

LIFE SATISFACTION IN AN AGEING POPULATION WITH REFERENCE TO TIRUCHIRAPALLI DISTRICT, TAMIL NADU

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ABSTRACT

The world population is ageing and the phenomenon is not new to India too. The care provided to the elder citizens of a country has a telling effect on the way in which they are treated and looked after. It is said that satisfaction in life is higher in old age than during younger ages. But when the elder citizens are deprived of financial security, food security, healthcare support, social recognition, suitable living conditions and strong emotional support, then the very thought - higher the age higher the satisfaction in life - needs a relook. This paper focuses on current life situations of the elderly people and how they perceive these situations in the light of gaining contentment and satisfaction.

Keywords – life situation, perception of life, elderly people, life satisfaction and

INTRODUCTION

'Greying Nation' is a term given by the United Nations that describes a country as an ageing nation when the proportion of its elderly population (60 years and above) reaches 7 per cent of its total population. India has crossed this benchmark in 2011 with 103.2 million people aged 60+ years constituting 8.6 per cent of the total Indian population. This segment rapidly increased from just 76 million in 2001 to nearly 104 million in 2011- a ground breaking increase by 35.5 per cent in a span of just one decade. India and the world are gearing up in equipping themselves with initiatives and programmes to counter the various issues and challenges posed by the exponential growth of the ageing population. Ensuring the well-being of the elderly people is a strenuous and demanding task. Guaranteeing social and economic security, food security, healthcare, housing, home care for the bedridden, long-term care, transportation, infrastructure and many such services to the elderly people would create a tremendous positive impact on their life satisfaction and well-being, ultimately contributing to their happiness.

Satisfaction is a subjective condition of human mind in relation to having a want, desire or need fulfilled. It is a means of understanding the happiness or gratification one receives from acquiring or achieving one's needs or desires. It is subjective in nature because it is an expression of a feeling that a person experiences when his/her aspirations get fulfilled in a manner desired by the person. The ultimate aim of every human life is the attainment of satisfaction. Every individual aims and strives towards achieving this through various activities and behaviour expressions. Expressions of joy, pleasure, happiness, optimism, success and so on are signs of satisfaction. Therefore, life satisfaction is the core aspect of human welfare.

LITERATURE REVIEW

According to Wolman (1973), "Life satisfaction is the attainment of a desired end and fulfilment of essential conditions." In 1977, Bartlett said, "Satisfaction in life does not lie in the length of days, but in the use we make of them. A man may live long yet may get little from life. Thus satisfaction in life does not depend on number of years, but on will." Maddox (1987) in the

Encyclopaedia of Ageing defines life satisfaction as, “subordinate construct of subjective well-being, others being happiness, mood and morale. It is contentment with one’s life in general.” Pavot and Diener (1993) opine that, “Life satisfaction is the conscious and cognitive judgement of one’s life in which the criteria of judgement are up to the person.” Meanwhile, Telman and Unsal (2004) say that, “Life satisfaction generally implies the pleasure that a person gets from his/her life.”

Indian Philosophy professes that a satisfied and meaningful life involves both subjective thinking and the objective component. It asserts that satisfaction included the capacity for enjoyment and is based on three foundations of life, namely, (1) the establishment of deep relationships; (2) the commitment to goals and ventures, and (3) the use of stories that place life in a genuinely ultimate context.

According to the World Happiness Index, India ranked 139th out of 149 countries in 2021. It slipped down from 122nd rank that it had obtained in 2017. This is a ranking given by the United Nations to indicate how happy a country is. The ranking is based on GDP, per capita, social support, healthy life expectancy, social freedom, generosity and absence of corruption. Finland was ranked as the first country in the world on the Happiness Index. The citizens of Finland say that, their willing acceptance of the cruel and dark winters as a part of life, access to nature, safety, childcare, good schools and free healthcare are some of the finest and remarkable things that have placed their country in the first place in the world. Finland’s story emphasises both the subjective as well as the materialistic implications of life satisfaction. Therefore, satisfaction in life is determined by one’s situation and circumstances that radiate contentment, fulfilment and happiness.

