

A comparative study of adjustment and self-concept of old aged male and female persons

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Introduction

Adjustment is a behavioral process by which humans maintain equilibrium among their various needs or between their needs and the obstacles of their environments. A sequence of adjustment begins when a need is felt and ends when it is satisfied. Hungry people, for example, are stimulated by their physiological state to seek food. When they eat, they reduce the stimulating condition that impelled them to activity, and they are thereby adjusted to this particular need.

In general, the adjustment process involves four parts: (1) a need or motive in the form of a strong persistent stimulus, (2) the thwarting or no fulfillment of this need, (3) varied activity, or exploratory behaviour accompanied by problem solving, and (4) some response that removes or at least reduces the initiating stimulus and completes the adjustment. Social and cultural adjustments are similar to physiological adjustments. People strive to be comfortable in their surroundings and to have their psychological needs (such as love or affirmation) met through the social networks they inhabit. When needs arise, especially in new or changed surroundings, they impel interpersonal activity meant to satisfy those needs. In this way, people increase their familiarity and comfort with their environments, and they come to expect that their needs will be met in the future through their social networks. Ongoing difficulties in social and cultural adjustment may be accompanied by anxiety or depression. Elderly persons have many obstacles regarding their health, home, social, marital, emotional & financial areas. They want to maintain equilibrium among these areas.

Maslow (1954) looks at adjustment as a process of planned satisfaction of hierarchy of needs from warm and caring relationship to others. Allport (1961) looks at adjustment as continued action of the "proprium development", in terms of socio-psychological conditions. Dashiell (1937) Adjustment is a process that covers the individual's life span operating within a complex environment field. The process is goal directed behavior instituted by a need which may rise at any level within the hierarchy of needs ranging from elementary psychological issue through the most complicated psychological symbolization." Kulshrestha, (1979) explained that the adjustment process is a way in which the individual attempts to deal with stress, anxiety, tensions and conflicts to meet his or her needs. In this process, the individual either makes efforts to maintain harmonious relationship with environment or changes his behaviour to fit one's need. The adjustment of the aging person depends upon the degree to which his personal and environmental circumstances offer opportunities or pose as threats to the satisfaction of his needs. Failure to adapt can result in bitterness, withdrawal, depression and anxiety. (Chokkanatham and Lee, 2005; Sharma, 2008). The stresses and vulnerabilities unique to the aging process viz. chronic physical problems, cognitive impairment and significant emotional losses may further contribute to anxiety. (Porzych, Kedziora, Porzych, Polak and Motyl, 2005; Ingle and Nath, 2008). The need for studying the adjustment patterns and anxiety in old age in Indian context is being increasingly felt.

Psychologists have suggested and stated adjustment in two ways, first adjustment is an achieving or learning and second is process. It means that adjustment is both process and product. Worldwide the number of people 65 years or older is increasing faster than ever before. Most of this increase is occurring in developed countries. In the United States the percentage of people of 65 years or older increased from four percent in 1900 to about thirteen percent in late 1990's. In 1900, only about 3 million of the Nation's citizens had reached 65. By 1948 the number of senior citizens had increased to about 34 million. Population experts estimate that more than 50 million Americans, about 17% of the population will be older in 2020.

In Indian society old men and women are recognized as mentors and advisors for the young generation. But this concept is reducing to a great extent due to a decrease in joint families and the busy schedules of the younger folk. Obviously old people are also putting their efforts to come out of their frustration by maintaining psychological distance with the young generation. Due to this distance they are prone to develop certain adjustment problems. A large segment of aged people find it difficult to accept that aging is a natural process. Old age is a sign of decline both physically and mentally. Aged people are found to be confused, dependent and insecure, on the other side we also find old people who are active, healthy, satisfied, and independent and secure in many respects. Due to better living conditions and better health care, most people do not show mental and physical signs of aging even during their middle

sixties or early seventies. The early old age which begins at 60 is the age of retirement. Physical and mental alertness is said to be ceasing from this period. Acceptance of aging process, adjustment to decreasing physical strength, retirement, reduced income, death of spouse and friends, adjustment to new generation are some of the development task of old age life.

