardening of blood vessels, respiratory and digestive disorders, heart ailments, arthritis etc.

Psychological problem include Cognitive impairment, Depressions, Dementia, Anxiety Death, Anxiety etc.

The negative images of aging affect both the social and care treatment given to the elderly population as well as the way individuals live their old age. (Levy, B. R., & Leifheit-Limson, E. 2009) [8].

Life events that could be highly stressful, such as financial problems, may have little negative effect if the individual feels he has some choice (Krause, Jay, & Liang, 1991) [6].

Most elderly people prefer to remain in their homes because they are able to maintain the integrity of their social network, preserve environmental landmarks and enjoy a higher quality of life. Furthermore, admission to nursing homes is expensive both in terms of public and private finances. Moreover, institutionalization is associated with several negative outcomes such as increased mortality. Psychological well-being studied extensively as there is a need to improve the state of mental conditions of people. Researchers find a large number of people are getting affected by mental health problems. Research studies reveal that there is a prevalence of depression, lower life satisfaction and more adjustment problems among elderly well-being individuals and societies. Wellness is generally used to mean a healthy balance of mind, body and spirit and it results in an overall feeling of well-being. In other words; wellness is a view of health that emphasizes the state of the entire being and its ongoing development. There

are several determinants of wellness and some of them include better understanding of concepts like health practices, spirituality, family, environment, work, money and security, health services, social support and leisure. Behaviors of others that convey criticism or imply that a person is unworthy of love or friendship are more likely to be related to depression that is the more basis of support. A study was conducted by (Tejal N (2010) <sup>[13]</sup> on psychological well-being aged individuals in India. It was found that institutionalized aged experience poor sense of psychological well-being than the non-institutionalized aged. Moreover, females have greater psychological well-being than the males. Level of psychological well-being is comparatively higher among the lower age group aged than higher age group aged. The present study is an attempt to find out the state of depression and psychological wellbeing in old age. Old age is a period in life when people feel emotional sameness and the aging emotional landscape was described as bleached and barren. That emotion is relatively unaffected by aging or even improves with age, in contrast to most cognitive functions (Scheibe and Carstensen, 2009) <sup>[12]</sup>.

Aging is associated with improved emotional problem solving (Blanchard-Fields, 2007) and increased frequency of positive feelings (Christensen *et al.*, 2011) <sup>[4]</sup>.

Social gerontology was launched as a field with prominent emphasis on whether life satisfaction was affected by the aging process (Lawton, 1975; Neugarten *et al.*, 1961) <sup>[7]</sup>. Initial Emotion is a prominent feature of life, increasingly thought to play a central role in a wide range of human processes spanning normal and abnormal development, including social bonding, intrapsychic dynamics, memory and cognition, and mental and physical health and illness

(Robert W Levenson 1991) Old age provides a unique opportunity to study emotion at the end point of what might be a lifelong process of emotional development. Indeed, several psychological phenomena related to emotion have been extensively studied in old age (Schulz, 1985). These include the individual's sense of well-being (George & Bearon, 1980) and personality traits such as neuroticism and extraversion (Costa, 1986). it is possible that learning and practice effects make older adults more competent at emotional regulation. Specifically, the long-term experience and practice in dealing with emotional situations should lead older adults to acquire additional situational, strategic and procedural knowledge about emotional process” (Scheibe & Carstensen, 2009) <sup>[12]</sup>.

**3. Result**

**Table 1:** Distribution of respondent according to presently working status

Working profile	Institutionalized (N=60)			Non-Institutionalized (N=60)		
	Male f (%)	Female f (%)	Total	Male f (%)	Female f (%)	Total
Working	0	0	0	4 (100)	1 (100)	5
Retired	13 (61.9)	13 (68.4)	26	8 (38.1)	6 (31.6)	14
Non-working	14 (36.8)	19 (52.8)	33	24 (63.2)	17 (47.2)	41

(Figure s in parenthesis indicates percentages :)

**2. Research Methodology**

Research methodology is a scientific procedure of looking at research issues. It is a science of studying how research is to be carried out. Essentially, the procedure by which researchers go about their work of describing, explaining and predicting phenomena is called research methodology.

**Sample**

Sampling is the process of selection of units (e.g., people, organization) from a population of interest so that by studying the sample may fairly generate results back to the population from which they were chosen. The present study consisted of 120 elderly people (age group 60-85 years) from the lucknow city. It will consist of 60 institutionalized and 60 non-institutionalized elderly people.

