

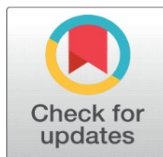
RELATIONSHIPS BETWEEN SPIRITUALITY, MINDFULNESS, AND SOCIAL SUPPORT WITH PSYCHOLOGICAL WELLBEING OF ELDERLY

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ABSTRACT

The purpose of the study was to examine the relationship between spirituality, mindfulness and social support (total and dimensions) with psychological wellbeing (total and dimensions). The sample of the present study was conducted on Total 200 elderly people with purposive sampling technique, within the age range from 60 to 75 years (Age Mean = 68.80, S.D. = 3.69). Sample was taken from various places of Varanasi and Chandauli district of Uttar Pradesh. Researchers used self-report questionnaires for taking responses of participants for studied variables. In this study total four tools namely - The Spiritual Personality Inventory-Revised, Five Facet Mindfulness Questionnaire-H (FFMQ-H), Social Support Scale and Psychological Well Being Scale (PWBS) were used. For knowing the relationship between variables, correlational analysis was used. The result of correlation analysis indicates that spirituality and its dimensions (e.g. spiritual virtues, positive outlook on life, spiritual discipline, goodness, spiritual services and moral rectitude), mindfulness and its dimensions (e.g. describing, acting with awareness, non-judgement to inner experiences, non-reactivity to inner experiences), social support and its dimensions (e.g. instrumental support, emotional support, informational support) significantly and positively correlates with psychological wellbeing and its dimensions (e.g. satisfaction, efficiency, sociability, mental health, interpersonal relations). The observed positive correlation suggests that increase in spirituality, mindfulness and social support of elderly people was associated with improved psychological wellbeing of them.

Keywords: Spirituality, Mindfulness, Social Support and Psychological Well-Being



1. INTRODUCTION

Old age is the witness to a lifelong experience of individual. Traditionally older people viewed as “storehouse of information” about the past. The importance of these experiences is seen when elders teach others about the facts and philosophy of life. In this context Lyon (1985) has said that the lives of seniors can provide “a meaningful horizon for others to become ethical”.

Aging is a natural and universal phenomenon in the entire world. Pedich (2007) defined aging as the final stage of life that ends with death. Szarota (2004) also placed their view that aging is that stage which comes after the age of

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maturity with reduction in bodily functions and various changes in system and organs. Actually, it is supposed to be a period of decline and degeneration in human life.

2. PSYCHOLOGICAL WELL-BEING (PWB)

Psychological well-being (PWB) is broad concept that is reflected in the evaluation of people's lives itself. Such an evaluation covers a wide range of construct like purpose in life, life satisfaction, emotion regulation, self-acceptance and so on. Diener et al. (1999) findings indicated four specific and distinct components of psychological wellbeing that is Pleasant or positive wellbeing, Unpleasant affect or psychological distress, Life satisfaction, domain or situation satisfaction. Diener's tripartite model of subjective well-being considers one of the most comprehensive models of psychological wellbeing. It includes emotional reactions and cognitive judgments. It posits three distinct but often related components of well-being namely frequent positive effect, infrequent negative affect and cognitive evaluations such as life satisfaction.

Carol Ryff (1989) has developed a multi-dimensional six factor model of psychological well-being in which he introduced core components or affective factor of psychological well-being, that is self-acceptance, personal growth, and purpose in life, environmental mastery, autonomy and positive relations with others.

3. SPIRITUALITY

Spirituality offers a pathway to a more positive aging, so that older adults live their remaining life happily and can embark on their spiritual journey in a meaningful way. At this stage, an elderly person faces various problems (such as fear of death, physical and psychological challenges, emotional problems and so on) that affect their well-being negatively. Hence many people turn to spirituality to found solace and meaning at the time of difficulties (such as disabilities, chronic illness and especially in old age) to cope with a situation where they found deterioration in their physical, mental, and cognitive abilities that happens with age. In recent days the curiosity of researcher has also steadily increased in studies relevant to spirituality and well-being of elderly people and its beneficial effects on aging process. Benson (1997), Benn (2001) and Park (2007) are widely accepted that the overall well-being of people is enhanced by spiritual beliefs and practices.

