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Flourishing in later life



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ABSTRACT

Objective: Flourishing is a relatively new concept in positive psychology that considers hedonic and eudaimonic aspects of well-being. The current study aims to identify the prevalence and socio-demographic and health factors associated with flourishing among older Malaysians.

Methods: The sample for this study consisting of 2202 community-dwelling older Malaysians was obtained from a national survey entitled "Identifying Psychosocial and Identifying Economic Risk Factor of Cognitive Impairment among Elderly", conducted from May 2013 to April 2014. Data analyses were conducted using the IBM SPSS Version 22.0 and AMOS Version 22.0.

Results: The average age of the respondents was 69.05 (SD = 6.24) years. Descriptive results showed that 50.1% of the respondents were flourishing in life, 36.3% were languishing, 8.4% were struggling, and 5.2% were floundering in life. The results of Multiple logistic regression analysis revealed that gender, employment status, level of education, having living children, and chronic medical conditions are significantly associated with flourishing. However, age, marital status, living alone, and economic status did not have much impact on flourishing.

Conclusion: To the best of our knowledge, the current study is one of the first studies that conceptualizes and assesses flourishing among older adults in Malaysia. The findings from the present study make important contributions to the existing literature on well-being. It is suggested that health and social care professionals working with older adults adopt a comprehensive approach to identify and propel non-flourishing people toward flourishing in life.

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1. Introduction

Malaysia is experiencing the aging population, which makes up around 8% of her total population. A majority of older Malaysians are living with their adult children and receives financial support from them (Momtaz, Ibrahim, & Hamid, 2014). In the wake of increasing aging population due to a declining birth rate and an increasing life expectancy, maintaining and improving older adults' well-being, as emphasized by the World Health Organization (WHO), has become a key strategic goal for social and health policy makers, worldwide (Momtaz, Ibrahim, Hamid, & Yahaya, 2011). In line with this mission and vision, a great deal of interest has been shown in the measurement of well-being in later life (Momtaz, Hamid, Ibrahim, Yahaya, & Abdullah, 2012; Momtaz,

Hamid, Yahaya, & Ibrahim, 2010). In general, there are two different conceptual approaches to measure and conceptualize well-being, namely hedonic and eudaimonic perspectives. Hedonic perspective defines well-being as high life satisfaction and positive affect. However, within eudaimonic perspective, well-being is related to fulfillment in the areas of life purpose, meaning, challenges and growth (Ryan & Deci, 2001). Review of gerontological literature shows some studies have exclusively measured hedonic aspects of well-being (happiness) (Momtaz, Hamid, & Ibrahim, 2014; Momtaz, Hamid, Masud, Haron, & Ibrahim, 2013). However, other studies have focused exclusively on eudaimonic aspects of wellbeing (personal growth) (Huppert & So, 2013). Scientific investigators have found that well-being can be best conceptualized as a multi-dimensional phenomenon that considers both hedonic and eudaimonic concepts of well-being. In other words, a life that is rich in both hedonic and eudaimonic pursuits, can to contribute to the highest level of well-being (Huta & Ryan, 2010). Thus, the term flourishing was developed to conceptualize and measure well-

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being using integrated approaches of hedonic and eudaimonic pursuits.

Flourishing is a new concept in the positive psychology that originally comes from the Latin word flor which is synonymous with biological and psychological growth and development (Hefferon, 2013). It is described as a state of optimal mental health and living within an optimal range of human functioning. Flourishing refers to doing and living well rather than merely feeling good (Satici, Uysal, & Akin, 2013). In other words, flourishing people not only feel good, but also do function good (Forgeard, Jayawickreme, Kern, & Seligman, 2011; Keyes & Lopez, 2002). Similarly, flourishing has been defined as a state that person does well psychologically and socially (Satici et al., 2013). Therefore, flourishing is different from the absence of psychopathology (Hone, Jarden, & Schofield, 2013; Keyes, 2007). According to Keyes (2007), flourishers experience positive emotions, have enthusiasm for life, and actively and productively contribute to the world. Flourishers are not only free of mental illness but have full of emotional vitality and function positively in their live (Michalec, Keyes, & Nalkur, 2009). Flourishing can be conceptualized within the two ancient theoretical approaches including the hedonic and the eudaimonic. From the hedonic approach, flourishing focuses on the pursuit of happiness and life satisfaction. However, from the eudaimonic approach, flourishing refers to the pursuit of actualization of human potentials (Hone et al., 2013). It reflects mental health definition proposed by the World Health Organization (WHO). According to the WHO, mental health is a state of wellbeing that individuals realize their own abilities, cope with normal life stresses, work productively and fruitfully and have ability to make a contribution to their community (Keyes, 2007). Finally, in positive psychology, flourishing refers to optimal human functioning, in terms of goodness (happiness, contentment, and effective performance), growth (use of personal and social assets), resilience (survival and growth after enduring a hardship), and generativity

(making life better for future generations) (Fredrickson & Losada, 2005). Studies show that high levels of flourishing have contributed to improvements to immune system functioning, cardiovascular recovery, lower health care costs, stronger social performance, and an overall healthier lifestyle (Fredrickson & Losada, 2005; Huppert & So, 2013; Keyes, 2007).

Flourishing is a new subject of study and, more research is needed to conceptualize and apply the concept of flourishing in gerontological field. Review of cross-sectional studies shows that lower levels of loneliness, higher levels of social support, higher education levels, higher income, being males and married are related to flourishing (Keyes, 2002; Van Lente et al., 2012). Although a recent national survey showed that around one-fifth of older Malaysians have mental health problem, there is lack of knowledge on what percentage is mentally flourishing and enjoying. The current study explores the hypothesis that sociodemographic and health factors are associated with flourishing in older Malaysians.

1.1. Conceptual framework to measure flourishing

Currently, there are four different models to conceptualize flourishing in the psychological literature. These models have been conceptualized by Keyes (2002), Huppert and So (2013), Diener et al. (2010), and Seligman (2011). Despite of having common theoretical and conceptual similarities, these models produce considerably different prevalent rates of flourishing (Hone, Jarden, Schofield, & Duncan, 2014).

The current study used the Complete State Model of Mental Health (CMH), devised by Keyes (2002), which considerably more published research supports this model than other modes. As shown in Fig. 1, the horizontal axis in the model represents the symptoms of mental illness from low to high, whereas the vertical axis shows the range of subjective well-being from low to high.

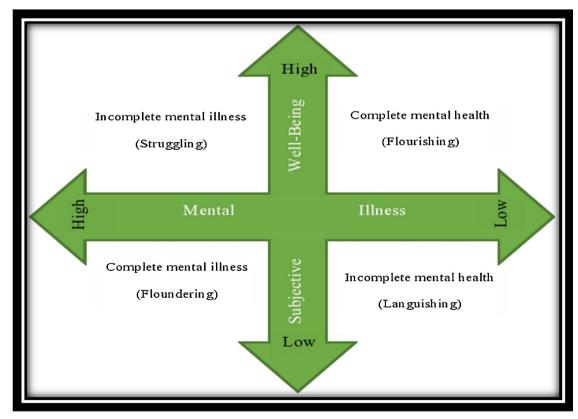


Fig. 1. Conceptual framework to measure flourishing, adopting from Keyes (2002).

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