# THE RELATIONSHIP BETWEEN OPTIMISM, SELF-ACTUALIZATION, RELIGIOUS ORIENTATION AND PSYCHOLOGICAL WELL BEING ON ACTIVE AND NON ACTIVE OLDERS

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# **ABSTRACT**

Understanding and promoting positive aspects of well-being in older adults is important given the growing number of older adults. The main purpose of this study was to investigate the relationship between optimism, self-actualization, religious orientation and psychological well being on active and non active olders. The results indicate that positive significant relationship between optimism, self-actualization, and religious orientation with psychological well being on active and non active olders. Optimism, self-actualization, religious orientation can predict active olders and non active olders psychological well being.

Keywords: Optimism, Self-actualization, Religious Orientation, Psychological Well Being

# **INTRODUCTION**

Understanding and promoting positive aspects of well-being in older adults is important given the growing number of older adults (Ferguson, 2010). Positive well-being has been conceptualized according to Ryff and colleagues (2004) and others (Ryan and Deci, 2001; Waterman *et al.*, 2008) as subjective (hedonic) well-being, which emphasizes happiness and pleasure; and psychological (eudaimonic) well-being, which focuses on the fulfillment of human potential. There is also growing empirical evidence for these two aspects of well-being being related but distinct (e.g., Compton *et al.*, 1996; Ryff and Keyes, 1995). Keyes *et al.*, (2002), for example, in both exploratory and confirmatory factor analyses supported a higher order well-being factor with two distinct oblique factors: psychological and subjective well-being. The highest loading for subjective well-being (SWB) was positive affect and the highest for psychological well-being (PWB) was purpose in life. Similarly, McGregor and Little (1998) found two factors: subjective well-being (which included positive affect) and psychological well-being (which included purpose in life). Ryff *et al.*, (2004) have even found different biological correlates for these two aspects of well-being.

Dispositional optimism has been defined as the generalized expectation that a person will obtain good outcomes in life (Carver and Scheier, 2001). It is construed as a stable personality characteristic. The positive effects of optimism have been demonstrated across diverse stressful situations (see Lightsey, 1996; Scheier and Carver, 1985). Positive effects of optimism could either be mediated through positive coping strategies, for example, optimists use more problem-focused strategies, information seeking and positive reframing (Scheier *et al.*, 2001), or through psychosocial variables such as perceived social support and perception of control. Other researchers found positive significant relation between optimism and psychological well being (e.g. Seligman and Csikszentmihalyi, 2000; Shahani *et al.*, 2005).

Several theories of personality development posit a highest stage that parallels Maslow's (1968) stage of self actualizing. Maslow (1968) also characterizes self-actualizing as the epitome of psychological health and well-being. However, most of the stage models of personality development—notably those that focus on structural, cognitive development (e.g., Loevinger, Kegan, and Fowler, but not necessarily Erikson)—

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# Research Article

do not deal with psychological health and well-being. The problem is that psychosocial maturity is neither empirically nor theoretically the same thing as well-being.

Empirically, research shows consistently that higher levels of psychosocial maturity do not correlate with higher levels of well-being (e.g., Bauer and McAdams, 2004a, 2004b, 2010). In other words, on average, people who score at higher relative to lower stages of maturity are not more likely to score higher on measures of well-being.

Allport (1950) distinguished between a mature religiosity and an immature one. Mature religiosity was associated to the integration and organization of personality, consistent morality, and flexible and complex cognitive style, all this opposed to fanaticism and rigidity of thought. On the contrary, Allport related immature religiosity with self-gratification, which did not contribute to the integration of personality or self-reflection. Later, Allport and Ross (1967) distinguished two religious orientations: intrinsic and extrinsic. The intrinsic orientation involves: the experience of religion as an end in itself and as a fundamental reason for life, the consideration of religion as an axis and absolute discretion in personal decisions, it is inclusive and source of existential sense, and it involves the internalization of the belief system, which is in harmony with the rest of the needs, these being considered less important though. Ultimately, intrinsic religiosity implies to live religion as a value and meaning. On the contrary, the extrinsic implies that religion is a means to achieve one's interest and personal purposes (security, social status, entertainment, self-justification, life-style support, etc.). The belief system is superficially sustained and selectively fulfilled to meet more pragmatic and beneficial needs, and then it is purely utilitarian and instrumental (Allport and Ross, 1967).