Spirituality, as a positive factor played a very important role for elderly population and in maintaining and recovering from illness (Mackenzie et al., 2000; Koenig et al., 1999; Parker et al., 2002; Pressman, 1990; Matthews et al., 1998). It takes away them from negativity to positivity and fills new energy to live life happy and peacefully. At this phase when elderly people deviate from the purpose of life and real meaning then at that time it proves helpful in showing them a new path. Spirituality links individual to those superpowers that govern their life as well as with others, with the world and oneself.

4. MINDFULNESS

Kabat-Zinn (1991) has operationally defined mindfulness as a state of awareness that arises through paying attention in a particular way on purpose, in the present moment, non-judgementally. With a different view, Langer (1992) has defined mindfulness as a trait characterized by such attributes as awareness, openness to novelty, abilities to draw novel distinction etc. Furthermore, Kabat-Zinn (2003) stated that mindfulness is perceived as any experience acquired from internal and external stimuli, as well as recognized and accepted without evaluating it. In the same way, Brown and Ryan (2003) have described mindfulness as an experience that happens in the form of responsive attention and awareness in the present moment. Bishop and colleagues (2004) have operationally defined mindfulness, as a kind of non-elaborative, non-judgmental, present-centered awareness in which individual's thoughts, feelings or sensations arises in the attention field and individuals tend to be acknowledged and accepted as it is. In the same context, Cardaciotto et al, (2008) has also defined mindfulness in terms of present moment awareness and acceptance. Brown et al. (2007), Germer, Siegel, & Fulton (2005), Kostanski & Hassed, (2008) and Siegel (2007b) have explained that "mindfulness" refer to a psychological state of awareness, a practice that promotes this awareness, a mode of processing information, and a characterological trait. Siegel, Germer & Olendzki (2011) have been also pointed out that mindfulness is an inherent human capacity and the ability to be mindful about present moment.

5. SOCIAL SUPPORT

Social support regarding is a powerful tool that has the capacity to enhance the emotional and practical resources that's greatly needed by the elderly community. In the life of older adults, their spouse, friends, family members (specifically grandchildren) considered as an important source of social support. Among these, friendship is considering one of the best sources of social support.

In this context, Matt & Dean (1993) have reported that social support has long been acknowledged as a factor that influences psychological well-being. Marjorie and Bennet (1980) placed emphasis on how social support system helps in meeting the major needs of elderly. These needs are socialization, carrying out the tasks of daily living & assistance during times of illness or crisis. Social support can be divided into four categories are widely accepted by the researchers namely emotional support, informational support, instrumental support and companionship support (Wills, 1991; Langford, 1997; Slevin et al. 1996; Taylor, 2011).

6. RATIONALE OF THE STUDY

The relationship between spirituality, mindfulness and social support are well documented separately in literatures but not established in full function related to elderly people in Indian context. In the same manner, there have been several studies regarding the variables in the present study, but the relationship of psychological well-being with all these variables has not yet been collectively explained. Thus, there is a need to study these factors collectively in relation to psychological well-being of elderly people.

Objectives

- To examine the relationship of spirituality, mindfulness and social support (total and dimensions) with psychological wellbeing (total and dimensions) of elderly.

7. HYPOTHESES

- 1) Spirituality and its dimensions would correlate positively with psychological well-being and its dimensions of elderly people.
- 2) Mindfulness and its dimensions would correlate positively with psychological well-being and its dimensions of elderly people.
- 3) Social support and its dimensions would correlate positively with psychological well-being and its dimensions of elderly people.