ECONOMICS AND LIFE SATISFACTION

Life satisfaction is a psychological concept yet its foundations rest on economic dimensions. It is well-known that the laws of demand and supply are based on the concept of utility. In economics, ‘utility’ is the capacity of a commodity or service that satisfies human wants. When a consumer purchases a particular good or service, he derives some benefit from its use which gives a certain level of satisfaction. The consumer’s demand or desire for the commodity or service is thus realized in terms of a feeling. To achieve this realization the consumer has to pay for the commodity or service in kind or money wherein economics comes into play. In modern times, ‘utility’ is referred to as ‘expected satisfaction’. Expected satisfaction is subjective. It depends on how much more or less or equal it is in relation to the real satisfaction derived from the consumption of a commodity or service. Thus ‘utility’ in economics and ‘satisfaction’ in psychological context are the same and are based on individual perception.

MEASUREMENT OF LIFE SATISFACTION

Life satisfaction is correlated with income, health, relationships, security and individual abilities both physical and cognitive. Measuring satisfaction is a daunting task because it is subjective in nature and every individual will have his/her own priority variables that are different from those of other individuals. Hence techniques such as surveys, questionnaires and interview schedules based on subjective questioning of the individuals are utilized to obtain an accurate assessment of life satisfaction.

LIFE SATISFACTION IN OLD AGE

It is a general assumption that life satisfaction is relatively high in old age. The weightage given to contributing factors are different during old age. In fact, elderly people emphasize more on contributing factors such as health, spirituality, security, family and social relationships along with long term fulfilment of one’s life rather than on factors like money, prestige and status. Health condition becomes the predominant factor that influences one’s satisfaction during old age. The next most influencing factor that determines satisfaction levels is the perception towards various life situations both in the past and in the present. But in the present day context with the evolution of nuclear families, many of the elderly people are abandoned or not cared for by their children or families. Factors like place of residence, economic status, social security, healthcare facilities, insurance availability, living arrangements, family care, food security, leisure activities and many more also influence the level of satisfaction achieved by the elderly people. Life satisfaction in old age is very important for an ageing population in any country. It means that the quality of life of the elderly people is commendable and the country is able to take care of its elderly population literally when their contribution to economic growth is on the decline. When a good quality of life is ensured to the elderly people, they become healthier and happier which is very essential to help them continue to contribute in whatever way possible to the country’s economy.

STATEMENT OF THE PROBLEM

After the introduction of various economic reforms in the 1990s there has been an increase in life expectancy of men (68 years) and women (70 years), lower death rates and birth rates, declining infant and maternal mortality rates and tremendous advancements in healthcare in India which have led to a rapidly increasing elderly population. According to the Ministry of Statistics and Programme Implementation the population of elderly people in India increased from 76 million in 2001 to 103.2 million in 2011 – by an enormous increase of 35.5 per cent during the same period. Before globalisation spread its wings in India, joint family system was the most predominant family establishment of the day. Joint families served as a source of protection and revered eldercare. Children in the family were looked upon as insurance in old age or future security for the elder members. In present day situations elderly parents in India are not given proper care and are also considered as a burden to the family. Several factors such as children working abroad or in places far away from where parents lived, inability to meet the expenses of elderly parents' health needs, feminization of the current labour force inevitably leading to neglect of eldercare, insufficient physical space to accommodate parents and the bias that the elderly parents are out-dated in their knowledge of life, along with age-related issues and challenges have made the situation more complex. Declining social and economic support, deteriorating family care, worsening physical and cognitive health and a feeling of being abandoned have led to dissatisfaction among the elderly people in general in India. This paper seeks to unravel the scenario of life satisfaction derived from the current living circumstances of the elderly people in Tiruchirappalli District of Tamil Nadu, South India.

OBJECTIVES

- To ascertain the perception of life (life satisfaction levels) among the elderly people of the study area.
- To suggest measures to improve the life situation of the elderly people in the study area.

