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# Social well-being of the elderly in Hungary

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**Key words:** social well-being, participation in social activities, physical activity, Big-5, depression

#### Goal

In our study, we intended to identify the components of social well-being in the elderly. An examination of the intrapsychic and the interpersonal aspect also played a role in our research. A number of areas were measured by a questionnaire, such as traits, social well-being, the amount of exercise and the range of daily activities.

### Hypotheses

According to literature neuroticism is the most reliable predictor of depression in the elderly with this in mind we hypothesized that (H1) a higher emotional stability score on the Big-5 is associated with a higher well-being score on the Social Well-Being Scale. In old age, social support, social help and the frequency and quality of social interactions are of increased importance, however, the elderly do not participate equally in various social activities. For measuring the social activity a list of activities was used to identify how much they participated in a given activity, based on this we assumed that (H2) the elderly who participate in social

activities more often will have a significantly better assessment of their social well-being (on the Keyes social well-being scale) than those who participated such activities less often. Many studies claim that those of the elderly who participate more in social activities have lower depression scores. (H3) According to our assumption, elderly people who are involved in social activities are more often characterized by a higher well-being score on the WHO well-being scale compared to elderly people who are less involved in social activities. Last, research suggests that our social well-being is related to regular exercise and physical activity. We assume that (H4) the more physically active an elderly person is the more he/she will experience greater well-being compared to less active elderly people.

## Sample

Originally 252 people filled in our questionnaires, which was reduced to 212 as a result of subsequent screenings. The average age was 71.6 years (ranging 65 to 91) with 69.3% female (N=147), 30.7% male (N=65) subjects.

#### Methods

Our questionnaire started with demographic questions were followed by a series of questions about social and daily activities, so that we can assess what general activities the elderly do and how frequently. Then we included the International Physical Activity Questionnaire (IPAQ) to assess the frequency of physical exercise. Next the Keyes (1998) Social Well-Being Scale was utilized followed by the Ten-Item Personality Inventory (TIPI). Last the WHO Well-Being Index (WBI) was administered to the subjects on the Google Form as an online platform was used to collect data.

#### Results

Our results show that, in terms of social activities, we can distinguish between frequently involved seniors, who regularly participate in social activities, and less involved seniors. Seniors who get involved more often have significantly better social well-being (W=3196,5; p<0,001), so we can even talk about involvement in social activities as a protective factor. We believe that it would be extremely important to involve the elderly in as many social programs as possible, and thereby facilitate their social embeddedness and the perception of social support. The general well-being (WBI) was significantly increased (W=4216,5; p<0,01) by being involved in social activities. So social activities affect both social and global well-being. Our results show that participation in social activities is one of the most important factors for

the quality of life of the elderly. Consequently, in the prevention of mental illnesses, it is absolutely necessary to support social interactions. The more physically active elderly have significantly better global well-being (W=3690,5; p<0,0001) compared to the less active. Lastly, the importance of personality traits should not be ignored either, because elderly people with higher emotional stability also judged their well-being to be better (p<0,001, r=0,512). In this regard we can claim that our interpersonal characteristics are just as important as extrapersonal factors even at an old age.