Summary and References

summary :-

The aging graying population is one of the most significant characteristic of the 20th century and the first quarter of the 21st century known as the “age of ageing”. Along with the world
population, India elderly are also “ageing in old age”. Ageing is a phase of life and a biological process. Every organism born, ages with time and decays. Ageing is a life-long activity – from birth we grow older through infancy to childhood to adolescence to adulthood and onwards. The most widely used measure of ageing is chronological age, since it is the simplest and most comparable. But the age in itself is inadequate to explain the condition of people in later life. The term old is often associated with alteration in individual biological, psychological and health capabilities and changes in social roles. People aged sixty years and over are also consider as persons in the third age. Ageing is a natural process that begins at birth or to be more precise, at conception, a process that progresses through one’s life and ends at death. It is a constant, Predictable process that involves growth and development of living organisms. Aging can’t be avoided, but how fast we age varies from one person to another. How we age depends upon our genes, environmental influences, and life style.

Ageing can also be defined as a state of mind, which does not always keep pace with our chronological age. Attitude and how
well we face the normal changes challenges and opportunities of later life may best define our age.

Growing older cannot be prevented. However, some of the effects of aging can be slowed and even prevented. Prevention in later years requires participating in health education and health promotion activities designed to reduce the risk of progressive disability and decline of function. In later life the goals of prevention also include maintaining function, validity and quality of life. The population is a worldwide phenomenon. The advancement in physical and medical science, economic development repaid expansion of public health service along with social welfare. And social security measures have resulted in increase of life expectancy. It has brought about a demographic transition leading to sharp increase in the population of the aged. The term aged, elderly or senior citizens which is used to describe a section human population usually, refers to a particular group of persons who have reached a certain chronological age. However based on a combination of age and incapacity to work criteria, the aged may be regarded a those who are in the age group of 60+ and have retired from employment or disengaged
from business after having had their innings. In India which is
going through a revolution in its demographic, economic, social
cultural and psychological status, the population of the aged 60+
is increase rapidly. The population of the age recorded as 20.19
million in the 1951 census, escalated to 54.68 million in 1991, 70
million in 1998 and is expected to be 177 million by 2025. The
increase in the population of the aged has drawn attention of the
social scientists, medical men social workers and all others
interested in their welfare. This has lead to researches on the
strengths and weaknesses of the aged and their problems ,
physical as well as psychosocial. Scientific research on aging in
the west

Has been invoked since the early years of this century but it is
only in the last few decades that it has token roots in India. Of all
the researches behavioral scientist have been more concerned
with the physical concomitants of again than with the process of
again itself. By identifying the causes of the problem of aged the
behavioral scientist hope to formulate intervention program in
order to make old age the best period of life by alleviating these
problems.
Statement of the problem :-

One of the earliest trends in research on the elderly has been the study of their problems and how they adjusted to them aged people from higher socioeconomic status with suppose living (Eswamoorthy, 1991 and Jamuna 1992, 1995 Ramamoorthy and Sudharani, 1994) from joint families (Ramamoorthy 1989) with positive attitude towards aging (reddy1990) non institutionalized (Ramamoorthy and Jamuna 1993) and low sensation seekers (jamuna1987) have been found to have good adjustment. Some psychologists have endeavored to study the correlates of life satisfaction among the aged. It has been found that satisfaction with the past and present life is a very important variable that contributes to successful aging Ramamoorthy 1991, Ramamoorthy jamuna 1993 the variables of creativity, ego integrity, autonomy and altruistic behavior have been shown to contribute to life satisfaction.

One group of studies is concerned with stress among the aged and the factors that determines the reaction of the aged to frustration. In this context locus of control and personality make ups have been studied. It has been found that social and personal
factor like reduced income declining health and interaction with family members are related with stress (Ramamoorthy, 1994 Reddy and ramamoorthy 1920). An important factor that has been demonstrated an individual adjustment in old age is personality. Researcher have studies that self concept of the individual, locus of control, belief, sensation seeking and hardiness in relation to adjustment and stress among the aged (Jamuna and Reddy 1993; Baltes 1986; Kobosa 1979; Zuckerman 1978). In addition to the above psychological variables demography factors such as gender, area of residence and religion have also been investigated in relation to the problems of the aged (Prakash 1995; Chaddha and Eswamoorty 1993; wirth 1938 and redfield 1947; Sajjan singh 1995).