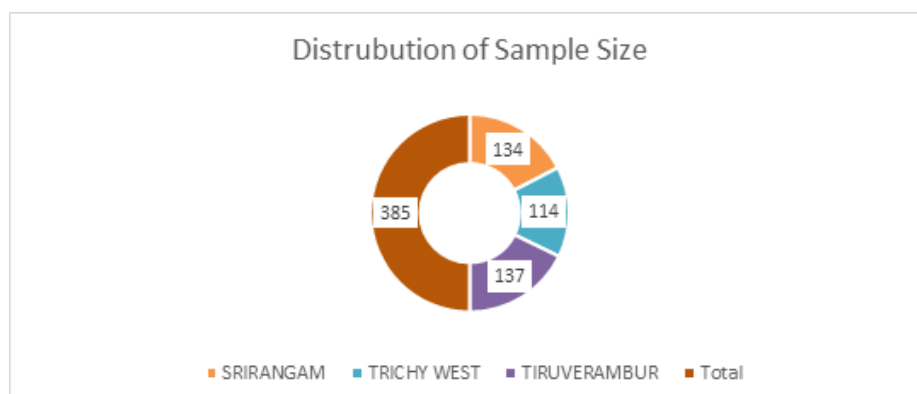
METHODOLOGY

Out of nine assembly constituencies in Tiruchirappalli District, three were randomly selected based on the size of their elderly population. A total of 385 respondents aged 60 years and older, from the rural and urban areas of Tiruchirappalli District in Tamil Nadu, were selected for the study based on random sampling technique. The sample size of 385 respondents was distributed among the three selected assembly constituencies namely, Srirangam, Tiruchirappalli West and Tiruverumbur. The study aimed at finding out the life situations and the perception of life of the respondents of the respective areas. Both male and female respondents were included in the sample study. An interview schedule containing questions related to satisfaction regarding life situations, namely, 1) leisure activities, 2) social relationships, 3) financial status and 4) healthcare support, using the Five-point Likert Scale was used to collect the primary data. The data thus collected was analysed to arrive at the conclusions of the study.

DATA INTERPRETATION

The primary data that was collected from the respondents from the selected assembly constituencies were tabulated and then analysed to unfold the results.

Figure No: 1 Assembly Constituency wise distribution of sample size



Source: Primary data

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Figure No: 1 provides the information regarding the distribution of the respondents who participated in the sample study. Srirangam constituency was represented by 134 respondents, Tiruchirappalli West constituency by 114 respondents and Tiruverumbur constituency by 137 respondents. All together they constituted 385 respondents, the sample size of the research study.

Table No: 1 Stratification of sample respondents into age groups

Age group	Sample Size	Percent
60-69	183	47.5
70-79	127	33
80-89	57	14.8
>=90	18	4.7
Total	385	100

Source: Primary data

The age of the respondents has been categorised into groups of 10 years interval based on The National Policy on Older Persons – Ministry of Social Justice and Empowerment, Government of India's (1999) stratification of 60 plus years population into three groups – 60-69 years as old, 70-79 years as old old and 80 plus years as oldest old. The researcher has further stratified the 80 plus group into two, 80-89 years and 90 plus years, maintaining the two groups in the oldest old category. From the table above, it can be observed that there were 183 (47.5 per cent) respondents in the age group (60-69) years, 127 (33 per cent) in the (70-79) years age group, 57 (14.8 per cent) in the (80-89) per cent age group and 18 (4.7 per cent) in the above 90 years age group.

DATA ANALYSIS

The data collected from the respondents in relation to their perception of life based on their current living conditions were subject to factor analysis as follows -

Factor analysis is a statistical method used to describe variability among observed, correlated variables in terms of a potentially lower number of unobserved variables called factors. In other words, it is possible, for example, that variations in three or four observed variables mainly reflect the variations in fewer such unobserved variables. Factor analysis searches for such joint variations in response to unobserved latent variables. The information gained about the interdependencies between observed variables can be used later to reduce the set of variables in a dataset.

Under factor analysis, confirmatory factor analysis (CFA) is a multivariate statistical procedure that is used to test how well the measured variables represent the number of constructs. In confirmatory factor analysis (CFA), researchers can specify the number of factors required in the data and, which measured variable is related to which latent variable. Confirmatory factor analysis (CFA) is a tool that is used to confirm or reject the measurement theory. The Six-factor model was applied for the study of life situations and perception of life variables.

The variables taken to ascertain Social Relationships were as follows: S1 – I enjoy my, S2 – I am happy with the current living arrangements, S3 – I am not healthy enough to look after, S4 – I am healthy enough to take care of myself and move, S5 – my family/friends will help me when needed, S6 – I like to be in the company of people, S7 – I have people to give me love and, S8 – I have my children with me, S9 – I feel safe in the place I, S10 – I am respected and consulted by my family, S11 – It is the responsibility of my spouse/children to take care of me and S12 – I am thinking of moving to an old age home due to neglect in my home.

