



RESEARCH PAPER

**The Ego Resilience and Life Satisfaction in Elderly People Living in Old Age Homes and with Families: A Quantitative Analysis**

<sup>1</sup>Khadija Mazhar <sup>2</sup>Dr. Asma Seemi Malik\* <sup>3</sup> Dr. Nayab Javed

1. MS Student, Department of Gender and Development Studies, LCWU, Lahore, Punjab, Pakistan
2. Assistant Professor, Department of Sociology, LCWU, Lahore, Punjab, Pakistan
3. Assistant professor, Gender Studies Department, University of Punjab, Lahore, Punjab, Pakistan

\*Corresponding Author      kehkashaanbeauty@gmail.com

ABSTRACT

The purpose of the study was to determine the ego resilience and life satisfaction of older people both residents of old-age shelter homes and living with families. The study was cross sectional quantitative research design. Data collection was gathered from various shelter homes and various domestic setups in Lahore. The method used for data collection was a survey method. 150 women and 150 men responded were conveniently selected. The sample comprised of 75 males and 75 females from old houses and 75 males and 75 females from families within age group 60 to 90 years in Lahore areas. The questionnaire used for data collection was standardized scale; Ego resilience scale and the Life satisfaction scale. Results of the study concluded that resilience and satisfaction from life were found to be the same in both groups of older living in old age homes and living with families. Family counselors will use this study to know about the current issues of society usually in families now a day and they will be able to give counseling to the families to respect and love their older and not send them to old age homes because when they went to old houses their positive resilience and satisfaction with life will be changed into negative reactions and experiences of life.

**KEYWORDS**      Aged, Counselor, Elderly, Experience, Families, Life Satisfaction, Old Age Homes, Resilience

Introduction

Aging is a difficult and serious problem in Pakistan. The older age individual population was higher day after day. The current value is 9 million individuals who fall in the age group criteria of 60 years and above in Pakistan. According to the estimated year 2050, the percentage of the older individual population will further be increased up to 42 million (United Nations, 2002). The social image was more affected now a day because the worth, importance, and dignity of older individuals have been lower and changed. The combined family system has been ruined and refused its grip and broke down into a nuclear family system it's the reason older adults' problems are increased (Gulzar et al., 2008).

That day current ratio of older individual persons is identified as 605 million worldwide (Dawane, Pandit, & Rajopadhye, 2014), and the rising ratio of inhabitants is identified as 2 million by the year 2050 (Perna et al., 2012). In developed and developing countries the rising rate of elderly adult inhabitant's individuals was seen as the hardest target for both countries. In Pakistan, there is a custom to admire or obey older individuals and the family also has to provide care, facilities, and financial support to their oldest persons and the older individuals bear the difficulties with their growing old age (Gulzar, Zafar, Ahmad, & Ali, 2008).

In Pakistan, they approximated that 5.6% population consisted of 60 years of age group population and above. According to this phenomenon, the increasing value of the elderly adult individual population has increased by up to 11% in the year 2025. The population of older individuals consists of 6% and the complete population may consist of

10 million so this estimate will be increased up to 15% in 2050 (Gulzar et al., 2008) ; (Jalaal & Younis, 2012).

An increasing inhabitant of elderly adults individual have seen in Pakistan they people are dependent economically, socially, and bodily on their offspring Life expectancy was increasing throughout the whole world and also in Pakistan. They estimated the increasing value of the older individuals day after day was higher. Pakistan faced too many hurdles due to a lack of resources that save the inhabitants of elderly adults (Sabzwari & Azhar, 2010).

They identified if the individual interacted and was attached to society and they do not exist in an institution, for example, old houses. For people who lived in old houses their level of resilience was higher (Azeem & Naz et al., 2015). Resilience is the major source that helped elderly adult people to manage any long-term illnesses such as hopelessness, stress diseases, and mental reactions (Wu et al., 2013). Resilience helped the individual develop the personality characteristics better and also the healthy psychological abilities of the person. It increased the capability of a person to perform in a good way according to the environmental changes and to cope with the stress full situations of life in a better way (Perna et al., 2012).