It is apparent from the above of researches that most of the studies on such problems of the aged as their adjustment and life satisfaction have been Bivariate studies and that multivariate studies exploring interactional effect of two or more variables on adjustment and life satisfaction and thereby the demonstrating the effect of moderator variables have rarely been attempted. Further it has seen that there is paucity of Indian researches on some of
the factors in the aged having moderating the effect of stress. One case in point is the optimism – pessimism dimension of personality. Which has been found to buffer or accentuate the effect of stress. Apart from this as is evident in India have drawn their samples from southern part of the country and perhaps no study has been conducted on the aged population of eastern U.P particularly the district of Jaunpur. In view of the above observation the Problems for the present study has been selected and formulated as follows: “an investigation in to the level of adjustment and life satisfaction in relation to stress, personality and some demography variables in elderly.”

**Hypothesis :-**

1- There will be significant difference between rural and urban aged with respect to level of adjustment.
2- There will be significant difference between rural and urban aged with respect to level of adjustment.
3- There will be significant difference between Hindu and Muslim aged with respect to level of adjustment.
4- There will be significant difference between Male and female aged with respect to life adjustment.
5- There will be significant difference between Male and female aged with respect to life satisfaction.
6- There will be significant effect of interaction among the demography variables in life satisfaction of the aged.
7- There will be significant effect of interaction among the demography variables on level of adjustment of the elderly.
8- There will be significant relationship between amount of stress and level of adjustment of the aged.
9- There will be significant relationship between amount of stress and life satisfaction of the aged.
10- There will be significant relationship between locus of control and level of adjustment in the aged.
11- There will be significant relationship between locus of control and level of satisfaction in the aged.
12- There will be significant relationship between optimism and level of adjustment in the aged.
13- There will be significant relationship between optimism and level of satisfaction in the aged.
14- There will be significant effect of interaction among the personality variables on the level of adjustment of the aged and the locus of control and optimism will moderate the effect of stress.

**Objective of the study :-**
The study has following objectives :-

1- To investigate the level of adjustment and life satisfaction of the aged.

2- To explore the effect of religion of rural – urban loving on the level of adjustment and life satisfaction of aged.

3- To determine the effect of religion on the level of adjustment and life satisfaction of aged.

4- To explore the comparative effect of gender on the level of adjustment life satisfaction.

5- To investigate the interaction effect of area religion and gender on level of adjustment and life satisfaction.

6- To explore the relation of stress with adjustment and satisfaction in the aged.

7- To determine the relation of locus of control with level of adjustment and life satisfaction.

8- To investigate relation of optimism – pessimism with level of adjustment and life satisfaction.

9- To examine the interactional effect of personality variables on level of adjustment and life satisfaction and thereby revealing the stress moderating role of locus of control and optimism.
Method and procedure :-

The present study started with the main aim of investing the level of the aged in relation to stress, personality factors and some demographic variables. The first step was to construct an scale to measure adjustment of the aged. The study was conducted on the sample given below:

Sample :-

The present study was conducted on a sample of 300 aged belonging to the age group of 60 and above. The samples were drawn from the rural and urban area of jaunpur district.

The number of sample for this purpose was 300 consisting of 150-150 responses from urban and rural areas respectively 150 response were further categorized in to 75 Hindu and 75 Muslim respectively. These 75 responses were further categorized in to 38 male and 28 female respectively.

Data collection :-
The investigator gave a short orientation lecture to the subjects. They were told that the project was designed to study the ages views about their problem. It would help in understanding the status of the aged in present time. The testing was completed in three sessions.

In the first session the adjustment and optimism attitude scale was administrated and after one day or next day the remaining ICMR sheet was given. It also took two hours and sometime other external factor. It look whole day.

Rest of the two scale namely locus of control and life satisfaction were administrated next day. Due to a large number of items it got very tough to administer the entire response sheet in one day. Anyhow the subjects were asked to fills in their personal data in the specified spaces and then to go through instructions printed on the first page of scales. The investigator presented the instruction orally and subjects followed through printed version. They were asked to clarify any matter if it was not clear
To them. After had understood the way they had to work they were requested to turn over the page and read the items and make their response according to the instruction. When the entire respondent had completed the test booklets were collected.

