

Association between family relations and socio-cognitive functions among senior citizens in district Faisalabad, Punjab, Pakistan

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Abstract:

The interpersonal relationship with family as family is that unit of the society through which life continues from one phase to another and it is the first line of defense for the older persons. Aging is a broad concept that includes physical, psychological, and social changes. The other aspects which directly or indirectly influenced their quality of life included education, family structure and gender. The present study was determined the impact of relationship with family on social cognition, health related behavioral and biological factors and cognitive functions. The data for the study collected from a sample of 180 men and women of age 60 years or above were investigated by using multistage sampling technique in the target area which was the urban areas of district Faisalabad of Punjab province. The study investigated the needs and problems faced by the senior citizens and determinants of socio-cognitive functions in old age by employing a pre-designed questionnaire. The results of the study evidently show that variables like social support, relationship with family, family income, marital status, health problems, social problems, violence and abuse, social isolation are significantly associated with the process of socio-cognitive functions among senior citizens.

Keywords: Relationship with family; socio-cognitive functions; Aging; social isolation

Introduction

The functional decline linked to ageing may affect any type of activities that seniors can pursue each and every day, leading to decreased quality lifestyle and increased depressive disorder and stress (Mcnamara *et al.*, 2015). People are naturally social. Yet, the modern life-style in industrialized places is greatly reducing the amount and quality regarding social relationships. Many people in these countries no more live in extended families as well as near each various other (Lunstad *et al.*, 2010).

1.2 Association between family relationship and socio-cognitive functions

Social relationships include multiple dimensions such as size of individual's social support systems, frequency of hitting the ground with people within the actual network, feelings connected with loneliness or wedding in social actions. Older adults will often be at a higher risk of solitude and loneliness as a result of many life changes that come about in later living, including retirement, bereavement as well as children and buddies moving away. (Cornwell&Wait, 2009; de

Jong Gierveld&Mavens, 2004) (Shankar *et al.*, 2015).

Social support or the provision of emotive and tangible guidance by family, close friends, and other people of one’s social networking is associated with better health insurance and well-being among older adults. (Berkman & Syme, 1979; House, Landis, & Umberson, 1998; Schulz et al., 2006; Uchino, 2004) (Nicklett *et al.*, 2013).

Social support can be used as a resource supplied by others (Cohen, Mermelstein, Karmarck, & Hoberman, 1985), particularly

family and friends, and can end up being divided into sub-types associated with functional support, for instance emotional, informational, along with instrumental support (Dunkel-Schetter, Blasband, Feinstein, & Herber, 1992) (Harvey & Alexander , 2012).

The lack of family is less detrimental than the absence of friends from the context of household, and that help quality is one mechanism where network types impact mental health. Social relations have a very powerful impact about mental health (Fiori *et al.*, 2006).

Findings and analysis

Findings and analysis of Univariate Analysis

Table 4.1: Distribution of the respondents according to their relations with family members.

Statements	Frequently		Sometimes		Not at all	
	F	%	F	%	F	%
You are involved in family functions	110	61.11	65	36.11	5	2.78
Disputes held among you and your children	58	32.22	83	46.11	39	21.67
Do your children/grand children take care of you, if you ever sick?	125	69.44	50	27.78	5	2.78
Do you visit your married children who live separately?	108	60.00	52	28.89	20	11.11
While living with the family do you perform any chores?	71	39.44	97	53.89	12	6.67
Total	180	100.00	180	100.00	180	100.00

Relationship with family members and intergenerational conflict:

Family is a major source of primary relationships providing long lasting intimate emotional ties with others thus the extent to which older people are embedded in a system of family relationships has a great potential impact on the aging experiences. Involvement of the aged in network of kins within the contact of traditional family system gave them a greater status and economic security (Lee & Wills, 1994). With regard to participation in the family functions, out of 180 respondents 61.11 percent reported involvement to a great extent where as 36.11 percent reported involvement to some extent and 2.78

