Navigating Gender Dynamics: Social Support and Psychological Distress in Elderly Individuals

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ABSTRAK

Populasi lanjut usia di Nigeria, khususnya di wilayah Ile-Ife, Negara Bagian Osun, menghadapi berbagai tantangan terkait dukungan sosial dan tekanan psikologis. Studi tentang menavigasi dinamika gender, dukungan sosial, dan tekanan psikologis pada individu lanjut usia di Ile-Ife, Negara Bagian Osun, bertujuan untuk meneliti hubungan antara dukungan sosial, dinamika gender, dan tekanan psikologis di antara populasi lanjut usia di komunitas Nigeria tertentu. Penelitian ini menyelidiki dampak sistem dukungan sosial terhadap kesejahteraan mental individu lanjut usia, khususnya dalam konteks perubahan peran dan dinamika gender dalam masyarakat. Sampel terdiri dari 137 orang lanjut usia dari Pemerintah Daerah Pusat Ife menggunakan pengambilan sampel yang mudah. Hasil penelitian menunjukkan bahwa dukungan sosial tidak memiliki pengaruh yang signifikan terhadap tekanan psikologis. Hasil penelitian juga mengungkapkan bahwa hasrat seksual memiliki pengaruh yang signifikan terhadap tekanan psikologis. Hasil penelitian selanjutnya menunjukkan bahwa gender memiliki pengaruh yang signifikan terhadap tekanan psikologis. Penelitian ini menyimpulkan bahwa hasrat seksual dan gender memengaruhi tekanan psikologis sementara dukungan sosial tidak memengaruhi tekanan psikologis.

ABSTRACT

The ageing population in Nigeria, particularly in the region of Ile-Ife, Osun State, faces various challenges related to social support and psychological distress. The study on navigating gender dynamics, social support, and psychological distress in elderly individuals in Ile-Ife, Osun State, aims to examine the relationship between social support, gender dynamics, and psychological distress among the elderly population in a specific Nigerian community. The research delves into the impact of social support systems on the mental well-being of elderly individuals, particularly in the context of changing gender roles and dynamics within society. The sample consisted of 137 elderly persons from Ife Central Local Government using convenience sampling. The results showed that social support had no significant influence on psychological distress. It also revealed that sexual desire had a significant influence on psychological distress. The result further showed that gender had a significant influence on psychological distress. The study concluded that sexual desire and gender influenced psychological distress while social support did not.

1. INTRODUCTION

Psychological health disorders pose a growing threat to individuals, their family members and to society. Disorders such as Depression, Post-Traumatic Stress Disorder (PTSD), and Mild Traumatic Brain Injury (MTBI), are often under-diagnosed and under-treated (Duan et al., 2020; Thomas et al., 2019). Failure to intervene early and effectively impacts individuals and their family members adversely and results in profound long-term costs to society. Psychological distress is defined in the modern literature as a non-specific mental problem that comprises symptoms of depression and anxiety (Budsankom et al., 2015; Peterson et al., 2009). This implies that distress is often comprised of an emotional component in terms of feelings of hopelessness as well as an anxiety component expressed in feelings of nervousness or restlessness. Feelings of hopelessness and anxiety are often the result of long-term physical and/or psychological stressors, common during major life changes (Chen & Tong, 2021; Reynolds et al., 2021).

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Increasing age is one of the risk factors affecting physical and psychological well-being which has a significant impact on their quality of life. One of the important indices in elderly people, which pose a threat to their well-being, is psychological distress which involves factors like loneliness and lack of social connections. Psychological distress is largely defined as a state of emotional suffering characterized by symptoms of depression (e.g., lost interest; sadness; hopelessness) and anxiety (e.g., restlessness; feeling tense) (Burnette et al., 2020; Chen & Tong, 2021). Psychological distress is a state of emotional suffering characterized by symptoms of depression (such as; loss of interest, sadness and hopelessness) and anxiety (such as; restlessness and feeling tensed). It is uneasy feelings of depression or anxiety in response to physical, spiritual or emotional demands, or a combination of multiple demands that result in temporary or permanent harm (Burnette et al., 2020; Hossain et al., 2021). As a result, these problems will lead to negative emotions such as low self-esteem, social isolation, despair and dejection in the elderly person. These disorders are important factors affecting mental health that interfere with the professional roles or responsibilities assumed by individuals.