Allport considered both intrinsic and extrinsic religiosity as mutually exclusive, corresponding to the mature and immature religiosity, respectively. A sign of the maturity of the intrinsic orientation would be its negative relationship with prejudice, enmity, contempt, and intolerance, as opposed to the extrinsic, which is positively related with these attitudes (Allport, 1966; Allport and Ross, 1967). In this regard, Garcia and Valero (2013) found a positive relationship between the intrinsic orientation and the psychological well-being measures except for Autonomy, (2) a negative relationship between the extrinsic orientation and Autonomy, and (3) a negative relationship between the quest orientation, Self-acceptance and Purpose in life. Therefore, the present study question is there significant relationship between optimism, self-actualization, religious orientation and psychological well being on active and non active alders?

# MATERIALS AND METHODS

# **Participant**

The population of the study consisted of all older men and women in Bilehsavar city. The sample size was 377. The sample was selected through multiple random cluster sampling method.

#### Measures

*Optimism Scale.* Optimism was measured using the Life Orientation Test – Revised (LOT-R) (Scheier *et al.*, 1994). The LOT-R consists of 10 items (four of which are fillers). Three items reflect an optimistic disposition, for example: "In uncertain times I usually expect the best." The reliability of this questionnaire was reported 0.84 by Scheier and Carver (1987).

**Self-actualization:** Self-actualization was measured using Ahvaz Self-actualization scale (Esmailkhani *et al.*, 1998) that was adopted from Lester 50 item Self-actualization Scale. This scale consists of 25 items with 3 point Likert Scale. In the current study, two of the three subscales showed acceptable levels of internal consistency, as indicated by Cronbach's alphas of .92.

**Religious Orientation:** Religious Orientation was measured using the Islamic Religiosity Scale (Bahrami, 2005). This scale consists of 64 items with 5 point Likert Scale. In the current study, two of the three subscales showed acceptable levels of internal consistency, as indicated by Cronbach's alphas of .91.

**Psychologycal Well-Being:** Psychological Well-Being was measured using Scales of Psychologycal Well-Being (SPWB; Ryff, 1989a, 1989b). This scale consists of 29-item scale Likert-type (1 = Strongly disagree, 6 = Strongly agree) that assesses the psychological wellbeing understood as personal

development and commitment to the existential life challenges. It works through six scales: Self-acceptance (positive attitudes toward oneself), Positive Relations (warm, trusting interpersonal relations and strong feelings of empathy and affection), Autonomy (self-determination, independence, internal locus of control, individuation, and internal regulation of behavior), Environmental Mastery (ability to choose or create environmentssuitable to his or her psychic conditions), Personal Growth (continuing ability to develop one's potential, to grow and expand as a person), and Purpose in Life (clear comprehension of life's purpose, sense of directedness, and intentionality).

# RESULTS AND DISCUSSION

As the results of table 1 indicate the means scores of active older in optimism, self-actualization, religious orientation, psychological well being is higher than non active older.

Table 1: Mean, Standard Deviation of Optimism, Self-actualization, Religious Orientation, Psychological well being

	Active ol	lder	Non Act	ive older	Total	
Variables	Mean	SD	Mean	SD	Mean	SD
Optimism	62.55	11.24	32.42	8.47	47.46	9.74
Self-actualization	21.50	8.02	10.61	5.21	15.81	10.23
Religious Orientation	18.98	10.92	14.57	7.09	16.76	8.97
Psychological well being	25.64	9.27	11.21	6.29	18.41	7.76

As the result of table 2 indicates all of predictor variables have correlation with psychological well being so that among these variables optimism for active older (0.64) and religious orientation for non active (0.31) indicate highest correlation.

Table 2: Correlation coefficient between Optimism, Self-actualization, Religious Orientation, Psychological wellbeing

Variables	riables Psychological well being								
	Active	older	Non Ac	ctive older	Total				
	R	$\mathbf{N}$	R	N	R	N			
Optimism	0.64	146	0.21	231	0.54	377			
Self-actualization	0.44	146	0.18	231	0.38	377			
Religious Orientation	0.53	146	0.31	231	0.43	377			

The results of table 3 indicate that optimism, self-actualization, religious orientation could predict psychological well being in older people.

Table 3: The results of multiple Enter regression to prediction of psychological well being on both groups

	R2	df	Mean of R2	F	Sig
Prediction	14312.46	3	7106.14	79.44	0/000***
Remain	33924.64	371	89.71		
Total	48237.1	376			

\*\*\*0.001

According to table 4 olders that have higher optimism, self-actualization and religious orientation more likely have higher psychological well being.