Tools – the selection of tools for any study largely depends upon such consideration as the objective of the study, the amount of the time at the disposal of the investigator availability of suitable test for the sample under study and the variable being as well taking these factors in to consideration the following test were used for the study.

**Description of tools :-**

1- Life satisfaction scale (Hindi adaption of Neugarten and havighurst, 1961).
2- Adjustment scale (prepared by the researcher).
3- ICMR psychosocial stress scale developed by (Dr. A.K. Shrivastava and D.M. Pestongee 1999).
4- PGI locus of control scale.
5- Optimistic – pessimistic attitude scale by D.S Parasar.
Finding the results

Stress and life satisfaction :-

The analysis of data revealed that the correlation between total stress score and the life score is not significant. When the dimensions of stress were correlated with life Satisfaction, the only dimensions of stress were correlated with life satisfaction, the only dimension of stress that had significant correlation with life satisfaction was health related stress. On the basis of these result it may be concluded that in case of the aged health related stress significantly affects their adjustment and since the direction of this relationship is negative, an increase in health related stress result in a corresponding decrease in life satisfaction.

The findings of the present study in case of stress-life satisfaction relationship are partly in agreement with the findings of earlier study because only one dimension of stress has been found to be negatively related with life satisfaction. An earlier study by Greenberg, seigel & leich (1983) reported lower levels of life satisfaction among persons who had experienced greater number of stressful negative life event.
The result showing negative correlation between health related stress and life satisfaction is understandable when the population under study is taken into consideration. In case of the aged health related problems become more important than the problem in other areas of their life. Perhaps this show because of the impending danger of death in this part of life have not been found to be significantly related with the elderly life satisfaction.

**Stress and adjustment :-**

The correlation analysis in case of stress adjustment relationship has shown that there is significant negative correlation between total stress score and total adjustment score. In addition to this all the six dimension of stress too have been found to be negatively correlated with total adjustment. When the total stress score and the scores for the scores for the six dimension of stress were correlated with the five component (emotional, social, financial, health, home) of adjustment, total stress were found to be significantly correlated with health and home components of adjustment all these correlations are negative which means that increments in various types of stress
lead to poor health and home and home adjustment, in addition to this dimension.

Of stress due to threat to socioeconomic status has been found to significant negative correlation with financial adjustment all these findings are in line with what is accepted

A number of studies have found result that are in consonance with the findings of the present study. Cowen et al, (1984 have reported that children with mental health problem are those that have experienced more negative life events. Sandler & Block (1979) have found that children with adjustment problem had experienced more negative life events than normal children. Venkoba Rao and Namalvar, (1976) have shown that as compared to a central group, the depressive group experienced more negative life events. Shrivastava (1979) in his study of the relationship between psychological stress and health has found that psychosocial stress had significant correlation between mal-adaptive and pathological behavior. Almost all the study has shown significant relationship between negative life events dysfunctional behavior negative life events have found to be correlated with anxiety and depression (Barrera, 1981; Compas &
The findings of all the studies mentioned above support the result of the present study, even through the samples differ the direction of the relationship between stress and adjustment remains the same.

**Area of Residence, religion, gender & Life satisfaction :-**

To assess the individual and interactional effects of the demographic variables area of residence, religion and gender on life satisfaction, analysis of variance was conducted. The obtained results show that the main effects of area religion or gender on life satisfaction are not satisfaction as regards the interactional effects the only interactional that has been found to affect life satisfaction significantly is the one between religion and area.

The findings of earlier studies on the association between demographic variables and well being have been inconsistent. For example Wilson, 1967 is the earliest review of studies on happiness that young educated, married persons of either sex or happy but Campbell et al, 1976 that demographic variable such as age income and education do not account for much variance in well being. Andreus & Withey (1976), has found that demographic factor measured by them accounted for less than
20% of the variance in subjective well being have reached the following conclusions. (a) Demographic factors such as age, sex and income are related to subjective well being (b) these effects are usually small, and thus, demographic factors tend to distinguish between people who are moderately and those who are happy (Diener & Diener 1996).