Psychological distress refers to uneasy feelings of anxiety or depression in response to physical, spiritual, or emotional demands or a combination of multiple demands that result in temporary or permanent harm. Psychological distress can be defined as an affective cognitive and behavioural response to a crisis-precipitating event perceived as threatening and manifested by anxiety and depressive symptoms (Ningrum & Bahri, 2020; Ravindran et al., 2020). Psychological distress can be defined as a deviation from one's usual level of functioning and is typically measured by the emergence of mental health disorders and symptomatology, the degree of social impairment, and the presence of somatic symptoms. Psychological distress is viewed as an emotional disturbance that may impact the social functioning and day-to-day living of individuals (Burnette et al., 2020; Chen & Tong, 2021). Psychological distress is a negative emotional condition that is an adjunct to the appraisal of threat, harm or loss vis-à-vis an important goal. Psychological distress is a multi-factorial construct, which is related to poor psychological function and quality of life (Hossain et al., 2021; Khawar et al., 2021). Psychological distress is a negative state of mental health that affects individuals, both directly and indirectly, over their lifetimes through connections with other adverse mental and physical health conditions (Brick et al., 2021; Evans et al., 2018).

Psychological distress can be defined as a state of poor mental health associated with symptoms from the anxiety-depressive spectrum. Psychological distress is defined as a continuous experience of unhappiness, nervousness, irritability and problematic interpersonal relationships (Abbas, 2021; O'Reilly et al., 2018). Psychological distress can be characterized as a lack of enthusiasm, problems with sleep (trouble falling asleep or staying asleep), feeling downhearted or blue, feeling hopeless about the future, and feeling emotional (e.g., crying easily or feeling like crying) (Akbari & Hossaini, 2018; Din & Ahmad, 2021). Social support can be defined as a social network's provision of psychological and material resources intended to benefit an individual's ability to cope with stress. Social support has two fundamental aspects; the mental aspect which represents an individual's imagination and perception of support from those around him, and other is the real aspect (objective) which consists of the amount of real aid to him (Cusinato et al., 2020; Skaalvik & Skaalvik, 2016). Social support can be viewed as emotional support which consists of comforting behaviours intended to alleviate uncertainty, anxiety, hopelessness and depression, as well as, instrumental support consists of providing tangible goods and services such as transportation and assistance with household tasks.

Social support can be characterized as the perception and actuality that a person is cared for, has assistance available from other people, and is part of a supportive social network. Generally, there are five main types of social support: emotional support (e.g. empathy, concern), esteem support (e.g. positive regard, encouraging person), tangible support (e.g., financial or direct assistance), informational (e.g. advice, feedback), and network support (e.g. welcoming, shared experience) (Mishra, 2020; Tang, 2021). Social support refers to the experience of being valued, respected, cared about, and loved by others who are present in one's life. Social support may be regarded as resources provided by others, as coping assistance, as an exchange of resources, or even as a personality trait. Social support can refer to a sense of refuge that reduces both stress and feelings of social isolation (Alawamleh et al., 2022; Brown, 2014). Social support includes two main types of support; instrumental and emotional support, whereby instrumental support is defined as helping behaviours that people do for another person, to help that person cope with a chronic or acute stressor, such as cleaning services, child care, or cooking meals while emotional support is the reassurance or emotional support offered to reinforce a sense of worth and feelings of self-efficacy (Burić & Kim, 2020; Hsiao et al., 2011).

Social support is a multidimensional concept and is generally conceptualized from a quantitative-structural perspective social support is the actual physicality of the support and includes quantitative elements such as the size of the social network, frequency of social interaction, whether or not people are married, whether or not people live alone, and how often they take part in social activities such as numbers of persons and formal relationships with them, while from a qualitative–functional perspective

of social support, it refers to the type or content of support such as the perceived content and availability of relationships with significant of others (Dam et al., 2019; Thompson, 2011). According to previous study perceived support refers to a generalized appraisal that individuals are cared for and valued, significant others are available to them in times of need and they are satisfied with their relationships (Isa et al., 2018; Mishra, 2020). Social support refers to positive exchanges with network members that help people stay healthy or cope with adverse events. Social support refers to the various forms of aid and assistance supplied by family members, friends, neighbours, and others. Social support is defined as any information leading the subject to believe that he is cared for, and loved and is an esteemed member of a network of mutual obligation. Therefore this study navigating gender dynamics, social support, and psychological distress in elderly individuals in Ile-Ife, Osun State, aims to examine the relationship between social support, gender dynamics, and psychological distress among the elderly population in a specific Nigerian community.