Self-concept (also called self-construction, self-identity or self-perspective) is a multi- dimensional construct that refers to an individual's perception of "self" in relation to any number of characteristics, such as academics and non-academic, gender roles and sexuality, racial identity, and many others. The term self-concept is a general term used to refer to how someone thinks about themselves. The self-concept is how we think about and evaluate ourselves. To be aware of oneself is to have a concept of oneself. The self-concept is an internal model which comprises self-assessments. A person's self- concept may change with time as reassessment occurs, which in extreme cases can lead to identity. The self-concept is not restricted to the present. It includes past selves and future selves. Future or possible selves represent individuals' ideas of what they might become, what they would like to become, or what they are afraid of becoming. They correspond to hopes, fears, standards, goals, and threats. Possible selves may function as incentives for future behavior and they also provide an evaluative and interpretive context for the current view of self. Self-concept is influenced by our sense of identity. Self-concept is the perception of one's competency in various domains (Marsh, 1987, 1990). Rosenberg and Simmons (2000) also stated that females in early adolescence are more conscious, more vulnerable to criticism and more concerned with promoting interpersonal harmony. Overall, adolescents' females are increasingly "people oriented" while boys "achievement and competence oriented".

Significance of the study

Since adjustment and self concept has a profound effect on the overall behavior of an individual whether male or female, it was decided to study the adjustment and self concept problems of the old aged male and females. Adjustment here has a special connotation representing its four aspects viz. home, health, social, emotional conditions as given in the Bell's Adjustment Inventory. The purpose of the study was to compare old aged males and females on Adjustment and Self- concept questionnaire given by Saraswat, 1984..

Problem: To compare the adjustment and self concept of old aged males and females.

Objective:

1. To study the comparative adjustment of old aged male and female persons on various dimensions of adjustment.
2. To study the comparative self concept of old aged males and females.

Hypotheses:

1. The comparative adjustment of old aged males is higher than females.
2. The comparative self concept of old aged males is higher than females.

Method

Design: Two randomized group was adopted and one tailed t-test was used.

Group	N (60 years and above)
Male	50
Female	50

Description of Sample:

The present study was conducted upon 100 old aged persons both 50 male and 50 female. For the selection of the sample normal random procedure was adopted. The age range of the subjects was from 60 years and above. The investigator collected the response of all the subjects and scoring was done according to the instructions given in the manual.

Tools:

Bell adjustment inventory: It is a self administered test consisting of 160 items, has five separate measures of personal and social adjustment viz. home, health, social, emotional and occupational adjustment. Since most participants were

not working, occupational adjustment was not included for the present study. Each statement has three alternatives: Yes, No or “?” for uncertain. The scores were obtained by using scoring stencils. The possible score for each subscale ranges from 0-32. Low scores are indicative of better adjustment, except in case of social subscale where high scores are indicative of better adjustment. Self- concept questionnaire: It is a self concept inventory consisting of 48 items. Each dimension contains eight items with five alternatives. There is no time limit but generally 20 minutes have been found. There is no right or wrong answer. The test-retest reliability is .67 to .88 .

Procedure:

Having selected the sample from Rohtak. All the persons were contacted individually. A rapport was established and subjects were well apprised of the purpose of the study. Those who showed interest and were ready to co-operate were asked to give a written informed consent. Each subject was contacted personally and rapport was established. Now the subjects were again assured of confidentiality. They were all informed about the relevance and implication of the study in very simple words. The present study intended to compare the adjustment and self concept in old aged males and females of 60 years and above. Subjects were told that their co-operation is highly esteemed and would help the researchers in understanding adjustment and their self concept. All information related to inventory and tests were given one by one separate instruction. Please read and give answer carefully and ask if the meaning not clear. Reply accurately. With many fold thanks I will give you separate inventory and the specific instructions one by one. Then the Ss were given questionnaires one by one.