**Sampling Technique**

Random sampling technique has been used in the present investigation. A random sample is a probability sample.

**Variable studied**

The are two type of variables in the study-

- i) Independent Variables
- ii) Dependent Variable

**i) Independent Variables**

- Gender
- Working status
- Marital status

**ii) Dependent Variable**

- Psychological well-being
- Emotional well-being

**Research tool**

- Use the scale Ryff’s (1995) Scales of Psychological Well-Being (SPWB)
- Use the scale Dr. shruti narain(1971) Emotional Intelligence scale.(EIS)

**Statistical technique**

- Descriptive statistics (Mean, Median, Standard deviation)
- Inferential statistics anova and (Co-relational analysis: Pearson -r)

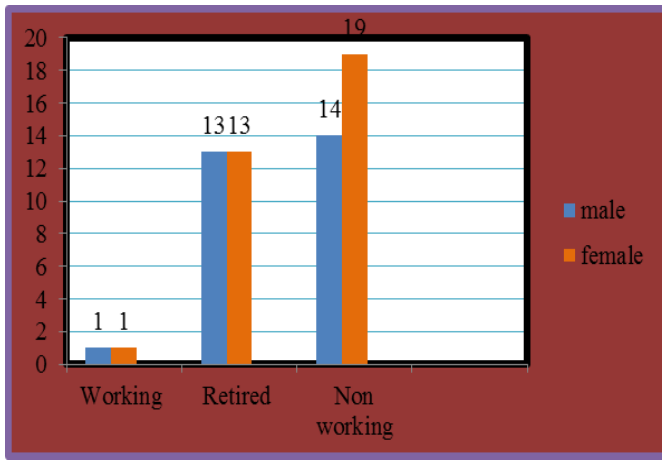


Fig 1: Presently working status Institutionalized (N=60) of elderly

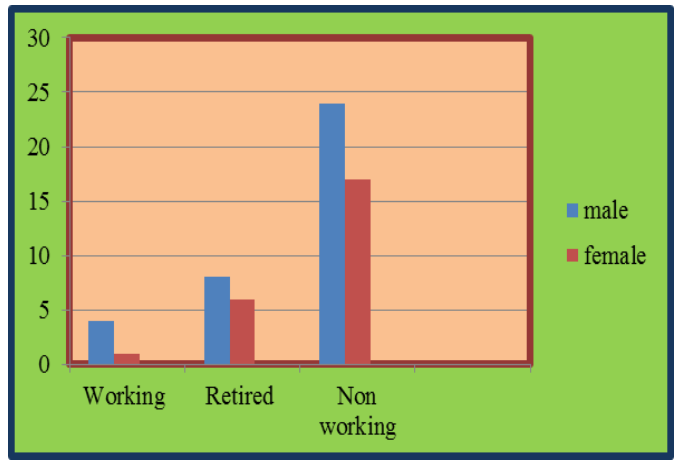


Fig 1.1: Presently working status Non-Institutionalized of elderly

The data in the above table clearly reveals that male and female are not working. Where majority 61.9 male and 68.4 female were retired from work and 36.8 male and 52.8 female are non-working in old age home. 4 percent male and 1 female are

working. Where majority 38.1 male and 31.6 female were retired from work and 63.2 male and 47.2 female are Non-working respondent residing in their home.

Table 2: Distribution of respondent according to educational qualification.

Educational level	Old age Home (N=60)			Residing in their Home (N=60)		
	Male f (%)	Female f (%)	Total	Male f (%)	Female f (%)	Total
Illiterate	0	5(35.7)	5	2(100)	9 (64.3)	11
High-school	5(62.5)	9(64.3)	14	3 (37.5)	1 (10)	4
Inter-mediate	4(25)	11(55)	15	12 (75)	9 (45)	21
Graduate	9(45)	5(55.6)	14	11 (55)	4 (44.4)	15
Post-graduate	10(55)	2(66.7)	12	8 (44.4)	1 (33.3)	9