percent of them reported that not at all their involvement were important in family functions. With regard to intergenerational relationship 32.22 percent respondents said that to a great extent disputes/quarrels held among them and their children, whereas 46.11 percent respondents reported to some extent and 21.67 percent of the respondents reported they never quarreled with their children. With regard to the care of them in sickness, 69.44 percent of the respondents reported that they were frequently cared by their children and grand children, 27.78 percent reported that sometimes they were cared by their children/grand children and 2.78 percent said they were never cared by them. Majority of the respondents said that they visited their married children who were lived separately, 28.89 percent said sometimes and 11.11 percent of the respondents they never visited their children who lived separately after marriage. With regard to the performance of daily chores, 39.44 percent of the respondents they mostly performed daily chores with family members, 53.89 percent said sometimes and 6.67 percent of the respondents reported that they never perform daily chores while living with the family.

Findings and analysis of Bivariate analysis:

Relations with family and socio-cognitive functions:

Hypothesis 2: Family relations links with socio-cognitive functions.

The following hypothesis is envisaged to assess the association between two variables (Relations with family and socio-cognitive functions).

H₀: There is no association between relations with family and socio-cognitive functions among senior citizens.

H₁: There is association between relations with family and socio-cognitive functions among senior citizens.

Association between relations with family and Socio-Cognitive Functions among senior citizens.

Relations with family	Socio-cognitive functions			Total
	Low	Medium	High	
Low	6	10	13	29
	20.8%	34.8%	44.2%	100.0%
Medium	9	25	36	70
	12.5%	35.1%	51.2%	100.0%
High	15	21	45	81
	18.1%	25.2%	55.6%	100.0%

Total	25	50	105	180
	13.9%	27.8%	58.3%	100.0%

Chi-square = 16.33 d.f = 4 Significance = .003** Gamma = .197

** = Highly significant

Table 2 presents the association between the relations with family and socio-cognitive functions among senior citizens. Chi-square value shows a highly significant association between relations with family and socio-cognitive functions among senior citizens. Gamma value shows a positive relationship between the variables. It means if the respondents had good relationship with family then their socio-cognitive functions less affected. The calculated value of chi-square was greater than the table value so the hypothesis “there is association between relations with family and socio-cognitive functions among senior citizens” is accepted.

Findings and analysis of Multiple analysis:

Table 3: Multivariate Analysis

Index variable	Unstandardized coefficients		Standardized coefficients	t	Sig.
	B	Std.Error	Beta		
(Constant)	.757	.225		3.364	.001**
Education	0.046	0.046	-.121	-2.553	.059**
Marital status	.266	.063	-.099	-2.094	.023**
Income of the family	.210	.053	.204	3.939	.047**
Social support	.005	.042	.006	.123	.160**
Relation with family	.094	.054	.008	1.755	0.332**
Social problems	-.031	.055	.251	4.848	-.213**
Violence	-.293	.051	.291	5.756	-.297**

A dependent Variable: Socio-cognitive functions among senior citizens

$R^2 = .589$ F-Value = 23.30 Sig. = .000

** = Highly significant

* = Significant

NS= Non-significant

Impact of family relationship:

The coefficient for this variable had a positive sign with the value of 0.094 and is significant at

1% level of significance. It shows that the relations with family have positive impact on socio-cognitive functions among senior citizens.



Recommendations

It is encouraged that efforts should be made to strengthen family members institution and to help consolidate family bonds through appropriate cultural interventions.

Conclusion

It was found that the reversal of roles from care takers to care seekers was a difficult change for the aged. Social surrounding and traditions determine to a large extent, how a given society views old population and the aging process. It affects the perception of the old age, feelings about the roles, rights, responsibilities of the elderly and support system. Sex, education, economic status, marital status, health limitations, interpersonal relations with family, family structure, access to health care, social and economic, social isolation are the important dimensions of socio-cognitive functions among senior citizens. The results for relationships with family also show positive result and a highly significant association.

Author's biography

Dr. Zahira Batool is an Associate Professor at department of Sociology, GC University, Faisalabad, Pakistan. She is also performing the duties of Director of Academics at GCUF, Pakistan. The second author of Miss Faima Younis is the student of Mphil, department of Sociology, GCUF, Pakistan and is doing her research work under the supervision of Dr. Zahira Batool.

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