Factors Affecting Subjective Well-Being of the Middle-Aged Class

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Abstract

Background/Objectives: The purpose of this study is to identify the factors influencing the subjective well-being of the middle-aged class and to identify the relative influence of the variables.

Method/Statistical Analysis: The subjects of this study consisted of a middle-aged class group, aged 40 to 64, among the panels of an online research company, and data was collected from a total of 196 subjects. The collected data were analyzed using descriptive statistics, t-test, ANOVA, post-test Scheffé test, Pearson's correlation coefficient and stepwise multiple regression using SPSS 22.0.

Findings: The average score of the subjective well-being of the middle-aged class was 3.34. The difference in subjective well-being according to general characteristics was found to be significant according to education (F=4.89, p=.009) and economic status (F = 9.76, p<.001).Subject's subjective well-being was positively correlated with health status (r=.56, p<.001), meaning in life (r=.66, p<.001), generativity (r=.76, p<.001), self-efficacy (r=.62, p<.001), and social support (r=.57, p<.001). As a result of stepwise regression analysis, generativity (β=.424, p<.001), health status (β=-.209, p<.001), social support (β=.190, p=.001), and self-efficacy (β=.150, p=.014) were factors affecting subjective well-being, and the explanatory power of these 4 variables was 62.6%. The most influential variable was generativity.

Improvements/Applications: This study considered variables in various fields to provide nursing intervention to promote subjective well-being of the middle-aged class, and as a result, it will contribute to promoting a qualitative life by improving the health potential of the middle-aged class.

Keywords: *Subjective well-being, health status, generativity, meaning in life, self-efficacy, social support.*

Introduction

The middle-aged class has served as a key generation of growth in countries and businesses, and an economic backbone in the home. However, the middle-aged class generation is also a generation that suffers from various difficulties as physical health is weakened, the loss of roles and anxiety about economic sources of income are heightened while preparing for retirement in the labor market.

Especially in middle age, people feel that they have somewhat reached personal achievement, feel emotional stability through social stability, aim to find their identity, and feel true happiness when they find meaning in life[1].Efforts to find meaning in life become the power to lead life well as an opportunity to grow by discovering its meaning in adversity or pain experienced in life[2]. The meaning in life is an indicator of psychological health related to happiness and is a variable that has an important influence on quality of life and well-being[3].

In general, the social-psychological development task of middle-aged people is generativity versus

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stagnation, and generativity is the degree of personal internal development that is important for having an identity as a middle-aged adult and indicates the maturity of psychosocial adaptation[4]. However, if the generativity is not obtained at this time, the person may fall into a sense of stagnation and self-righteousness, and the relationship with spouses and others becomes difficult and can suffer psychological difficulties such as atrophy, anxiety, depression, and decreased self-esteem[5]. Generativity is a concept that exists within an individual, but in a social relationship, an individual can increase psychological well-being and increase generativity by perceiving the support of social support systems or resources[6].

Well-being is divided into two categories, subjective well-being focusing on "hedonic" results and psychological well-being emphasizing "eudaimonic" results[7].In particular, subjective well-being is a concept that encompasses emotional experiences and cognitive judgments related to life, and cognitive judgment means evaluation of life satisfaction, and emotional experience means static and negative emotional reactions in life conditions[8]. Personal factors affecting subjective well-being include physical change and health status, and health status is becoming a source of effective coping skills by increasing social activity and giving positive meaning in life and value through interpersonal relationships and interactions with others[9]. In addition, subjective well-being is affected by self-efficacy, expectations, environmental support and resources[7],and social support is an important influencing factor[10].

So far, many studies on quality of life have been conducted in nursing, but studies on well-being considering the developmental tasks and comprehensive concepts of middle-aged classes are rare. For helping middle-aged classes achieve their development tasks and give them new meaning in life, and in order for them to experience well-being and prepare for successful aging, nursing intervention is needed considering various aspects. Therefore, this study aims to find an intervention that can improve the well-being of the middle-aged class by identifying factors affecting subjective well-being of the middle-aged class.

Method

Subjects: The subject of this study is a panel of a specialized online research company, and is a middle-aged class aged 40 to 64 years old. The minimum number of samples is 178 when calculated by setting the statistical power for regression analysis to 90%, medium effect size 0.15, significance level 0.05, and 11 predictors using the G*Power 3.12 program, and a total of 196 questionnaires were included in the final analysis subject considering the dropout rate of 10%.

Tools:

Subjective well-being: It is a 5-point scale of 30 questions developed by Bakand Hong[11]. The higher the score, the higher the subjective well-being score. The reliability in this study was found to be Cronbach's α = .75.