In the process of aging life satisfaction is also disturbed (Clark, 2007). Satisfaction with life changes according to the period it is the continuing process of aging. Physical wellness and success in aging were for a short period so that in the age of oldest they feel depressed and weak. The satisfaction of life is also disturbed the physical fitness of older individuals (Baltes & Simith, 2003). Such factors that affect the life satisfaction of older individuals such economic weak, the hardest situations of life, and the support of society and community (Borg, Hallbergir, & Blomqvist, 2006; Khan, 2014), the positive changes and development are also effect on outer factors such as community and household members and in a different situation (Luthar et al., 2000; Masten 2001). In other research, the concept of the process of aging has a positive effect on psychological health and life satisfaction (Wurm et al., 2008).

In Pakistan society, in such a region, the existing standards and stereotypical assumptions have been different now a day. In our community, they welcomed the separated family system (Gull & Dawood, 2013).

In those days the shelter houses gave shelter to that individual who did have not any kind of shelter and support from their families. The thought of institutionalization move from another country and spread to Asian countries (Devi & Roopa, 2013). The older individuals experience they are satisfied with their lives as per living in shelter homes and living with their families. The elderly who live in homes are too much satisfied with life as well as people who lived in older age shelter homes (Gueldner et al. 2001).

## **Literature Review**

Hayat and Sadia (2016) examined common sense, resilience, and satisfaction in the life of individuals who are living in older resident institutes and those who lived in homes. This study concluded that resilience and common sense were critically affected the satisfaction of the life of older adult persons. Cosco et al. (2017) researched psychological characteristics and physical assessment of older individuals with successful aging. And resilience and unhappiness were positively associated with each other for successful aging and also affected older individuals' physical health. This study's finding was that ego resilience increased and depression decreased with growing age. Merchant et al. (2022) conducted a study on the living standard of older persons who lived in domestic setups. This study identified that older adults living with their families spent healthy and decent life than aged person living in shelter homes.

Dahlberg and McKee (2018) identified in their study on elderly adults in rural and urban. Participant's well-being and community services were used who were living in residential areas of London. The satisfaction with life related to their wellness and community facilities in homes were also taken into consideration. This study concluded that elderly adults who used these facilities living in homes were more satisfied as compared to inhabitants who had no access to these kinds of services. Puvill et al. (2016) researched bodily health and satisfaction of life of older age persons. This research concluded that satisfied from life is positively concerned with the health span of elderly people and it also changes with different periods in life.

De Paula et al. (2011) identified the bodily and psychological health of the oldest people and their everyday trials of life. They found a traumatic life incident that badly affected the bodily and mental health of the oldest individuals. Resilience helped the elderly to cope with traumatic circumstances of life and their effect on individuals positively in stress and health.

Azeem et al. (2015) conducted this study on resilience, sadness, and feeling of worry for older inhabitants who lived in institutions and non-institutional setups. It was seen that the oldest females faced higher level of depression and worry than as oldest males. The level of resilience was more in the oldest male as compared to the oldest females. James et al. (2014) conducted this study on older persons to elaborate their experiences, challenges, changes, and implications for the betterment of everyday life in shelter homes. This study found a positive relationship between betterment of daily life and older adult's existence in shelter homes. As they grew older they spent their life more freely and their life becomes important to them.

Bothra et al. (2011) researched psychosocial issues such as sorrow and place adjustment of older people either living in homes and old homes, partner bonding, or generativity. They concluded that there was a positive relationship between these variables elderly individuals' both males and females and also it supported to maintain the positive old life process.

Sreelekha and Sia (2022) investigated the connection among solitude and mental well-being and investigated the fact that demise fretfulness arbitrates the link between isolation and mental well-being of elderly people in India. According to them there was an important indirect influence of aloneness on cognitive health under the effect of death worry.

According to Hayat, Khan and Sadia (2016) there found a positive linkage between resilience, ego, wisdom and life satisfaction of aged adults. The wisdom and satisfaction with life was appeared to be greater in aged people living in homes than people living in institutions. The outcomes discovered that resilience facilitated the connection between perception and life gratification in aged grown-ups living with relatives.

## **Hypotheses**

There found be a significantly no difference between life satisfaction and aged adults.

The life satisfaction of aged both males and females will be same while living with families and in old homes

The ego resilience of elderly adults living with families and in old homes will be the same.

Elderly adults' resilience and life satisfaction will be different as per age-wise.