2. METHOD

This study is a description survey design (Mendenhall & Sincich, 2016). This study is carried out among elderly persons in Ile-Ife, Osun State. The study population will be elderly persons above 60 years of age. This choice was informed by elderly people's vulnerability to old age crises such as the risk of becoming dependent on others for help, loss of a partner, medical and mental disabilities as well as financial implications which may cause psychological distress for them. Purposive sampling was used to choose Ife Central Local Government Area in Ile-Ife because this is the place where large numbers of elderly are compared to other local governments in Ile-Ife. Samples of 137 elderly persons, selected through convenience sampling were collected. The average age of the elderly persons selected for this study is 67.77 years (S.D = 9.33). Description statistics was used to analyze the data generated from the socio-demographic variables. Independent sample T-test was used to analyse the influence of gender on psychological distress while Linear Regression was used to analyse the influence of social support and psychological distress. All the hypotheses for the study were subjected to appropriate statistical analyses and tested at a 0.05 level of significance.

3. RESULTS AND DISCUSSION
Result

The descriptive analysis of the socio-demographic characteristics of the respondents is show in Table 1.

Table 1. Descriptive Analysis of the Socio-Demographic Characteristics of the Respondents

Variable	Level	Frequency	Percentage (%)
Sex	Male	71	51.8
	Female	66	48.2
	Married	85	62.0
Marital Status	Divorced	1	0.7
	Widowed/Widower	51	37.2

Base on Table 1, the result of the data analysis showed that 71(51.8%) of the respondents were male while 66(48.2%) of the respondents were female. Also, the analysis revealed that 85(62.0%) of the respondents were married, 1(0.7%) of the respondents were divorced and 51(37.2%) of the respondents were widowed/ widower. Finally, the analysis indicated that the average age of the elderly persons selected for this study is 67.77.

Table 2. Descriptive Analysis of the Level Psychological of the Respondent

Variable	Level	Frequency	Percentage (%)
	Low	66	48.2
Levels of Psychological	Average	65	47.4
	High	6	4.4
	Total	**137**	**100.0**

Based on Table 2, the categorization of the psychological distress was carried out with Visual binning by setting the cut points at +/-2SD. The result of the visual binning process showed that 66(48.2) of the respondents had low psychological distress, 65(47.4%) of the respondents possessed average and 6(4.4%) of the respondents had high psychological distress.

Social support will significantly predict psychological distress among elderly persons in Ile Ife. The hypothesis was tested with linear regression at a 0.05% level of significance. The independent variable is social support while the dependent variable is psychological distress. The result is show in Table 3.

Table 3. Linear Regression of Social Support on Psychological Distress

Model	B	Std. Error	R	F change	P-value
(Constant)	29.900	3.033	0.065	0.571	0.451
Social support	-0.038	0.050			

R2=0.004; Adjusted R2=-0.003

Base on Table 3, the result of the data analysis showed that social did not significantly predict psychological distress among elderly persons in Ile Ife {F (1,135) =0.571, R2=0.004, P>.05}. Similarly, the result of the data analysis revealed that social support explained a 0.4% variance in psychological distress among elderly persons. The null hypothesis was therefore accepted while the alternate hypothesis was rejected.

There will be no significant influence of gender on psychological distress among elderly persons in Ile Ife. The hypothesis was tested with an independent sample T-test. The results of this analysis are presented in Table 4.

Table 4. Test Comparison of Males and Females on Psychological Distress

Group	N	$\bar{X}$	SD	Df	T	P
Male	71	24.40	9.90			
Female	66	31.28	10.45	135	-3.953	.001
Total	137					

t (135) = -3.953, P<0.05

Base on Table 4, the results of data analysis revealed that there was a statistically significant difference between the mean of Male ($\bar{X}$=24.40, SD=9.90) and that of Female ($\bar{X}$=31.28, SD=10.45) elderly persons on psychological distress {t (135) = -3.95, P<.05}. The findings of this study suggested that female elderly persons tend to exhibit more psychological distress than their male counterparts. The null hypothesis was therefore rejected while the alternate hypothesis was accepted.