8. METHODOLOGY

8.1. SAMPLE

Total 200 (N= 200, Age Mean = 68.80, S.D. = 3.69) elderly people were used for this study within the age range from 60 to 75 years. The subject beyond this age range was not included in the present study. Further, those participants were also excluded from the present study who reported any history of chronic medical illness, psychiatric illness or any kind of neurological damage or disease. Sample was taken from various places of Varanasi and Chandauli district of Uttar Pradesh. The subjects were convinced to participate in the study.

8.2. RESEARCH DESIGN

The present study adopted correlational research design to assess the relationship between spirituality, mindfulness, and social support with psychological well-being.

8.3. MEASURING TOOLS

8.3.1. SPIRITUAL PERSONALITY INVENTORY- REVISED (SPI-R)

The original version of Spiritual Personality Inventory was developed by Husain, Luqman and Jahan in 2012. There are 32 items in the scale which are rated on 5-point Likert scale. This scale has two dimensions i.e., noble attitude towards others and moral rectitude. Further, the revised version of the SPI was developed by Husain & Anas in 2018. This self-report inventory is made up of 28 items, used to measure the spiritual personality of individuals on a 5-point Likert scale (viz., 1=Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5= Strongly Agree). There are not any negative items in the scale so all items of the scale are positively worded. The scores obtained on the inventory vary from 28 to 140. Higher scores indicate high level of spirituality while lower scores indicate low level of this one.

The SPI-R is reported to have very good Cronbach Alpha values for spiritual personality is .893. The internal consistency of the scale is quite high, and this gives the support that the scale has very good reliability (George & Mallery, 2003). The Cronbach Alpha for the factors was found to be 0.76, 0.70, 0.73, 0.67, 0.63, and 0.58 respectively. The scale has relatively high content validity (face and logical), construct validity.

8.3.2. FIVE FACET MINDFULNESS QUESTIONNAIRE-H (FFMQ-H)

Five Facet Mindfulness Questionnaire was originally developed by Baer, Smith, Hopkins, Krietmeyer & Toney in 2006. The original FFMQ consists of 39 items with 5-point likert scale. To measure mindfulness precisely, the scale was adapted in Hindi language (with the help of Translation- Back-Translation method) by Mandal, Arya and Pandey in 2016. This self-report inventory is made up of 28 items, used to measure the level of mindfulness within individuals on a 5-point Likert scale (viz., 1=Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5= Strongly Agree). In the adapted version of the scale, both positive and negative items have been used. The score of participants on FFMQ-H ranged between from 70 and below to 115 and above. Higher scores indicate high level of mindfulness and vice versa. The reliability of the full scale demonstrated good internal consistency with .85 alpha coefficients. The reliability of the dimensions of FFMQ-H namely describing, acting with awareness, non-judgement of inner experience and non-reactivity to inner experiences was found to be .79, .81, .75 and .61 respectively also presented satisfactory level of reliability. The validity of the scale is also high for a particular construct (trait mindfulness).

8.3.3. SOCIAL SUPPORT SCALE (SSS)

Social support was measured with Social Support Scale (SSS), developed by Asthana and Verma (2005). Social support scale measured social support of individuals with self-report questionnaire method. This is a brief, easy to administer self-report questionnaire which contains 35 items, among which 25 were positively worded and 10 items were negatively worded. The response was to be obtained on a 5-point response format strongly agree to strongly disagree. An individual score on social support scale ranged between 31 and below to 69 and above with higher scores indicate high level of social support while the lower scores indicate low level of social support. In the questionnaire, out of 35 items 20 items measures the dimension of emotional support, 6 items measure the dimension of informational support and 9 items measures the dimension of instrumental support. Test-Retest Reliability of the scale was found .81, and construct validity of the scale was determined by finding coefficient of correlation between scores on SSS and P.G.I. Social Support Questionnaire (Nehru and others 1998). It was found .59, showing moderate validity.