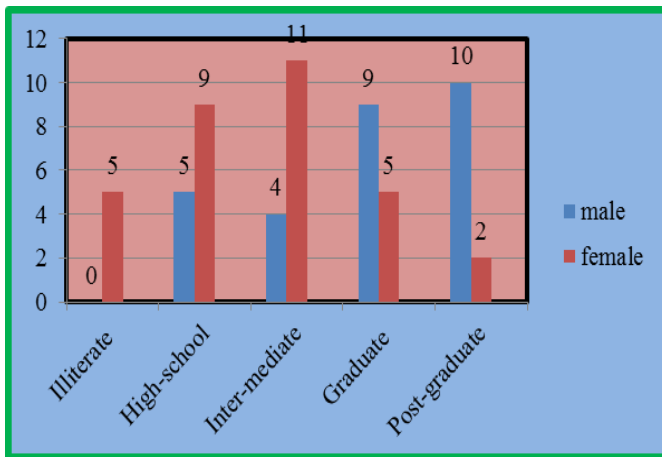


Fig 2: Educational qualification of old age Home elderly

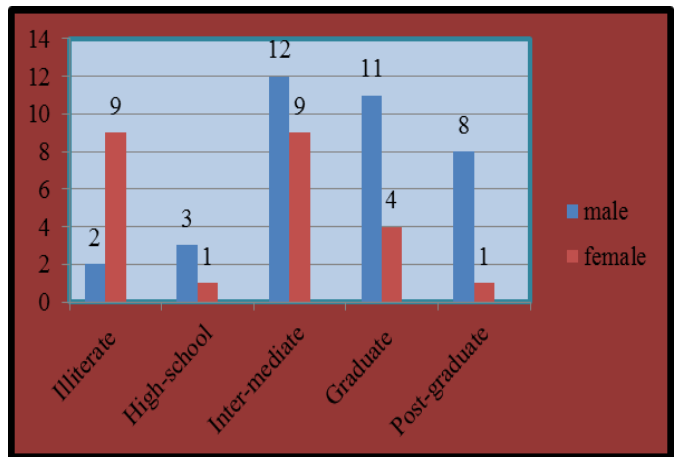


Fig 2.2: Educational qualification residing in their of elderly.

Table 3: Distribution of respondent according to marital status. (N=120)

Working profile	Old age Home (N=60)			Residing in their Home (N=60)		
	Male f (%)	Female f (%)	Total	Male f (%)	Female f (%)	Total
Married	19 (55.9)	23 (56.1)	33	25 (71.4)	18 (43.9)	32
Widow/ers	8 (28.6)	12 (63.2)	26	10 (41.7)	7 (36.8)	27
Unmarried	1 (50)	0	1	1 (50)	0	1



Fig 3: marital status residing in their home of elderly

Table 4: Ho- There is no significant relationship between Psychological well-being of elderly across residence of older people.

S. No	Parameter	Mean±SD Old age home	Mean±SD Residing in their home	't'	'P'
1.	I tend to be influenced by people with strong opinions.	5.03±1.275	5.12±1.316	.007	.931
2	In general, I feel I am in charge of the situation in which I live.	3.25±1.558	4.95±.852	32.594**	.000
3	I think it is important to have new experiences that challenge how you think about yourself and the world.	4.45±1.395	4.85±1.287	1.582	.211
4	Maintaining close relationships has been difficult and frustrating for me.	2.67±1.410	2.20±1.695	1.117	.293
5	I live life one day at a time and don't really think about the future.	3.80±1.774	4.10±1.719	.055	.816
6	When I look at the story of my life, I am pleased with how things have turned out.	4.42±1.279	4.42±1.078	1.989	.161
7	I have confidence in my opinions, even if they are contrary to the general consensus.	4.48±1.269	4.02±1.444	.744	.390
8	The demands of everyday life often get me down.	4.73±1.006	4.38±.922	.027	.869
9	For me, life has been a continuous process of learning, changing and growth.	4.65±1.325	4.37±1.426	.190	.664
10	People would describe me as a giving person, willing to share my time with others	2.97±1.507	3.53±1.589	1.556	.215
11	Some people wander aimlessly through life, but I am not one of them.	3.45±1.881	2.03±1.484	15.512**	.000
12	I like most aspects of my personality.	5.02±1.066	5.05±1.268	.246	.621
13	I judge myself by what I think is important, not by the values of what others think is important.	4.25±1.297	4.55±1.111	.879	.350
14	I gave up trying to make a big improvements or changes in my life a long time ago.	3.53±1.567	4.73±1.148	8.868*	.004
15	I have not experienced many warm and trusting relationships with others.	4.62±1.277	4.42±.979	3.626	.059
16	I sometimes feel as if I've done all there is to do in life.	3.92±1.629	4.72±1.091	11.099*	.001
17	In many ways, I feel disappointed about my achievements in life.	5.17±.847	3.92±1.629	24.790**	.000
18	In many ways, I feel disappointed about my achievements in life.	4.40±1.649	4.38±1.497	1.788	.184

(P<0.05=Level of highly significant)

Result depicted in table no-4.5.3 depicts that the P value calculated more than 0.05, which should that there was significant difference between residences of older people of respondent among elderly.

