Gender Differences in Successful Ageing in Iran

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ABSTRACT

The population structure of Iran is undergoing ageing processes. Based on the 2016 Iranian census the number of people aged 60 and older is 7.4 million which represents almost 10 percent of the Iranian population and estimated to increase to 25 percent until 2050 due to a sharp decline in fertility and increasing life expectancy. Increases in life expectancy and ageing populations have given rise to a greater interest in successful ageing. Successful ageing is gendered construct and thus needs to be understood in gender lens. This paper aims to examine gender differences in dimensions of successful ageing among Iranian elderly men and women. The data is drawn from a representative sample of 600 older adults aged 60 and older (293 males, 307 females) that conducted in the city of Tehran (is the capital of Iran) in 2015. Controlling for socio-demographic variables, the results of multivariate analysis revealed there are significant gender differences in various dimensions of successful ageing. Significant disparities were found between elderly men and women in psychological well-being, spirituality, financial security, functional health, physical and mental health, and healthy lifestyles. Females had higher scores of spirituality, psychological well-being, and healthy lifestyle than males, and vis-a-vis males had higher scores than females in physical and mental health, functional health and financial security. But, there was no significant gender difference in social support. In conclusion, this paper demonstrates the need to develop gender-sensitive interventions and policies for successful ageing.

Kevwords: Gender, Inequality, Successful ageing, Financial security, Well-being, Iran.

Introduction

The population ageing in all societies will surely result in profound changes in the economic, social and political sectors. For this reason, several studies have been carried out to overcome the challenges caused by such deep changes in micro and macro levels(1).

Due to the longer female life expectancy, one of the significant outcome of population ageing is more number of elderly women living alone without their husbands and confront various economic and health problems.

One of the key concepts in these studies, which may cope with the problems of population ageing, would be the concept of successful ageing (SA). In the last decades; various models of successful ageing such as "Rowe & Kahn Model" (2) and "SOC" have been proposed by researchers in order to define and measure it. Modern theories emphasis on the subjectivity of the concept of the SA, the theoretical framework of "Culturally-relevant" (3), or life course perspective of SA(4).

In Iran, with the entering of baby boomer generation into the old age period, the phenomenon of the population ageing will certainly be formed after the year 2050. At the present time, according to 2016 census results, 9.3 percent of the total population of Iran aged 60 years and older (5). To manage the challenges of population ageing do require appropriate SA policy—makings with the main focus on the gender perspective. Therefore, the aim of the present study was to investigated gender differences in successful ageing in Iran.

Research design

Participants and data collection

This cross-sectional study was carried out in Tehran, Iran, in 2015. The study population consisted of community-dwelling individuals aged 60 years and older. A sample of 600 older adults was chosen by the multistage stratified sampling procedure in 22 districts of Tehran. In each district, two neighborhoods were randomly chosen. Then, three blocks were selected in each neighborhood and older adults who were living in those blocks gave interviews. Data were collected using a face to face interview technique by trained enumerators in respondents' homes.

Dependent variable

In the current study to measure self-perceived successful ageing, a validated instrument (SSAI) was developed on the basis of the qualitative interview with Iranian older adults as well as an integrative review of the research background(6). SSAI has 54 items and seven sub-scales including "the psychological well-being", "the social support", "the financial-environmental security", "functional health", "physical and mental health", "health-related behaviors" and "spirituality". The SSAI had a high internal consistency (Cronbach's alpha=0.93).

Independent Variabels

Sex (0= male, 1= female),

Control variables

Demographic variables included age at interview, Marital status (0= Widowed/divorced, 1= married), Education (0= illiterate, 1= Primary, 2= Secondary, 3= Higher education), Employment status (1= employed, 2= retired 3= Housewife), living arrangement (0= alone, 1= Living only with children, 2= Living only with spouse, 3= living with spouse & children), Household income (1= Less than \$300, 2=\$301-600, 3=\$601-900, 4= More than \$900), Neighborhood SES (1= low, 2= middle, 3= high), Number of diseases (0=no diseases, 1=One diseases, 2=2-3 diseases, 3=4-5 diseases, 4=6+ diseases). Moreover, Childhood socioeconomic status and health circumstances were assessed by two questions includes: "what was your family's socioeconomic situation during the first 15 years of your life?" and "how was your health status during the first 15 years of your life?"

Analytical strategy

Data analysis including descriptive and inferential statistics were conducted using SPSS 20.0 for Windows program. The descriptive statistics such as percentage, frequency, and

mean were conducted to illustrate characteristics of the study sample. The inferential statistics such as bivariate analyses and multiple regression were done to find out relations among the study variables.

Demographic characteristics

In this study, around 51 percent of the sample were older women. The mean age of the respondents was 69.7 (SD=7.5). Around 46 percent of the sample included retired elderly. While only about 16.2 percent of the sample was still employed. Also, 75 percent of the sample was married. Furthermore, 16.5 percent of the sample had no formal education

Results

As Figure 1 showed elderly male subjects obtained a higher average score in all the seven dimensions of the successful ageing, except the spirituality dimension and the health – related behaviors dimension.

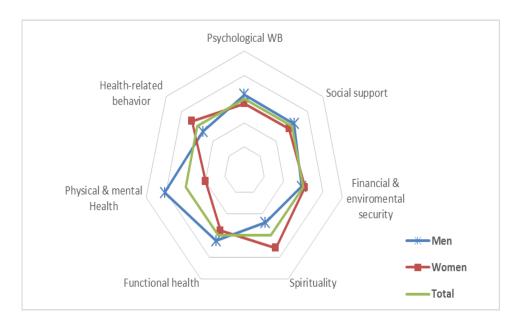


Figure 1: Successful Ageing Dimensions by gender

Multiple regressions Analysis

As we prepare the paper for presentation at EPC, we will further refine the conceptual and analytic models.

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