8.3.4. PSYCHOLOGICAL WELL BEING SCALE (PWBS)

Psychological Well Being Scale (PWBS) was developed by Sisodia and Chaudhary (2005). In the present study PWBS used to measure the level of psychological well-being of elderly. This tool consisted of 50 items and responses of the participants obtained on a 5-point Likert scale with scores "1 to 5" ranging from "strongly agree to strongly disagree". There are no negative items in the scale, so all items of the scale are positively worded. This scale measured psychological wellbeing with five dimensions of well-being such as Life satisfaction, Efficiency, Sociability, Mental health and Interpersonal relations. In the questionnaire, out of 50 items, 10 items from 1 to 10 measures satisfaction, 10 items from 11 to 20 measures efficiency, 10 items from 21 to 30 measures sociability, 10 items from 31 to 40 measures mental

health and last 10 items from 41 to 50 measures interpersonal relations respectively. The test-retest reliability was .87 and the consistency value for the scale is 0.90.

8.4. PROCEDURE

The necessary permission for data collection was sought from various houses of different localities (where elderly people are available according to the age range of the sample) of Varanasi and Chandauli district. Initially, researcher was contacted to them for taking their consent as well as establishing rapport with participants individually for the participation in the study. The individuals who agreed to participate in the study were finalized for further meeting. After receiving the required permission, the necessary instructions and a brief description of scales along with the objectives and importance of the study were explained to them to insure their honest, correct and sincere response, and initiated for tools administration on the participants.

8.5. STATISTICAL ANALYSIS

In order to examine hypotheses of the present study, the raw scores obtained on different scales were entered in the computer. Correlation analysis was used to examine the relationship of spirituality, mindfulness and social support with psychological well-being. The SPSS 20.0 was used for the present study.

9. RESULTS

In view of the main purpose of the present study to investigate the relationship between spirituality, mindfulness, social support with psychological well-being of elderly. The data were analyzed with the help of Bivariate correlation analysis. The results have been presented in the following tables.

Table 1 Correlation Coefficient of Dimensions of Spirituality with Dimensions of Psychological Well Being

Dimensions	Psychological well being				
	Satisfaction	Efficiency	Sociability	Mental health	Interpersonal relations
Spirituality					
Spiritual Virtues	0.430**	0.443**	0.471**	0.447**	0.675**
Positive Outlook on Life	0.630**	0.646**	0.645**	0.647**	0.504**
Spiritual Discipline	0.657**	0.659**	0.685**	0.704**	0.641**
Goodness	0.347**	0.374**	0.406**	0.402**	0.380**
Spiritual Service	0.217**	0.238**	0.247**	0.250**	0.232**
Moral Rectitude	0.279**	0.272**	0.270**	0.323**	0.256**

****p<0.01**

The result illustrated in table-1 indicated coefficient of correlation between all dimensions of spirituality and all dimensions of psychological well-being. It is evident from the result of correlation analysis that spiritual virtue was found to be significantly and positively correlated with satisfaction ($r = 0.430$, $p < .01$), efficiency ($r = 0.443$, $p < .01$), sociability ($r = 0.471$, $p < .01$), mental health ($r = 0.447$, $p < .01$) and interpersonal relations ($r = 0.675$, $p < .01$). Similarly, positive outlook on life was found to be significantly and positively correlated with satisfaction ($r = 0.630$, $p < .01$), efficiency ($r = 0.646$, $p < .01$), sociability ($r = 0.645$, $p < .01$), mental health ($r = 0.647$, $p < .01$) and interpersonal relations ($r = 0.504$, $p < .01$). In the same way, spiritual discipline was found to be significantly and positively correlated with satisfaction ($r = 0.657$, $p < .01$), efficiency ($r = 0.659$, $p < .01$), sociability ($r = 0.685$, $p < .01$), mental health ($r = 0.704$, $p < .01$) and interpersonal relations ($r = 0.641$, $p < .01$). The fourth dimension of spirituality was goodness, which was found to be significantly and positively correlated with satisfaction ($r = 0.347$, $p < .01$), efficiency ($r = 0.374$, $p < .01$), sociability ($r = 0.406$, $p < .01$), mental health ($r = 0.402$, $p < .01$) and interpersonal relations ($r = 0.380$, $p < .01$). Further, spiritual service was found to be significantly and positively correlated with satisfaction ($r = 0.217$, $p < .01$), efficiency ($r = 0.238$, $p < .01$), sociability ($r = 0.247$, $p < .01$), mental health ($r = 0.250$, $p < .01$) and interpersonal relations ($r = 0.232$, $p < .01$). At last, moral rectitude was found to be significantly and positively correlated with satisfaction ($r = 0.279$, $p < .01$), efficiency ($r = 0.272$, $p < .01$), sociability ($r = 0.270$, $p < .01$), mental health ($r = 0.323$, $p < .01$) and interpersonal relations ($r = 0.256$, $p < .01$).