Result also revealed that majority of the parameter highly significant (.000). It mean that there is difference between residence of older people of respondent and psychological

well-being among elderly.

Hence the result revealed t test was found significant between residence of older people and psychological well-being among elderly. which mean null hypothesis was rejected was rejected, which mean that psychological well-being dependent or influenced by elderly live in old age home and residing in their home.

Table 5: Ho- There is no significant relationship between Psychological well-being of elderly across types of family.

S. No	Parameter	Mean±SD Neclure	Mean±SD Joint	't'	'P'
1.	I tend to be influenced by people with strong opinions.	5.26±1.143	4.79±1.459	2.478	.118
2	In general, I feel I am in charge of the situation in which I live.	3.64±1.636	4.81±.947	23.881	.000
3	I think it is important to have new experiences that challenge how you think about yourself and the world.	4.75±1.310	4.49±1.412	.383	.537
4	Maintaining close relationships has been difficult and frustrating for me.	2.48±1.556	2.36±1.607	.012	.914
5	I live life one day at a time and don't really think about the future.	3.79±1.838	4.19±1.583	2.642	.107
6	When I look at the story of my life, I am pleased with how things have turned out.	4.44±1.167	4.38±1.208	.088	.767
7	I have confidence in my opinions, even if they are contrary to the general consensus.	4.25±1.470	4.26±1.224	1.602	.208
8	The demands of everyday life often get me down.	4.68±1.012	4.36±.895	.500	.481
9	For me, life has been a continuous process of learning, changing and growth.	4.62±1.430	4.34±1.290	2.318	.131
10	People would describe me as a giving person, willing to share my time with others	3.47±1.582	2.91±1.501	.747	.389
11	Some people wander aimlessly through life, but I am not one of them.	3.14±1.988	2.13±1.361	22.319	.000
12	I like most aspects of my personality.	5.12±1.079	4.89±1.289	1.740	.190

13	I judge myself by what I think is important, not by the values of what others think is important.	4.32±1.290	4.53±1.080	2.096	.150
14	I gave up trying to make a big improvements or changes in my life a long time ago.	4.07±1.540	4.23±1.433	.445	.506
15	I have not experienced many warm and trusting relationships with others.	4.44±1.213	4.64±1.009	.516	.474
16	I sometimes feel as if I've done all there is to do in life.	4.33±1.519	4.30±1.317	1.852	.176
17	In many ways, I feel disappointed about my achievements in life.	4.66±1.426	5.09±1.231	1.391	.241
18	In many ways, I feel disappointed about my achievements in life.	4.30±1.672	4.53±1.396	3.329	.071