The variables taken to understand Financial Status were as follows: F1 – I have my own money to pay for my, F2 – I do not have enough money to contribute to my family, F3 – I can afford to buy what I, F4 – I can take care of my own travel and F5 – I have the freedom to decide on my savings/property and assets.

The variables taken to discover Leisure Activities were as follows: L1 – I have my own leisure activities, L2 – I try to remain active, L3 – I do paid/unpaid activities to keep up my role in, L4 – religion/spirituality is very important to me, L5 – I participate in all cultural/religious/festivals/events, L6 – I like to pursue my own, L7 – I read books/newspapers, L8 – I watch TV/listen to, L9 – I involve myself in writing, L10 – I do errands for my, L11 – I play with my and L12 – I sleep most of the time.

The variables taken to verify the Health Status were as follows: H1 – my family is taking good care of me, H2 – I get proper food and diet required for my health, H3 – I am accompanied by my family members during health check-ups, H4 – I am given/reminded of my daily medication by my family, H5 – I receive unconditional love and care in spite of my health

condition, H6 – I am happy with my current health condition, H7 – I am much better in health than last year and H8 – I believe my health will remain good in the future.

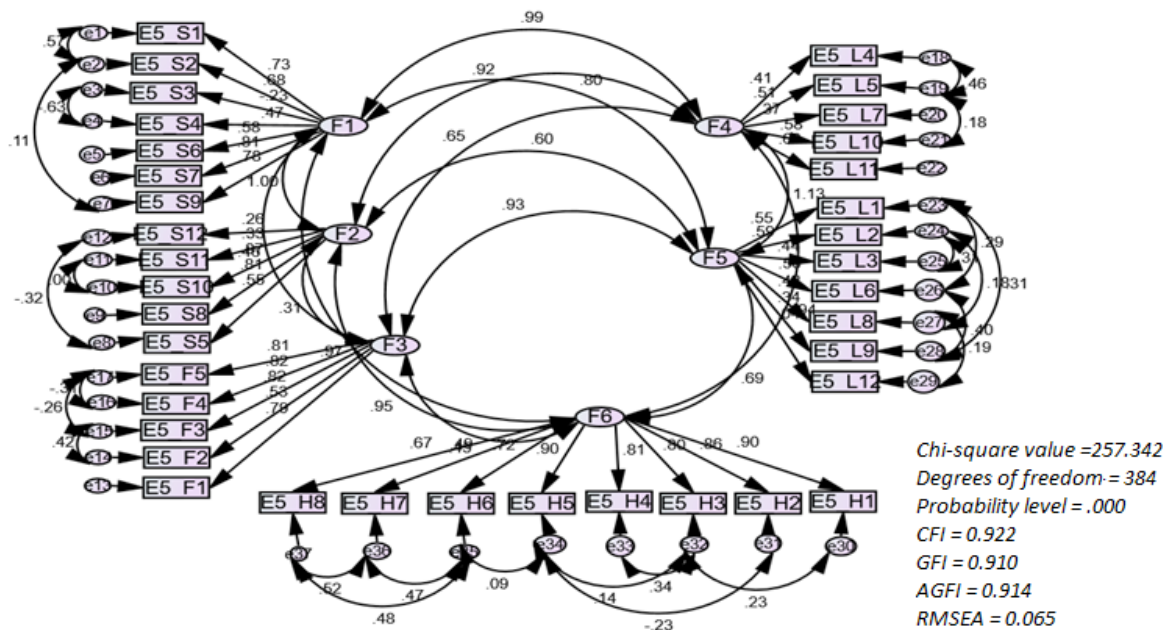
Hypothesis – to test the relationship between life situations and perception of life

H0 – There is no significant correlation between life situations and the perception of life

H1 – There is a significant correlation between life situations and perception of life

Interpretation

Figure No: 1 Six-factor model for this study for CFA



From the figure above, it was found that the calculated p- value was less than 0.05 which indicated the test to be perfectly fit. Here GFI (Goodness of Fit Index) value and AGFI (Adjusted Goodness of Fit Index) value was greater than 0.9 which represented it as a good fit. The calculated CFI (Comparative Fit Index) value was approximately 1 which meant that it was a perfectly fit test. It was found that RMR (Root Mean Square Residuals) and RMSEA (Root Mean Square Error of Approximation) value was 0.024 and 0.065 respectively which was less than 0.10 - which indicated that the test was perfectly fit.

