

Investigate the Situation of Satisfaction of Social Relationships and Living Environment in Elders in Nursing Homes and Elders in the Family

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Received: December 27, 2016

Accepted: January 11, 2017

Online Published: February 1, 2017

doi:10.5539/mas.v11n2p95

URL: <http://dx.doi.org/10.5539/mas.v11n2p95>

Abstract

The purpose of this study is to compare the satisfaction of social and living conditions of elderly people living in nursing homes, with family environment. The research method is Survey. The population included elderly residents of a nursing home comfort in Karaj (60 Persons), and the number of seniors living in families in the city of Karaj. Due to the limited number of population, census method was used to determine sample size. Also, 60 seniors who lived in the area were selected by convenience sampling method, to study more precise and similar in both groups of seniors. The questionnaire included 11 questions on a Likert spectrum of very high (5), high (4), average (3), low (2) and very low (1) was used to collect data in this study. The research tools were used by the opinions of experts, and reviewed and revised. Therefore, the validity was confirmed. Parallel methods were used to measure the reliability of research. In this case, we refer to the first 20 participants, and questions were asked, and again the test was repeated a week later, and since, to obtain general information, the information is not different from those after of a week, the questionnaire was judged as valid. To analyze the findings, we used descriptive statistics (frequency, percentage and mean) and inferential statistics (t-test) with application software spss. The results showed that, on average satisfaction (of social relations and the environment) among residents of a nursing home, are 9.56 and 14.27, respectively, and in the elderly living at home is 14.09 and 18.84 respectively. Hypothesis test results also showed that satisfaction with social relationships and environment, studied two groups of elderly unequal, and this inequality is also significant.

Keywords: satisfaction, social relationships, environment, family, elderly

1. Introduction

Human beings, biological processes, are faced with the aging process. What causes aging and life is passing and the passing of time, this phenomenon exists in all historical periods. But today, unlike in the past, medical science advances, improved nutrition, and public health, has caused an increase in the number of elderly people, and the mean age in different societies (Aghanouri, 2011). Looking at the figures, depth, intensity and importance of this issue becomes more visible, so that, today, there are about 600 million elderly person, over 60 years, globally, that figure will double by 2025, and will rise to two billion people in the year 2050 (Hatami et al, 2008), and this increase will be much more severe in developing countries, compared with developed countries and our country, Iran, is not exempt from this Comments (Moahmoudi et al., 2012). In reviewing this massive demographic shift, what is more worrying is that, most of these are non-constructive elderly people economically, and socially isolated, and health at risk for chronic diseases, and handicaps and disabilities caused by (Pahlevanzadeh & Jarelahi, 2011).

The elderly, in comparison with the youth, more likely, with multiple chronic diseases and disabilities are in. The use of health care is highest among elderly persons in late life. People over 85 years, are several times more likely to lose their independence, and several times more likely to be living in nursing homes (Huijun et al., 2011). A large number of elderly in activities of daily living (such as dressing, eating) and ongoing activities related to items (such as food, medication, use of money), and have difficulties, and there There is a disproportionate rate of disability among older age groups (Mokhtari and Ghasemi, 2011). In the past, the elderly were known as experts, who were present in all socio-economic aspects of community life, and they were the

first and last word in solving family problems. Today, illness and disability and the maintenance of their problems at home, on the one hand, and changes in family structure and social transformation of the elderly, have made families leave their elderly nursing homes, and day to day, also added is the number of elderly people in inns, and the number of nursing homes (Javaheri et al., 2010).

In the meantime, life satisfaction is considered one of the oldest and most persistent problems studied in adult life, which is generally expressed as a general review of the situation, the comparison wishes, to real access to them. Diener said, satisfaction with life, comes from attitude and his general assessment of the totality of his life, or some aspects of life, such as family life, work, leisure, income and so on. In fact, satisfaction with life, is a reflection of the gap between the ideals of the party, and his current situation, and the gap between the ideal and the current situation is more individual, will be reduced accordingly satisfaction (Etemadi and Ahmadi, 2010).

Discuss life satisfaction measured and studied since, from now on, the elderly will account, a large part of Iran's population, and due to the problems of citizens, is one of the necessities of each community. Given the importance of this issue, this paper seeks to examine and compare the status of resident and non-resident seniors in nursing homes, and the answer to the question, Is there a difference between life satisfaction seniors, who are living in nursing homes, and seniors who are living together with their family members? Is there a difference in many aspects (social and environmental)? Finally, what size has been able to provide satisfactory nursing homes for the elderly living in nursing homes, and meet their needs, the same proportion as other seniors who live with their families?

