The Effect of Determinants of Subjective Wellbeing on the Level of Wellbeing among Elderly in Selangor

Umi Abidah Noor Osman & Ramlee Ismail

Faculty of Management and Economic, Universiti Pendidikan Sultan Idris, Tanjong Malim, Perak, Malaysia ramlee@fpe.upsi.edu.my DOI: https://doi.org/10.37134/jcit.vol9.3.2019

Abstract

This study was conducted to measure the level of wellbeing among elderly in Selangor and effect of the determinants of subjective wellbeing (SWB) and income on the level of wellbeing among elderly in Selangor. A survey method was used to collect data. The sample comprised 480 respondents living in rural and urban area in Selangor. Regression analysis was performed to measure the influence of the determinants of subjective wellbeing (personal factor, social participation, financial and neighborhood) and income on the level of wellbeing among elderly in Selangor. The findings demonstrated that all the determinants have influence the level of wellbeing among elderly. While, income have less influence with the wellbeing. The implication of this study suggested that elderly must be provided with their needs to increase their level of wellbeing.

Keywords: Subjective wellbeing; Elderly; Level of wellbeing

INTRODUCTION

Economic growth and development affected by the changes in trend of population. Before the century, the changes population trends had been influenced by famine, disease and war. Those situations resulted in high and fluctuating death rates. Today, the declining in death rates resulting from advanced technology and economic control. Advanced technology in medicine resulted in the increases in world's population growth. Developing countries especially will experiencing the rapid transition of population, which death rates have fallen sharply, and birth rates have fallen very slowly. This resulted to increase in number of aging population. The trend changes have impact on global economic growth, saving, investment, consumption, workforces, pensions scheme, taxes and living condition.

The issue regarding on demographic structure on economic growth of Malaysia not very crucial as Malaysia has not yet become an ageing nation. However, rapid population growth can have consequences for the people's wellbeing including their incomes, health and education.

At the same time, Malaysia faces several issues including rising cost of living, stringent credit terms, rising household debt, slowdown in economic activity and rising consumer inflation. These issues affect the wellbeing or quality of life of the population in this country. Malaysia has used the Malaysian Wellbeing Index (MWI)(EPU, 2013) to measure the level of wellbeing and quality of life of the country. Wellbeing in the MWI refers to the physical, social and economic benefits that contribute to the improvement of the quality of life and the satisfaction of

individuals, families and communities. However, there is no specific indicators to measure the level of wellbeing among elderly in Malaysia.

LITERATURE REVIEW

The research objective of this study is to measure the influence of subjective wellbeing (SWB) and the level of wellbeing of elderly in Selangor. Personal factor, social participation, financial factor, neighborhood (determinants of SWB) were taking into account to measure their influence with the level of wellbeing among elderly in Selangor.

Wellbeing

Well-being yet has no specific definition. The level of well-being, quality of life, life satisfaction and happiness are interchangeably used. Wellbeing is about perspective or evaluation of people on their own lives (Diener, Oishi, & Lucas, 2015; Sarracino, 2010). The evaluation includes asking people if they are satisfied with human needs(Phillips, 2006), asking whether they feel their existence in a social group, asking whether they have a purpose in their lives and their emotions.

Generally, wellbeing is perceived to be a macro concept or area of study concerned with the objective and subjective assessment of well-being as a desirable human state (La Placa, McNaught, & Knight, 2013). Further, La Placa et al. (2013) highlighted the definition of wellbeing in which the domain in wellbeing including a range of social, economic and environmental forces that provide the resources and the contexts for the generation and maintenance of wellbeing at all levels of society.

Subjective wellbeing

There are a number of studies on which associated with subjective wellbeing had been conducted since long time ago including the study of wellbeing for gerontology. Wellbeing has become important relation to elderly in particular. There are numerous studies seeking to increase understanding about factors associated with the well Strongly Agree Agree Disagree Strongly Disagree being of elderly such as the study of antecedents and outcomes of activity profile (Morrow-Howell et al., 2014) and indicators of wellbeing in later life (Age UK's Index of Wellbeing in Later Life, 2017). This study has assumed that all the factors (personal factor, social participation, income and neighborhood) were influenced with the level of well-being among elderly.

