SOCIO-DEMOGRAPHIC FACTORS OF ELDERLY SUBJETIVE WELLBEING IN LITHUANIA

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Abstract. The aging of population is a complicated phenomenon which highlights various social and economic challenges for both the oldest generation and the whole society. The increasing share of the elderly in the context of all the society highlights the interest in the subjective wellbeing of the elderly. The understanding of the subjective wellbeing of the elderly and its interrelation with socio-demographic characteristics enables to familiarize with the opportunities of the physical and social functioning, need for self-realization and limitations of this group and the factors which influence the wellbeing of their life. The aim set in this article has been to establish the links of socio-demographic factors with the subjective wellbeing of the elderly. The object of the research has been the socio-demographic factors of the subjective wellbeing of the elderly. The socio-demographic factors of the subjective wellbeing of the elderly have been analysed by employing the method of the questionnaire survey. The questions were formulated following the examples of international questionnaires of wellbeing research which were realised in various countries and following the good experience of various scientists in investigating these problems. The sample of research was 602 elderly people older than 60. Average points of evaluation of subjective wellbeing are domineering; men evaluate the wellbeing worse than women; the respondents who were sixty-sixty nine were distinguished for better wellbeing and most often the representatives of seventy-seventy nine evaluated the wellbeing as bad; there are more less happy than really happy persons, and women are happier than men; men are also less satisfied with the present life than women; the characteristics of wellbeing of economically active elderly population are better.

Key words: wellbeing, subjective wellbeing, elderly, socio-demographic factors.


Introduction

The research of the subjective wellbeing of elderly conducted in Lithuania most often reveals the factors influencing the subjective wellbeing of the elderly related with health, however, still limited research of elderly wellbeing (especially emphasizing the situation of rural population) has been conducted in social sciences. Subjective opportunities of theoretical and methodological evaluation of the elderly wellbeing in Lithuania have been analysed insufficiently and the conducted separate research for the revelation of versatile subjective wellbeing of elderly people is rather limited. Lithuanian researchers interested in the subjective wellbeing of the elderly state (Vaznoniene, 2011; Butenaite, Bulotaite, 2011; Orlova, 2013; Kuliesis, Pareigiene, 2014), whereas the structure of the society changes, it is expedient to monitor and evaluate the subjective wellbeing of the elderly, as that creates opportunities for the evaluation of the problems appearing for this social group, their existing needs, life changes, aims and that is important for both elderly people and the whole society. S.Ventegodt, J.Merrick (2003) distinguished several factor groups influencing the subjective wellbeing of the elders among which objective factors (age, income, status and similar) are mentioned, as they form and influence the present human lifestyle, opportunities of choice and functioning. Growing number of the elderly of retirement age is associated with a rather unattractive vie of future society, although everybody understands and acknowledges in the context of the policy of active aging (Adomaitiene et al., 2007) that elderly must have an opportunity to make use of the human rights and opportunities of life as well and that influences their wellbeing. The aging of the society induces to review and apply the existing public resources for the new needs in the spheres of economic, policy, social safety, health care, human ecology and other spheres.

The object of the research is the socio-demographic factors of the subjective wellbeing of elderly population.
The aim of the research has been to establish the interrelations of socio-demographic factors with the subjective wellbeing of elderly population.

To reach the aim of the research the following research tasks are set:

1) to reveal the peculiarities of the subjective wellbeing of elderly population;

2) to analyse the interrelations of the socio-demographic factors with the subjective wellbeing of elderly population.

The methods employed in the research are as follows: literature analysis and synthesis, questionnaire survey, methods of statistical analysis, Chaid function, graphic modelling and comparative analysis.

The structure of the paper is as follows: at first features of elderly subjective wellbeing are presented, also methodological aspects of research are revealed and finally the interrelations of socio-demographic characteristics of elderly with their subjective wellbeing were discussed.

