

TURKISH ELDERLY'S LIFE SATISFACTION ACCORDING TO INDIVIDUAL CHARACTERISTICS AND DEPENDENCE IN DAILY LIFE ACTIVITIES

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ABSTRACT

Background: Older people must maintain their lives in the face of various obstacles due to health and social problems that occur with aging. Certainly, difficulties in daily life activities become more evident with advancing age and impair life satisfaction Purpose: This study's primary aim was to investigate and compare life satisfaction according to individual characteristics and dependence in daily life activities of the Turkish elderly. Methods: This cross-sectional study included 200 (female=121, male=79) participants aged 65 and above, who were living in the area of Dikmen, Akpınar in Ankara, Turkey. The Information Gathering Form, the "Philadelphia Geriatric Center Morale Scale," and the "Katz Index of Independence in Activities of Daily Living" were used to collect data.

Results: The results revealed that elderly people's morale levels show significant differences depending on their dependence / independence during the following daily activities: bathing, dressing, sitting down/standing up, using the toilet, walking, cooking, cleaning, and shopping.

Conclusion: The results indicate that elderly people who can continue their daily activities independently have higher levels of satisfaction.

Keywords: Daily life activities, elderly, life satisfaction

INTRODUCTION

Senility can be defined as a biological, psychological, and sociological process that occurs with advancing chronological age. According to the World Health Organization's (WHO, 2013) an elderly person is defined as aged 65+ years. Changes and improvements in quality of life have increased the number of elderly by increasing the average lifespan, but have also brought about many problems that need solving in psychological, social, cultural, and economic dimensions (Danış, 2004; Koşar, 1996).

According to United Nations report, world population will be 7.284 in the end of 2015 and reach 9.306 by 2050 (TOBB, 2013). In Turkey, the elderly account for 8% of the population, and average lifespan is 68 years for males and 71 years for females (TSE, 2015). The proportion of elderly population is projected to reach 9.3% by 2025 in Turkey (Aylaz, Güneş, & Karaoğlu, 2005; Güler, 1997). Life satisfaction, defined as attitudes or feelings of an individual related to overall quality of life (Lawton, Winter, Kleban, & Ruckdeschel, 1999), has therefore gained greater importance for the elderly, along with the population's aging.

Studies about geriatric life satisfaction is increasing in many country. Indeed, aging research has predominantly focused on issues of the physical, psychological, social, and economic status of older adults (Ng and Confessore, 2014).

Older people must maintain their lives in the face of various obstacles due to health and social problems that occur with aging. Certainly, difficulties in daily life activities become

more evident with advancing age and impair life satisfaction (Dudak, Çakıl, Aykut, Çetinkaya, Günay, & Öztürk, 2006). Furthermore, life satisfaction is one of the common measures of subjective well-being (Campbell, 1976), and its stability and validity have been well documented. The higher a population's life satisfaction, the better that population's quality of life (Chiao, Ksobiech, & Wei, 2013).

Many researchers see a link between advancing age and decreased life satisfaction level because of social, physical, emotional and psychological losses in the old ages. Major life events experienced in the aging process are presumed to impact the elderly's life satisfaction profoundly (Chen, 2001; Sener, 2007).

Studies on the elderly have reported an association between life satisfaction and functional status, personality, social support (communication with children and friends, number of close friends, and friend satisfaction), financial status, physical function, social support, activity performance in daily life, loneliness, and restricted mobility (Borg, 2006; Hernandez, 2009; McCamish-Svenson, Samuelsson, Hagberg, Svensson, & Dehlin, 1999). In fact, such studies on aging have an increasing importance in improving the elderly's life satisfaction. Therefore, the present study was conducted to evaluate life satisfaction according to the Turkish elderly's individual characteristics and daily life activities.

METHODS

With the goal of evaluating life satisfaction according to the elderly's individual characteristics and daily life activities, people aged above 65, residing in the Akpınar Parish located in Çankaya district of Ankara, constituted the area of this study. Due to time constraints and financial restrictions, a study sample was determined using simple random sampling, a probability sampling method, and 200 elderly persons constituted the study group.

During the study, interviewers read questions on the three scales used to collect data to the elderly participants, in accord with face-to-face techniques. Questions that elderly persons could not understand were reread, and the questionnaire were completed in approximately 25 to 30 min.

