



**UNIVERSITI PUTRA MALAYSIA**

**RELATIONSHIP BETWEEN FILIAL RESPONSIBILITY, SELF-ESTEEM,  
EMOTIONAL REGULATION AND SUBJECTIVE WELL-BEING AMONG  
PAKISTANI COMMUNITY-DWELLING OLDER ADULTS**

**SUMARA MASOOD UL HASSAN**

**FEM 2019 32**



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By

**SUMARA MASOOD UL HASSAN**

**Thesis Submitted to the School of Graduate Studies, Universiti Putra Malaysia,  
in Fulfilment of the Requirements for the Degree of Doctor of Philosophy**

**May 2019**

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## DEDICATION

Dedicated to my companion in life, AAP;  
to my beloved parents and siblings I owe my everything;  
and to my lovely and intelligent daughters, Aresha and Anaya



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Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfilment of the requirement for the degree of Doctor of Philosophy

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**SUMARA MASOOD UL HASSAN**

**May 2019**

**Chairman : Professor Tengku Aizan Hamid, PhD**  
**Faculty : Human Ecology**

Prior research on the psychosocial factors of subjective well-being as one of the key indicators of ageing well was mainly conducted in Western cultures and with little emphasis on mechanisms underlying older adults' subjective well-being. This correlational study aimed to determine the association of adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation with subjective well-being; the direct effects of filial responsibility, self-esteem, and emotional regulation on subjective well-being after controlling for the influences of covariates; and the mediating effects of self-esteem and emotional regulation on the relationship between filial responsibility and subjective well-being. Multistage cluster random sampling method was utilised to collect data from 400 older adults from Rawalpindi, Pakistan. The Concise Measure of Subjective Wellbeing (COMOSWB), The Experiences in Close Relationships-Revised Scale (ECR-RS), Affective Scale, Revised Intrinsic/Extrinsic Religious Orientation Scale (I/E-R), filial expectation and filial behaviour scales, Rosenberg Self-Esteem Scale (RSES) and The Emotional Regulation Questionnaire (ERQ) were administered to the respondents through the interview method. The results showed that adult attachment, relationship quality, religiosity, filial behaviour, self-esteem, and emotional regulation were significantly while filial expectation was not significantly associated with subjective well-being. Filial behaviour of respect, self-esteem and emotional regulation were major predictors of subjective well-being after controlling for the influences of covariates. These variables explained 72% of the variability in subjective well-being. Structural equation modeling demonstrated that self-esteem and cognitive reappraisal of emotional regulation partially mediated the relationship between filial behaviour of respect but failed to function as significant mediators on the association of filial expectation and filial behaviour of daily maintenance with subjective well-being. Besides, suppression of emotional regulation did not show a mediating effect on the relationship between filial responsibility and subjective well-being. Overall, this study

provides valuable insights regarding the importance of eldest sons' filial behaviour of respect in their older parent's lives and highlights the roles of self-esteem and emotional regulation in the relationship between filial responsibility and older adults' subjective well-being.



Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk ijazah Doktor Falsafah

**HUBUNGAN ANTARA TANGGUNGJAWAB FILIAL, HARGA DIRI,  
PENGAWALAN EMOSIONAL DAN KESEJAHTERAAN SUBJEKTIF  
DALAM KALANGAN KOMUNITI PENGHUNI LEBIH TUA PAKISTAN**

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Penyelidikan terdahulu ke atas faktor psikososial kesejahteraan subjektif sebagai salah satu indikator utama penuaan sejahtera telah dijalankan dalam budaya Barat dengan sedikit penekanan terhadap mekanisma-mekanisma berkenaan kesejahteraan golongan dewasa lebih tua. Tujuan keseluruhan kajian korelational ini adalah untuk meneliti perkaitan pertautan orang dewasa, kualiti hubungan, kewarakan, tanggungjawab filial, harga diri, dan pengawalan emosional dengan kesejahteraan subjektif; kesan langsung tanggung jawab filial, harga diri, dan pengawalan emosional ke atas kesejahteraan subjektif selepas pengawalan bagi pengaruh ciri latar belakang, pertautan, kualiti hubungan, dan kewarakan; dan kesan pengantara harga diri dan pengawalan emosional ke atas hubungan antara tanggungjawab filial dan kesejahteraan subjektif dalam kalangan komuniti penghuni dewasa lebih tua Pakistani. Kaedah persampelan rawak kluster multiperingkat telah digunakan untuk mengumpul data daripada 400 orang dewasa lebih tua dari daerah Rawalpindi, Pakistan. Ukuran Padat Kesejahteraan Subjektif (COMOSWB), Pengalaman dalam Skala Semakan Hubungan Rapat (ECR-RS), Skala Afektif, Skala Orientasi Kewarakan Intrinsik/Ekstrinsik Semakan (I/E-R), ekspektasi filial dan skala tingkah laku filial, Skala Harga Diri Rosenberg (RSES) dan Soal Selidik Pengawalan Emosional (ERQ) telah diberikan kepada responden melalui kaedah temu bual. Keputusan penyelidikan menunjukkan bahawa tingkah laku filial (iaitu, tingkah laku hormat filial dan tingkah laku pengendalian harian filial), harga diri, pengawalan emosional, pertautan orang dewasa, kualiti hubungan, dan kewarakan adalah secara signifikan berkaitan dengan kesejahteraan subjektif. Walau bagaimanapun, ekspektasi filial adalah secara tidak signifikan berkaitan dengan kesejahteraan subjektif. Tingkah laku hormat filial, harga diri dan pengawalan emosional adalah prediktor bagi kesejahteraan subjektif setelah pengawalan bagi ciri-ciri latar belakang. Faktor-faktor tersebut menerangkan 72% variabiliti dalam kesejahteraan subjektif. Kemudian, ujian kesan pengantara pengikat menunjukkan bahawa harga diri dan penilaian semula

kognitif pengawalan emosional pengantara separa hubungan antara tingkah laku hormat filial tetapi gagal berfungsi sebagai pengantara yang signifikan ke atas perkaitan ekspektasi filial dan tingkah laku pengendalian harian filial dengan kesejahteraan subjektif. Akhirnya, supresi pengawalan emosional tidak menunjukkan kesan pengantaraan ke atas hubungan dimensi tanggung jawab filial dengan kesejahteraan subjektif. Secara keseluruhannya, kajian ini marangkumi nilai-nilai murni mengenai kepentingan sikap hormat filial yang lebih tinggi daripada anak lelaki sulung yang akan menyebabkan kesejahteraan subjektif warga tua yang lebih tinggi. Ia juga menekankan peranan harga diri dan pengawalan emosional dalam hubungan di antara tanggungjawab filial dan kesejahteraan subjektif warga tua.