Health status: It is a 5-point scale of 4 questions that Chang and Oh[12] developed. The higher the score, the better the subjective health status. The reliability in this study was found to be Cronbach's α = .90.

Meaning in life: The Korean version meaning of life scale of Won et al.[13] was used. It is a 7-point scale of 10 questions, and the higher the score, subjectively the more meaning in life. The reliability in this study was found to be Cronbach's α = .87.

Generativity: It is a 5-point scale of 27 questions developed by Lee and Lee[6], and the higher the score, the higher the level of generativity. The reliability in this study was found to be Cronbach's α= .95.

Self-efficacy: It is a 4-point scale of 10 questions developed by Schwarzer and Jerusalem[14], and the higher the score, the higher the level of self-efficacy. The reliability in this study was found to be Cronbach's α = .90.

Social support: It is a 5-point scale of 12 questions developed by Zimet et al[15], and the higher the score, the higher the level of social support. The reliability in this study was found to be Cronbach's α = .90.

Data collection: Data collection was conducted from June 12, 2020 to June 30, 2020, and it was deemed to have been agreed upon if the person who received the participation e-mail from the company among the panel the of online research company went online and proceeded to answer the questionnaire.

Ethical considerations: This study was approved by deliberation and written consent exemption from the Public Institutional Review Board of the Ministry of Health and Welfare (PO1-202006-22-009).

Data analysis method: The collected data were processed by computer statistics using SPSS/WIN 22.0 program. Descriptive statistics for the general characteristics and variables of the subjects were obtained. The difference in subjective well-being level was determined according to general characteristics t-test, ANOVA, and post-test Scheffé test. The correlation between the subjective well-being and the variables was analyzed by Pearson's correlation coefficient. In addition, in order to identify factors affecting subjective well-being, it was analyzed by stepwise multiple regression after multicollinearity diagnosis.

Result

General characteristics of subjects: The distributions of the gender were 94 male (47.5%), 104 female (52.5 %). Mean age of the subjects was 52.7(±7.93) years old and 60 to 64 years old group was the most among these with 196 persons (33.8%). University graduates were the most with 128 (64.6%); 152 (76.8%) had their spouses; 115 (58.1%) had no religion; and 156 (78.8%) had occupations. With respect to the economic status, 132 (66.7%) answered as

Table 1. General Characteristics and Difference in Degree of Subjective Well-Being according to General Characteristics

Characteristics	Categories	n(%)	Subjective well-being			
			M±SD	t/F	p	Scheffé
Gender	Male	94(48.0)	3.34±0.48	0.04	.966	
	Female	102(52.0)	3.33±0.46			
Age (Yr)	40-49	66(33.6)	3.26±0.42	2.11	.124	
	50-59	65(33.2)	3.32±0.40			
	60-64	65(33.2)	3.43±0.55			
Education	High school[a]	43(21.9)	3.20±0.42	4.89	.009	a<c
	University[b]	126(64.3)	3.33±0.46			
	Graduate school[c]	27(13.8)	3.55±0.50			
Spouse	Yes	150(76.5)	3.33±0.47	0.21	.832	
	No	46(23.5)	3.35±0.45			
Religion	Yes	81(41.3)	3.39±0.49	1.32	.188	
	No	115(58.7)	3.30±0.44			
Occupation	Yes	155(79.1)	3.34±0.46	0.42	.678	
	No	41(20.9)	3.31±0.50			
Economic status	Low[a]	59(30.1))	3.13±0.48	9.76	<.001	a<b, c
	Middle[b]	131(66.8)	3.42±0.43			
	High[c]	6(3.1)	3.62±0.43			

Descriptive statistics of the study variables: Subjective well-being averaged 3.34 (±0.47), health status averaged 3.22 (±0.66), and meaning in life averaged 4.58 (±0.92). In addition, the average generativity was 3.33 (±0.56), the self-efficacy was 2.71 (±0.39), and the social support was 3.48 (±0.69) (Table 2).

Table 2. Descriptive Statistics of the Study Variables

Variables	Mean	SD	Min	Max
Health status	3.22	0.66	1.25	5.00
Meaning in life	4.58	0.92	1.90	7.00
Generativity	3.33	0.56	1.19	4.93
Self-efficacy	2.71	0.39	1.70	3.90
Social support	3.48	0.69	1.00	5.00
Subjective well-being	3.34	0.47	1.97	4.93

Difference in degree of subjective well-being according to general characteristics: The degree of subjective well-being was significantly different according to education (F=4.89, p=.009) and economic status (F=9.76, p=<.001) (Table 1).