## **Theoretical Framework**

The Erikson (1950) presented the psycho-social development theory which is based on 8 levels of psychological and social development. These stages defined the bad and good experiences of life and also explained the effects on personality development. He elaborated on the older physical, psychological, and sociological changes they faced at this age. The theory psycho-social development theory was selected because this theory related to human psycho and environmental social development. So human psycho plays a vital role in the resilience and life satisfaction of the individual because how a person handles and copes with any traumatic circumstance also performs a role in life satisfaction. If the human brain is satisfied with any circumstances, or goals of life and involves in different kinds of activities the individual's satisfaction with life becomes higher and increases day by day. In this theory researcher selected two stages that are helped to explain resilience, life satisfaction, and aging. Firstly generativity stage is the stage of accomplishment. In this seven-level, individuals engage in different kinds of activities, goals they achieve, creativity, productivity and assume new ideas of whole life. The person accepted the good and bad changes in life, these kinds of changes are an effect on human life and the positive changes helped the individuals to spend successful aging. Secondly ego integrity versus despair stage in this eight-stage they thought about the full life and identified how humans are satisfied and not satisfied with life. At the oldest age, how do individuals spend their life satisfied or not if their life experiences are not satisfied positive resilience helped the person in older age to cope with the hardest situations.

The researcher conducted this study because there is not too much literature exists on this topic. Previous studies were conducted on resilience, wisdom, and life satisfaction of older individuals living with families and in old age homes in developed nations but the present study was conducted in different under developed areas because people of different areas having their different perspectives and different ethical and moral values and also having a different experience of life. The environment of houses and shelter homes of different areas and the living standard was very important to make the difference in the level of resilience and satisfaction from the life of the oldest individuals.

## **Material and Methods**

In the present study cross sectional quantitative research design was used. The study was conducted through a survey method. Data was compiled in two different categories such as Group A: Old age homes and Group B: Living with families. Snowball sampling was used for the selection of respondents in old age homes as the in-charge of the respective institute suggested the name. And the purposive sampling technique was used for the recruitment of respondents from families. Two structured tools were used to gather important information about older adults' resilience and their life satisfaction. Ego resilience scale by Block and Kremen (1996) and the Life satisfaction scale by Diener et al., (1985) were used to gather data from the respondents. The questionnaire was based on Likert scale points. The reliability of the Ego Resilience Scale was .81. However, the Satisfaction with Life scale was .87 (Hayat, Khan and Sadia, 2016). In the present study, the reliability of both scales was .83 for ego resilience scale and the Satisfaction with Life Scale was .69.

Data was gathered from the city of Lahore. The study sample comprised of 300 (150 males and 150 females). Data was collected from diverse shelter homes (75 males and 75 females) and various families (75 males and 75 females). After informed consent was taken from respondents then questionnaires were filled. The researchers filled out the questionnaire from different old homes and different families. The confidentiality and anonymity of the respondents were maintained in the process of collecting information.

## **Data Analysis**

Data were analyzed by SPSS 21 and two statistical tests were used to test the hypothesis such as the Independent sample t-test and One-Way-ANOVA.

## Results and Discussion

The hypotheses were tested with an independent sample t-test to check the resilience and life satisfaction of elderly individuals who live in old residents and living in homes and also indicate the resiliency and satisfaction with life in men and women. One-way ANOVA was used to check the resilience and life satisfaction according to age-wise in older individuals. Demographics of participants are described in table 1 and descriptive statistics of scales elaborate in table 2

For elderly adults who live in old homes, their mean of life satisfaction was  $26.03 \pm 7.645$  and those who lived with families were  $28.06 \pm 6.227$ . The p-value of life satisfaction of individuals who lived in old homes and living with families was 0.012 (table-3). The resilience of older persons' means value of old residents is  $42.23 \pm 10.456$  who live in houses  $42.15 \pm 7.453$ . The p-value of the resilience of older homes persons and who lived in homes was .939 (table 4). For older individuals, men and women who lived in older houses mean value of men was  $42.32 \pm 11.443$  and for females,  $42.15 \pm 9.444$  p-value of the resilience of men and women who lived in older homes was .920 and the life satisfaction mean was male  $26.28 \pm 7.969$ , and females  $25.79 \pm 7.353$  p-value of life satisfaction men and women who living in old homes was .694 (table 5) and individuals who are living in houses their resilience of men and women mean value was  $42.23 \pm 7.816$  and female  $42.08 \pm 7.122$  p-value of resilience male and female who live in families was .905 and life satisfaction mean was in male  $28.55 \pm 6.749$  females  $27.57 \pm 5.662$ . the p-value of satisfaction with life for males and females who live in houses was 0.340 (table 6). Older individuals with age-wise difference, the p value of resilience 0.070 and life satisfaction p value was 0.506 (table7).

