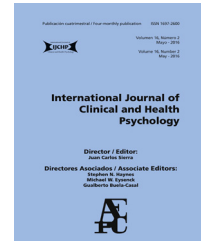




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## ORIGINAL ARTICLE

# Changes in psychological well-being among older Lithuanian city dwellers: Results from a cohort study

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### KEYWORDS

Psychological well-being;  
Psychosocial factors;  
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Cohort study

**Abstract** *Background/Objective:* The purpose of this study is to evaluate changes of psychological well-being (PWB) in older Lithuanian city dwellers during ten years of follow-up, and to establish factors associated with it. *Method:* 7,115 men and women of age 45-72 years participated in the initial survey in 2006-2008. In 2016 the follow-up survey was performed among all 6,210 participants who survived. 4,266 individuals responded to postal questionnaires. PWB was evaluated by using CASP-12 questionnaire. Depressive symptoms were evaluated by CES-D-10 scale. Quality of life, self-rated health, and social activity were evaluated. Socio-demographic, socio-economic factors were included into standard questionnaire. *Results:* PWB deteriorated in all age groups during 10-years follow-up. Poor quality of life, poor self-rated health, having depressive symptoms, and not being member of social organization are associated with lower PWB after 10 years in men and women. Employed-retired, retired, and not socially active women have higher possibility to have lower PWB over 10 years. *Conclusions:* PWB in older Lithuanian city dwellers deteriorates as many other socio-economic and psychosocial indicators during ten-year follow-up. Mostly psychosocial factors, but not the socio-demographic, and socio-economic ones predict PWB over 10 years. It is crucial to understand and promote predictors of PWB in older age.

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## PALABRAS CLAVE

Bienestar psicológico;  
factores  
psicosociales;  
factores  
sociodemográficos;  
factores  
socioeconómicos;  
estudio de cohorte

## Cambios en el bienestar psicológico de los habitantes de las ciudades más antiguas de Lituania: resultados de un estudio de cohorte

**Resumen** *Antecedentes/Objetivo:* Evaluar los cambios en el bienestar psicológico (BP) de los habitantes de las ciudades lituanas más antiguas en un seguimiento de diez años e identificar factores asociados. *Método:* Inicialmente participaron 7.115 hombres y mujeres de 45-72 años de edad durante los años 2006-2008. En 2016, la encuesta de seguimiento se realizó entre 6.210 participantes. De ellos, 4.266 personas respondieron a los cuestionarios. El BP fue evaluado mediante el cuestionario CASP-12. Los síntomas depresivos mediante la escala CES-D-10. Se evaluó la calidad de vida, la salud y la actividad social. *Resultados:* El BP se deterioró en todos los grupos de edad a los 10 años de seguimiento. Mala calidad de vida, mala autoevaluación de la salud, síntomas depresivos y la no pertenencia a una organización social se asocian con BP más bajo. Mujeres jubiladas y socialmente inactivas tienen mayor probabilidad de peor BP. *Conclusiones:* El BP de los habitantes de las ciudades lituanas más antiguas se deteriora, al igual que otros muchos indicadores socioeconómicos y psicosociales a los diez años de seguimiento. La mayoría de los factores psicosociales, aunque no los sociodemográficos y socioeconómicos, predicen el BP. Es crucial promover predictores de bienestar psicológico en la vejez.

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When life expectancy is getting longer, factors related with healthy aging become more important. One of the factors leading to successful aging is psychological well-being (PWB; [Bowling & Dieppe, 2005](#)). PWB consists of autonomy, self-acceptance, purpose in life, environmental mastery, positive relationships and personal growth ([Ryff & Singer, 2008](#)). It reflects person's attitudes towards his life, feeling well ([Huppert, 2009](#)). In the last decades' maintenance of PWB in older age became one of the public health priorities ([Adler & Seligman, 2016](#)). Previous studies linked PWB with various health conditions, especially cardiovascular health ([Boehm & Kubzansky, 2012](#); [Boehm, Peterson, Kivimaki, & Kubzansky, 2011](#)), and healthy lifestyle habits ([Sapranaviciute-Zabazlajeva, Luksiene, Virviciute, Bobak, & Tamosiunas, 2017](#)). Moreover, PWB is associated not only with healthier, but also with longer life ([Stepptoe, Deaton, & Sone, 2015](#); [Tamosiunas, Sapranaviciute-Zabazlajeva, Luksiene, Virviciute, & Peasey, 2017](#); [Zaninotto, Wardle, & Steptoe, 2016](#)). Therefore, PWB draws not only scientists' attention but is one of the priorities in health policy.

It is known that PWB changes with age; however, it is not clear whether it improves or worsens with age ([Ryff, 2014](#)). Dynamic model of the concept varies across the nations ([Karasawa et al., 2011](#); [Schönfeld, Brailovskaia, & Margraf, 2017](#); [Stepptoe et al., 2015](#)). In English-speaking developed countries, PWB shows a U-shaped pattern with the worst PWB being at the age of around 50 years, but in Lithuania, as in other post-Soviet countries, PWB exhibits a decline with an increasing age ([Stepptoe et al., 2015](#)). Why? What factors influence dramatic decrease of PWB in older ages? Some studies have analysed the determinants of well-being in older age ([Carlin et al., 2011](#); [Snowden, Dhingra, Keyes, & Anderson, 2010](#)), but little is known about well-being among older adults in the post-Soviet region.

Even there are many factors leading to the successful transition to older age and retirement ([Heaven et al., 2013](#)), not all changes of well-being are successfully explained by

demographic or health factors ([Snowden et al., 2010](#)). As the population is aging, along PWB being one of the factors leading to successful aging, it is important to understand dynamics and predictors of PWB in the light of aging. The purpose of this study - is to evaluate changes of PWB in older Lithuanian urban adults during ten years of follow-up, and to establish factors associated with it.

## Method

### Participants

Data from the surveys performed in the framework of the international HAPIEE (Health, Alcohol and Psychosocial Factors in Eastern Europe) study are presented ([Peasey et al., 2006](#)). A random sample of 10,940 Kaunas city (Lithuania) men and women aged 45–72 years, stratified by gender and age was selected from Lithuanian register of population as sample for initial survey. The response rate was 65%, thus 7,115 respondents participated in this health survey from 2006 to 2008. In 2016 the follow-up survey was performed among all 6,210 participants (2,569 male; 3,551 female) from the initial survey who survived till April of 2016. 4,266 individuals (1,793 male; 2,473 female) responded to postal questionnaires mailed during the follow-up survey (response rate was 68.7%). The final number of individuals in the analysis included all participants both during the initial and follow-up survey with all variables used in the logistic regression models or other analysed groups – 3,405 (1,480 male; 1,925 female). Distribution of study participants during the initial (2006-2008) and follow-up surveys (2016) by socio-demographic, socio-economic, and psychosocial characteristics is presented in [Table 1](#).

The study was approved by the Ethics Committee at University College London, UK and by Kaunas Regional Biomedical Research Ethics Committee.

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