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Last but not the least; I would like to thanks my husband, my daughters, parents, and moreover my siblings, without their love, patience and support, I would not be what I am today.

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## LIST OF ABBREVIATIONS

AGFI	Adjusted Goodness of Fit Index
AMOS	The Analysis of Moments Structures
ANOVA	Analysis Of Variance
AVE	Average Variance Extracted
BC	Bias Corrected
CFA	Confirmatory Factor Analysis
CFI	Comparative Fit Index
CMIN/DF	Chi-Square/Degree of Freedom Ratio
COMOSWB	COncise Measure of Subjective Wellbeing
CR	Construct Reliability
ECR-RS	The Experiences in Close Relationships-Revised Scale
EDA	Exploratory Data Analysis
EFA	Exploratory Factor Analysis
ER	Extrinsic Religiosity
ERQ	Emotional Regulation Questionnaire
GFI	Goodness of Fit Index
I-E/R	Revised Intrinsic/Extrinsic Religious Orientation Scale
IFI	Incremental Fit Index
IR	Intrinsic Religiosity
KMO	Kaiser-Myer Olkin
MI	Modification Indices
NFI	Norms-Fit Index
PBS	Pakistan Bureau of Statistics
RMSEA	Root-Mean-Square Error of Approximation
RSES	Rosenberg Self-Esteem Scale
SEM	Structural Equation Modelling
SIGN	Scottish Intercollegiate Guidelines Network
SPSS	The Statistical Package for Social Sciences
SST	Socioemotional Selectivity Theory
STROBE	STrengthening the Reporting of Observational Studies in Epidemiology
TLI	Tucker Lewis Index
UN	United Nations
VIF	Variance Inflation Factor

# CHAPTER I

## INTRODUCTION

The present chapter describes the major elements that directed this study which include the background of the study, statement of the problem, research questions, objectives, hypotheses, theoretical framework, conceptual framework, significance of the study, and definitions of the key terms. Lastly, the organisation of the thesis and summary of the first chapter are also presented.

### 1.1 Background of the Study

Declining fertility and increased life expectancy are two major contributing factors to population aging worldwide. According to the United Nations (2017), adults age 60 and above make up 13% of the world's population; however, this percentage is expected to double by 2050. Developed countries have already undergone a demographic transition; hence they are facing problems related to ageing societies. On the other hand, the demographic shift in developing countries is relatively slow, but still manifests an increase in the number of the elderly population. UN estimates indicate that the growth rates of the ageing population in developing countries (3%) are higher than that of developed ones (1.9%). It shows that the process of the aging population is relatively advanced in rich countries, but the absolute number of aging population is higher in developing nations. Pakistan is one of the developing countries that is yet to experience demographic transition. Approximately 11 million of its population is 60 years and older, which is more than the population of 11 European nations (Population Reference Bureau, 2011). In 2009, 6.1% of Pakistan's population consisted of adults aged 60 and above, which is expected to increase to 14.9% by 2050 (United Nations, 2009). With an estimated 14.9% of its population comprising of adults aged 60 and over, Pakistan will be labelled as an aging nation by 2050.

Parallel to the socio-demographic shift, the sociocultural changes due to modernisation have also resulted in the transformation of the normative structure of the Pakistani family (Itrat, Taqui, Qazi, & Qidwai, 2007; Ibrahim, Abbas, Adnan, & Bhatti, 2011; Sabzwari & Azhar, 2011). The well-being of aged parents is largely dependent on the eldest son in a Pakistani family. However, due to changes in the family landscape, the eldest sons, on whom responsibility falls, are reluctant to provide filial support to their aged parents (Cheng & Chan, 2006). Consequently, the dynamics of inter-generational transfers in the families of old adults are in a transitional stage; emphasising the fact that the subjective well-being of this older segment of the population is at risk. It is therefore evident that the aging phenomenon, generally, and transitional changes, specifically, in the family landscape may affect the quality of life among Pakistani older adults.

An important determinant of quality of life and healthy aging is the maintenance and enhancement of subjective well-being (Baltes & Baltes, 1990; Peterson, Chatters, Taylor, & Nguyen, 2014; Tu & Yang, 2016). The concept “subjective well-being” refers to an individual’s positive appraisal of life and emotional reaction to events (Diener, 1984; Diener, Oishi, & Lucas, 2002). It is categorised into three components, namely, life satisfaction (a cognitive component), positive affect and negative affect (affective component) (Herero & Extremera, 2010). The maintenance and enhancement of subjective well-being in old age is important because a higher sense of subjective well-being promotes positive functioning, delays illness and extends longevity (Zeng, Dudley, Jr, Vlosky, & Gu, 2008; Rowe & Kahn, 1998). Studies have shown that subjective well-being of an individual tends to increase in old age (Carstensen, Pasupathi, Mayr, & Nesselroade, 2000; Blanchflower & Oswald, 2008). Furthermore, increasing age is associated with lower negative emotions (Carstensen, 2006; Diener & Suh, 1997), increased life satisfaction (Mroczek & Spiro, 2005), stable positive affect (Charles et al., 2001) and lesser psychological vulnerability (Piazza & Charles, 2006). Despite the old age trajectories, a majority of older adults optimise their sense of subjective well-being by selecting emotionally meaningful goals which promote the use of regulatory processes (Baltes & Baltes, 1990; Carstensen, 2006).