Research results and discussion

1. Features of elderly subjective wellbeing

The aging of population is one of the problems of modern society. The essence of the problem lies in the fact that the elderly number and their share in the general number of population increases. Although the elderly wellbeing is an inseparable part of the general wellbeing of our society, as the aging of the society progresses, various demographic, social, economic, political consequences for the whole society appear. The ratio of the young and elderly age population in the society induces to adapt the existing resources for new needs and the resources are limited. Although the threshold of the population senility (the attributing of people to the category of elderly) is a matter of agreement, according to the senility criteria confirmed by the United Nations it is 60 years (UN). In most European countries the retirement age reaches 65 years, whereas in another it is gradually increased – this is the case in Lithuania. According to the data of Lithuanian statistics of 2014 (Demographic Yearbook, 2014), the retirement-age population in Lithuania made 22.4 % of all the population, the retirement-age of the women has reached 60 years and 8 months and that of men 62 years 10 months. Intense growth of the elderly in society essentially changes the demographic and social structure of the society, the systems of distribution and consumption and for the system of health care provokes the challenges of ensuring of financing, balanced development of high quality services and their accessibility for everyone, also promotion of wellbeing as well. If the society does not adequately react to the increase of the share of elderly and their special needs in senility, a danger for the wellbeing of the population of this group appears.

Various scientists (Hoff, 2008; Stula, 2012; Orlova, 2013; Kuliesis, Pareigiene, 2014) analyse different aging causes and their impact on the population senility, the wellbeing of their life. Traditional definition of wellbeing (Diener, Diener, 2000; Kahneman, 2003; Hird, 2003; McAllister, 2005; Veenhoven, 2009) is related with an opportunity to acquire certain income which should guarantee at least minimal needs. At present the conception of wellbeing is expanded (Well-being in 2030, 2011; Measuring Well-being for..., 2013; Vaznoniene, 2014) and covers not only the conditions according to which the people live and distribute material resources – subjective evaluation of one’s own wellbeing covering various components: the physical health, spiritual state, experience, life priorities etc. So the wellbeing of the elderly is understood as versatile satisfaction of life in various spheres of life covering subjective experience and objective events of life.

Following the experience of foreign surveys (e.g. Eurobarometer surveys, European social survey, SHARE), it is expedient to draw attention to the surveys of subjective elderly wellbeing:
1) the society of Lithuania (and especially separate regions) just as that of the world is rapidly aging;

2) elderly people are one of the most potential social groups who are able to become socially excluded, as with age the risk of vulnerability increases;

3) the voice of the very elderly people can add to the reduction of their social exclusion;

4) elderly people are often discriminated within other social groups (e.g. in comparison with younger generations);

5) elderly people can have wise, suitable offers how their wellbeing could be improved;

6) the research of the subjective elderly wellbeing would markedly add to the present rather limited informational basis on the reality of their lives, as the subjective wellbeing of this social group within the context of Lithuania research has been poorly analysed. Besides certain foreign scientists (Hoff, 2008; Veenhoven, 2009) acknowledge that the research of the subjective elderly wellbeing is a particular innovation, as attention is often focused on other vulnerable groups (e.g., children, women, risk families) and others.

2. Research methodology

The research was implemented using the method of questionnaire survey. The questionnaire has been drawn up following the examples of international wellbeing (subjective wellbeing) survey questionnaires which are realised in various countries or within separate countries, i.e. national, regional, local levels. In the questionnaire seven question blocks describing elderly wellbeing were formulated. In the article the attention is focused on the interrelation of socio-demographic characteristics (sex, age, social status, marital status, education, place of residence) with the subjective elderly wellbeing. The formulations of the questions on subjective wellbeing are presented following already performed empiric surveys of various international research and authors (Diener, Diener, 2000; Veenhoven, 2009 etc.). The essential questions the aim of which has been to elucidate the subjective opinion on how a person values his wellbeing are defined as follows:

- How would you evaluate your wellbeing?
- If you evaluate in general, are you satisfied with your present life?
- If you say in general, are you happy?

