# HAPPINESS IN AGING ADULTS

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## Perceived Social Support

**Perceived Support is Associated with Physical Health**
- High statistical correlation between social support network and health (Gallo, 1982).
- Greater loneliness is associated with an increased probability of having a heart condition (Sorkin, Rook, Lu 2002)
- Social isolation linked to a variety of negative health outcomes (Sorkin, Rook, & Lu, 2002).

**Perceived Support is Associated with Loneliness**
- Lower levels of companionship and emotional support associated with significantly greater loneliness (Sorkin, Rook, & Lu, 2002).

**Perceived Support is Associated with Mistreatment**
- Higher quality of social contacts is associated with subjective well-being. Quantity of social contacts is not as important.(meta-analysis; Pinquart & Sorensen, 2000).
- Mistreatment (self reported) associated with lower levels of positive support
- Mistreatment also associated with lower levels of happiness and higher levels of psychological distress (Lou & Waite, 2011).
- Criticism from close relationships, and feelings of social isolation were associated with mistreatment and lower levels of happiness (Lou & Waite, 2011).
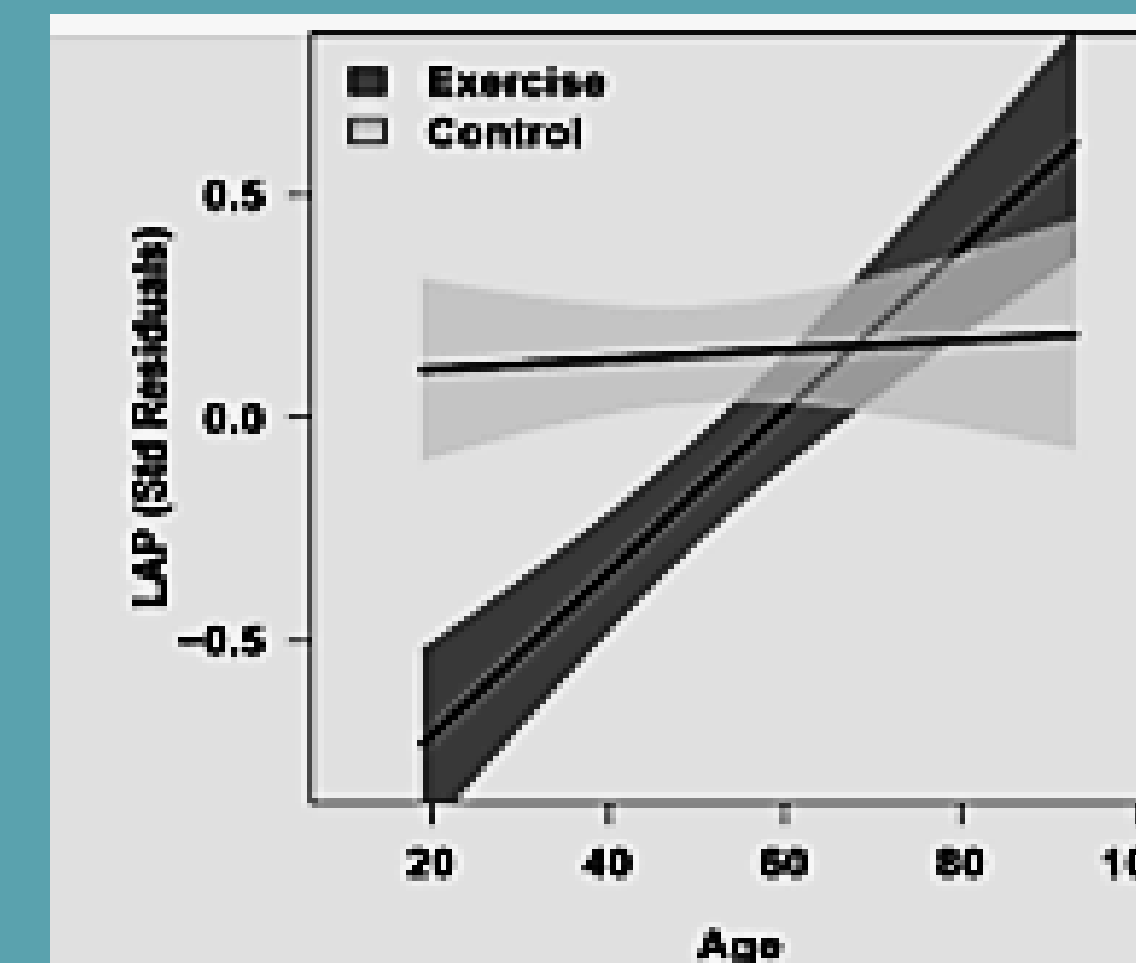