2. The Empirical Record

- Banazadeh (2003) conducted a study entitled "The effect of social relations and confidence in mental health". In this study, 100 men older than 65 years were selected by cluster sampling method, the central part of the city of Kerman. Analysis of data obtained using two-way analysis of variance showed that the ratio obtained F, is not significant in any of the main factors (social relations and self-confidence), and only the F, is significant interaction between the two independent variables studied. Therefore, the effect of social relations and self-confidence at the same time, the mental health of the elderly, is confirmed.

- Pasha and colleagues (2007) conducted a study entitled "Comparison of public health and social protection, among elderly nursing home residents, the elderly in the family". In this study, 50 elderly people living in nursing homes (25 females and 25 males), and 50 elderly people living in households (25 women and 25 men) in the city of Ahvaz, were studied. The results showed that there is a significant difference between the elderly living in nursing homes, and seniors living in households, in terms of public health and its components, the physical symptoms, anxiety, social dysfunction, depression, and social support. Also, analysis of variance (2 x 2) was used to test for differences between men and women, the elderly, the named variables, the results showed no significant difference between men and women In both groups, the elderly, in terms of public health, and its components, and social support.

- Hesamzadeh and colleagues (2009) conducted a study entitled "Comparison of quality of life of elderly living in families with elderly residents of nursing homes and private in Tehran". The quality of life of elderly families (65.57) was higher than the quality of life of elderly people living in nursing homes, state (51.30) and private (50.64). The dimensions of physical functioning, social, and life satisfaction, and self-care, elderly families, the elderly, nursing homes showed significant statistical difference. No significant difference was found between quality of life, public and private homes, as well as the quality of life of men and women in the study units. Elderly family, had, better quality of life, public and private nursing homes to elderly residents, the physical, social functioning and life satisfaction.

- Alipour and colleagues (2009) conducted a study entitled "The role of social support on quality of life". Data is collected from a sample of 100 people aged 2 Tehran area. The results showed that there is a direct relationship between types of social support (emotional, structure, function, material), and quality of life. The results showed that the greatest impact on quality of life, emotional support, and a variety of social support, had the highest correlation with the social dimension of quality of life.

- Ghazi et al. (2013) conducted a study entitled "Consent elderly nursing home resident NGOs, the services provided to them: a survey in the province of Golestan, Mazandaran and Semnan, Khorasan, in 2012". The mean scores showed that satisfaction with the care of the elderly from physical (3.55), and the physical environment institutions (3.77) is of a higher level, to the satisfaction of the psychological aspects (3) and social care (26.3). The average overall satisfaction scores of service was 3.4, indicating moderate to good satisfaction level. There is a significant relationship between overall satisfaction and acceptance at home. Also, due to the significant relationship between overall satisfaction and admission to nursing homes, mental health preparation before

admission to a nursing home, may lead to further his or her satisfaction with the services provided in the institution.

- Rezvani and colleagues (2013) conducted a study titled "Analysis of Factors affecting the quality of life in rural areas (Case Study: Nishapur city)". Regression analysis showed that six factors, vitality In the first step, subjective well-being in the second step, third step mental and physical ability, quality and availability of health services in the fourth step, fifth step of social relationships, and interaction Social sixth step, in order of importance, they are in explaining the dependent variable in the regression equations arrived. In total, these six factors could explain more than 60 percent of the variation in quality of life, the study area. Therefore, to improve the quality of life of rural areas, attention and practical measures in the areas identified factors, is essential.

- Research carried out by Bier in 2007, as a result of social and family interactions, the signs of depression in the elderly, in rural areas. Participants indicated that, most of them involved in social output, and communicate with members of the therapist, close friends and members. On the other hand, negative interactions with family members, effect on symptoms in their behavior.

- The relationship between life satisfaction and health behaviors in family compounds in the manure (2007), which was carried out to determine the composition of the family and life satisfaction of the elderly in Seoul, his family and son combination had a statistically significant relationship there, with life satisfaction.

3. Hypothesis

- It seems there is a significant difference between the satisfaction of social relations of the elderly living in nursing homes, and seniors living at home.