As M. Grasso, L. Canova (2008) state, the approaches of the wellbeing research following both theoretic and methodological aspects must be examined empirically, first of all drawing special attention to socio-demographic aspects of subjective wellbeing. The identification of social demographic and social economic characteristics in the research of subjective wellbeing is one of the principal variables in the research of this sphere. The individual changes of a person related with age often mark other peculiarities typical of subjective wellbeing in the elderly age (Ventegodt, Merrick, 2003; Veenhoven, 2004). These changes can be understood as appearing inconveniences after reaching retirement age or, on the contrary, the positive sides of the retirement-age period show up.

During the research, 602 persons took part in questionnaire. Such characteristics of the elderly were important in forming the sample: distribution of the respondents according to sex and to the age groups (60-69 years, 70-79 years, 80 years and older). For establishing the sample unprobabilistic selection was used. The respondents were achieved in the research by the convenience principal, also using Third age universities. The sample was calculated considering the general number of elderly in Lithuania and the statistical error which is important in the evaluation of the respondent answers. Striving towards questionnaire reciprocity and result reliability 650 questionnaires were distributed from which 602
The data of the research were processed with the help of software SPSS 15.0 and MS Excel. For the processing of the data CHAID (Chi-Square Automatic Interaction Detector) method (or Chaid algorithm), or otherwise named Decision Tree, was used. The essence of this method can be defined as follows - it enables to classify the present data according to groups and forecast dependent variables according to known independent variables (Pukenas, 2009). In every stage this method defines the independent variable which is most of all related with the dependent variable. For distinguishing of factors Chi square criterion which indicates if the difference between the compared groups is statistically important was used. The risk of this method was 40 %, i.e. the probability to correctly classify the people according to their subjective wellbeing evaluations employing the model depending on the fact to what socio-demographic group they belong is 60 %.

The variables were reorganized in such a way that one category would encompass more than 5 % of the respondents. After choosing such criteria the influence of the socio-demographic respondents’ characteristics on their subjective wellbeing were evaluated.

Interrelations of socio-demographic characteristics of elderly with their subjective wellbeing

Subjective interrelations of elderly wellbeing with socio-demographic characteristics were analysed in various sections and due to the abundance of the results only certain relevant remarks are presented. The number of women in the survey was – 69 %, and that of men – 31 %.

The average of the elderly age who participated in the research was 70.3 years, moda was 68, the minimum of the age was 60 and the oldest respondent was 93 years. The age of the respondents in the whole age variation row fluctuated by 6.7 years. The distribution of the elderly according to the indicated age groups indicates how much respondents represented "young" old (60-69 years – 51 %), "medium" old (70-79 years – 38 %) or "old" old (80 and more years – 11 %) persons. It is natural that most respondents represented the age group of 60-69 years and these persons had already reached the retirement age.

In distinguishing the social demographic respondent characteristics which are important for the evaluations of subjective wellbeing they are: a) with aging the number of widows increases, as the mortality of men is bigger; b) the characteristics of respondent social status disclose their present life and opportunities of social functioning; c) respondent distribution according to marital state is similar, both men and women in elderly age considered marriage as a value; d) the life of elderly people with children/grandchildren is of ambivalent significance: it is the result of unfavourable social economic life conditions, also that is the need for mutual benefit/support; e) the elderly people are
distributed variously according to the place of residence, however, more “young” old and “medium” old respondents live in the city/borough, and more “old” old people have indicated that they live in the village; f) the characteristics of education reveal that it is not very high and has been influenced by the circumstances of life /opportunities/needs “of previous time” and as a result of that, it can be a factor of present life elderly people social and lower wellbeing.

The research has established that the correlation coefficients between subjective wellbeing, satisfaction with the present life and feeling of happiness are statistically important, as

![Fig. 1 Evaluation of respondents' subjective wellbeing according to their gender, percentage](image)

It has been established that according to their age the wellbeing was evaluated as bad (26.1 %) and not good (16.6 %) by more respondents (9.5 %). Higher evaluations of subjective wellbeing were more typical of the age group of 60-69 years and most (34 %) of the representatives of 70-79 age group indicated their subjective wellbeing as bad. Such evaluations can be explained by the fact that part of "young" elderly were working and healthier than other older age groups. Namely age determines that people move from one social economic status to another or from one social group to another. That is reflected in the evaluation of the satisfaction of the elderly people with present life (Figure 2).