Substantial research has identified multiple psychosocial factors which are associated with older adults’ subjective well-being in a positive and negative manner. According to Banjare, Dwivedi, and Pradhan (2015), there is strong evidence which indicates that certain aspects of social relationships such as affectional ties and social support from close networks can promote an intact sense of well-being. While, the lack of support from social circles, psychological stress and lower engagement in daily activities are associated with a poor sense of well-being in old age. Concomitantly, Zhang, Chen, Ran, and Ma (2016) reported that attachment relationships characterised by attachment avoidance and anxiety are strongly linked with lower subjective well-being in older adults. A cross-sectional study also concluded that lower social support, strain, parental dissatisfaction, and unequal intergenerational exchanges promote lower levels of well-being (Reczek & Zhang, 2015). Religiosity refers to an orientation of religiosity when individual chooses to see religion as an end in itself and involves in religious activities (Koenig, 1990). It may serve as a protective agent against old age trajectories as evidences suggest that both domains of religiosity namely; intrinsic and extrinsic religiosity ameliorates longevity (Zimmer et al., 2016), and sense of subjective well-being in older adults (Momtaz, Hamid, Ibrahim, & Chai, 2011; Momtaz et al., 2012).

Filial responsibility is also linked with subjective well-being in older adults. Two dimensions of filial responsibility (i.e., filial expectation and filial behaviour) exhibit different effects on subjective well-being. Filial expectation from an adult child is positively associated with life satisfaction (Yeung, 1989; Chong & Liu, 2016). However, Simon, Chen, Chang, and Dong, (2014) reported no significant relationship between this link. Regarding filial behaviour, several studies have reported a consistent positive association between filial behaviour and subjective well-being (Krause, 1997; Takagi & Saito, 2012; Ju et al., 2016)

Besides social factors, self-esteem and emotional regulation have been identified as significant psychological factors of subjective well-being in older adults. Self-esteem is an established protective factor as evidence suggests that it is associated with better levels of subjective well-being (Schimmack & Diener, 2003; Fagerström et al., 2007; Herero & Extremera, 2010). High self-worth in individuals is a consequence of closely attached supportive relationships (Mickelson, Kessler, & Shaver, 1997; Mikulincer & Shaver, 2003), which further facilitates subjective perceptions of individuals about their sense of happiness. Likewise, emotional regulation optimises positive functioning and promotes higher levels of subjective well-being (Baltes & Baltes, 1990; Carstensen, 2006). Hu et al. (2014) reported that two dimensions of emotional regulation are significantly associated with subjective well-being. The first is cognitive reappraisal which is positively associated with subjective well-being; whereas the second dimension is suppression, which is negatively associated with subjective well-being (Gross & John, 2003). In addition, Mikulincer and Shaver (2003, 2007) reported that secure or insecure relationships with an attachment figure influence a person's regulatory skills in both adaptive and maladaptive manner, leading to higher or lower subjective well-being in older adults.

Thus, this study sought to examine the relationship of adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation with the subjective well-being of older adults in Pakistan.

## **1.2 Statement of the Problem**

The maintenance of subjective well-being is crucial to quality of life and healthy aging. The upsurge in geriatric population and sociocultural changes in the family landscape may affect the subjective well-being of older adults (Cheng & Chan, 2006; Takagi & Saito, 2012; Ul-Haq, 2012; Thanakwang, 2015). Hence, it is imperative to know whether older adults are happy and satisfied with their quality of life.

Subjective well-being of older adults is associated with multiple psychosocial factors in various ways. Studies have shown that adult attachment (Zhang, Chen, Ran, & Ma, 2016), relationship quality (Reczek & Zhang, 2015), and religiosity (Zimmer et al., 2016) are significantly associated with subjective well-being of older adults. Attachment security helps persons to manage interpersonal relationships (Mikulincer & Shaver, 2007) and has been consistently linked with higher levels of subjective well-being (Kafetsios, & Sideridis, 2006; David, Morris, & Drake, 2016). Parent-adult child relationship quality is pivotal for well-being and is known to be highly associated with subjective well-being of older adults (Merz, Consedine, Schulze & Schuengel, 2009; Cheng, Birditt, Zarit, & Fingerman, 2015). Individuals with higher levels of intrinsic and extrinsic religious orientations find religion as an important aspect of their lives and seek to contextualise other aspects of their life through religion (Whitley & Kite, 2010). Indeed, greater levels of intrinsic and extrinsic religiosity promote greater levels of psychological well-being (Momtaz, Hamid, Ibrahim, Yahaya, & Abdullah, 2012). However, no study has examined the associations between all these variables in one study. Therefore, one of the main objectives of the study was to examine the

association of adult attachment, relationship quality and religiosity with subjective well-being in older adults.

There is agreement in extant literature on the multifaceted structure of filial responsibility (Hamid, 1992). The two facets of filial responsibility, namely, filial expectation and filial behaviour have been examined separately in different studies (Cheng & Chan, 2006; Yunong, 2012). The investigation of filial responsibility in association with subjective well-being from a multifaceted perspective is relatively sparse. As such, this study attempted to fill the void by incorporating both facets of filial responsibility. Additionally, previous studies investigated any child (Lee, Netzer, & Coward, 1994) or close child (Cheng & Chan, 2006) as the referral child. Instead, the current study focused on eldest sons as they are of fundamental value in the Pakistani society. Eldest sons are expected to cater to their aged parents' needs and are considered a source of emotional and familial gratification (Kakar, 1981; Gupta et al., 2003; Ebenstein & Leung, 2010). Owing to the cultural significance of the eldest son in the Pakistani society, the current study examined filial responsibility of the eldest son in relation to the subjective well-being of older adults.

Additionally, the two dimensions of filial responsibility engender different forms of associations with older adults' subjective well-being. A few studies reported that lesser filial expectations from an adult-child relationship lead to better life satisfaction (Yeung, 1989; Chong & Liu, 2016), while others reported null associations between these constructs (Simon, Chen, Chang, & Dong, 2014; Dong, Zhang & Chang, 2016). Moreover, filial behaviour has been significantly and consistently associated with subjective well-being. Specifically, higher levels of filial behaviour from the adult child promotes higher levels of subjective well-being in older adults (Krause, 1997; Takagi & Saito, 2012; Yunong, 2012; Ju et al., 2016). Such variations in findings on filial expectation and filial behaviour in relation to subjective well-being require deeper exploration of how filial responsibility from an adult-child predict subjective well-being in older adults. Hence, this study examined both filial expectation and filial behaviour as independent variables to explain subjective well-being in older adults.