Replicated after Figure 1 from Luo & Waite (2011)

## Positive Expectancies

**Positive Expectancies about Aging are associated with Happiness (**Holahan, Holahan, Veasquez & North, 2008)
- Measured the time course of happiness of aging adults over 20 years, with average ages of 66-86.
- Individuals with more positive expectancies about aging at 61 were significantly happier throughout the duration of the study. Age, gender, prior happiness, family income, and physical health were controlled.

**Positive Self Perceptions of Aging increase Survival Rate both Indirectly and Directly (**Levy et al., 2002)
- European Study of Adult Well-Being (Tuminello et al., 2011)
- Survey of older adults regarding expectancies of aging.
- Participants with high expectancies showed higher levels of happiness across the age spectrum in spite of gradual overall declines in happiness with age.



Drawn from Holahan, Holahan, Veasques, and North (2008)

## Health

**Physical Health and Happiness**
- A single bout of exercise can have positive effects on cognitive performance and affective experience, independent of participant's age. Younger adults show drops in low arousal positive affect (represented by calm, content, or relaxed feelings) after exercise, while older adults LAP either remains the same, or slightly improves after exercise (Hogan, Mata, & Carstensen, 2013.)
- Participants reporting an unfavorable health status "had almost three times the odds of being unhappy."(Angner et al., 2013)
- Health status is one of the most important predictors of happiness in older age (Angner et al., 2013).

**Psychological Health and Happiness**
- Lee et al. (2012) created a Health Promotion program called Body-Mind-Spirit.
- Participants in Body-Mind-Spirit program improved their ratings of physical health, & had overall higher activity levels than the control group.



Drawn from Hogan, Mata, & Carstensen, 2013

- Graph represents that older adults felt more calm, content, and relaxed after a bout of exercise compared to the control group.

## Social Participation

**Social Interaction is associated with Well-being and Happiness and Decreased Loneliness and Anxiety**
- Elderly individuals with large amounts of social interaction show higher levels of well-being (Litwin, & Shiovitz-Ezra, 2011).
- Older adults who participated in both social and restful activities at high levels experienced higher levels of happiness (Oerlemans, Bakker, & Veenhoven, 2011).



**Social Participation is Positively associated with Happiness in Elderly**
- Graney (1975) found six of nine measure of social participation were significantly related to happiness.
- Network types that have least amount of social ties and interactions show the least amount of physical activity, and poor mental health (Litwin, & Shiovitz-Ezra, 2006).