More than one third of all the elderly participants of the research evaluated their present life by 5 points (i.e. medium satisfaction), however, already twice less indicated 4 or 6 points that means that the respondents are satisfied/dissatisfied with the present life rather differently, as that is influenced by many factors.
In the figure it is seen that women were more satisfied in their present life than men, i.e. even 38% of women indicated 6-10 points. The following opinion of elderly people was clarified: in general, wellbeing, present life and happiness understanding had similar evaluation tendencies, however, their variations are distinguished while analysing other components, factors related with subjective wellbeing.

Another important question which is included into the research of subjective wellbeing is the personal perception of happiness (Figure 3).

Although the majority of respondents value their happiness in 5 points (average evaluation), it is obvious that separate life experience, suffering, present social economic status influence their present understanding of happiness. Quite a big part of respondents indicated that they were not very happy, i.e. 51% of men and 41% of women indicated 6-10 points. That enables to state that there are less happy than really happy persons (only 18% of men and 23% of women indicated 0-4 points).

Chaid method revealed interesting results of influence of socio-demographic indicators for the elderly wellbeing (Figure 4). Among all independent variables one factor influencing the wellbeing most of all was highlighted – disablement of elderly people. The wellbeing of even 42% of respondents suffering from disablement is either bad or very bad.
Fig. 4. Impact of respondents socio-demographic characteristics to their subjective wellbeing (results from Decision Trees or Chaid method)

Whereas, among the respondents who do not suffer from disablement there are 22 % of whom the wellbeing is bad or very bad. Further highlighted respondent groups: the disabled and those who were not disabled. The wellbeing of the disabled is mostly influenced by marital status, the group of widows/widowers is distinguished in which 67 % have evaluated their wellbeing as very bad or bad. The groups of divorced and married do not differ here 29 % evaluated their wellbeing as very bad or bad. Among the people do not suffering from disablement, the factor of education has been of largest importance. Persons having secondary education (nearly 30 %) are distinguished: they evaluated their wellbeing worst of all, whereas those having higher education - best of all. The wellbeing of lower than secondary education persons first of all depends on the fact if that person is ill. Even 34 % of ill people have indicated that their wellbeing is bad or very bad. However, the wellbeing of those who are not ill was also influenced by the locality of their residence, especially living in rural localities. The wellbeing of the latter persons has been influenced by age as well, i.e. persons aged 60-69 and 80 and more are apt to evaluate it better than the group aged 70-79 (nearly 30 % stated that their wellbeing was bad or very bad).

**Conclusions, proposals, recommendations**

1) Elderly subjective wellbeing is one of the most discussed issues in aging society not only in Europe but also in Lithuania. Subjective wellbeing of elderly disclose their perception about overall wellbeing, it gives wider understanding of a certain life components like the physical health, spiritual state, experience, life priorities. Accordingly the wellbeing of the elderly is understood as

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versatile satisfaction in life in various domains of life covering subjective experience and objective events of life.

2) Socio-demographic characteristics of elderly revealed that: age not always was the primary factor of their wellbeing but it worsened with the years; sex (gender) showed that women often evaluated their wellbeing, present living and happiness higher than men; effects were seen from marital status changes (being a widow raises unhappy feelings etc.) and transition from being employed to retirement age also mostly negatively influenced their wellbeing. From Chaid results it was found that the biggest challenge was to be disabled because with the age functioning and capabilities decrease.

3) Research enabled to confirm that these research are important from scientific and practical sides. It supplements existing data about elderly wellbeing because there are no many research in Lithuania’s level about this issue, also it explores real life situation and knowledge about elderly subjective wellbeing perception related to different life domains.

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