The positive association of self-esteem with subjective well-being in older adults is likewise well-entrenched in literature (Herero & Extremera, 2010; Wiesmann & Hannich, 2014). Older adults with poor self-evaluation are more susceptible to psychological vulnerability later in life (Fagerström et al., 2007; Ali, Suhail, & Ali, 2016). Mickelson, Kessler, and Shaver (1997) corroborated the view that truth-worthy relationships induce a sense of higher self-esteem. To the best of the present researcher's knowledge, no empirical study has identified the positive association between filial responsibility and self-esteem as well as employed self-esteem as a mediator in the relationship between filial responsibility and subjective well-being. Hence, this study endeavoured to understand the pathways between filial responsibility and subjective well-being via self-esteem.

Several studies have shown significant associations of two dimensions of emotional regulation (i.e., cognitive reappraisal and suppression) with subjective well-being in

older adults (Hu et al., 2014; Gross & John, 2003). However, based on a systematic search of literature, no empirical study has examined how filial responsibility and emotional regulation work together in accounting for variations in subjective well-being. Therefore, one of the main objectives of this study was to investigate if emotional regulation mediates the relationship between filial responsibility and subjective well-being in older adults. Although literature on emotional regulation and filial responsibility has established their relationship with subjective well-being, these constructs have remained independent of each other. Clarifying the nature of these relationships can provide efficient intervention programs on the enhancement of subjective well-being.

One of the important tasks of a scholar is to discover the factors associated with subjective well-being in older adults. Simultaneously investigating various psychosocial factors in relation to subjective well-being in one study will provide a holistic view to scholars and counsellors about the unique nature of these factors. This may help them to plan intervention programs for the improvement of subjective well-being in older adults. Therefore, this study was carried out to fill the void in subjective well-being literature.

Finally, most studies on subjective well-being have been conducted on Western samples which are characterised by individualistic cultures (Herero & Extremera, 2010; Augusto-Landa, Pulido-Martos, & Lopez-Zafra, 2011; Ferrand, Martinent, & Durmaz, 2014; Wiesmann & Hannich, 2014). Consequently, little empirical evidence on subjective well-being exists in the context of collectivistic cultures. There is in fact a need to replicate studies on subjective well-being in non-Western settings owing to cultural and geographical differences to establish generalisability of results. Theoretical and empirical findings on subjective well-being will be more worthwhile if they are collected from various cultures. As a collectivistic society, subjective well-being in Pakistan has been relatively understudied in terms of its associations with adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation. Several studies in Pakistan have focused on the financial aspect of well-being (Afzal, 1997; Qureshi & Arif, 2001; Alam & Karim, 2006; Gulzar, Zafa, Ahmad, & Ali, 2008; Ali & Kiani, 2003; Ul-Haq, 2012), with little emphasis on its psychosocial factors. Therefore, this study endeavoured to provide deeper understanding of the association of subjective well-being with adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation in Pakistani older adults.

### **1.3 Research Questions**

The study addressed the following research questions:

1. What are the background characteristics of the respondents and their eldest son, levels of subjective well-being, adult attachment (i.e., attachment avoidance and anxiety), relationship quality, religiosity (i.e., intrinsic and

extrinsic religiosity), filial expectation, filial behaviour (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem, and emotional regulation (i.e., cognitive reappraisal and suppression) among Pakistani community-dwelling older adults?

2. What are the associations of adult attachment (i.e., attachment avoidance and anxiety), relationship quality, and religiosity (i.e., intrinsic and extrinsic religiosity) with subjective well-being among Pakistani community-dwelling older adults?
3. What are the relationships of filial expectation, filial behaviour (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem, emotional regulation (i.e., cognitive reappraisal and suppression) with subjective well-being among Pakistani community-dwelling older adults?
4. Do filial responsibility (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem, and emotional regulation (i.e., cognitive reappraisal and suppression) significantly predict the subjective well-being of Pakistani community-dwelling older adults after controlling for the influences of background variables, adults attachment, relationship quality, and religiosity?
5. Do self-esteem and emotional regulation (i.e., cognitive reappraisal and suppression) significantly mediate in the relationship between filial responsibility (i.e., filial expectation, filial behaviour of respect, and filial behaviour of daily maintenance) and subjective well-being among Pakistani community-dwelling older adults?

#### **1.4 Research Objectives**

1. To describe the background characteristics of the respondents and their eldest son, levels of subjective well-being, adult attachment (i.e., attachment avoidance and anxiety), relationship quality, religiosity (i.e., intrinsic and extrinsic religiosity) filial expectation, filial behaviour (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem, and emotional regulation (i.e., cognitive reappraisal and suppression) among Pakistani community-dwelling older adults.
2. To examine the associations of adult attachment (i.e., attachment avoidance and anxiety), relationship quality, and religiosity (i.e., intrinsic and extrinsic religiosity) with subjective well-being among Pakistani community-dwelling older adults.
3. To examine the relationships of filial expectation, filial behaviour (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem, emotional regulation (i.e., cognitive reappraisal and suppression) with subjective well-being among Pakistani community-dwelling older adults.
4. To identify the extent to which filial responsibility (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem, and emotional regulation (i.e., cognitive reappraisal and suppression) significantly predict the subjective well-being of Pakistani community-dwelling older adults after controlling for the influences of background variables, adult attachment, relationship quality, and religiosity.



5. To determine the mediating roles of self-esteem and emotional regulation (i.e., cognitive reappraisal and suppression) in the relationship between filial responsibility (i.e., filial expectation, filial behaviour of respect, and filial behaviour of daily maintenance) and subjective well-being among Pakistani community-dwelling older adults.

## 1.5 Hypotheses

**The following hypotheses were obtained according to the specific objectives 2 & 3:**

**Hypothesis 2.1:** There is a significant negative association of attachment avoidance and attachment anxiety with subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 2.2:** There is a significant positive association between relationship quality and subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 2.3:** There is a significant positive association of intrinsic and extrinsic religiosity with subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 3.1:** There is a significant association between filial expectation and subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 3.2:** There is a significant positive association between filial behaviour (i.e., filial behaviour of respect and filial behaviour of daily maintenance) and subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 3.3:** There is a significant positive association between self-esteem and subjective well-being among Pakistani community dwelling older adults.

**Hypothesis 3.4:** There is a significant positive association between cognitive reappraisal of emotional regulation and subjective well-being among Pakistani community dwelling older adults.