- It seems there is a significant difference between nursing home resident satisfaction with their living environment, and the elderly living at home.

3.1 Research Methodology

This study, in terms of target applications, and the nature and methods, descriptive and correlational, and the survey is to collect information strategy. The study sample consists of two groups as follows: 1. the number of seniors living in nursing homes in Karaj. 2. The number of seniors living in families in the city of Karaj. In order to determine those of a single study, first a nursing home in Karaj was 14. 60 elderly people living in nursing Setayesh, the sample is examined in this study. Due to the limited number of population, census method was used to determine sample size. Also, in order to further scrutiny and similarity of the two groups of seniors, aged 60, who lived in the area, were selected by available sampling method. A questionnaire was used to collect data in this study; they were filled by interviewing elderly. Independent variable name has two alternatives (among residents of the Serra / seniors living at home). Also, for the elderly, are people over 60 years. In this study, 2 were considered indicators of life satisfaction: the satisfaction of social relationships (4 items), and satisfaction of the living environment (7 items) was used. Questions, Likert set in a range of very high (5), high (4), average (3), low (2) and very low (1). To assess the validity of survey of the data to experts, and based on the comments and issues raised by Experts were taken to remove some of the questions and adding some other Azsvalat, or modification of the terms, the credit formal questionnaire was approved, thereby. Parallel method is used to measure the reliability of research. In this case, we refer to the first 20 people (10 men and 10 women among the elderly residents of nursing homes in the family) and asked questions. And again, the test was repeated a week later, and since the general data, is not different with the information obtained from them after a week, so the reliability of the questionnaire. Descriptive statistics (frequency, percentage and mean) and inferential statistics (t-test) with spss software was used to analyze the findings.

3.2 Descriptive Findings

Table 1, Average satisfaction (of social relations) among residents of a nursing home is 9.56, and the average satisfaction of elderly people living at home is 14.27. This result suggests that the elderly living at home, it is better and better social relations of the elderly living in nursing homes.

Table 1. Average satisfaction of social relations, in place of life

	Number	Minimum	Maximum	Mean	Standard deviation	Variance
Elderly in Nursing Homes	60	12	21	14.09	1.78	3.17
Elderly living at home	60	17	29	18.84	1.51	2.28

Total	120	10	29	16.47	2.89	8.39
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Classified satisfaction (of living environment) is also shown in Table 4. 42.4% of the elderly in Nursing Homes, their satisfaction with the living environment is low and only 17% of Elderly living at home; their satisfaction the living environment is low. Only 23% of the elderly in Nursing Homes, their satisfaction with the living environment is high, this while, 38% of elderly people in their home living environment is a high level of satisfaction.

Table 4. satisfaction of the living environment, as classified, and in the elderly

		Satisfaction of living environment			
		Low	Medium	High	Total
Elderly in Nursing Homes	Elderly in Nursing Homes	31 (35%)	10 (23%)	60 (100%)	
Group	Elderly living at home	25 (45%)	27 (38%)	60 (100%)	
			37 (31%)	120 (100%)	

3.3 Inferential Findings

First hypothesis: it seems there is a significant difference between the satisfaction of social relationships among elderly living in nursing homes, and seniors living at home (family).

As shown in Table 5, referring to the significant level of Leuven, we see that the significance level is greater than 0.05, and concluded that the two groups of unequal variance. Therefore, we refer to the two-tailed tests of significance level, at the row of equality of variances. It can be seen that the significance level of less than 0.05, and therefore we conclude that, satisfaction of social relations, in two groups of elderly people is unequal, and this inequality is also significant.

Table 5. T test two independent groups - the difference in satisfaction with social relations

		Levene test for equal variance		T-test for equality of means				
		F	Significance level	T	Degrees of freedom	Significance level (two-tailed)	lower limit	upper limit
Satisfaction with social relations	Equality of variance	0.418	0.467	2.235	107	0.000	8.34	12.33
	Lack of equality of variance			1.730	62.109	0.000	7.98	13.64

The second hypothesis: it seems that there is a significant difference between the satisfaction with life among the elderly in nursing homes, and seniors living at home (family).

As shown in Table 6, by reference to the significant level of cauliflower we see that the significance level is greater than 0.05, and concluded that the two groups of unequal variance. Therefore, we refer to the test, two-tailed significance level, the row of equality of variances. It can be seen that this part is less than the significance level of 0.05, and therefore we conclude that, the consent of the two groups living environment for the elderly, is unequal and the inequality is also significant.