Correlation between subjective well-being and variables: Subjective well-being was positively correlated with health status (r=.56, p<.001), meaning in life(r=.66, p<.001), generativity (r=.76, p<.001), self-efficacy (r=.62, p<.001), and social support (r=.57, p<.001) (Table 3).

Table 3. Correlations Coefficient among the Variables

Variables	Health status	Meaning of life	Genera-tivity	Self-efficacy	Social support
	r *(p)*	r *(p)*	r *(p)*	r *(p)*	r *(p)*
Subjective well-being	.56 (<.001)	.66 (<.001)	.76 (<.001)	.62 (<.001)	.57 (<.001)

Influencing factors on subjective well-being: To identify factors affecting subjective well-being, education and economic status, which showed significant differences in general characteristics, were converted into dummy variables, and a total of 7 variables, such as health status, meaning in life, generativity, self-efficacy, and social support, were input to perform regression analysis in a stepwise manner (Table 4). Asa result, generativity (β=.424, *p*=<.001), health status (β=.209, *p*=<.001), social support (β=.190, *p*=.001), and self-efficacy (β=.150, *p*=.014) were identified as significant variables explaining subjective well-being. The explanatory power of these 4 variables was 62.6%, and the most influential variable was generativity (Table 4).

Table 4. Influencing Factors on Subjective Well-Being

Variables	B	β	t	p
Intercept	0.742		4.752	<.001
Generativity	0.353	0.424	5.779	<.001
Health status	0.147	0.209	4.049	<.001
Social support	0.129	0.190	3.468	.001
Self-efficacy	0.179	0.150	2.488	.014
F=83.492, p<.001, Adj R2 =.626				

Discussion

Subjective well-being according to general characteristics was found to be significantly different according to education and economic status. In the study of Chang and Sohn[10] using the same tool for middle-aged men and women, subjective well-being was found to have a significant difference according to economic status, which was consistent with the results of this study. However, early studies of well-being reported that the influence of demographic variables on subjective well-being is low, so further studies are required[16].

The average of subjective well-being of the subjects was 3.34 points. In the study of Chang and Sohn[10], the score was 3.36, which was similar to the results of this study.

Subjective well-being was shown to correlate with health status, meaning in life, generativity, self-efficacy and social support. These results are consistent with the results that meaning in life is closely related to quality of life and well-being and health status[13]. In addition, generativity correlates with social support[17], and subjective well-being correlates with meaning in life, self-efficacy, and social support[18],supporting the results of the study.

As a result of stepwise regression analysis to identify factors affecting subjective well-being, generativity, health status, social support, and self-efficacy were found to be significant variables for explaining subjective well-being. The most influential variable was generativity. Generativity is related to psychological well-being, self-esteem and life satisfaction, and subjective well-being can be felt in the process of obtaining generativity[6]. The second influential variable was health status, which was shown in the study by Chang[18] as a variable influencing middle-aged well-being, which was consistent with the results of this study. Health status means physiological adaptation,and as the health status worsens, the quality of life is reported to decrease[1], supporting the results of this study. Social support appears to be an important factor influencing well-being and supports the results of this study[7]. However, the result of the study by Chang[18] showed that social support did not affect middle-aged well-being, which was contrary to the results of this study. These results are estimated to be the result of different variables input as subjects, measurement tools used, and predictors, and further study is needed.

The concept of self-efficacy is applied in various fields in nursing or health-related fields, and since it acts as a determinant in creating behavioral change and

synchronization for problem solving in the middle-aged class[20,21], it can be confirmed that it is a factor influencing subjective well-being.

On the other hand, although meaning in life was highly correlated with subjective well-being, it did not appear as a variable affecting subjective well-being in the middle-aged class. However, meaning in life is a decisive component[13] of well-being, and repeated studies using the same measurement tool are needed for these contradictory results.

Through the above results, it is necessary to provide information and build a system to utilize the community infrastructure to establish the middle-aged identity and strengthen the support system. Furthermore, it is necessary to promote the physical and mental health of individuals to prepare for retirement and to actively reorganize and understand the meaning in life from middle to old.

Conclusions

Generativity, health status, social support, and self-efficacy were identified as significant factors predicting the subjective well-being of the middle-aged class.

This study is meaningful in that it considers physical, mental, and social variables to promote subjective well-being and prepare for successful aging by increasing generativity, a development task of middle-aged class. In particular, by identifying factors affecting subjective well-being of the middle-aged class, it provides a framework for exploring individualized nursing intervention method, and it will contribute to improving the quality of life by improving the health potential of the middle-aged class, their family and, furthermore, the elderly.

Ethical Clearance: Not required

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Conflict of Interest: Nil

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