**Hypothesis 3.5:** There is a significant negative association between suppression of emotional regulation and subjective well-being among Pakistani community-dwelling older adults.

**The following hypotheses were obtained according to the specific objective 4:**

**Hypothesis 4.1:** The regression coefficients for selected variables (i.e., background characteristics of older adults, their eldest son, adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation) are significant when regressed against the subjective well-being of Pakistani community-dwelling older adults.

**Hypothesis 4.2:** Filial responsibility (i.e., filial behaviour of respect and filial behaviour of daily maintenance), self-esteem and emotional regulation (i.e., cognitive reappraisal and suppression) significantly predict the subjective well-being of Pakistani community-dwelling older adults after controlling the influences of background variables, adult attachment, relationship quality, and religiosity.

**The following hypotheses were obtained according to the specific objective 5:**

**Hypothesis 5.1:** Self-esteem mediates the associations between filial responsibility (i.e., filial expectation, filial behaviour of respect, and filial behaviour of daily maintenance) and subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 5.2:** Cognitive reappraisal mediates the associations between filial responsibility (i.e., filial expectation, filial behaviour of respect, and filial behaviour of daily maintenance) and subjective well-being among Pakistani community-dwelling older adults.

**Hypothesis 5.3:** Suppression mediates the associations between filial responsibility (i.e., filial expectation, filial behaviour of respect, and filial behaviour of daily maintenance) and subjective well-being among Pakistani community-dwelling older adults.

## **1.6 Significance of the Study**

The current study presented a holistic picture by 1) describing the background characteristics of the respondents, their eldest sons and the levels of study variables 2) examining the association of adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation with subjective well-being in one study 3) determining the predicting roles of filial responsibility, self-esteem, and emotional regulation on subjective well-being 4) investigating the mediating effects of self-esteem and emotional regulation between filial responsibility and subjective well-being. Such empirical connections between studies variables added immensely towards the expansion of knowledge, theory, therapeutic intervention and policy development. Additionally, the findings of this study are extremely valuable for the families of older adults. The current study is imperative in the following ways:

### **1.6.1 Contribution to knowledge**

With respect to knowledge, the study expanded the gerontological knowledge related to subjective well-being by incorporating adult attachment, relationship quality, religiosity, filial responsibility, self-esteem, and emotional regulation in association with subjective well-being among Pakistani community-dwelling older adults in one study. It is expected that the study provided a deeper understanding of familial and

individual interaction by identifying filial responsibility, self-esteem, and emotional regulation as unique predictors of subjective well-being after controlling the role of background characteristics and covariates (i.e., attachment, relationship quality and religiosity). Secondly, the study gave fundamental knowledge by uncovering how different cognitive-emotional regulatory processes (i.e., self-esteem and emotional regulation) may boost the subjective well-being of older adults when they have trusting and supportive social networks. Thirdly, conduction of this study in the Pakistani context offered a rich insight into generalizability of past findings on subjective well-being in the non-Western context.

### **1.6.2 Contribution to theory**

The present study extended the socio-emotional selectivity theory (SST, Carstensen, 2006) 1) by explaining the phenomenon of subjective well-being with reference to the functional aspects of familial relationships (i.e., filial responsibility of the eldest son towards aged parents) 2) and by integrating cognitive-emotional regulatory processes (i.e., self-esteem and emotional regulation) between filial responsibility and subjective well-being explained through attachment theory. Hence, theoretical understanding of subjective well-being among older adults would hopefully lead to better outcomes in terms of healthy aging and quality of life among Pakistani community-dwelling older adults.

### **1.6.3 Relevance to practice and policymakers**

With regard to prevention and intervention, the present study provided a scientific orientation about the predicting effects of filial responsibility, self-esteem, and emotional regulation on subjective well-being and mediating effects of self-esteem and emotional regulation between filial responsibility and subjective well-being. The joint consideration of these variables impels policymakers to develop intervention programs which promote and enhance the mental health and well-being among older adults within their family context. Likewise, the mediating effects of self-esteem and emotional regulation between filial responsibility and subjective well-being may help counsellors and health professionals to understand the significance of individual factors in collectivistic society. It may enable them to incorporate these underlying mechanisms in their therapeutic work while development and maintenance of subjective well-being in older person within their familial context.

### **1.6.4 Relevance to family**

Aged individuals are at risk population globally. In Pakistan, the social security system has not been fully developed (Ali & Kiani, 2003). Majority of older people are dependent on their family for their happiness and well-being. It is hoped that the study can help family members to refine their knowledge about the resilience and risk factors of subjective well-being and familial needs of their aged individuals. It may also help

them to understand the cognitive-emotional regulatory factors that further manage the subjective well-being of older adults within their familial context.

Hence, the findings of the current study may be beneficial to professionals and policymakers to develop family-oriented intervention programs and policies that involve the whole family with the aim to promote the subjective well-being of aged people and help them to flourish as functional members of the society.

## **1.7 Theoretical Background**

The theoretical framework of the current study was built on the socio-emotional selectivity theory (SST, Carstensen, 2006), Diener's subjective well-being approach (Diener, 1984; Diener, Lucas, & Oishi, 2002), and attachment theory (Bowlby, 1982). This study describes subjective well-being as a developmental outcome, is a result of the interactions among psychosocial factors. Diener's framework explains the phenomenon of subjective well-being in older adults. Specifically, Diener emphasised a domain of subjective well-being that maintains or improves across ageing and a domain that decreases across ageing. In particular, evaluative well-being such as life satisfaction increases with age. On the other hand, hedonic well-being has two components (i.e., positive affect and negative affect), the positive affect which tends to remain stable or even improve with age and the negative affect which decreases with age (Diener, 1984; Diener & Suh, 1997; Diener, Lucas, & Oishi, 2002). Certain demographic and psychosocial factors (i.e., adult attachment, relationship quality and religiosity) have been linked to subjective well-being (Diener & Seligman, 2002; Diener & Oishi, 2006; Tay, Li, Myers & Diener, 2014). In this study, subjective well-being of older adults was investigated as a dependent variable and was assessed through the Concise Measure of Subjective Well-Being (COMOSWB). It combined the evaluative and hedonic domains to assess the subjective well-being of older adults.