**Table 1**  
**Demographics of the respondents (n=300)**

Variables	Frequency (Percentage)	Frequency(Percentage)
	Old Homes	Living with families
<b>Gender</b>		
Male	75(50%)	75(50%)
Female	75(50%)	75(50%)
<b>Job-status</b>		
Employed	81(54%)	79(52.7%)
Unemployed	69(46%)	71(47.3%)
<b>Income status</b>		
Low income	132(88%)	137(91.3%)
High income	18(12%)	13(8.7%)

**Table 2**  
**Descriptive Statistics of Scales Old Age Homes**

Scale	No of items	Mean	Minimum	Maximum	SD
Ego resilience	14	42.23	17	56	10.45
Satisfaction with Life	5	26.03	8	35	7.64
<b>Living with families</b>					
Ego resilience	14	42.15	20	56	7.45
Satisfaction with Life	5	28.06	5	35	6.22

**Table 3**  
**Independent t test to measure difference between aged people living in institutions and homes with satisfaction level**

Scale	older homes (n=150)	living in houses (n=150)	95% CI of the difference
-------	------------------------	-----------------------------	-----------------------------

LS	M	SD	M	SD	t(df)	LL	UL	P
	26.03	6.22	28.06	7.645	-2.517(286.287)	-3.611	-.442	.012

LS=life satisfaction

Table 3 explained that there was a significant mean difference found among satisfaction with life of older inhabitants who lived in old houses and who lived with families  $t = -2.517(286.287)$ , It was found to be more for aged living with families at  $p < 0.05$ .

**Table 4**  
**Independent t test to measure difference between aged people living in institutions and homes with resilience**

Scale	older homes (n=150)		living in houses (n=150)		t(df)	95% CI of the difference		P
	M	SD	M	SD		LL	UL	
ER	42.23	10.456	42.15	7.453	.076(296.329)	-1.984	2.144	.939

ER=Ego Resilience

In this table 4 results showed that there is no significant mean difference found in ego resilience of people who lived in old residents and who lived at homes  $t = .076(296.329)$ ,  $p > 0.05$ . The mean value indicated the minor difference in both residents' individuals.

**Table 5**  
**Independent t test to measure difference between aged people living in institutions with resilience and life satisfaction**

Scale	older homes (n=150)		living in houses (n=150)		t(df)	95% CI of the difference		P
	M	SD	M	SD		LL	UL	
OH	26.03	6.22	28.06	7.645	-2.517(286.287)	-3.611	-.442	.012

"OH= Old houses, R=Resilience and LS=life satisfaction"

The results revealed in table 5 that there was no statistical difference found in the resilience of males and females of old houses  $t = .101(148)$ ,  $p > 0.05$  and non-significant difference in male and female and satisfaction with life  $t = .394(148)$ ,  $p > 0.05$ . The Mean indicated that there was a slight difference in both gender resilience and satisfaction with life.

**Table 6**  
**Independent t test to measure difference between aged people living in families with ego resilience and life satisfaction**

LWF	Male (n=75)		Female (n=75)		t(df)	95% CI of the difference		P
	M	SD	M	SD		LL	UL	
R	42.23	7.816	42.08	7.122	.120(148)	2.266	2.560	.905
LS	28.55	6.749	27.57	5.662	.957(148)	-1.037	2.984	.340

"LWF= living with families, ER=Ego Resilience and LS =life satisfaction"

Table 6 result concluded that there is no significant difference in the resiliency of men and women who lived in residence areas  $t = .120(148)$ ,  $p > 0.05$ , and older individuals of both genders are satisfied from life  $t = .957(148)$ ,  $p > 0.05$ . There is a minor difference in the mean of both men and women resilient and satisfactory in life.