Participants

The study sample comprised 200 elderly people residing in their own or relatives' homes. People in the 71–75 age group (33.3%), secondary school graduates (33.0%), those having an income of 892–1500 TL (41.5%), those having two children (28.5%), those living with their spouses (33.0%), and those having social security insurance (SSK) (38.0%) were major subgroups.

Data Collection Instruments

Data Gathering Form

Survey has been used as a data gathering method in the study. The survey is made of two parts. While questions about the demographic specifications of the students' are asked in the first part, the second part consists of the Philadelphia Geriatric Center Morale Scale" and "Katz Index of Independence in Activities of Daily Living".

Philadelphia Geriatric Center Morale Scale

The "Philadelphia Geriatric Center Morale Scale" developed by Lawton in 1975, the Turkish version of which was validated by Pınar and Oz in 2010 (Shelkey & Wallace, 1999). Assessing life satisfaction in the elderly, this scale contains 15 questions assessing three

factors—agitation, attitude toward one’s own aging, and loneliness dissatisfaction (25, 26). The Agitation dimension was scored based on answers to the first six questions; the Attitude Toward Own Aging dimension was assessed by responses to four questions (7–10); the Loneliness Dissatisfaction dimension was assessed by responses to five questions (11–15), with higher scores indicating better status in all dimensions (Pinar & Oz, 2010).

Katz Index of Independence in Activities of Daily Living (ADL)

The ADL index contains eight questions assessing bathing, dressing, moving, transferring, walking, eating, cleaning, and shopping. The items are scored three points if the person independently performs daily activities, two points if the person performs the activity with assistance, and one point if the person cannot perform the activity at all (Shelkey & Wallace, 1999).

Data Analysis

Data were analyzed with the SPSS 16.0 package program. Participants’ demographic features were expressed as frequency and percentage, and each item in the “Philadelphia Geriatric Center Morale Scale” was expressed as percentage distribution and standard deviation. The comparison between scale items and individual characteristics and activities of daily living was conducted using the t-test for two groups and analysis of variance between more than two groups. The reliability of the scale was determined using Cronbach’s Alpha coefficient.

RESULTS

Descriptive statistics on the participants’ opinions about items in the Philadelphia Geriatric Center Morale Scale are presented in Table 1. The item, “Is life hard much of the time?” was answered “yes” by 86.5% of the participants, indicating low morale among the participants. Similarly, the participants provided negative answers to the following items: “Do you take things hard?” (66.5%); “Do you feel that as you get older, you are less useful?” (65.5%); “Do you see enough of your friends and relatives?” (62.5%); “Do things keep getting worse as you get older?” (65.0%); “Do little things bother you more this year?” (61.5%).

Table 1(Part-I). Descriptive Statistics for the Turkish Elderly Sample on the Philadelphia Geriatric Center Morale Scale

<i>Items</i>	<i>Yes</i>	<i>No</i>
	<i>%</i>	<i>%</i>
1. Do little things bother you more this year?	61.5	38.5
2. Do you sometimes worry so much that you can’t sleep?	38.5	61.5
3. Are you afraid of a lot of things?	45.5	54.5
4. Do you get angry more frequently than you used to?	42.5	57.5
5. Do you take things hard?	66.5	33.5
6. Do you get upset easily?	27.5	72.5
7. Do things keep getting worse as you get older?	62.0	38.0
8. Do you feel that as you get older you are less useful?	65.5	34.5
9. As you get older, are things better than you thought?	35.0	65.0

Table 1(Part-II). Descriptive Statistics for the Turkish Elderly Sample on the Philadelphia Geriatric Center Morale Scale

<i>Items</i>	<i>Yes</i>	<i>No</i>
	<i>%</i>	<i>%</i>
10. Are you as happy now as you were when you were younger?	45.0	55.0
11. Do you feel lonely?	51.0	49.0
12. Do you see enough of your friends and relatives?	62.5	37.5
13. Do you sometimes feel that life is not worth living?	37.5	62.5
14. Is life hard much of the time?	86.5	13.5
15. How satisfied are you with your life today?	58.0	42.0

Results of the t-test and analysis of variance for comparison of various individual characteristics in the Philadelphia Geriatric Center Morale Scale are presented in Table 2. Accordingly, morale was not significantly affected by gender, number of children, people living together, and social security ($p>0.05$); however, age, education level, and monthly income were associated with significant differences ($p<0.05$). When group averages were examined, the average morale score was lower in people in the 65–70 age group, primary school graduates, and those with an income from 892 to 1500 TL.