The socio-emotional selectivity theory (Carstensen, 1992, 2006) posits that well-being is a function of emotionally meaningful goals and balanced emotional states. It further stipulates that as people grow older, they become increasingly conscious about the amount of time left to live. This awareness of impending mortality may lead older adults to prioritise emotional balance and emotionally meaningful goals (Carstensen, 1995; Carstensen, Fung, & Charles, 2003; Charles & Carstensen, 2010). Therefore, older individuals focus on the activation of person-oriented goals than future-oriented goals. Personal goals are related to emotional meaning and motivational preferences; whereas, future goals are linked to knowledge acquisition or establishing new social contacts (Carstensen, 1995, 2006). Additionally, due to the motivational shift, older adults develop a greater capacity to experience and regulate emotional states (Lockenhoff & Carstensen, 2004; Carstensen, 1995; John & Gross, 2004; Kessler & Staudinger, 2009). Thus, SST provides evidence that the maintenance of well-being is dependent on the pursuit of emotional gratification in one's social networks and focus on positive regulatory strategies. In this study, an emotionally gratifying interpersonal relationship was manifested by filial responsibility of the eldest son towards his aged parents. On the other hand, emotional regulation and self-esteem were regarded as

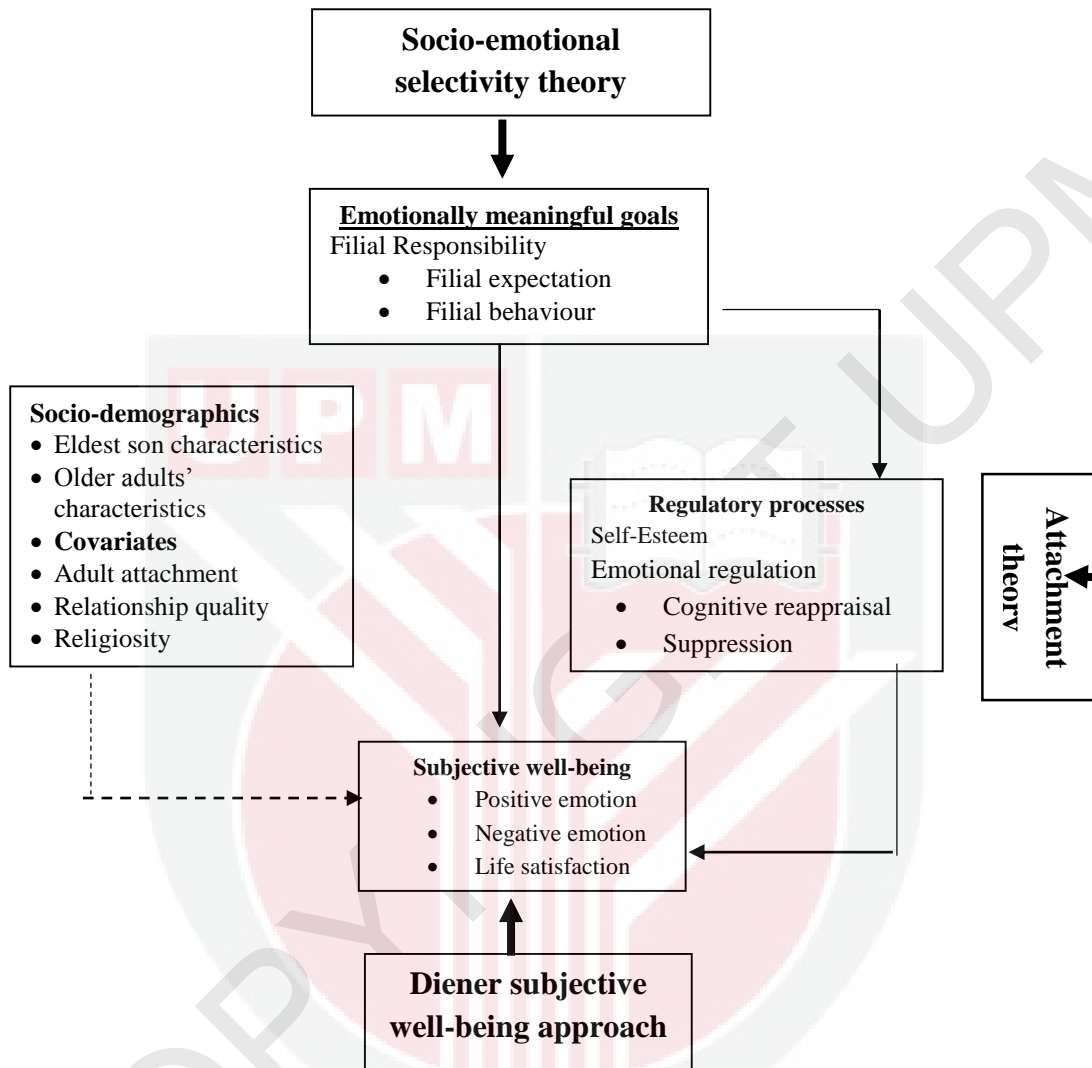
cognitive-emotional regulatory processes that have been considered by the attachment theory as underlying mechanisms for the relationship between social contacts and subjective well-being.

The attachment theory was originally developed to elucidate an infant's emotional bonding with the maternal figure (Bowlby, 1973, 1988). Nonetheless, Hazen and Shaver (1987) shifted the focus of attachment from the infant to adult relationships. The attachment theory (Bowlby, 1973, 1988; Hazen & Shaver, 1987) postulates that close relationships must be taken into account in human functioning, especially in the context of health and well-being. The theory suggests that interpersonal relationships are linked to well-being through self and stress appraisal patterns, as they are related to an individual's beliefs and expectations about being able to cope with stressful situations (Mikulincer & Shaver, 2007).

Moreover, self-esteem as an internal regulator that mainly involves a self-resistant attitude linked to the appraisal of oneself as able to cope with the interpersonal environment. Attachment theorists suggest that people who perceive trust, respect and support in social relationships view themselves as self-worthy and experience improved overall well-being (Hazen & Shaver, 1987; Mikulincer & Shaver, 2003). This involves the belief and perception of emotional responsiveness of primary caregivers at the time of need, leading to higher degrees of self-esteem and subjective well-being. Indeed, there are signs of individual differences in adaptive functioning such as mental health and well-being (Mikulincer & Shaver, 2003). Furthermore, an insecure attachment relationship is associated with lower self-esteem (Parker, Crocker, & Mickelson, 2004), while a secure attachment relationship is correlated with higher subjective well-being (Mickelson, Kessler, & Shaver, 1997). It is expected that the qualitative and functional aspects of attachment relationships contribute to higher self-esteem, which may, in turn, improve subjective well-being.