**Table 7**  
**One Way Anova to measure difference between Age of aged people with ego resilience and life satisfaction**

	SS	df	MS	F	P
ER	437.106	2	218.553	2.690	.070
SWF	67.711	2	33.855	.683	.506

"ER=Ego Resilience and SWF=Satisfaction with life"

According to table 7 results showed that there is no age-related difference significant existed in resilience  $F(2,297) = 2.690, P>.05$  and life satisfied  $F(2,297) = 683, P>.05$  of older persons.

## Discussion

This study was conducted on the resilience and life satisfaction of elderly adults living in old age homes and living with families. The first hypothesis of this study found a significant relationship between older adults' satisfaction with the life lived in shelter houses and families. Such outcome was supported by study conducted by fox et al. (2017), they believed that shelter houses must improve their environment that could give life satisfaction to the older adults, who if satisfied with their life in old homes' environment, will be encouraged to do their life activities and meet with their friends and family. The outcomes are in line with study of Park and Kang (2022) who believed that life satisfaction is greatly linked with domestic environment, if it is good, then aged people will be more satisfied with life. Another research by Dubey, (2011) recommended that elderly individuals who lived in old houses were not satisfied with life because they felt that they become a liability for others. In the present study older persons who lived in old homes, their life satisfaction was not good as compared to those who lived in families. Females living in homes are more satisfied and adopted a positive behavior towards environment as compared to men. Aged adults who lived in homes and infirm homes, their relationships with the community and satisfaction with life were different from each other's.

The second hypothesis of this study was that resilience of elderly males and females will be difference while living with families and in old homes. Hayat & Sadia (2016) believed that resilience and wisdom were related to the satisfaction of the life of older inhabitants. Older people who lived in families their resilience, wisdom, and satisfaction from life was good as compared to those who lived in old residents. In the present study in both males and females and differences were found in resilience. This finding is in line with Merchant et al. (2022), they found that older persons who lived in domestic setups spent healthy and decent life than aged person living in shelter homes. Cosco et al. (2017) believed that resilience and unhappiness were positively associated with each other for successful aging and also affected older individuals' physical health. De Paula, (2011) stated that stressful life situations affected badly the mind and physical health of the oldest. In the circumstances, resilience helped the older to cope with the traumatic circumstances, and resilience affected positively individuals in stressed situations and makes them healthy.

The third hypothesis was based that resilience and live satisfaction of older people living in domestic setups was even different. There was no difference found between two. Aged people were satisfied with their life and showed resilience to overcome many issues related to their health and economy.

The fourth hypothesis of this study was elderly adults' resilience and life satisfaction will not be different according to age-wise. It was contrary to the finding of Perna et al. (2012) who found a strong resilience among aged people above 70 years of age. According to Beutel (2010), age groups are not considered the satisfaction of life in humans so their resilience level reacts to their psyche in a good or bad way. In that case, if an individual was economically and financially strong, good house care, does a job, and has better physical

health as their resilience effect is positive, and satisfaction with life increased. At the oldest age if an individual is free from stress and depression and has all resources then they are satisfied with life and their difficult circumstances positive resilience helps older individuals to cope with the situation.

### **Conclusion**

The researcher concluded that older who lived in old age homes become more sensitive and emotional. And the individuals wait for their offspring and they thought one day their children or any family member come and they go from this shelter home. And older who lived with families think they are not independent now a day and dependent on their families. They pass their time in such activities. And the finding of the study no difference was originated in the resilience and life satisfaction of older who lived in old houses and with families. And the life satisfaction level was greater in people who live in houses and decreased in individuals who live in old houses. And the resilience level was similar in both residents older.

### **Recommendations**

There is limited literature found on this topic and in our Pakistani society, there needs to do more work. Government provides psychological counselors who counsel older who are lived in old homes. The psychologist counselor makes them positive individuals. Govt. gain profit from the job experiences of older in a different fields so that they earn money from this initiative and spent their life independently. The older adults teach the coming generation and make a healthy nation.