Table 2(Part-I). Comparison of Life Satisfaction of the Turkish Elderly Sample with Various Individual Characteristics

<i>Variable</i>	<i>Group</i>	\bar{X}	<i>s.d.</i>	<i>t/F</i>	<i>p</i>
Gender	Female	1.48	0.17	1.391	0.166
	Male	1.51	0.17		
Age	65–70	1.58	0.18	17.011	0.000*
	71–75	1.56	0.15		
	76–80	1.49	0.16		
	81–85	1.43	0.11		
	85 and above	1.32	0.10		
Education Level	Primary School	1.54	0.17	3.356	0.020*
	Secondary School	1.49	0.18		
	High school	1.51	0.16		
	College	1.43	0.16		

Table 2 (Part-II). Comparison of Life Satisfaction of the Turkish Elderly Sample with Various Individual Characteristics

<i>Variable</i>	<i>Group</i>	\bar{X}	<i>s.d.</i>	<i>t/F</i>	<i>p</i>
Monthly Income	891 TL and below (minimum wage)	1.51	0.19	2.480	0.045*
	892–1500 TL	1.53	0.17		
	1501–2250 TL	1.50	0.17		
	2251–3000 TL	1.43	0.15		
	3001 TL and above	1.43	0.16		
Number of Children	No children	1.57	0.20	0.992	0.424
	One	1.49	0.18		
	Two	1.51	0.18		
	Three	1.50	0.17		
	Four	1.45	0.17		
People Living Together	Five and above	1.49	0.14	1.827	0.144
	Alone	1.45	0.15		
	With Spouse	1.52	0.17		
	With Spouse and Children	1.49	0.20		
Social Security	With Children	1.51	0.16	2.336	0.075
	Health Card for the Uninsured	1.42	0.17		
	Retirement Fund	1.47	0.16		
	Social Security Organization for Artisans and the Self-employed	1.54	0.20		
	Social Security Institution	1.51	0.17		

Results of the t-test and analysis of variance for comparison of activities of daily living in the Philadelphia Geriatric Center Morale Scale are presented in Table 3. Morale of the elderly showed significant differences according to abilities in bathing, dressing, sitting down / standing up, using the toilet, walking, preparing meals, cleaning, and shopping ($p < 0.05$). When average values were examined, people expressing independence while performing the above-mentioned activities reported more favorable opinions when compared with semi-dependent and dependent individuals; in other words, independent people had higher morale.

Table 3. Comparison of the Turkish Elderly's Life Satisfaction According to Dependency in Daily Life Activities

<i>Variable</i>	<i>Group</i>	\bar{x}	<i>s.d.</i>	<i>F</i>	<i>p</i>
Bathing	Dependent	1.39	0.11	10.734	0.000
	Semi-dependent	1.42	0.13		
	Independent	1.53	0.18		
Dressing	Dependent	1.39	0.13	6.671	0.002
	Semi-dependent	1.42	0.13		
	Independent	1.52	0.18		
Sitting down/standing up	Dependent	1.37	0.11	5.453	0.005
	Semi-dependent	1.43	0.13		
	Independent	1.51	0.18		
Using the Toilet	Dependent	1.39	0.13	5.962	0.003
	Semi-dependent	1.40	0.13		
	Independent	1.51	0.17		
Walking	Dependent	1.33	0.08	8.433	0.000
	Semi-dependent	1.43	0.13		
	Independent	1.52	0.17		
Preparing a Meal	Dependent	1.41	0.12	23.488	0.000
	Semi-dependent	1.43	0.15		
	Independent	1.57	0.17		
Cleaning	Dependent	1.41	0.12	50.088	0.000
	Semi-dependent	1.45	0.14		
	Independent	1.65	0.16		
Shopping	Dependent	1.40	0.12	34.521	0.000
	Semi-dependent	1.47	0.13		
	Independent	1.62	0.19		

DISCUSSION

Slightly more than half the elderly people included in the study reported satisfaction from life. Studies in the literature have reported similar findings, and the rate of elderly reporting satisfaction from life was 56.3% in the study by Kurt (2008), 62.0% by Arslan et al. (2005), and 80.4% by Dudak et al. (2006).

