Research Paper
Prediction of Psychological Well-Being of the Elderly Based on the Power of Stress Management and Social Support

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ABSTRACT

Objectives Owing to the fact that interpersonal bonds of social support can improve health under stressful situations, social support can have a protective and moderating role against the harmful effects of stress. The present research aims to predict the relationship between psychological well-being and the ability to manage stress and social support.

Methods & Materials This descriptive-analytic research is correlational and is done through the sectional method. The society includes all the elderly living in Tehran (60 years and older), and the sample was selected among the old people who appeared in parks during May and June, 2016 in district 8 in Tehran. The sample size is determined using Cochran formula (n=131 people). In this research, the short form of Rif psychological well-being scale (1989), Kalzbyk stress management scale (1990), and Philips social support scale (1977) have been applied. The data analysis was performed through multiple regressions.

Results The results show that social support and stress management with t=2.23 and t=4.79, respectively, on level Beta=0.05 will predict psychological well-being.

Conclusion The results showed that social support and stress management variables can predict psychological well-being variable among the elderly. Therefore, the use of active coping styles is recommended.

Extended Abstract

1. Objectives

The increasing population of the elderly worldwide and also in Iran reveals the need for conducting research in this regard. However, most of the studies conducted in Iran in the field of aging are new and limited and focus on the physical health of the elderly people. It should be noted that elderly studies will have a growing value and credibility for different policies including studies on the physical and mental health of the elderly people. Psychological well-being affects disease control and the reactivity of people when facing problems. Interpersonal links of social support can promote health. Under stressful circumstances, social support plays the role of a moderator and protector from the harmful effects of stress. The current study was conducted with the aim of predicting the relationship between psychological well-being and stress management ability and social support.

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2. Methods and Materials

This descriptive-analytic study is a cross-sectional correlational research conducted in May and June, 2017. Statistical population of this study included all elderly people living in Tehran (60 years and older). The subjects were selected from among the elderly in parks (Parks of Haft Howz, Fadak, Taslihat, Baharestan) in district 8 of Tehran province using the available sampling method. Using the Cochran formula, the sample size was determined to be 131. In this study, a short form (18 questions) of the Reef Psychological Well-being Scale (1989) was used to measure the psychological well-being of the elderly. The Calzbick Stress Management Scale (1990) was employed to assess the stress management of the elderly, and the Social Support Scale of Philips (1977) was used to measure social support of the studied elderly. In the present study, questionnaire method was used individually to collect information.

An inclusion criterion to participate in this study was the ability to read and write. The data collected from the questionnaires were analyzed using SPSS21 software and simultaneous and simple multivariate regression testing . This study was approved in terms of ethics of conducting research by the professors of Faculty of Psychology and Educational Sciences at Allameh Tabatabai University of Tehran. In this study, all moral considerations including the informed consent and the confidentiality of the information were observed. The purpose of the study was explained individually to the elderly subjects, and their permissions were obtained for performing the study and using their information. The elderly under study were free to accept or refuse to participate in the research. As a result, a number of participants agreed to cooperate at the beginning but refused to complete the questionnaire and left the research, and some other subjects replaced them. The participants were assured that the gathered information will be anonymous and that confidentially will be maintained until the end of the study. All the scientific materials are presented with reference to their source.

3. Results

The number of male and female participants was equal in terms of demographic characteristics. A total of 65 men and 65 women, equivalent to 50% of both genders, participated in this study. Of them, 87% of the elderly were married and the remaining 13% were single. With regards to age, 85% of the participants were 60 and 75 years of age and 11% were more than 75 years of age. In terms of education, 36% of the elderly had an elementary degree, 28% had a secondary degree, 24% had a diploma, and 12% had a university degree. On the scale of psychological well-being, getting higher score meant better psychological well-being. Correlation of the short version of Reef Psychological Well-being Scale with the original scale fluctuated between of 0.7 to 0.89. In the present study, scale validity using Cronbach's Alpha was 0.65.

In the scale of coping with the stressful conditions by Calzbic, the scoring was based on 5-point Likert scale, where the maximum value for each item was 5 and the least one was 1. The range of changes included three types of confrontational behaviors in a way that the score for each of the triple confrontational behaviors, i.e. problem-oriented, emotion-oriented, and avoidance-oriented, was from 16 to 80. In other words, the dominant confrontational behaviors of the individual were determined according to the score obtained in the test. In other words, a behavior with a higher score was considered as confrontational behavior for the individual. Boysan (2012) has reported the alpha coefficient of sub-scales as follows: Problem-oriented coping was 0.72, emotion-oriented coping was 0.77, and avoidance-oriented coping was 0.74. In the present study, alpha coefficient of problem-oriented coping was 0.75, emotion-oriented coping was 0.72, and avoidance-oriented coping was 0.57. On the Phillips Social Support Scale, getting a high score represents higher social support. In the current study, Cronbach's alpha for the whole questionnaire was obtained to be 0.70. Simultaneous regression was used to answer the assumption that "stress management ability and social

Table 1. Fitting result of the regression model

Model	Non-Standard Coefficients		Standard Coefficients	T Value	P Value
	B Value	Standard Error	Beta Value		
Constant value	38.419	5.535		6.941	0.001
Social support	0.520	0.232	0.181	2.236	0.27
Stress management ability	0.409	0.085	0.388	4.798	0.001

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support can predict psychological well-being in the elderly under study".

R value or correlation between predictor and dependent variables equaled to 0.46, and the value of R^2 equaled to 0.21. That is, the amount of variance that the predictor variables of social support and stress management explain for dependent variable, i.e. psychological well-being, equaled to 0.21. Using the variance analysis of the obtained F value, the significance of regression model equaled to 17.54. This amount is significant at the level of 0.01.

Table 1 shows the regression coefficients related to predictor variables of social support and stress management. Beta coefficient value for social support equaled to 0.18, which is significant at the level of 0.05. This coefficient, in fact, shows the magnitude of the impact of a predictive variable on the dependent variable that is not high. The beta coefficient value for stress management variables equaled to 0.38, which is significant at the level of 0.01. Considering the amount of beta coefficients for two predictor variables, it can be said that stress management variable has more relationship with the dependent variable, i.e. psychological well-being. The results show that social support with t=2.23 at the level of α=0.05 and stress management with t=4.79 at the level of α=0.01 predict psychological well-being.

4. Conclusion

The present study was conducted with the aim of predicting the relationship of psychological well-being with stress management ability and social support. The findings resulting from the hypothesis of stress management ability and social support confirmed the relationship of stress management and social support with psychological well-being in the elderly under study. This indicates that at least one of the predictor variables (stress management or social support) was effective in criterion variable (psychological well-being). The review of the literature has confirmed the relationship between the research variables. Social support as a facilitator of stress compliance is considered as one of the sources of confrontation that affects the promotion of health in older people. Having friends helps people to consider stressful events less threatening and controllable and reduce negative feelings resulting from stress. Therefore, these helpful interventions are recommended for the elderly to acquire and maintain effective resources and coping skills. The use of stress management practices, which includes efforts to

minimize, avoid, tolerate, and accept stressful conditions, helps to balance physical and mental health and promote successful aging process. Thus, active coping styles are recommended.

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Conflict of Interest

The authors declared no conflicts of interest.

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