## Reference

- Azeem, F., & Naz, A. M. (2015). Resilience, death, anxiety, and depression among institutionalized and non-institutionalized elderly. *Pakistan Journal of Psychological Research*, 30(1), 111-130.
- Baltes, M.M. & Smith, J. (2003). New Frontiers in the Future of Aging: From Successful Aging of the Young Old to the Dilemma of the Fourth Age. *In: Gerontology*, 49, 123– 135.
- Beutel, M. E., Glaesmer, H., Wiltink, J., Marian, H., & Brähler, E. (2010). Life satisfaction, anxiety, depression and resilience across the life span of men. *The Aging Male*, 13(1), 32-39.
- Borg, C., Hallbergir, I. R., & Blomqvist, K. (2006). Life satisfaction among older people (65+) with reduced self-care capacity: The relationship to social, health and financial aspects. *Journal of Clinical Nursing*, 15, 617- 618.
- Bothra, N., & Dasgupta, M. (2011). A comparative psychosocial study of selected elderly groups in the canvas of successful aging. *Perception of social change among the elderly*, 2.
- Chakwal. (2011). Pakistan. *Academic Research International*, 1(3), 149-155. Retrieved from [http://www.savap.org.pk/journals/ARInt./Vol.1\(3\)/2011\(1.3-16\).pdf](http://www.savap.org.pk/journals/ARInt./Vol.1(3)/2011(1.3-16).pdf)
- Clark, A.E. (2007). *Born to be Mild? Cohort Effects Don't (Fully) Explain Why Well-being is U-shaped in Age*. IZA Working Paper No. 3170.
- Cosco, T.D., Kaushal, A., Hardy, R., Richards, M., Kuh, D., & Stafford, M. (2017). Operationalizing resilience in longitudinal studies: a systematic review of methodological approaches. *J Epidemiol Community Health*, 71(1), 98–104. <https://doi.org/10.1136/jech-2015-206980>.
- Cosco, T.D., Kaushal, A., Hardy, R., Richards, M., Kuh, D., & Stafford, M. (2017). Operationalizing resilience in longitudinal studies: a systematic review of methodological approaches. *J Epidemiol Community Health*, 71(1), 98–104. <https://doi.org/10.1136/jech-2015-206980>.
- Dahlberg, L., & McKee, K.J. (2018). Social exclusion and well-being among older adults in rural and urban areas. *Archives of Gerontology and Geriatrics*, 79, 176-184. <https://doi.org/10.1016/j.archger.2018.08.007>.
- Dawane, J., Pandit, V., Rajopadhye, B. (2014). Functional assessment of the elderly in Pune, India: Preliminary study. *Journal of Gerontol Geriatric Research*, 3(3), 155-156. doi:10.4172/2167-7182.1000155
- De Paula Couto, M. C. P., Koller, S. H., & Novo, R. (2011). Stressful life events and psychological well-being in a Brazilian sample of older persons: The role of resilience. *Ageing International*, 36(4), 492-505.
- Devi, L., & Roopa, K. S. (2013). Quality of life of elderly men and women in institutional and non-institutional settings in urban Bangalore district. *Research Journal of Family, Community, and Consumer Sciences*, 1(3), 7-13.
- Dubey, A., Bhasin, S., Gupta, N., & Sharma, N. (2011). A study of elderly living in old age homes and within family set-ups in Jammu. *Studies on Home and Community Science*, 5(2), 93-98.