Table 2 Correlation Coefficient of Dimensions of Mindfulness with Dimensions of Psychological Well Being

Dimensions	Psychological well being				
	Satisfaction	Efficiency	Sociability	Mental health	Interpersonal Relations
Describing	0.368**	0.389**	0.406**	0.405**	0.506**
Acting with awareness	0.436**	0.473**	0.495**	0.476**	0.323**
Nonjudgement	0.676**	0.687**	0.672**	0.685**	0.590**
Non reactivity	0.603**	0.648**	0.607**	0.591**	0.470**

****p<0.01**

The result table-2 indicated coefficients of correlation between all dimensions of mindfulness and all dimensions of psychological well-being. The result of correlation analysis demonstrates that the first dimension of mindfulness viz. describing was found to be significantly and positively correlated with satisfaction ($r = 0.368$, $p < .01$), efficiency ($r=0.389$, $p<.01$), sociability ($r=0.406$, $p < .01$), mental health ($r=0.405$, $p < .01$) and interpersonal relations ($r=0.506$, $p < .01$). The second dimension of mindfulness e.g. acting with awareness was found to be significantly and positively correlated with satisfaction ($r = 0.436$, $p < .01$), efficiency ($r=0.473$, $p<.01$), sociability ($r =0.495$, $p < .01$), mental health ($r=0.476$, $p < .01$) and interpersonal relations ($r =0.323$, $p < .01$). Similarly, the third dimension of mindfulness e.g. non judgement to inner experiences was found to be significantly and positively correlated with satisfaction ($r = 0.676$, $p < .01$), efficiency ($r=0.687$, $p<.01$), sociability ($r =0.672$, $p < .01$), mental health ($r =0.685$, $p < .01$) and interpersonal relations ($r=0.590$, $p < .01$). In the same way, the fourth dimension of mindfulness viz. non reactivity to inner experiences was found to be significantly and positively correlated with satisfaction ($r = 0.603$, $p < .01$), efficiency ($r=0.648$, $p<.01$), sociability ($r =0.607$, $p < .01$), mental health ($r=0.591$, $p < .01$) and interpersonal relations ($r =0.470$, $p < .01$).

Table 3 Correlation Coefficient of Dimensions of Social Support with Dimensions of Psychological Well Being

Dimensions	Psychological well being				
	Satisfaction	Efficiency	Sociability	Mental health	Interpersonal relations
Social support					
Emotional support	0.642**	0.631**	0.622**	0.634**	0.763**
Informational support	0.688**	0.750**	0.712**	0.708**	0.638**
Instrumental support	0.828**	0.830**	0.833**	0.855**	0.735**

