Scholars Journal of Arts, Humanities and Social Sciences

Abbreviated Key Title: Sch. J. Arts Humanit. Soc. Sci.

©Scholars Academic and Scientific Publishers (SAS Publishers)

(An International Publisher for Academic and Scientific Resources)

ISSN 2347-5374(Online) ISSN 2347-9493(Print)

DOI: 10.36347/sjahss.2018.v06i10.017

Ageing and Self-Esteem among the Elderly in *Maina* (an Informal Settlement) in Nyahururu Municipality, Kenya

Nancy Njoki Irungu*, Barasa Enos, Mbuthia Ngunjiri Laikipia University, Kenya

*Corresponding author Nancy Njoki Irungu

Article History

Received: 12.10.2018 Accepted: 27.10.2018 Published: 30.10.2018



Abstract: The overall purpose of this study was to investigate influence of ageing on psychosocial well-being among the elderly in Maina informal settlement of Nyahururu Municipality, Kenya. The study used Ex-post-factor research design. The target population included 180 male and female elderly people between the ages of 60 and 80 years residing in Maina informal settlement of Nyahururu Municipality; those working or not working or may have worked, and living alone or living with others. A sample size of 36 elderly people was determined using stratified sampling technique that regarded both men and women guided by postulations from Gay (1976) who observes that a sample size of 10% is considered minimum for large populations and 20% for small populations. The data in the study was collected using a questionnaire containing statements of preference on the domains being measured. Collected data was analysed using the statistical package for Social Sciences windows version (22.0). Results were presented through frequency and percentage tables. The study revealed that self-esteem of the elderly in Maina settlement is not influenced by age but by individual perceptions towards themselves. They feel they have lost value and thus not of importance to their local community and the larger society. They also felt other people had little regard for them as they had nothing to contribute towards the community. The conclusion was that the self-esteem of elderly is greatly determined by how they validate themselves as elderly members of the community. The study recommends that counsellors and organizations working with the elderly focus on campaigning and sensitising communities on the need to show appreciation to the elderly in society. This will help in fostering positive feelings and attitudes within and towards them.

Keywords: Ageing, Self- Esteem, Psychological well-being, Life expectancy.

INTRODUCTION

The process of ageing is a natural phenomenon that starts at birth progressively ending at death at which the individual is exposed to social, psychological, emotional vulnerabilities. physical, and improvement in healthcare, there is increased life expectancy and consequently the number of the elderly in the world is more. This is complicated by modernization of societies through urbanization. This creates the need to investigate vulnerabilities of the ageing not only to make their life more fulfilling but also to harness their skills and knowledge. Ageing is a normal biological phenomenon and refers to a slow imperceptible progressive degenerative process, which follows one's chronological age. It is a biological life reality, which has its own dynamics and is largely beyond human intervention. It is also subject to the constructions by which each society makes sense of old age [1]. Accordingly [2] defines ageing as the deteriorating of a nature organism resulting from of time, increasingly moving independence to dependence and resultant in inability to

cope with stresses of life, and thereby increasing the probability of death.

The process of ageing is a natural phenomenon that starts at birth progressively ending at death. Throughout this process the aging individual is exposed to social, psychological, physical, and emotional vulnerabilities. Old age is part of our life cycle and hence older persons have always been an integral and important part of the family. Old-age is a universal phenomenon and a natural biological process of the life cycle rather than a specific stage in life. For some, it is regarded as a highly esteemed stage of wisdom and experience while it may be a stage of degeneration characterized by health problems and social frustrations for others [2].

Though the use of the word well-being is relative to the context in which it is being used it can be associated with the satisfaction of desires or preferences, (hedonic) and life activities which people engage in (eudaimonic). These can therefore be conceptualized broadly and linked to a person's location

and functioning in society [3]. According to the writer, a person's well-being is judged according to things they do, or are able to do; notwithstanding the fact that wellbeing is an outcome that is experienced by an individual. Consequently it is also achieved and interpreted within a given social-cultural context and by people with different needs and abilities. This therefore implies that the social status in society may be inscribed by a person's standing in society whether from an economic stand point or responsibilities in a given society. In case of the elderly, this would mean that their self-esteem within a given community may be determined by the status accorded to them by their community whether from their social responsibilities or from their economic abilities. Psychosocial wellbeing is thus a subjective self -appraisal other than what is judged from the other's perception and hence a phenomenological experience.

Not everyone who is ageing may of necessity experience loss of sight, hearing, or such physical changes. However, the elderly person is eventually likely to develop some illness, disability or chronic illness or disability that limits their daily functions. This means that the elderly person will eventually face some challenges that may have been none existent before or during the younger years [4]. While gerontologists have categorized ageing as either usual or successful, either of the two still brings unique physical and emotional and psychological challenges. Physical challenges may include fatigue, possible falls, poor mobility, and improper digestive and urinary functions. Emotional challenges may include feeling of loneliness and depression. Not any less, the elderly person experiences the loss of a future. If the person becomes preoccupied with the losses in life, this may in turn impact negatively on their emotional health. Coupled with this is possibility of anxiety that may begin to build from the uncertainty of the implications of ageing without guaranteed old age care [4]. The elderly person therefore requires strong support systems that are functioning whether through family, community or even the government in order for the person to cope and feel valued.