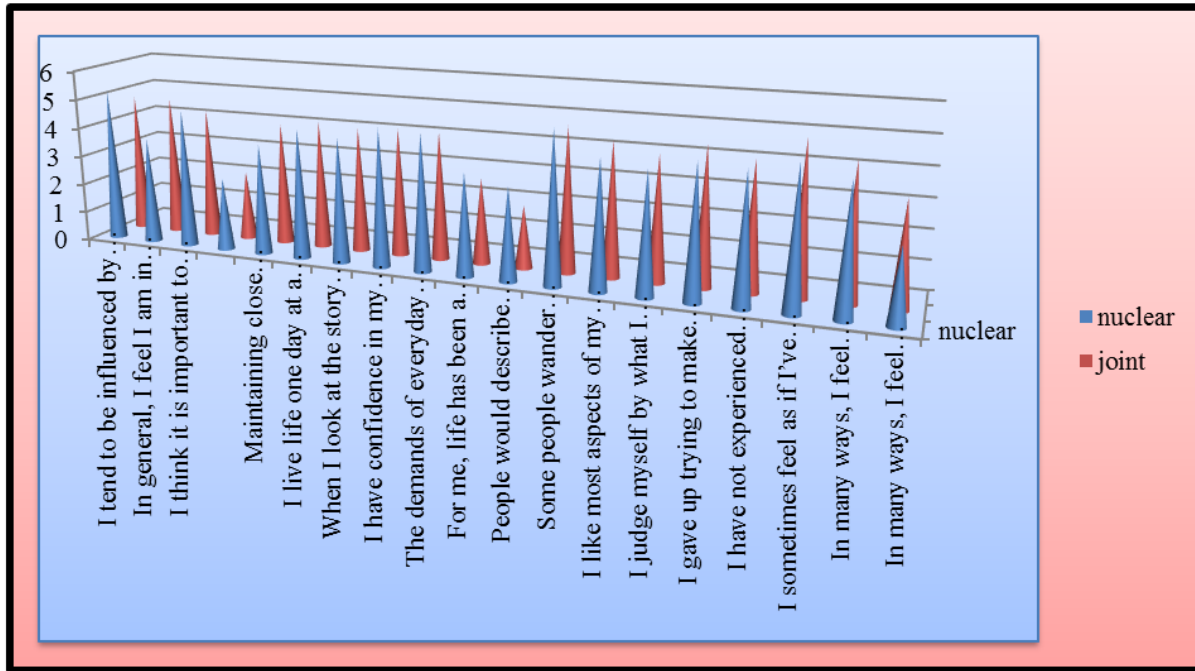


Fig 5: Distribution of the respondent on the basis of psychological well-being across types of family.

Result depicted in table no-4.5.4 depicts that the P value calculated more than 0.05, which should that there was significant difference between types of family people of respondent among elderly.

Result also revealed that majority of the parameter highly significant (.000). It mean that there is difference between types of family of respondent and psychological well-being

among elderly.

Hence the result revealed t test was found significant between types of family and psychological well-being among elderly. Which mean null hypothesis was rejected, which mean that psychological well-being dependent or influenced by types of family.

Table 6: There is no significant relationship between emotional intelligence of elderly across residence of older people.

S. No	Parameter	Mean±SD Old age home	Mean±SD Residing in their home	't'	'p'
1.	Good relationship with other	1.53±.503	1.78±.415	26.600**	.000
2.	Like talking other	1.73±.446	1.73±.446	1.000	.000
3.	Liked by other	1.58±.497	1.58±.497	1.000	.000
4.	Competition with your friends easily	1.65±.481	1.65±.481	1.000	.000
5.	Usually aware about the reasons for your happiness or sadness.	1.62±.490	1.47±.503	2.638	.107
6.	Care for others happiness or sorrow.	1.67±.475	1.65±.481	.146	.704
7.	Able to resolve the problem of others easily	1.50±.504	1.43±.500	1.068	.304
8.	Family members care about your feelings.	1.38±.490	1.77±.427	12.239*	.001
9.	Extremely disciplined.	1.33±.475	1.43±.500	4.422	.038
10.	You have many friends.	1.40±.494	1.65±.481	1.226	.270
11.	Others often approach you for help.	1.62±.490	1.58±.497	.535	.466
12.	You usually happy	1.37±.486	1.68±.469	1.297	.257
13.	Ask for help from others to finish your work.	1.58±.497	1.63±.486	1.191	.277
14.	Recognize people intentions easily.	1.62±.490	1.72±.454	5.142	.025
15.	React normally to your criticism by others.	1.43±.500	1.77±.427	18.985**	.000
16.	Easily able to get over your failures and learn from your mistake.	1.75±.437	1.60±.494	11.518*	.001
17.	Troubled by the fear of being rejected by friends	1.55±.502	1.68±.469	7.236	.008
18.	Others trust you.	1.47±.503	1.75±.437	18.536**	.000
19.	Quickly able to take decisions.	1.65±.481	1.58±.497	2.097	.150
20.	Reject /disapprove of even the right thoughts of people whom you happen to dislike personally.	1.40±.494	1.58±.497	.135	.714
21.	Fall in love and get out of it as quickly.	1.50±.504	1.42±.497	1.686	.197