****p<0.01**

The result table-3 indicated coefficient of correlation between all dimensions of social support with all dimensions of psychological well-being. It is evident from the result of correlation analysis that the first dimension of social support e.g. emotional support was found to be significantly and positively correlated with satisfaction ($r = 0.642$, $p < .01$), efficiency ($r=0.631$, $p < .01$), sociability ($r =0.622$, $p < .01$), mental health ($r=0.634$, $p < .01$) and interpersonal relations ($r =0.763$, $p < .01$). Similarly, the second dimension of social support viz. Informational support was found to be significantly and positively correlated with satisfaction ($r = 0.688$, $p < .01$), efficiency ($r=0.750$, $p<.01$), sociability ($r =0.712$, $p < .01$), mental health ($r =0.708$, $p < .01$) and interpersonal relations ($r =0.638$, $p < .01$). The third dimension of social support viz. instrumental support was found to be significantly and positively correlated with satisfaction ($r = 0.828$, $p < .01$), efficiency ($r=0.830$, $p<.01$), sociability ($r =0.833$, $p < .01$), mental health ($r =0.855$, $p < .01$) and interpersonal relations ($r =0.735$, $p < .01$).

Table 4 Correlation Coefficient of Spirituality, Mindfulness, Social Support with Psychological Well Being

Variables	Spirituality	Mindfulness	Social Support
Mindfulness	0.627**		
Social Support	0.699**	0.743**	
Psychological Well Being	0.627**	0.716**	0.856**

****p<0.01**

The result illustrated in table-4 indicated coefficient of correlation of spirituality, mindfulness and social support with psychological well-being of elderly people. The result of correlation analysis reported significant positive relationship between spirituality and psychological well-being ($r = 0.627$, $p < .01$). Similarly, the correlation coefficient of mindfulness with psychological well-being ($r=0.716$, $p < .01$) suggested significant positive correlation. In the same way, social support was also significantly positively correlated with psychological well-being ($r =0.856$, $p < .01$). In addition, there were found correlation coefficient of spirituality with mindfulness ($r = 0.627$, $p < .01$), and social support

($r = 0.699$, $p < .01$), indicated significant positive correlation between aforementioned variables. Furthermore, mindfulness was also found to be significantly positively correlated with social support ($r=0.743$, $p<.01$).

In sum, it can be evident that spirituality, mindfulness and social support were significantly positively correlated with psychological well-being of elderly people. Further, the observed positive correlation suggests that increase in spirituality, mindfulness and social support of elderly people was associated with improved psychological wellbeing of them. In other words, the findings of the present study demonstrate that spirituality, mindfulness and social support are positively related to the better state of psychological well-being of elderly people.

10. DISCUSSION

In this section, the obtained results have been discussed in the light of theoretical and empirical evidences in accordance with hypotheses of the present research.

10.1. MAJOR FINDINGS OF THE STUDY

- On the basis of findings, it can be reported that various dimensions of spirituality were found to be significantly and positively correlated with all dimensions of psychological well-being. The observed positive correlation coefficients suggested that increase in spiritual virtues, positive outlook on life, spiritual discipline, goodness, spiritual service and moral rectitude within elderly participants was associated with increase in satisfaction, efficiency, sociability, mental health and interpersonal relations, leads to enhanced psychological wellbeing of them. In other words, the findings of the present study demonstrates that in old age, aforementioned spiritual characteristics were positively linked with better state of psychological well-being in the elderly people. In other words, if elderly people are highly spiritual, their psychological well-being will be high. Similarly, if elderly people have a lower spiritual personality, they show poorer symptoms of PWB.

In this context, Saleem and Khan, (2015) suggested that spirituality has beneficial impact on well-being among elderly people, as well as with higher level of spirituality, they may be able to manage their well-being better. Numerous studies on spirituality and psychological well-being have revealed that experiencing meaning and purpose in life is closely related to a wide range of positive well-being outcomes (Ho, Cheung & Cheung, 2010; Sterger, Oishi & Kashdan, 2009). Blazer (1991), Kelly (1995) and Reed (1991) have shown that spirituality helps the elderly people to deal with depression by increasing the enjoyment of life. In the same way, Cohen and Koenig (2003) reported that religiosity/spirituality has a greater impact on physical and mental well-being of elderly, particularly on their relationships not only with family and friends; but also, with their chosen god and relevant others (Glicksman 2002, Glicksman & Glicksman 2008). On the basis of evidence mentioned above, the results of the present study have been found supporting the first proposed hypothesis.