Drawn from Oerlemans, Bakker, & Veenhoven

- Graph represents the interaction effect of participation in high and low levels of social activities for individuals high and low on participation in restful activities.
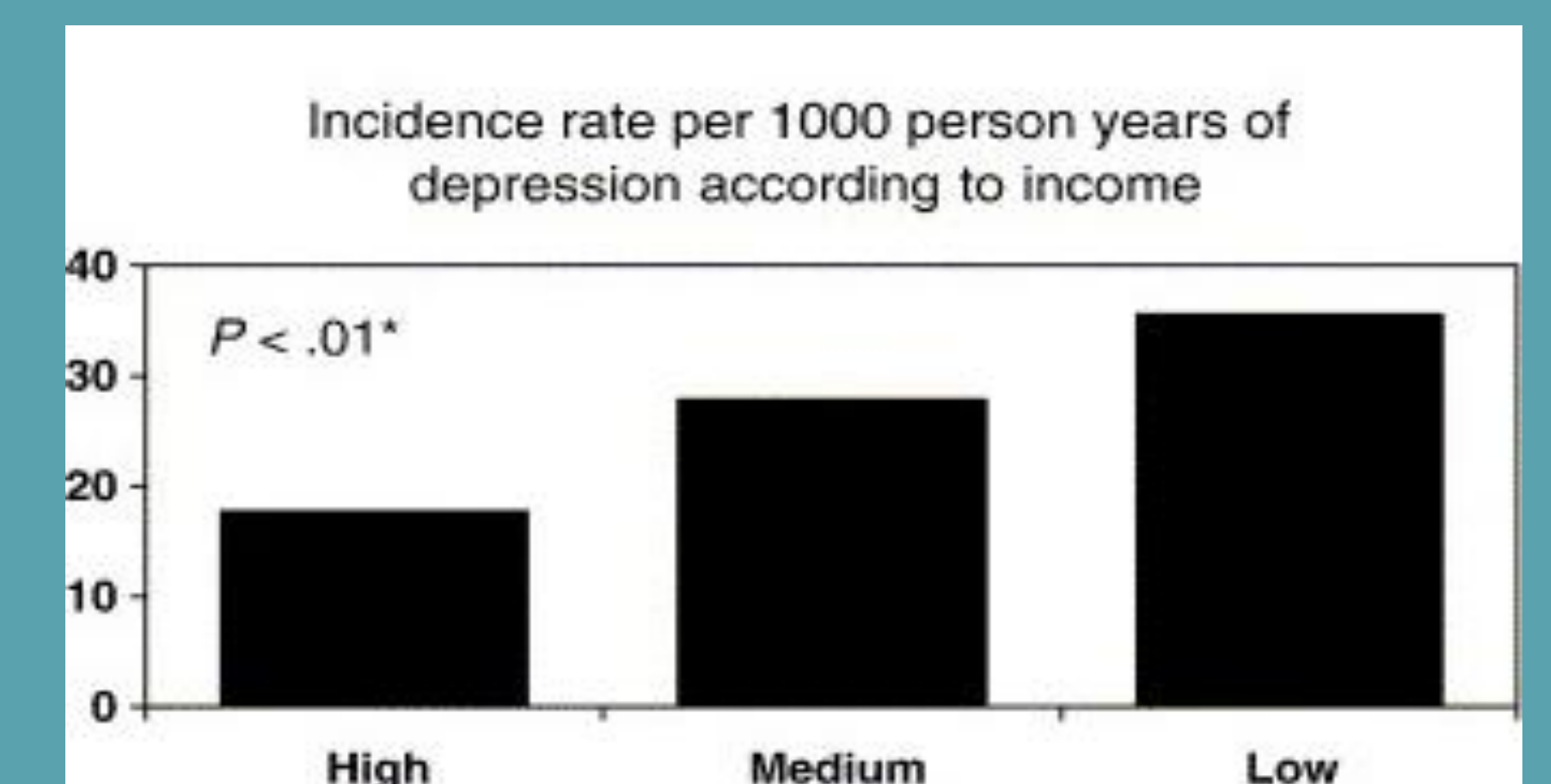
## Socioeconomic Status

**Socioeconomic Status (SES) is Associated with Physical Health in Elderly Population**
- The Reserve Capacity Model (Gallo et al., 2005; Gallo & Mathews, 2003) was developed to organize research on psychosocial variables in socioeconomic (SES) related health disparities.
- The model predicts physical health issues like cardiovascular disease and early mortality (Gallo, Monteros, & Shivpuri, 2009).
- Higher rates of morbidity and mortality are associated with low SES (Marikainen et al., 1999).