METHODOLOGY

To measure the influence between the determinants of SWB and income to the level of wellbeing among elderly in Selangor, a quantitative research is used in this study. This study involving a set of questionnaire as the study instrument. The questionnaire comprising three parts, namely A, B and C. Part A is the information on the demographic profile of respondent. While part B is the items on the level of wellbeing of the elderly. Lastly, part C is the items that are based on four

variables (determinant of SWB) which are personal factor, financial and neighborhood. Both part B and C using 4- point Likert scale with 1; strongly disagree, 2; disagree, 3; agree and 4; strongly agree. The items were adopted with modifications to suit the understanding on the information of wellbeing among elderly.

A total of 384 respondents with aged 50 years old and above were randomly selected from four districts in Selangor which are Petaling, Klang, Sabak Bernam and Hulu Selangor. To ensure the return of the questionnaire according to the total number required, the sample was increased by 20 percent and made the total number of respondents are 480 but only 466 respondents were fulfilled the needs of the study.

Regression analysis was used to assess the extent to which the independent variables (subjective wellbeing and income) explained the level of wellbeing among elderly. Here is the model to implement the bound testing the influence of personal factor, social participation, financial, neighborhood and income to the level of wellbeing among elderly:

$$WB = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + \beta_5 X_5 + e$$

where, WB is the level of wellbeing of elderly, α is the parameter of the regression equation and βx represented the independent variables.

RESULTS

| Profile | Frequency | Percentage (%) |
|-------------------------|-----------|----------------|
| Gender (n = 466) | | |
| Male | 187 | 40.1 |
| Female | 279 | 59.9 |
| Age (n = 466) | | |
| ≤50 | 192 | 41.2 |
| 51-55 | 129 | 27.7 |
| 56-60 | 74 | 15.9 |
| 61-65 | 41 | 8.8 |
| 66-70 | 17 | 3.6 |
| ≥71 | 13 | 2.8 |
| Income (n = 466) | | |
| ≤4 000 | 288 | 61.8 |
| 4 001 - 6 000 | 88 | 18.9 |
| 6 001 - 8000 | 50 | 10.7 |
| ≥8 001 | 40 | 8.6 |

Descriptive Analysis

Table 1 is the result of descriptive analysis which shows the sample comprised 466 respondents and they were almost equally for both number of male (40.1%) and female (59.9%). About 40.1% of the respondents were in the age of 50 years old, whereby about 27.7% at the age of 51 to 55 years old, respondents at the age 61 to 65 years old was about 8.8%, elderly at the age 66 to 70 years old were about 3.6% and the remaining 2.8% were at the age of 71 and above. A slightly higher percentage of elderly were living in rural areas, which were 54.3% and 45.7% of elderly living in urban areas. Most of the elderly in Selangor (61.8%) have earned income less than RM4000. About 18.9% of the elderly have earned RM4 001 to RM6 000, while it was about 10.7% of them earned in a range of RM 6 001 to RM8 000 and it was very least (8.6%) of the elderly had earned more than RM8 001. A significantly high proportion (43.1%) of the elderly had received income from salary, 11.8% of them received income from pension, 27.3% received their income from self-employed and remaining 12% of the elderly received income from dividend and others.

Mean analysis

To measure the level of wellbeing among elderly in Selangor, mean analysis was used.

| Tuble 2. Level of wendering uniong enderly in behangor | | | | |
|--|--------|----------------|----------|--|
| Variable | Mean | Std. Deviation | Level | |
| wellbeing | 3.2712 | .53001 | moderate | |

Table 2. Level of wellbeing among elderly in Selangor

Table 2 shows the level of wellbeing among elderly in Selangor. Based on the scale of measurement, the mean score between 1 to 2 the level is low, the mean score between 2 to 3 the level is moderate and the mean score between 3 to 4 the level is high. The elderly living in moderate level of wellbeing.

Regression analysis

In order to measure the factors (SWB and income) most influence the level of wellbeing among elderly in Selangor, regression analysis was undertaken. The dependent variable is the level of wellbeing. The independent variables are personal factor, social participation, financial, neighborhood, and level of income. All the outliers' cases have been sorted out before the data to be test for regression analysis.