The present study found some difficulties in elderly people's lives. Indeed, a considerable number reported feeling lonely, experiencing difficulties while doing something, and feeling that everything was getting worse. Studies that aimed to determine satisfaction in elderly life have reported similar findings. In studies by Aslan et al. (2005) and Kurt et al. (2008), feeling lonely ranked first among other reasons for their dissatisfaction in life (Aslan, 42.0%; Kurt, 46.2%).

In the present study, a considerable number of individuals reported that they saw enough of their friends and relatives. Meeting with close friends and relatives increases morale and thereby life satisfaction in the elderly. Studies suggest that a close relationship with family members is a factor that increases quality of life and satisfaction from life (Hjaltadottir & Gustafsdottir, 2007; Tseng & Wang, 2001).

In the present study, elderly males had higher quality of life and satisfaction from life than females. Many international and national studies support this finding (Arslantaş, Metintaş, Ünsal, & Kalyoncu, 2006; Ceremnych, 2003; Iwatsuba, Derriennic, Cassou, & Patrenaud, 1996; Kaya et al., 2008; Kirchengast & Haslinger, 2008). This result suggests that in our country, which has a patriarchal structure, role sharing according to custom and tradition, and especially the constraints these roles place on women, lead to a reduction in life satisfaction.

Research shows significant differences between age and moral values and life satisfaction of the elderly. In fact, as age increased, life satisfaction of the elderly significantly decreased. In the literature, other studies support these findings (Kaya et al., 2008; Özyurt, 2007; Şahin & Emiroğlu, 2014).

In this research, a relationship was discovered between the life satisfaction of elderly people and their level of education. In fact, Altıparmak and Yazıcı found a significant relationship between the level of education of elderly people and their ability to cope with daily activities in their study (Yazıcı, 1994).

Study results determined that as the income level increased, life satisfaction of elderly significantly decreased. It is thought that this arises from the fact that high-income individuals have higher life expectations, always feeling like they require better, and hence they are not easily contented with their situation.

The physical capacity of individuals decreases with age, and this restricts their functional independence (Erkal & Sahin 2010). As people age, their need for assistance in almost every daily activity increases. It is known that regular physical activity increases psychological wellness and life satisfaction among the elderly (Arthur et al., 2002; Erkal & Sahin, 2010).

Morale status and satisfaction from life show changes depending on the elderly's independence in activities of daily living. Some studies suggest that improvements in activities of daily living directly affect quality of life and morale status (Lin, Ou, & Wu, 1998; Pearson, Hocking, Mott, & Riggs, 1993). Altug, Yağcı, Kitiş, Büker, and Cavlak (2009) found quality of life lower in patients with limited mobility. Likewise, in studies by Hellström and Hallberg (2001), 79% of elderly participants required assistance to perform personal activities (e.g., bathing, using the toilet), and the increase in their dependence in daily life activities was associated with a decrease in their satisfaction from life. Kesioğlu,

Bilgiç, Pıçakçıefe, and Uçku (2003) found that the activities in which the elderly had the most difficulties included shopping (25.8%), bathing (18.8%), dressing (15.3%), and using the toilet (15.1%). These findings parallel the present study's results.

Due to restricted mobility with aging, reduced life satisfaction is expected to result from decreased ability to perform personal activities and to satisfy one's own needs.

CONCLUSION AND RECOMMENDATIONS

The average morale score was higher in people in the 65–70 age group, primary school graduates, and those with a monthly income from 892 to 1500 TL. Satisfaction from life in the elderly shows significant changes consequent to their independence in activities of daily living.

The following may be suggested based on the current study's findings:

1. Performing more studies on a larger group of elderly patients in an attempt to increase life satisfaction in the elderly,
2. Determining problems encountered by the elderly in performing daily life activities and seeking solutions to reduce such problems,
3. Providing effective social support to those experiencing dependence in performing daily life activities, and
4. Planning and implementing services to help increase satisfaction from life in the elderly.

The study does have some limitations. These are:

- I. Measurement of life satisfaction and life daily life activities only by self-report and
- II. The survey covers only the elderly people living in Ankara/Cankaya. Comparing the elderly living two or more cities might lead to new conclusions.

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