**SES is Associated with Mental Heath in Elderly Population**
- Low SES is linked to higher rates of depression (Loan et al., 2003), a common disorder found in the elderly population that has negative effects on an individual's happiness & well-being (Beckman et al., 1997).
- Low SES persons report less social support and lower self-efficacy than individuals with high SES (Koster et al., 2006).
- Low SES persons have higher occurrence of disease, are less physically active, and have a higher BMI than high SES persons (Koster et al., 2006).
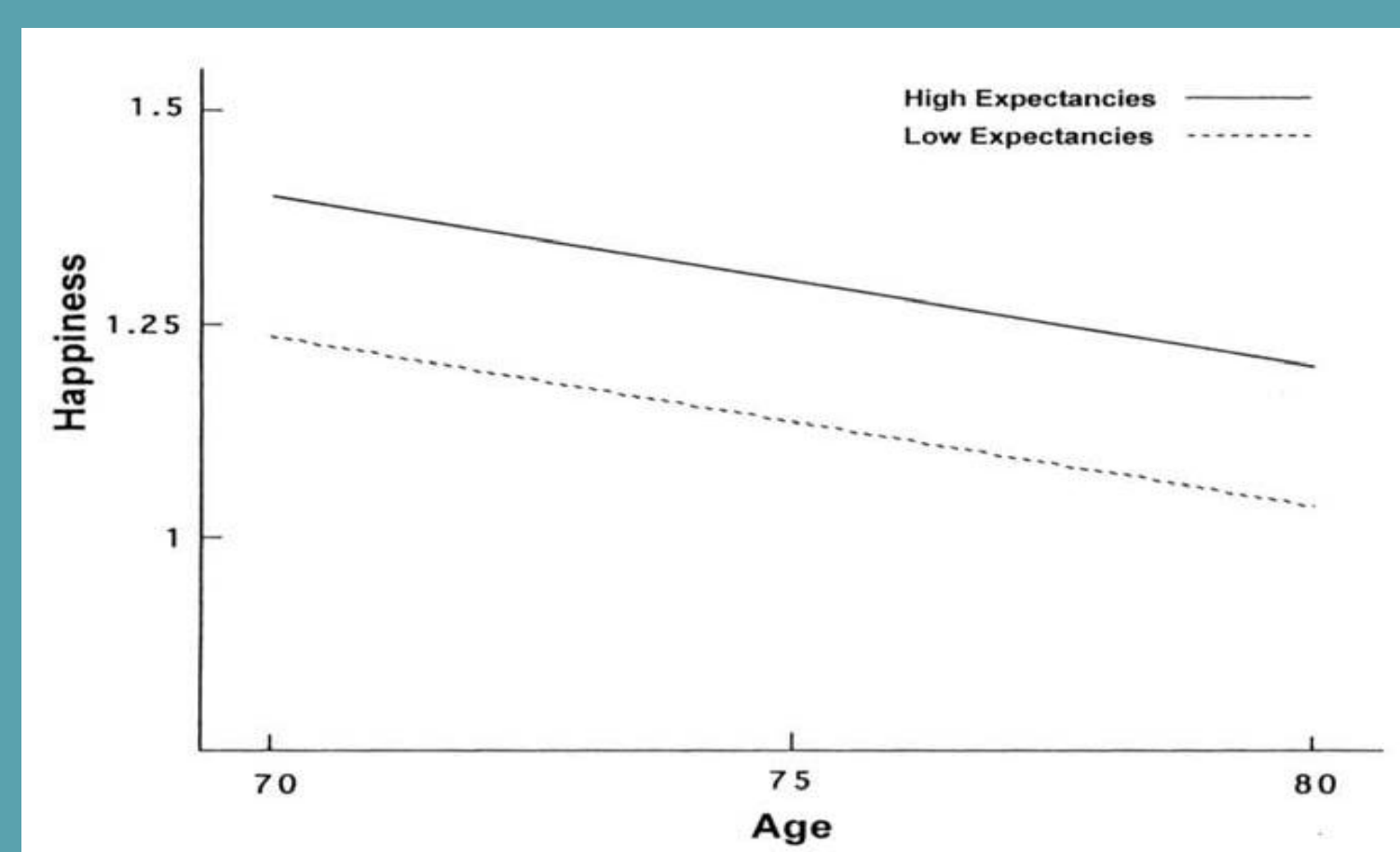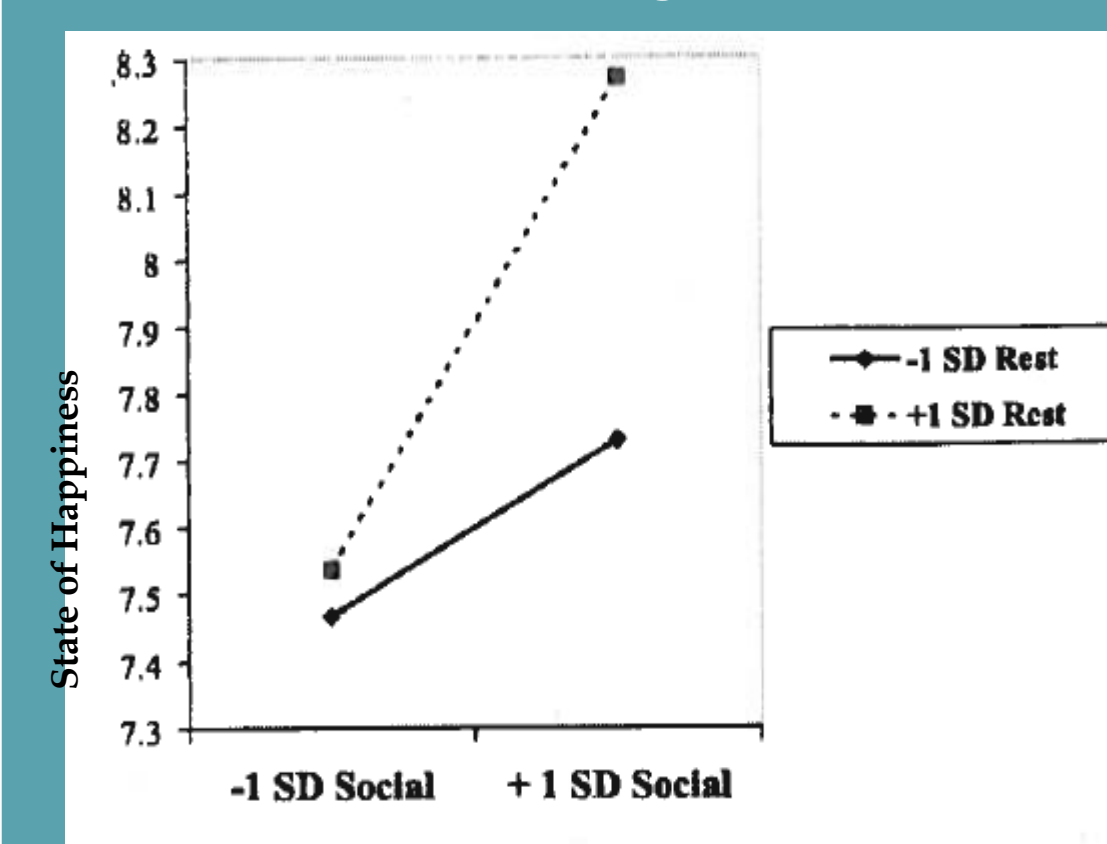


Drawn from Koster et al., 2006

**SES and Happiness**
- Pinquart & Sorensen's (2000) meta-analysis of 286 articles found that income was correlated the strongest with well-being out of all data.
- Greater economic status is associated with higher subjective health in centenarians (Bishop et al., 2010).
- Past life satisfaction in centenarians was directly associated with present happiness. These findings imply that perceptions of resources might enhance quality of life in the elderly (Bishop et al., 2010).
- Results from Bishop, Martin, & Poon (2006) show that a relationship exists both directly and indirectly between older individuals socioeconomic status.