On the other hand, emotional regulation particularly involves the appraisal of a stressful situation as threatening or not, and a person's way of handling the stressors. Mikulincer and Shaver (2003, 2007) proposed that emotional regulation is a mechanism through which interpersonal relationships result in higher subjective well-being. When an individual perceives his/her relationship with the attachment figure as untrustworthy, he/she relies more on hyperactivating or deactivating coping strategies and views a stressful situation as more threatening (Birnbaum, Orr, Mikulincer, & Florian, 1997). The unsettled interpersonal distress damages an individual's stress management skills, suggesting a low reappraisal of the stressful event and more inhibition of emotional expression (Berant, Mikulincer, & Shaver, 2008). In contrast, secure interpersonal relationships influence a person's regulatory skills and well-being in an adaptive manner. It is conceivable that emotional regulation, as a stress appraisal factor, facilitates the association between interpersonal relationship and well-being by making the relationship with the attachment figure more promising and supportive. In the current study, self-esteem and emotional regulation were considered as supplementary factors in the stress-appraising process which may play mediating functions in the association between family relationships and well-being. Figure 1.1

demonstrates the linkage between the theories and variables investigated in the current study.

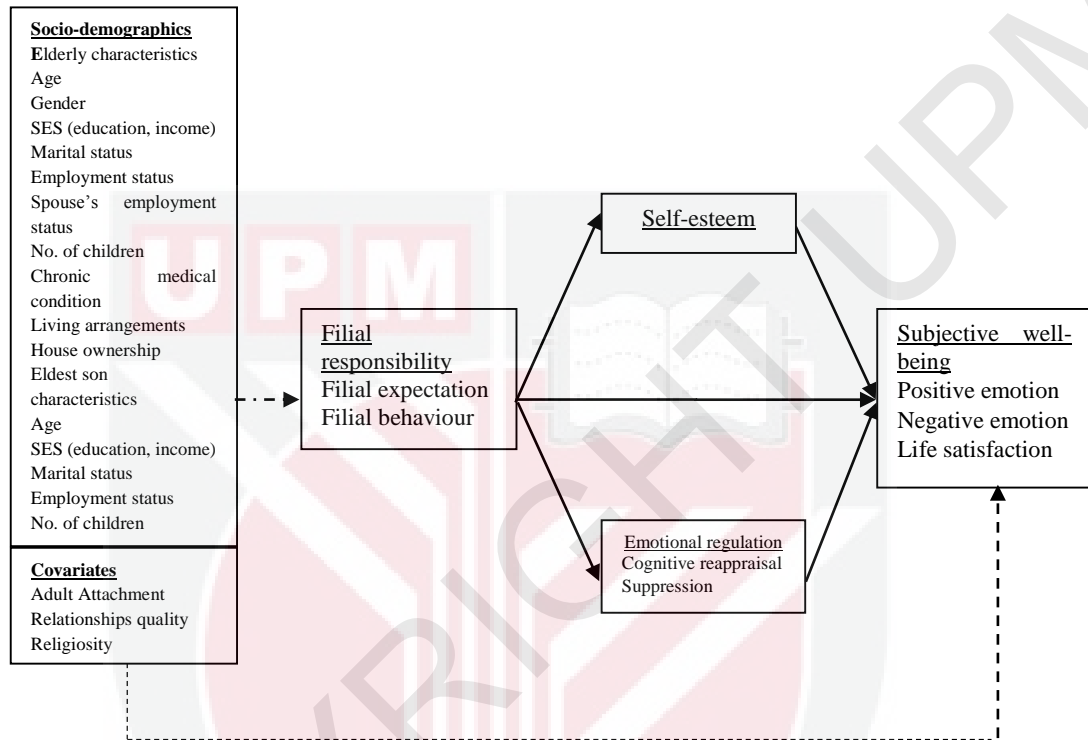


**Figure 1.1 : The linkage between theories and variables of the current study**

### 1.8 Conceptual Framework

The conceptual framework of this study was based on a sound theoretical background. It was developed from the pressing need to comprehensively understand subjective well-being of older adults from an integrated view of psychosocial factors. The conceptual framework may be considered in-depth in such a way that two dimensions of filial responsibility, self-esteem, and emotional regulation were included in the model. Besides, it considered adult attachment, relationship quality and religiosity as covariates that influence filial responsibility and subjective well-being. Life satisfaction, positive emotion, and negative emotion encompassed the subjective well-being variable. In examining the model, filial responsibility was treated as an

independent variable, adult attachment, relationship quality, and religiosity as covariates, and subjective well-being was examined as the dependent variable. In connecting the relationship between the endogenous and exogenous variables, self-esteem and emotional regulation (cognitive reappraisal and expressive suppression) were hypothesised as mediators. Altogether, the conceptual framework of the study is depicted in Figure 1.2.



**Figure 1.2 : Conceptual framework of the study**

## 1.9 Conceptual and Operational Definitions of the Terms

### Older adults

**Conceptual:** Older person is defined as old individual aged 60 years and over (United Nations, 2015).

**Operational:** Individual aged 60 and above lives in community from Pakistan.

### Subjective well-being

**Conceptual:** Subjective well-being is defined as one's cognitive and affective evaluations of his/her life (Diener, Oishi, & Lucas, 2002).

**Operational:** Subjective well-being was operationally defined as positive emotion, negative emotion and life satisfaction. It was measured by COncise Measure Of Subjective Well-being scale (COMOSWB, Suh & Koo, 2011). It assessed subjective well-being on 5-point likert type scale. Higher score indicates higher level of subjective well-being.

### **Adult attachment**

**Conceptual:** Attachment is broadly defined as a close emotional bond between the child and his/her attachment figure that gave a sense of security, protection, and safety (Bowlby, 1982). Adult attachment is conceptualized as individual differences on the two dimensions of attachment namely; attachment avoidance and attachment anxiety. Attachment avoidance reflects a preference for interpersonal distance, discomfort from emotional dependency and closeness to the attachment figure. Attachment anxiety involves intense worries about the availability and responsiveness of attachment figure, at the same time having a strong desire for closeness and safety from attachment figure (Brennan, Clark, & Shaver, 1998).