Generally, society is ostensibly stratified into upper, middle and lower classes. Several objective indicators have been established according to which society can be stratified. Common among these indicators are occupation, education, income, sociocultural background and place of residence. All these factors contribute towards making a social class and consequently have a bearing in the social-psychological environments that are sustained; not only due to external circumstances but also internal systems of values, preferences, and both intra and interpersonal relationships all which have validity of their own and persist even after the external circumstances change [5].

While psychological and social needs of the aged remain essentially the same like for other people, the social world withdraws from the ageing person making it more difficult to fulfil these needs. The phenomenological theory operates on the premise that an individual person has their respective interpretation of their perceptual world [6]. The older person who ages optimally is the person who stays active and who manages to resist the withdrawal of the social world according to [7]. Sadly, this rarely happens. According to Bella's cognitive model of emotional disorders an individual's mood and behaviour are largely determined by the subjective beliefs one holds about themselves and the world [8].

According to [9] most people change their perception of life as they age. They may seek happiness, reduce their social circles of negative people and place more importance on family, worry less about others opinion and get less angry over small matters hence may choose to focus on what they have in order to get happier and improve their way of their well-being. However this is dependent on the availability of the strong family and other support that boost their sense of self-esteem. Sutin [9] further contends that happiness may not necessarily depend on age but rather influenced by life experiences. This for the elderly due to their age may affect their perception towards self, thus forming their elf-esteem based on that.

Happiness and depression can increase with age and people tend to become more emotional and experience both sadness and happiness, which may be part of ageing ignoring the happiness which may be part of ageing though again this has a lot to do with society's attitude towards the ageing. The self-value the individual elderly ascribes upon themselves may be determined by how the society views and treats the elderly people amongst them; especially with the fast changing social economic environment caused by urbanising and traditional norms, and thus values increasingly getting eroded. According to [10] in order for ageing to become a positive experience, any increase in life expectancy must be accompanied by active and healthy years added to life other than the logic being that active and engaged people actively contribute to their own state of health, well-being and a sense of independence.

Canada is recognized as a good place to live and grow old due to the social-security programs for the elderly. A large population of Canadian seniors enjoys economic security and good health (Health Policy 2009; August 5(1)). Norway, Sweden, and Switzerland are also favourable countries for the elderly; this list is based on access in the domains of income, health, capacity, and enabling environment. These can be generalized as good quality of life, social and economic status. The listing considers health to include life expectancy at 60 and psychological status [10].

In Sub-Saharan Africa, older people make up a relatively small function of the total population. A characteristic of the Kenyan urban population according to the National Coordinating Agency for Population and Development (NCAPD) (2001) report is that more than half of this population lives in poverty, in peripheral urban areas, have limited incomes and education, poor diets and live in over-crowded conditions. This urban poor population of necessity also comprises of the elderly whose physical, economic, and social needs change with age progression. Furthermore, in Kenya and indeed in Africa, the elderly have traditionally been viewed positively where more of the family socialvalues and networks are expected to provide care and support in later life. Coupled with that, the elderly were traditionally viewed as the custodians of the customs and traditions of their community and therefore placing them at a valued social status, ensuring reverence and respect. That notwithstanding, development and modernization are closely connected with social and economic changes that can weaken traditional social values and networks that provide care and support to the elderly.

MATERIALS AND METHODS

The study used an *Ex-post facto* research design. This is a research design that studies an already existing condition and thus the researcher does not therefore manipulate the independent variable [11]. The design was found suitable as the researcher was studying an already existing independent variable: -ageing; and did not seek to experimentally manipulate any variable. Data was collected using a face to face questionnaire with various selected psychosocial domains statements arranged on a continuum for appropriate selection.

Study area

Nyahururu, a rapidly urbanizing town that grew around a railway from Gilgil that opened in 1929 has seen population pressure and subsequent emergence of informal settlements that include Manguo and Maina areas. It started as Thomson Falls named after the 243 ft (74m) high Thomson's falls on the nearby Ewaso-Narok River. Urbanization has been coupled by depletion of nearby forests which was a major source of livelihood for most residents. An example is the collapse of the National Pencil Factory in the 1990's that depended on the forest resource and that saw many lose jobs. Maina Settlement is unique in that it is the oldest informal settlement whose residents have been negatively affected by shrinking livelihood opportunities in the town. This has affected the social-economic setup of the village, affected its social fabric and introduced undesirable effects on the aging population who could not relocate due to limitations that come with age. However, the younger residents were able to relocate to other towns in search of employment.

Units of Analysis

According to the 2009 Population and Housing Census, 300 elderly people resided in Maina informal settlement of Nyahururu Municipality. The study population was composed of 300 elderly people residing in Maina informal settlement of Nyahururu Municipality. The study sample was made up of males and females that were either working or not working or may have worked, and living alone or living with other people. The sampling frame was a list of those who received the government's cash transfer aid provided by the local chief who represented the Government administration. Those who fall within the sample age of 60 to 80 years were 180; out of this 108 are women and 72 men (60% and 40% respectively).