- It can be noted that various dimensions of mindfulness were significantly positively correlated with all dimensions of psychological well-being. Further, the observed positive correlation suggested that increase in describing, acting with awareness, non-judgement to inner experiences and non-reactivity to inner experiences within elderly is associated with increase in satisfaction, efficiency, sociability, mental health and interpersonal relations, leads to enhanced psychological wellbeing of them. In other words, the findings of the present study suggest that aforementioned traits of mindfulness in old age are positively related to a better state of psychological well-being.

The result of the present study is consistent with the finding of Hohaus and Spark (2013), which reported that all facets of mindfulness were significantly correlated with psychological well-being. In addition, the finding of Elliot et al. (2018) also evidenced that greater level of mindfulness is associated with fewer depressive symptoms. Similarly, Frias and Whyne, (2015) have also reported that people who have high level of mindfulness have less life stress, which in turn promotes mental health. On the other hand, if elderly people have lower level of mindfulness, they will show maladaptive behaviour towards challenging situations and will not be able to cope with it. This finding is collaborated with the view of Prakash et al. (2017) who stated that lower mindfulness is associated with greater thought avoidance, which results in greater emotion deregulation. In the same way, Shorey et al. (2014) found that lower level of mindfulness is associated with substance abusers. On the basis of evidence mentioned above, the results of the present study have been found

supporting the second proposed hypothesis. At last, the findings of the present study demonstrated that mindfulness thoughts are linked with better state of psychological well-being in the life of elderly people.

- It was evident that various dimensions of social support were significantly and positively correlated with all dimensions of psychological well-being. The observed positive correlation suggests that increase in different kinds of social support viz. emotional support, informational support and instrumental support is associated with increase in satisfaction, efficiency, sociability, mental health and interpersonal relations leading to enhanced psychological wellbeing of elderly people. In other words, the findings of the present study demonstrated that social support are positively linked to a better state of psychological well-being of elderly people.

These finding is consistent with the study of Kovalenko & Spivak (2018), which reported that seniors' citizens who do not feel lonely and have enough opportunities to communicate with other people and be involved in social life have higher level of psychological well-being, than those seniors who are lonely, lacking in communication and socially inactive. The findings highlight the importance of social support networks including family, spouse (Mathur, 2015), friends, sibling and neighbors (Shaw, 2005; Cornwell et al. 2008) and relevant others, which enhances the psychological well-being of older people by playing a major role in providing love, care, information regarding coping with problematic situations and direct assistance in the form of giving money, custodial care etc. In addition, it was also noted that when social support increases, the psychological well-being of older people also increases. A growing body of research reveals that involvement in social networking and activities affects social well-being and may improve the overall psychological well-being of elderly people as well as the way they judge their life satisfaction or happiness. Similarly, if elderly people have lower level of social support, they will show dissatisfaction leads to poor status of psychological well-being.

The result of the present study was supported by a number of studies. Currently, Papadopoulos (2020) noted that the important perspective in understanding the well-being of elderly people is social connectedness. With the same view, Gottlieb and Bergen (2010), reported that connectedness with others may profitable in a number of ways. Furthermore, Gray (2009) said that others may provide practical assistance in meeting daily needs (e.g. help with transportation for medical care, help maintaining one's house).

At last, the findings of the present study clearly support our proposed hypothesis, indicated that level of social support linked with better state of psychological well-being in the life of elderly people. Finally, the obtained coefficient of correlation between spirituality, mindfulness and social support with psychological well-being indicated significant and positive correlation. Therefore, it is evident that spirituality, mindfulness and social support are closely linked with better state of psychological well-being in the life of elderly people. In sum, the observed positive correlation suggests that increase in spirituality, mindfulness and social support of elderly people was associated with improved psychological wellbeing of them.

CONFLICT OF INTERESTS

None.

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