22	Take jokes of others normally.	1.52±.504	1.62±.490	3.191	.077
23	Like helping others.	1.70±.462	1.75±.437	1.485	.225
24	Easily able to motivate others.	1.58±.497	1.73±.446	10.792*	.001
25	Find others sorrows as your own.	1.60±.494	1.67±.475	2.175	.143
26	People with whom your often interact trustworthy.	1.42±.497	1.65±.481	2.097	.150
27	Able to trust others.	1.73±.446	1.63±.486	5.369	.022
28	Able to react normally to your jokes.	1.60±.494	1.52±.504	2.258	.136
29	Achieve mercy and help of others easily.	1.55±.502	1.73±.446	14.131**	.000
30	Yourself a responsible person	1.68±.469	1.77±.427	4.150	.044
31	Easily calm down anger of others.	1.60±.494	1.70±.462	4.917	.029

(P<0.05=Level of highly significant)

Result depicted in table no-4.6.3 depicts that the P value calculated more than 0.05, which should that there was significant difference between residences of older people of respondent among elderly.

Result also revealed that majority of the parameter highly significant (.000). It mean that there is difference between

residences of older people and emotional intelligence among elderly. Hence the result revealed t test was found significant between and residences of older people among elderly. which mean null hypothesis was rejected, which mean that emotional-intelligence dependent or influenced by residence of older people.

**Table 7:** Correlation of Emotional intelligence and Physical fitness.

**Ho:** There exists no significant relationship between gender of elderly, emotional intelligence and physical fitness.

		Emotional intelligence	Physical fitness
Male	Emotional intelligence	1	
	Physical fitness	.107 .400	1
Female	Emotional intelligence	1	
	Physical fitness	.442** .000	1

\*\*Correlation is highly significant the 0.01 level.

The above table 48.1 showed that age had positive relationship with each other and also showed that the emotional intelligence and physical fitness had positive relationship with other. It mean that if elderly male physical fitness also high. Also there was a highly significant difference between emotional intelligence and physical fitness.

There was no significant difference between male and female with emotional intelligence and physical fitness The Null hypothesis was rejected.

**4. Conclusion**

The study examined the relationship between psychological and emotional well-being in old age. The aim was to find out the relationship if any physical health life satisfaction and emotional health. The findings reveal that is consistent relationship between psychological and emotional well-being and health is old age. On applying person’s coefficient correlation significant positive relationship were found between psychological and emotional in elderly people.

**5. Reference**

1. Blanchard Fields F. Every day problem solving and emotion: an adult developmental perspective. *Curr. Dir. Psychol. Sci.* 2007; 16(1):26-31. doi:10.1111/j. 1467-8721.2007.00469.
2. Bowling A, Grundy E. Activities of daily living: changes in functional ability in three samples of elderly and very elderly people. *Age and Ageing*, 1997; 26(2):107-114.
3. Bradburn NM. The structure of psychological well-being. Chicago: Aldine, 1969.
4. Carstensen LL, Turan B, Scheibe S, Ram N, Ersner-Hershfield H, Samanez Larkin G *et al.* Emotional experience improves with age: evidence based on over 10

- years of experience sampling. *Psychol. Aging* 2011; 26, 21–33. doi: 10.1037/a0021285.
5. Irudaya Rajan S, Misra US, Defining Old Age: An Indian Assessment. *Bold.* 1995; 5:4.
6. Krause N, Jay G, Liang J. Financial strain and psychological well-being among the American and Japanese elderly. *Psychology and Aging*, 1991; 6(2):170-181.
7. Lawton MP. The Philadelphia Geriatric Center Morale Scale: A revision. *Journal of Gerontology*, 1975; 30:85-89.
8. Levy BR, Leifheit-Limson E. The stereotype-matching effect: Greater influence on functioning. *Psychology and Aging*, 2009; 24:230-233. doi:10.1037/a0014563
9. Priyanka, mishra Sunita. Life Satisfaction of Elderly People Urban People in Urban & semi Urban Region of Lucknow. *An International Research Journal Lab to Land Journal.* 2010; 2(7):297-302.
10. Rathaur Anjali, mishra Sunita. Gerontological adjustment of old people and their well-being. *An International Journal of current research.* 2015; 7(09):20334-20337.
11. Rathaur Anjali, mishra Sunita. life style disease and wellbeing in old age. *Journal for Studies in Management and Planning.* 2015; 1(08):2395-0463.
12. Scheibe S, Carstensen L. Emotional Ageing: Recent Findings and Future Trends’ in the *Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 2009; 2:135-144.
13. Tejal N. Psychological well-being. A study of place of residence-4 gender and age among aged people. *Indian Journal of Psychology and Mental Health.* 2010; 4:145-149.