**Table 4: Results of regression coefficients** 

Predictor variables	В	SE	β	t	Sig
Optimism	0.45	0.05	0.47	5.94	0/000***
Self-actualization	0.14	0.12	0.24	2.52	0/000***
Religious	0.09	0.26	0.18	2.11	0/000***
Orientation					

<sup>\*\*\*0.001</sup> 

The results of table 5, 6 indicate that in the first step optimism correlation coefficient is 31% and can predict 19% of psychological well being on non active olders. Then, in the second step self-actualization correlation coefficient is 34% and can predict 22% of psychological well being on non active olders. Ultimately, correlation coefficient of religious orientation is 37% and can predict 26% of psychological well being on non active olders.

Table 5: Stepwise multiple regression between Optimism, Self-actualization, Religious Orientation, Psychological wellbeing on non active olders

Predictor variables		$\mathbb{R}^2$	df	Mean of R	F	Sig
Optimism	Prediction Remain	7962.36 22980.32	1 229	7962.36 100.29	79.44	0/000***
Self-actualization	Prediction Remain	9235.73 21716.04	2 228	4617.81 95.15	46.47	0/000***
Religious Orientation	Prediction Remain		3 227			0/000***

Table 6: The results of regression coefficients for non active olders

Independent variable	Predictor variables	regression coefficients	R2	В	SE	β	t	Sig
	Optimism	0.31	0.19	0.38	0.09	0.34	4.90	0/000***
psychological well being	Self- actualization	0.34	0.22	0.36	0.16	-0.23	2.31	0/000***
	Religious Orientation	0.37	0.26	0.32	0.06	0.21	3.64	0/000***

Table 7: Stepwise multiple regression between predictor variables and psychological well being on active olders

Predictor variables		$\mathbb{R}^2$	df	Mean of R	F	Sig
	Prediction	4294.12	1	4294.12		
Optimism	Remain	12995.76	144	89.26	47.60	0/000***
Self-actualization	Prediction Remain Prediction	5279.85 12010.03	2 143 3	2638.42 82.10	31.44	0/000***
Religious Orientation	Remain		142		27.31	0/000***

Table 8: The results of regression coefficient for active olders

Independent variable	Predictor variables	regression coefficients	R2	В	SE	β	t	Sig
	Optimism	0.50	0.24	0.67	0.18	0.34	2.41	0/000***
psychological well being	Self- actualization	0.53	0.27	0.51	0.08	-0.20	2.31	0/000***
	Religious Orientation	0.57	0.32	0.19	0.04	0.14	3.64	0/000***

# Conclusion

The main purpose of this study was to investigate the relationship between optimism, self-actualization, religious orientation and psychological well being on active and non active alders. The results of this study indicate that there is positive significant relationship between optimism with psychological well being on active and non active olders. In other words, with increase of optimism scores psychological well being scores is increase and it means that olders with high optimism more likely have less psychological problems. Also, optimism was predictor of psychological well being on active and non active olders so that optimism can predict 24% active olders and 19% non active olders psychological well being. This result is in line with the results of Scheier *et al.*, (2001), Seligman and Sikszentmihalyi (2000) and Shahani *et al.*, (2005).

The results of this study indicate that there is positive significant relationship between self-actualization with psychological well being on active and non active olders. It means that with increase of self-actualization scores psychological well being scores is increase and it means that olders with high self-actualization more likely have less psychological problems. Also, self-actualization was predictor of psychological well being on active and non active olders so that self-actualization can predict 27% active olders and 22% non active olders psychological well being. This result is in line with the results of Maslow (1950).

The other result of this study was the positive relationship between religious orientation and psychological well being on active and non active alders. In fact, with increase of religious orientation scores psychological well being scores is increase and it means that olders with high religious orientation more likely have less psychological problems. Also, religious orientation was predictor of psychological well being on active and non active olders so that religious orientation can predict 32% active olders and 26% non active olders psychological well being. This result is in line with the results of Garcia and Valero (2013). In general, it could be concluded that although there is positive significant relationship between variables on active and non active but for psychological well being on active and non active olders optimism, self-actualization and religious orientation have had prediction roles, again, religious orientation was greater predictor of psychological well being on active olders.

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