Discussion

The prevalence of psychological distress in the present study showed that 66 (48.2%) of the respondents had low psychological distress, 65 (47.4%) of the respondents possessed average and six (4.4%) of the respondents had high psychological distress. Hypothesis one addressed the relationship between social support and psychological distress among elderly persons. The result obtained revealed no significant influence of social support on psychological distress. This finding is in support of study who affirmed that no significant relationship was found between tangible and structural support and psychological distress (Akbari & Hossaini, 2018). The result is contrary to the buffering hypothesis which states psychosocial stress will have deleterious effects on the health and well-being of those with little or no social support, while these effects will be lessened or eliminated for those with stronger support systems (Susilowati & Azzasyofia, 2020; Swearer & Hymel, 2015). A likely explanation for this could be that the resources that are perceived to be available did not match or correspond with the needs evoked by the stressful event. For example, emotional loss associated with the death of a partner by an elderly person would presumably elicit a need for emotional and psychological support that is adequate to fill in the gap of such loss (Arzaqi & Romadona, 2021; Bakker et al., 2023; Noori et al., 2023).

Hypothesis two addressed the influence of gender on psychological distress among elderly persons. The finding from the hypothesis showed that gender has a significant influence on psychological distress among elderly persons. These findings support several previous studies found that psychological distress scores were higher for women than men not only at older ages but across the board (Peterson et al., 2009). Other study found that women scored higher than men in psychological distress, chronic stress, emotional coping and instrumental social support (Hadwin et al., 2022; Hossain et al., 2021). Previous study found that females reported more psychological distress, chronic stress, work stress, negative life events, and childhood and adulthood trauma, compared to males (Davis-Kean, 2015). Other study found that elderly women with serious psychological distress had the greatest likelihood of falls as compared to men with serious psychological distress and men and women without serious psychological distress (Flujas-Contreras et al., 2019).

Previous study revealed that psychological distress was significantly associated in women and men with worse social functioning and concluded that psychological distress has a considerable impact on the social functioning of the elderly (Peterson et al., 2009). Other study found that in elderly people, psychological distress has been associated with less social support (Burnette et al., 2020). Other study examined social support from family and the mental health of older people in Iran and found that social support is important for the mental well-being of older people (Akbari & Hossaini, 2018). Similarly, other study revealed that a positive change in satisfaction with social support was associated with improvement in quality of life beyond the effects of the CBT treatment (Ochoa et al., 2020). In addition, pretreatment satisfaction with social support, and change in satisfaction with social support moderated the effect of CBT on quality of life. These results suggest that bolstering social support concomitant to CBT may increase quality of life. Other study found that a significant negative correlation was seen between perceived social support and depression and that there was no significant correlation between depression and received social support (Sauvé et al., 2018). The Canadian Institute for Health Information-CIHI (2012) found that Positive Interaction and Emotional Support Predict Improvements in Distress and concluded that supportive social relationships are important in the reduction of high psychological distress levels, although in different forms.

Previous study reported a statistically significant association between psychological distress and social support (Ifdil et al., 2020). A strong association between lack of social support and psychological distress, irrespective of variables adjusted for, indicated a direct effect. Lack of social support and somatic health problems were associated with psychological distress in elders. Other study found support for the reciprocal relationship between affectionate support and distress (Parris et al., 2022). Higher psychological distress was related to subsequently higher levels of positive social interaction, and significantly related to subsequently higher emotional/informational support. No significant relationship was found between tangible and structural support and psychological distress. Other study found that Women scored higher than men in psychological distress, chronic stress, emotional coping and instrumental social support (Ningrum & Bahri, 2020). Previous study found that elderly women with serious psychological distress had the greatest likelihood of falls as compared to men with serious psychological distress and men and women without serious psychological distress (Burnette et al., 2020). A person's gender plays an important role in the understanding of psychological distress. Past research has found that women tend to exhibit greater levels of depression than men and symptoms of depression are about twice as high among older women than older men (Mello et al., 2019).

4. CONCLUSION

The findings underscore the significance of social support in buffering the negative consequences of psychological distress, especially in the context of gender variations. One of the key significances of the study is the important function of social support networks in promoting mental health and the ordinary best of life amongst aged individuals. The effects suggest that social aid from family members, and friends can function as a protective element against psychological distress. This highlights the significance of fostering sturdy social connections and addressing the social isolation of the various aged populace. Moreover, gender differences in the experience of social support and mental distress. Women, particularly, were discovered to have better levels of intellectual distress as compared to men. This gender disparity underscores the need for gender-touchy interventions and helps offerings tailor-made to the unique needs of elderly women. By recognizing and addressing those differences, healthcare providers and policymakers can help the intellectual fitness and well-being of aged people in Ile-Ife and beyond.

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