| Table 3. Multiple Regression analysis | | | | | | |
|---------------------------------------|--------------------------------|------------|------------------------------|--------|------|--|
| | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. | |
| | В | Std. Error | Beta | | | |
| (Constant) | 223 | .124 | | -1.799 | .073 | |
| Personal factor | .377 | .050 | .321 | 7.553 | .000 | |
| Social participation | .114 | .041 | .113 | 2.755 | .006 | |
| Financial | .145 | .040 | .122 | 3.667 | .000 | |
| Neighborhood | .402 | .040 | .387 | 10.013 | .000 | |

| $R^2 = .678$ | Income | | .022 | .016 | .040 | 1.363 | .174 | |
|------------------|---------------|--------------------|------|------|------|-------|------|--|
| 1-Value -170.015 | R² F-value | = .678 =190.615 | | | | | | |

Table 3 provides the result for the influence of the determinants of SWB and level of income on the level of wellbeing among elderly in Selangor. In general, the result shows that the variables with significant value are personal factor, social participation, financial, and neighborhood. These explained that all the determinants of SWB have significant value to the wellbeing of the elderly. Based on the beta values as the four significant variables, the most influence on the wellbeing among elderly in Selangor was neighborhood (β = .387), followed by personal factor (β = .321), financial factor (β = .122) and lastly social participation (β = .113). As for level of income, the table indicates not significant.

DISCUSSION

The results of this study show a significant influences between the determinants of SWB on the level of wellbeing among elderly in Selangor. The most influence on the wellbeing among elderly in Selangor was neighborhood. Previous study argue that neighborhood concerned for the wellbeing of elderly including medical services, transportation and shopping facilities by Age UK's Index of Well-being in Later Life (Green, Iparraguirre, Davidson, and Zaidi, 2017). Furthermore, security in neighbourhood and existence of worship places are the fundamental conditions for ageing in place of elderly (Hamid, 2015). It is undeniable that public safety is important in neighborhood for elderly.

In addition, the finding indicates that income had no significant influence on the level of wellbeing among elderly in Selangor. However, income appears to influence the wellbeing in a long term. According to (EASTERLIN, 2013) the wellbeing do not increase as income goes up. As an elderly are vulnerable and commonly have poor health. Income inequality affect their wellbeing as they have inadequate income to pay for their health services. Instead, better health associated with higher income (Wyshak, 2016).

Finally, the findings from this paper provides evidences and information regarding subjective wellbeing and income to the level wellbeing among elderly. Thus, it might suggested that elderly must be provided with their needs to increase their level of wellbeing.

ACKNOWLEDGEMENT

Funded under Research Grant by MoHE, FRGS

REFERENCES

Diener, E., Oishi, S., & Lucas, R. E. (2015). National accounts of subjective well-being. *American Psychologist*, 70(3), 234–242. https://doi.org/10.1037/a0038899
EASTERLIN, R. A. (2013). HAPPINESS, GROWTH, AND PUBLIC POLICY⁺. *Economic Inquiry*, 51(1), 1–15.

https://doi.org/10.1111/j.1465-7295.2012.00505.x

EPU. (2013). The malaysian well-being report 2013, (December).

- Green, M., Iparraguirre, J., Davidson, S., & Zaidi, A. (2017). A summary of Age UK's Index of Wellbeing in Later Life, 1–16. Retrieved from http://www.ageuk.org.uk/search1/?keyword=index+of+wellbeing&nation=ageuk_en-GB
- Hamid, T. (2015). Population Ageing in Malaysia. POPULATION AGEING IN MALAYSIA A Mosaic of Issues, Challenges and Prospects, 92.
- La Placa, V., McNaught, A., & Knight, A. (2013). Discourse on wellbeing in research and practice. *International Journal of Wellbeing*, *3*, 116–125. https://doi.org/10.5502/ijw.v3i1.7
- Morrow-Howell, N., Putnam, M., Lee, Y. S., Greenfield, J. C., Inoue, M., & Chen, H. (2014). An Investigation of Activity Profiles of Older Adults. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 69(5), 809–821. https://doi.org/10.1093/geronb/gbu002
- Sarracino, F. (2010). Social capital and subjective well-being trends: Comparing 11 western European countries. *Journal of Behavioral and Experimental Economics (Formerly The Journal of Socio-Economics)*, 39(4), 482–517. Retrieved from http://econpapers.repec.org/RePEc:eee:soceco:v:39:y:2010:i:4:p:482-517
- Wyshak, G. (2016). Income and Subjective Well-Being: New Insights from Relatively Healthy American Women, Ages 49-79. *PLoS ONE*, *11*(2), 1–16. https://doi.org/10.1371/journal.pone.0146303