Target population and sample size

A list of respondents who fall within the ages 60 - 80 years was compiled from the list provided by the local administration. This study used stratified random sampling. Gay [12] observes that a sample size of 10% is considered minimum for large populations and 20% for small populations. Higher populations take lower percentages and lower populations take higher percentages. In the population of 180 the researcher went for higher percentage of sample. The sample was 36 respondents. The list was stratified according to the gender. Respondents from each gender were randomly selected by picking every 6th person on the female list and every 6th on the male list totalling 21 females and 15 males, (60% and 40% respectively) to make a total of 36 respondents.

Research Instrument

The data in the study was collected using a face to face questionnaire containing statements of preference on the domains being measured. A five-point scale; ranging from "strongly agree" to "strongly disagree was used to collected data; where respondents were supposed to indicate how they felt about the study statement. The choice of a short item interview schedule was informed by its appropriateness when studying the elderly as it would require a short time to complete and therefore elicit more cooperation [13]. Data was collected after getting authorization from National Commission for Science, Technology and Innovation.

DATA ANALYSIS

The data collected through the face to face questionnaire was analysed by use of descriptive and inferential statistics. The descriptive statistics comprised frequencies and percentages. A rating scale of five items ranging from Strongly Agree, Agree, Not Sure, Strongly Disagree and Disagree was used. The rating values were: 5-Strongly Agree, 4-Agree, 3-Not Sure, 2- Strongly Disagree; 1- Disagree. To make data presentation easier, Strongly Agree and Agree and Strongly Disagree and Disagree were considered together respectively as either positive or negative responses. The frequency of responses was compiled

and respective percentages calculated. The inferential statistics used to test the hypotheses was the Analysis of Variance at 5% level of Significance. The null hypothesis was accepted at p> 0.05 and rejected at p \leq 0.05. [14] points out that most researchers in Education and Social Sciences use the 0.05 level of Significance to test the hypothesis. The Statistical Package for Social Sciences Software Widows Version (22.0) was used to analyse the data.

DISCUSSION

The study sought to establish the influence of ageing on self-esteem among the elderly in Maina Informal settlement, Nyahururu Municipality. The findings of the study showed no statistical significant influence of ageing on self-esteem among the elderly in the study area. However, the elderly did not seem to value themselves across all the age categories. Indeed they felt that they had no good qualities and therefore had nothing to offer to their community. Ageing is accompanied by loss of good health and most times by loss of income. This reduces productivity for both the individual and others. This may result in increased dependence on others and consequently foster feelings of one becoming a burden to others in the community. There is therefore need to establish factors that can contribute to improvement of self-esteem of the elderly.

CONCLUSION

The self-esteem of the elderly in Maina Informal Settlement seemed not to be influenced by the age they were in but by how they regarded themselves and how they were able to contribute to their local community across all the age groups. Thus, they felt a Failure in life. Moreover, the elderly felt they were a burden to others as society seemed to make them feel incompetent and hence did not respect them and regarded them negatively. In view of the fact that the elderly felt of low value to the community across all the age groups, all counsellors caring for the emotional needs of the elderly ,it is recommend that counsellors caring for the emotional needs of the elderly focus on raising the self-esteem of their elderly clients. Organizations working with the elderly may also need

to focus on campaigning and sensitizing the community on the need to show appreciation to the elderly in society and thus fostering positive feeling and attitudes within and towards them. Consequently, this will result into an increased sense of self-esteem.

REFERENCES

- National Coordinating Agency for Population and Development. 2001.
- Nasreen A. Urban elderly: Coping strategies and societal responses. Concept Publishing Company. 2009.
- 3. King. The concept of well being an its implication. A case study of aging in Auterroa New Zealand. Ewas working paper series. 2007.
- 4. Holstege HR. *Caring for aging loved ones*. Wheaton: Tyndale. 2002.
- 5. Dhillon. The Psycho-Social aspect of Aging in India. 1992.
- 6. Smith, & Obsorn. *Interpretive Phenomenological Analysis*. London. 2010.
- Kart CS & Metress E. Aging and Health Biological and Social Perspectives London. Adison Wesley. 1978
- 8. Heeple Pearce J & Wilkinson. *The Psychological Therapies with Older People*. Sussex: Brunner Routledge. 2002.
- 9. Sutin R. Pschcentral Retrieved. Retrieved July Friday. 2013. 2016, from hh://psychcentral.com/news/2013/02/19/happiness-satisfaction-with-life-generally-increase-with-age/51731.html
- 10. Zaidi. Global Age Watch Index. 2014.
- 11. Creswell J. An Overview of Educational Research. *Pearson Education*. 2002.
- 12. Gay NC. The change of shape of a viscous ellipsoidal region embedded in a slowly deforming matrix having a different viscosity—a discussion. Tectonophysics. 1976 Nov 3;35(4):403-7.
- 13. Waltz, Strickland & Lenz. *Measurents in Nursing Research* (2nd ed.). 1981.
- 14. Mugenda A. Research methods Quantitative and qualitative approaches by Mugenda. Nairobi, Kenya. 2003.