All the subjects were approached individually and the investigator sat together to get every questionnaire filled from each subjects. After completion of the entire questionnaire, the scoring was done with the help of manual. Now the data were tabulated as per the objective of the study and put to analyses. The obtained data were subjected to statistical analysis. Obtained results have been discussed in the next section.

Results and Discussion:

The present research was designed to compare the adjustment and self concept in old aged male and female persons. The first objective was to study the comparative adjustment of old aged male and female persons on various dimensions of adjustment. Adjustment scores of these persons were compared with self concept. A one tailed t-test was employed.

The following table shows the means, SD's and t-test of the two groups on these tests.

Table: 1. Showing mean, SD and t-value of male- female aged sample in different areas of adjustment (N = 100) and self-concept.

Variables	Males	Females	T-Value
Home	10.3±2.092	15.26 ±3.212	2.72*
Health	8.82 ± 1.424	11.0 ± 1.731	4.31**
Social	12.78 ± 2.47	14.18 ± 1.88	3.19**
Emotional	14.74± 2.67	17.84 ± 3.69	5.06**
Self – Concept	86.64±5.612	80.04±8.882	2.35*

*Significant at 0.05 Level ** Significant at 0.01 Level Max. possible subscale score: 32 . In social subscale, lower scores are indicative of poorer adjustment, unlike rest three subscales, where higher scores indicate poorer adjustment.

Table-1 Showing the mean, SD and t-value on different areas of adjustment of male and female aged sample. Many researches reveal that during old age female are less adjusted than male in any area of adjustment. The present research has proved the said hypothesis. In the present table the calculated t-value in all the areas of adjustment health, home, social adjustment is significant at 0.001 levels, which shows that there is significant difference in male and female aged sample in adjustment. Men are better adjusted than women. The result of present study revealed that significant difference was found among the groups on home, health, emotional and social adjustment area as well as self - concept scores.

Though both males and females subjects were found to have adjustment problems, elderly females were facing more adjustment problems in home, health and emotional areas compared to the elderly male subjects. This is in line with the earlier study by Sijuwade and colleagues, 2008; Everard, (2009). Elderly females suffer multiple problems attributable to gender, widowhood and old age and are at a particularly disadvantaged position. Unsatisfactory home relations,

health constraints, emotional isolation, fear, expectations and communication gap are a few reasons leading to a lot of adjustment problems. The female-specific issues add further complexity to the age-related bio- psycho-social factors. It is further argued that women receive different treatment in old age and are more likely to be economically weaker compared to other age categories or the males (Chouhan, 2008). Hussain and Kaur (1991) indicate that males have scored significantly higher on the four constituents of mental health that is emotional stability, overall adjustment, autonomy and self-concept.

This indicates better mental health of the males than females. Dhillon's (1993) revealed that the aged females, irrespective of institutionalization, felt more alienated, depressed, and pessimistic than the aged males. On social subscale the female subjects showed better adjustment as compared to male subjects. There is a positive effect of social and religious activities on wellbeing and life satisfaction. Females may benefit from these positive effects, as they engage more often in these activities compared to males. Lena, Ashok, Padma, Kamath and Kamath (2009).

The significant difference of means of self - concept indicated that males have positive attitude about themselves as compared to females. The 2nd hypothesis also proved. A widely accepted cultural belief is that boys have much higher self-concept than girls, yet the gender difference is small. Females may think less well of themselves because they internalize this negative cultural message (Kling et al. 1999). Hay and Ashman (2003) were also of the same view that adolescent males were less interested in close relations than females. Rosenberg and Simmons (2000) also stated that females in early adolescence are more conscious, more vulnerable to criticism and more concerned with promoting interpersonal harmony. Overall, adolescents' females are increasingly "people oriented" while boys "achievement and competence oriented". It can be concluded that the positive thinking attributes towards better adjustment in males as compared to females.

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