Compare Self-Esteem and Social Support among Ageing

Anahita Khodaabakhshi-Koolaee,¹ Zakieh Nasiri²

1. Department of Psychology, University of Social Welfare and Rehabilitation Science, Tehran, Iran

Introduction

Ast developments in living standards and health care were associated with the importance of public health improvement in the community during recent decades. Life expectancy is increasing, which results in increments in the number and proportion of the elderly in many populations [1]. According to statistics from the Ministry of Health and Medical Education, by 2006, the elderly population was over 5 million people and will reach to over 10% of society population in 2021 [2]. According to the Welfare Organization of the city of Shiraz, the number of the elderly residing in boarding centers was about 416 people in 2010.

The elderly population increment has attracted the attention of professionals to their primary needs including health, emotional, and psychological needs. Dispelling such needs requires better understanding of them and all aspects of their life [3]. Research showed that 43% of men and 35% of women aged over 65 need special care and attention from their family members.

Family support is the best and most valuable resource for the elderly. Social support has three elements: the emotional support which convinces the person that others like him. Secondly, respect-based protection which convinces the person that he/she has value and revere. And finally, communication or network support, that a person feels belonging to a particular community. These three social elements should be presented together [4]. Social support leads to people's self-efficacy and self-esteem. Self-esteem is the assessing aspect of the self-concept [1]. Many factors affect the self-esteem in old age such as depression, anxiety, rejection, and loneliness.

Seniors living with their families have some roles; they generate income for their families and look after the children, they financially help and do housework; thus, the elderly feel that they are powerful and do not need to rely on others. This feeling is not seen in seniors residing in boarding facilities [5]. This study is seeking to investigate the difference between self-esteem and social support in the elderly group living in boarding centers and living at home.

Materials and Methods

This study is causal-comparative. The study population consisted of all elderly living in the boarding centers or residing at home in the city of Shiraz; out of this population, 60 persons from boarding facilities (30 men and 30 women) and 60 elderly living in their homes (30 men and 30 women) were selected as study samples. The subjects were matched with each other in terms of age and gender.

The subjects had the following conditions: older than 60 years, informed consent to cooperate with the research, resident in boarding centers covered by the Welfare Organization of the city of Shiraz, or who had enrolled at the Retirement Center of Shiraz city in 2009-2010, as well as not being affected by cognitive disorders such as Alzheimer's, dementia, and acute and severe physical disease and psychosis, according to medical records, as well as severe hearing impairment and being able to understand and answer the questions of the questionnaire. To collect data, three questionnaires were used.

1. Demographic: This questionnaire was used to obtain information on the age, gender, and education of elderly.
2- Social Support Appraisals Scale of Vaux et al.: This scale has been developed by Vaux et al. and consists of 23 questions in the three domains of family (8 questions), friends (8 questions), and relatives (7 questions). This test is made based on a four-grade scale: highly agree, agree, disagree, and highly disagree. In his study, Ebrahimighavam has provided a two degrees system; Yes and No, for this scale and has obtained a Cronbach’s alpha coefficient as 0.90 [6].

3- Rosenberg Self-Esteem: This scale is made by Rosenberg and has 10 items. Cronbach’s alpha coefficient for this scale has been reported as 0.87. The correlation coefficient of this scale is obtained 0.48 with Coppersmith self-esteem [7]. This 10-question scale has five positive and five negative questions and the subject specifies his/her view about each clause as agree or disagree. A high score indicates high self-esteem. The data were analyzed through Pearson correlation and the t-test.

Results
As shown in Table 1, there is a significant relationship between self-esteem and social support in elderly residents in boarding centers (p=0.036). In addition to these findings, the other results obtained by this study showed a significant and positive relationship between self-esteem and social support among the elderly living at home (p=0.028). The results revealed that there is a significant difference between social support (t < 7.47) and self-esteem (t < 7.9) in the elderly residing at boarding centers and the elderly living at home.

The results also showed that the relationship between self-esteem and social support in elderly people living in boarding centers is r=0.63 and in elderly living at home is r=0.35.

<table>
<thead>
<tr>
<th>Social Support (Mean±SD)</th>
<th>Self-Esteem (Mean±SD)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residing at boarding centers</td>
<td>34.7±6.84</td>
<td>15.08±2.43</td>
</tr>
<tr>
<td>Living at home</td>
<td>18.13±1.74</td>
<td>18.13±1.74</td>
</tr>
</tbody>
</table>

Discussion
The results showed a significant relationship between self-esteem and social support in elderly people living in boarding facilities and those living at home. Hence, if social support of the elderly is done based on respect to the independence and respect to the psychological, emotional, and social needs, he/she will experience a higher feeling of value and acceptability and this will create a positive image of him [1]. Also, the results showed that social support and the self-esteem of the elderly living at home is higher than the elderly residing in boarding facilities. The elderly lose their effective relationships with family members, friends, and relatives due to residence in boarding facilities and because of decrease in relationship and social networks, social support will also be reduced.

In a research conducted by Pashav et al. the results showed that elderly living at nursing homes have less social support and higher depression compared with the elderly living at home [8]. Self-esteem is an attitude that an elderly person has about his/her set of abilities, characteristics, and values. In boarding facilities, this attitude becomes negative toward their abilities and self-values, because the elderly do not have much control over their lives, do not perform a specific activity, and have no presence in the community; furthermore, they have no authority over a lot of their problems like life decisions, daily planning such as food choices, and freedom to go out, etc. and do not use their abilities compared to the elderly living at home. Therefore, they internalize some concepts for themselves such as: “I’m useless,” and “I’m a burden existent,” and these concepts lead to reduction of self-esteem compared to the elderly living at home.

Another reason for the low self-esteem of these people is that, since people living in boarding facilities have reduced social networking and lose many of their close relationships with the important people of their lives, their social support consequently reduces, which results in the reduction of feelings of self-value and being loved that are received from social support. This has a negative impact on self-esteem; however, seniors living at home feel greater ability by assuming some roles in the family, being respected, and contributing in community and social relations.

Acknowledgements
This research project was approved by the Research Committee of the University of Welfare and Rehabilitation with a code number of 184 in 2010.

Authors’ Contributions
Dr. Anahita Khodabakhshi Koo lace was offer the title of article and implemented all stages of research. Ms. Zakieh Nasiri was collected the data and interviewed with participants.

Conflict of Interest
This research project was financial support from research committee of the University of social Welfare and rehabilitation science.

Funding/Support
University of Social Welfare and Rehabilitation Science.

References