RESULT

From this Confirmatory Factor Analysis, it was found that there was a significant correlation between perception of life and the life situations. Therefore the alternate hypothesis – ‘H₁ – There is a significant correlation between life situations and perception of life’, was accepted.

FINDINGS

1. Life situations of the respondents did have a significant correlation with their perception of life.
2. In the case of social relationships, the majority of the respondents were not clearly decisive in their opinion on current living arrangements (S1, S2, S9 & S10), in the case of healthcare given by the family, family relationships and other social relationships (S4, S5, S6, S7, S8, S11 & S12) they had expressed dissatisfaction.
3. In the case of financial status, a majority of the respondents had said that they did not have enough money to take care of their own needs and take care of their travel needs (F1 & F4), a majority of the respondents disagreed that they were able to financially contribute to their families (F2) and, a majority of the respondents were neutral in their opinion regarding the decision related to property matters and ability to purchase what they wanted (F3 & F5).
4. In the case of leisure activities and doing errands for the family (L1 & L10), a majority of the respondents had maintained

neutrality in their opinion. In the case of trying to remain active, doing paid/unpaid activities, and participation in religious activities, festivals or events (L2, L3, L4, L5, L8, L9 & L11), a majority of the respondents had expressed disagreement. They had also agreed to the fact that they slept most of the time but liked to follow their own hobbies (L6 & L12).

5. In the case of health status, a majority of the respondents had expressed disagreement on health matters such as family care, getting proper food and diet according to their health conditions and the accompaniment of family members during health consultations (H1, H2 & H3). In the case of health matters such as reminder to daily medications by family members, unconditional love and care in spite of the health condition, happiness/satisfaction with present health condition, opinion about previous year's health situation and future expectation of health condition, a majority of the respondents were neutral in their opinion (H4, H5, H6, H7 & H8).
6. It was also found that all the four factors – social relationships, financial status, leisure activities and health status were all inter-related, with each set of variables under these factors having an impact on the other (Figure. 1 – CFA).
7. Thus, on the whole, it can be realized that life situations of the elderly people does have a strong relation with their perception of life.

SUGGESTIONS

- More research on the life satisfaction of ageing population in India needs to be undertaken to get a better understanding of the situation.
- Awareness programmes regarding the requirements of the elderly people need to be implemented to sensitize families, especially children and youth, so that the future generations get to know what they need to do to extend a helping hand in taking care of the ageing members of the society.
- Families could be given encouragement and incentives in the form of tax deductions, additional benefits and awards of appreciation at the state or national level to take better care of their elder members.
- Health insurance has to be made mandatory for all elderly people irrespective of their capacity to contribute towards premium.
- NGOs, public and private players can be encouraged to provide activities that improve the satisfaction achievement level among the elderly people by fruitfully engaging them in occupations that are not only productive but also provide contentment to the elderly members.
- Financial security has to be ensured so that the elderly people are able to lead a peaceful life continuing to contribute to the nation and their families in whatever ways they can.

CONCLUSION

The most important factors that influence life satisfaction are income and self-perception of health especially as one grows by age into retirement and thereafter. In the present day context of increasing nuclear families, feminisation of the labour force, migration of younger members of the family for job opportunities and a high cost of living, multitudes of elderly people are being abandoned, abused, ill-treated, murdered and left to fend for themselves. This transition of the society has led to dejection, disappointment and frustration among the elderly people. Satisfaction in life of the elderly people is crucial because it promotes peace, contentment and happiness that ultimately boosts good health in them. Good health ensures that the elderly people remain active and participate in the nation's progress through their contributions to society. Through their hard work during earning days, the elderly people have made the society a great place for the younger generations to live in. Therefore it is high time that the younger generations repay by taking care of the elderly people in the most appropriate ways required to guarantee the best care possible for them. Summing up, it can be concluded that the major requirements of the elderly people are financial security along with both physical and emotional care (healthcare) support which are the most important determinants of satisfaction in life of the elderly people.

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