**Operational:** Adult attachment was operationally defined as the quantitative scores obtained from the Experiences in Close Relationships- Revised Scale (ECR-RS, Fraley, Heffernan, Vicary, & Brumbaugh, 2011). Attachment avoidance was operationally defined as the sum of the score obtained by the respondents on six items about individual differences on attachment avoidance between respondents and their eldest son. Attachment anxiety was operationally defined as the sum of the score obtained by the respondents on three items about the individual differences on attachment anxiety between respondents and their eldest son. Higher score indicates higher levels of attachment insecurity.

### **Relationship quality**

**Conceptual:** Relationship quality is conceptualized as positive feelings (Bengtson, Biblarz, & Roberts, 2002) and emotional closeness between parents and their adult children (Bengtson & Mangen, 1988).

**Operational:** Relationship quality was operationally defined as perception of the quality of parent-eldest son relationships. Quality of parent and eldest son relationship was measured by using affective scale developed by Hamid (1992). It assessed relationship quality on 4-point likert type scale. Higher score indicates higher relationship quality.



## **Religiosity**

**Conceptual:** Religiosity is the degree to which one believes in and is involved in religion (Chayya et al., 2007), while Gorsuch and McPherson (1989) conceptualized religiosity into two domains namely; intrinsic and extrinsic religiosity. Intrinsic religiosity refers to as an inward expression of religious beliefs while extrinsic religiosity focuses on how individual act out his/her religious beliefs such as prayer and meditation (Allport, 1964; Koenig, 1990).

**Operational:** In the present study, religiosity was operationally defined as the quantitative scores obtained from the Revised Intrinsic/Extrinsic Religious Orientation Scale (I-E/R, Gorsuch & McPherson, 1989). Intrinsic religiosity was operationally defined as the sum of score obtained by respondents on eight items about their personal religious beliefs. Extrinsic religiosity was operationally defined as the sum of score obtained by respondents on six items about their involvement in religious activities. It assessed religiosity on 5-point Likert type scale. Higher score indicates higher levels of extrinsic religiosity.

## **Filial responsibility**

**Conceptual:** Filial responsibility is defined as “an adult-child’s duty required by law, by custom, or by personal attitude to meet the needs of the elderly parents” (Schorr as cited in Hamid, 1992, p.10). Seelbach (1977) also stated that filial responsibility refers to an adult child’s responsibility towards maintenance of his/her parental well-being. Hamid (1992) conceptualized filial responsibility into two dimensions namely; filial expectation and filial behaviour. Filial expectation is defined as “expectations of care and support of parents from their children” and filial behaviour as “caregiving behaviour or performance of various services and activities by children for their parents” (Hamid, 1992, p.12-13).

**Operational:** Filial responsibility was operationally defined as the quantitative scores obtained from Gallois et al., (1999) filial expectation and filial behaviour scale. Filial expectation and filial behaviour was operationally defined as the sum of the score obtained by the respondents on twelve items about expectation to meet the need of parents and aid and support received by older adults from their eldest son. A higher score indicates higher levels of filial expectation and filial behaviour.

## **Self-esteem**

**Conceptual:** Self-esteem is generalized feelings of self-acceptance, goodness and self-respect (Rosenberg, 1965).

**Operational:** Self-esteem was operationally defined as respondent's scores on ten positive and negative items measured through Rosenberg Self-Esteem Scale (RSES, Rosenberg, 1965). It used a 4-point likert scale ranging from strongly agree to strongly disagree. Higher score indicates higher self-esteem.

## **Emotional regulation**

**Conceptual:** It is defined as how a person can influence the emotions being experienced, when and how these emotions are felt and expressed (Gross, 1998). Emotional regulation is conceptualized as individual differences on habitual use of cognitive reappraisal and expressive suppression as emotional regulation strategies. Cognitive appraisal refers to a reframing of emotional situation to alter its impact (Gross, 1998) defined, while, suppression refers to an inhibition of continuous emotion expressive behaviour. It is a type of response modulation (Gross & Levenson, 1993).

**Operational:** Emotional regulation was operationally defined as the quantitative scores obtained on Emotional Regulation Questionnaire (ERQ, Gross & John, 2003). Cognitive reappraisal was operationally defined as the sum of the score obtained by the respondents on six items of ERQ whereas suppression was operationally defined as the sum of the score obtained by the respondents on four items of ERQ. Higher score indicates higher levels of cognitive reappraisal and suppression.

### **1.10 Organization of the Thesis**

This study is organized in five chapters.

Chapter 1: The first chapter comprises of key components that drove the research. These components are background of the study, statement of the problem, research questions, objectives, hypotheses, significance of the study, theoretical framework, conceptual framework and definitions of the key terms.

Chapter 2: This chapter provides a comprehensive review of relevant literature related to all constructs. Besides, it also shed light on the gaps identified during systematic literature review conducted from 2011 to 2017 (see Appendix A).

Chapter 3: This section gives a detailed description about the research design, population, sampling technique, sampling procedure, data collection methods, instruments, pilot study, data analysis, data preparation and measurement model.

Chapter 4: This chapter discusses the results generated through univariate, bivariate, and multivariate analyses. It also presents the findings in relation to research hypotheses.

Chapter 5: The final chapter concludes the major findings. It also offers implications, limitations and suggestions for the future studies.

### **1.11 Chapter Summary**

The current chapter provided a detailed description about the background of the study, statement of the problem, research questions, objectives, hypotheses, significance of the study, theoretical framework, conceptual framework and definitions of the key terms. Besides, it gave an overview of the content of all other sections.

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## LIST OF PUBLICATIONS

- Hassan, S. M. U., Hamid, T. A., Haron, S. A., & Ibrahim, R. (2018). A Systematic Review on Psychosocial Determinants of Elderly Subjective Wellbeing. *Mediterranean Journal of Social Sciences*, 9(6), 107-120.
- Hassan, S. M. U., Hamid, T. A., Haron, S. A., & Ibrahim, R. (2019). Emotional regulation as a mediator between the filial behaviour of the oldest son and subjective well-being of older parents in Pakistan. *Psychogeriatrics*.





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