- Farquhar, M. (1995). Elderly people's definitions of quality of life. *Social science & medicine*, 41(10), 1439-1446.
- Fox, S., Kenny, L., Day, M.R., O'Connell, C., Finnerty, J., and Timmons, S. (2017). Exploring the Housing Needs of Older People in Standard and Sheltered Social Housing. *Gerontol Geriatr Med*, 3, 2333721417702349. [https://doi: 10.1177/2333721417702349](https://doi.org/10.1177/2333721417702349). PMID: 28491914; PMCID: PMC5406190.
- Golant, S. M. (1986). The influence of the experienced residential environment on old people's life satisfaction. *Journal of Housing for the Elderly*, 3(3-4), 23-50.
- Gueldner, S. H., Loeb, S., Morris, D., Penrod, J., Bramlett, M., Johnston, L., & Schlotzhauer, P. (2001). A comparison of life satisfaction and mood in nursing home residents and community-dwelling elders. *Archives of Psychiatric Nursing*, 15(5), 232-240.
- Gull, F., & Dawood, S. (2013). Religiosity and subjective well-being amongst institutionalized elderly in Pakistan. *Health Promotion Perspectives*, 3(1), 124-128. doi:10.5681/hpp.2013.014.
- Gulzar, F., Zafar, I. M., Ahmad, A., & Ali, T. (2008). Socioeconomic problems of senior citizens and their adjustment in Punjab, Pakistan. *Pakistan Journal of Agricultural Science*, 45(1), 138-144
- Gwozdz, W., & Sousa-Poza, A. (2010). Aging, health and life satisfaction of the oldest old: An analysis for Germany. *Social Indicators Research*, 97(3), 397-417.
- Hayat, S. Z., Khan, S., & Sadia, R. (2016). Resilience, Wisdom, and Life Satisfaction in Elderly Living with Families and Old-Age Homes. *Pakistan Journal of Psychological Research*, 31(2), 475-494
- Hayat, S.Z., Khan, S., & Sadia, R. (2016). Resilience, Wisdom, and Life Satisfaction in Elderly Living with Families and In Old-Age Homes. *Pakistan Journal of Psychological Research*, 31(2), 475-494.
- Jalaal, S., & Younis, Z. M. (2012). Aging and elderly in Pakistan. *Ageing International*, 39(2), 4, 12. [https://doi:10.1007/s12126-012-9153-4](https://doi.org/10.1007/s12126-012-9153-4)
- James, I., Blomberg, K., & Kihlgren, A. (2014). A meaningful daily life in nursing homes—a place of shelter and a space of freedom: a participatory appreciative action reflection study. *BMC nursing*, 13(1), 19
- Jeste, D. V., Savla, G. N., Thompson, W. K., Vahia, I. V., Glorioso, D. K., Martin, A. V. S., & Depp, C. A. (2013). Association between older age and more successful aging: critical role of resilience and depression. *American Journal of Psychiatry*, 170(2), 188-196.
- Khan, S. (2014). *Comparison of perceived social support and quality of life in older adults living with families and in an old-age home*. (Unpublished M.Sc. Research Report). National Institute of Psychology, Quaid-i-Azam University, Islamabad, Pakistan.
- Luthar SS, Cicchetti D, Becker B (2000) The construct of resilience: a critical evaluation and guidelines for future work. *Child Dev*, 71(3), 543–562
- Masten A (2001) Ordinary magic: resilience processes in development. *Am Psychol*, 56(3), 227-238

- Merchant, R.A., Aprahamian, I., Woo, J., Vellas, B., Morley, J.E. (2022). Editorial: Resilience and Successful Aging. *J Nutr Health Aging*, 26(7), 652-656.
- Mitchell, J. M., & Kemp, B. J. (2000). Quality of life in assisted living homes: A multidimensional analysis. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 55(2), P117-P127.
- Park, J.H., & Kang, S.W. (2022). Factors Related to Life Satisfaction of Older Adults at Home: A Focus on Residential Conditions. *Healthcare (Basel)*, 10(7), 1279.
- Perna, L., Mielck, A., Lacruz, E. M., Emeny, T. R., Holle, R., Breitfelder, A., & Ladwig, H. K. (2012). Socioeconomic position, resilience, and health behavior among elderly. *Public Health*, 57, 341-349. <https://doi:10.1007/s0003801102940>
- Puvill, T., Lindenberg, J., de Craen, A.J.M., Slaets, J.P.J., Westendorp, R.G.J. (2016). Impact of physical and mental health on life satisfaction in old age: a population based observational study. *BMC Geriatr* 16, 194
- Sabzwari, R. S., & Azhar, G. (2010). Aging in Pakistan: A new challenge. *Ageing International*, 36(4), 423-427. doi: 10.1007/s12126-010-9082-z
- Sreelekha, N. and Sia, S.K. (2022). Loneliness and psychological well-being among community-dwelling elderly people: the mediating role of death anxiety. *Working with Older People*, 26 (4 ), 374-386. <https://doi.org/10.1108/WWOP-08-2021-0042>
- United Nations. (2002). *World population aging 1950-2050*. New York: Economic and Social Affairs, Population Division.
- Wu, G., Feder, A., Cohen, H., Kim, J. J., Calderon, S., Chamey, D. S., & Mathe, A. A. (2013). Understanding resilience. *Frontiers in Behavioral Neuroscience*. <https://doi:10.3389/fnbeh.2013.00010>
- Wurm, S., Tomasik, M.J., & Tesch-Romer, C. (2008). Serious health events and their impact on changes in subjective health and life satisfaction: the role of age and positive view on aging. *Eur J Ageing*, 2(5), 117-127