Table 6. T test two independent groups - the difference in satisfaction with living conditions.

		Levene test for equal variance		T-test for equality of means				
		F	Significance level	T	Degrees of freedom	Significance level (two-tailed)	lower limit	upper limit
Satisfaction with living environment	Equality of variance	0.213	0.674	3.532	107	0.000	7.43	13.45
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Lack of equality of variance	2.91370.109	0.000	8.79	12.46
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4. Conclusion

Here is a summary of the findings presented:

- Average satisfaction (of social relations) among residents of a nursing home, is 9.56, and the average satisfaction was at 14.27 against the elderly at home. This result suggests that the elderly living at home had better and better social relations, to the elderly living in nursing homes.
- Classification of satisfaction (of social relations) also showed that only 23% of the elderly in Nursing Homes, the satisfaction of their social relations was high, this while, 38% of seniors living at home, the satisfaction of their High of social relations.
- Average satisfaction (of the environment) among residents of a nursing home, was equal to 9.14, and the average satisfaction was at 18.84 against the elderly at home. The results showed that the elderly living at home had a better living environment and more favorable than the elderly living in nursing homes.
- Classification of satisfaction (of environment) also showed that only 23% of the elderly in Nursing Homes, satisfaction with their living environment was high, this while, 38% of seniors living at home, the satisfaction of their the environment was high
- First hypothesis test results showed that a significant level of Levin test was higher than 0.05, and the two groups of unequal variance. Therefore, we refer to the test, two-tailed significance level, at the row of equality of variances and we observed that the significance level of this section is less than 0.05, and thus, satisfaction of social relations, the two groups of older adults unequal and this inequality is also significant.
- Test results showed that the second hypothesis, the significance level was 0.05 Levin test and the two groups of unequal variance. Therefore, we refer to the test, two-tailed significance level at the row of equality of variances, and observed, that the significance level is less than 0.05, and therefore, the consent of the two groups of older adults living environment unequal, and this Inequality is also significant.

The results of this study show the relevance and impact of loneliness that comes from living in nursing homes, with life satisfaction, therefore, the results of this study should convince the officials and health care providers, which have continuous contacts with people elderly and identify unique situations, such as loss of social relationships, and identify the thoughts and beliefs of the elderly, and raise awareness of health care providers and families and elderly people to understand and strengthen the relationships and interactions in the elderly and design to education, treatment and rehabilitation programs and prevent the creation of loneliness and life satisfaction, and improving the quality of life in the elderly.

5. Suggestions

Aging is not something that exists only in a historical period, or in a particular community. But the core of the family, in modern times, has turned to the issue of aging is that it requires more and more attention. Nursing homes are a solution, which responded only to requests and family needs. But, do not pay attention to the elderly, as the users of this community (nursing homes). As is clear from the study, elderly at Nursing Homes have less satisfaction in all dimensions than the elderly living in their family life.

Studies have shown that, outreach work, causes, reducing the social and emotional needs of the elderly and mental health. Work is a low-cost process, the use of existing facilities, and to find the real needs of the elderly can provide many of the goals of the health care system and health care, for the elderly. The most important factor in meeting the social and health needs of the elderly, attention and importance attached to them by social workers and health systems and subsequently by family members. There is a need to love and respect all people, and it does not slow down with age. The elderly, due to reduced physical performance, less energy for social interaction and changes in appearance can change your image in him. In this regard, recommendations regarding the role of workers in improving elderly people in nursing homes are provided:

- Nursing homes, seniors should try to improve the situation by employing workers, part-time or periodically.
- Create a refreshing and fun, for the elderly, through the implementation of cultural, artistic and entertaining programs, by inviting worker of arts groups, such as music, theater and comedy performances.
- Workers have to provide facilities, as families spend more time with their elders, whether in Nursing Homes or

out of it.

- The involvement of the elderly in cultural and artistic activities, such as writing poetry, reading a story and novel, play, film and television with the worker, so that the spirit of hope and joy to be for the elderly.
- Worker should monitor the behavior and attitude of nurses and staff and employees of nursing homes.
- Control and supervision of medical applications, and the diagnosis and treatment of the elderly through physicians contracted with nursing homes;

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