The general conclusion is that though demographic variables like age & sex related to subjective well being. These effects are small and depend upon the component of that is measured.

The findings of the present study showing non significant main interactional effect of religion gender and area indicate that these demographic variables have at the most negligible relationship with the life satisfaction. The only significant interactional effect of religion and area appears to be an anomaly and needs to be verified by conducting replicative study.

**Area of residence religion gender and adjustment :-**
A second analysis of variance conducted to assess the effect of religion, gender and area on adjustments demonstrated that gender and religion has significant main effect on adjustment but the main effect of area is not significant. The interactions between religion and area and gender as well as religion into area are significant. These findings indicate that religion and religion do have a relationship with adjustment of the aged. Aged women are higher mean score for adjustment than the aged man and Muslim aged higher have score than Hindu aged. These results need confirmation before they are generalized. This reveal has its root in the reasoning that religiously of a person may have a relationship with adjustment, but simply being a member of religious group may not have to do anything with the persons adjustment. Similarly to say that women are more adjusted than men may be an over generalization. What appears to be logical is to conduct further studies that sample individual different locations.

1- There is significant positive correlation between optimism and life satisfaction. This leads to the inference that an increase in
optimism has a corresponding increase in life satisfaction of a person.

2- There is significant negative correlation between locus of control and life satisfaction since higher score on the measure of locus of control indicate external locus of control. It may be inferred that a person with more belief in external control of events in his life has lower level of life satisfaction.

3- The correlation between optimism and adjustment has not been found to be significant and it may be said that the present study has shown that optimism is not related with adjustment.

4- Locus of control has significant positive relationship with adjustment. This demonstrates that a person having higher standing on external locus of control has better adjustment as compared to one having lower standing.

5- The correlation between total stress score and the score for life satisfaction is not significant.

6- The only dimension of stress too have a negative relationship with life satisfaction has been found to be health related stress.
7- A significant relationship between total stress score and the total score for adjustment has been found. This means that stress and adjustment are associated. The direction of this relationship is negative.

8- The correlation between various components of stress and adjustment are also negative and significant.

9- When the total stress score and the scores for the significant correlations were obtained only in case of health adjustment and home adjustment. All the dimension of stress were found to have significant negative correlations with health and home adjustment. Additionally the dimension of stress due to socioeconomic status has negative correlation with financial adjustment.

10- When analysis of variance to see the effect of religion gender and area of residence and the interactions among these variables was performed result shows that the main effects of religion, gender and area on life satisfaction are not significant. This means that religion gender and area as individual factor do not effect life satisfaction.
11- The only interaction that has been found to have significant effect on life satisfaction is the one between religion and area.

12- The analysis of variance conducted to ascertain the effect of religion, gender and area on adjustment demonstrated that religion and gender have significant main effects but the main effect of area is not significant.

13- The interaction between religion and gender has been found to have no significant effect. The interaction among religion, and area gender and area has have been found to have significant effect. The interaction among religion, and area gender and area has also shown a significant effect on effect on adjustment.

Limitations of the Study:-
The present study has following limitations

1. It has been a correlational study inferences about causal relationship between correlated variable are not possible.

2. The study is not an experimental study and therefore lacks control of extraneous variable. As such the following have low internal validity.

3. The sample for the study was drawn from the population limited to a particular geographical limited validity, particularly ecological validity.

4. The tools used for the measurement for the variable have been self report Questionnaires and scales therefore is brought with all the limitations of such tools.
Suggestions for Further research:-

In view of the findings of the study and its limitations the following suggestions for further research may be made

1. Correlation between stress and its dimension and two components of adjustment namely health and home have been found to be significant, while other components of adjustment have been found to no relation with stress and its dimensions. The only exception being the correlation between threat to socioeconomic status and financial adjustment, these findings need further confirmation by conducting erplicative studies.

2. Significant differences between the adjustment of the aged belonging to different religion and gender has been found in which aged Muslims have higher mean adjustment score than aged Hindus, and aged women have higher mean adjustment score than aged men. These findings too call for verification by further study.

3. The present study has been limited to the geographical area of Jaunpur district of Utter Pradesh. To increase the ecological
validity and generalizability of the findings, studies on the aged living in different geographical locations need to be conducted.