

## **Determinants of gender differences in life satisfaction among Filipino older persons**

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Findings from the 2007 Philippine Study on Aging (PSOA) indicate a significant gender difference in the life satisfaction among older Filipinos ages 60 years and over. While there is a tendency towards an average self-assessed life satisfaction, women are more likely to exhibit higher levels of satisfaction than men (Cruz G. T., Natividad, J.N., Gonzales, M.L., and Saito, Y., 2016). Factors explaining this observed gender gap remain unclear owing to the limited studies on the older population in the country.

A review of related literature, however, indicates the profound impact of various socio-economic and health factors on the elderly's life satisfaction although the relationships, nature and direction vary across studies. The association of age with lower levels of psychological and physical wellbeing is found to negatively affect the life satisfaction of older adults ages (Meléndez et al., 2009). In terms of the gender differences of life satisfaction among older persons, Ferring et. al. (2010) found that men tend to have a slightly higher life satisfaction than their female counterpart. Other studies (Chipperfield and Havens, 2001) suggest that men and women experience different patterns in terms of the effect of marital status to their life satisfaction. For instance, men tend to have an increasing life satisfaction in late life with the presence of spouse. However, the life satisfaction of women is said to be decreasing if they remain married and when they become widows, this despite of the women's notable social interaction. The authors also reasoned that women's dissatisfaction with life may be influenced by other factors associated with growing old in contemporary society. Widowhood has a negative association with life satisfaction with married older persons having higher levels of life satisfaction than 'nonmarried' individuals (Hsu, 2012). Living arrangement is also found to have a direct and indirect relationship in predicting the life satisfaction of older persons. Living alone is associated with lower life satisfaction (Kooshar et. al., 2012).

Other social demographic variables such as income, living arrangement, and level of activity participation have profound impact on life satisfaction (Chen, 2001). In particular, financial strain is found to constrain life satisfaction among older adults particularly in economically underdeveloped countries. Others note no clear direction in the relationship between financial strain and life satisfaction, but they noted that the relationship 'may be reciprocal' (Li, Aranda, & Chi, 2007). Older persons with a higher educational attainment tend to have higher life satisfaction (Enkvist et.al., 2002; Heo & Cho, 2008; Lee & Lee, 2013). In mainland China, urban older adults are found to have higher life satisfaction than their rural counterparts (Li, et al., 2014). Health indicators, particularly physical functioning, are likewise found to be strong predictors of life satisfaction.

### *Study objectives*

In the Philippines, where aging studies are relatively at its early stage, studies focusing on life satisfaction in later life have not received as much attention. To address the current gap and contribute to the Philippine literature on older persons in general, the study will assess the factors affecting gender differences in life satisfaction among older Filipinos. In particular, the study aims to: (1) determine the gender differences in life satisfaction among Filipino older people and the extent of change between 2007 and 2018 and (2) assess the influence of socio-demographic and functional health status on the life satisfaction by sex.

### *Data and methodology*

The study uses two national data sets on older Filipinos: the 2007 Philippine Study on Aging (PSOA) and the 2018 Longitudinal Study on Aging and Health in the Philippines (LSAHP). The 2007 PSOA is the second nationally representative survey of older persons (aged 60 and over) in the Philippines

conducted by the University of the Philippines Population Institute (UPPI) in collaboration with the Nihon University Population Research Institute (NUPRI). The study was designed to investigate the health status and wellbeing of the Filipino older persons and its possible correlates and determinants. The study yielded 3,105 respondents with a response rate of 94.4 percent (For a fuller discussion of the study design and sampling procedure, please refer to the project report (Cruz G. T., Natividad, J.N., Gonzales, M.L., and Saito, Y., 2016).

The 2018 LSAHP is the third nationally representative sample of older Filipinos and is the baseline for the longitudinal study on older Filipinos. The 2018 LSAHP is designed to be the first nationally representative longitudinal study on aging to be conducted in the country and will cover a nationally representative sample of 6,022 respondents aged 60 years and over living in community dwellings. Data gathering is ongoing and completion is expected by December 2018. The 2018 LSAHP is a multi-level and multi-actor data that collects information from the older respondent, as well as that of the children and caregiver of the older person to allow for an assessment and cross validation of findings across generations.

In the study, life satisfaction is derived from the question: "Are you satisfied with your present life?" Response categories are: Yes, very satisfied; Yes, somewhat satisfied; and No, not satisfied. Independent variables include: age, access to healthcare (% with Health insurance), socio-economic status (poor or non-poor), educational attainment (number of years of formal schooling), type of place of residence (urban or rural), living arrangement (if co-residing with one child or not) and marital status (currently in union or not in union). Functional health indicator, using activities of daily living (ADL) is also considered as a possible determinant of life satisfaction.

For the determinants analysis, multinomial logistic regression (MLR) and multiple classification analysis (MCA) are employed. The two data sets will be merged with time (2007 and 2018) treated as an independent variable. The analysis will be done separately for males and females to compare differences if any, on the factors influencing self-assessed life satisfaction.

### *Findings*

The following findings show the results of the MLR and MCA using the determinants analysis of the life satisfaction by sex using the 2007 PSOA. This initial finding will be updated using the merged data of the 2007 PSOA and 2018 LSAHP when the latter data will be available.

Findings indicate similar significant predictor variables of life satisfaction for both males and females. Significant determinants include access to health care, place of residence and functional health status (Table 1). Age, SES, education, living arrangement and marital status do not show significant influence. In particular, results show that controlling for the other variables in the model, those who have better access to health care indicated by their having a health insurance coverage is associated with increased likelihood of life satisfaction in old age compared to those with no health insurance. Among the males for example, 37.8 percent of those with health insurance are very satisfied with their life as compared to 30.3 percent for their counterparts with no health insurance. The corresponding figures for their female counterparts are 45.0 and 34.1 percent, respectively which are higher relative to their male counterparts. About 16 percent of males with no health insurance declared they are not satisfied with their life as compared to 11 percent for the females.

For both male and female elders, rural residence is associated with greater self-assessed life satisfaction. Rural males are most satisfied with their life with 38.2 percent who are very satisfied compared to 40.4 percent for the rural females. Urban men have the greatest proportion who are not satisfied with their life (21.1%).

Functional ability is a significant determinant of life satisfaction with those having no functional difficulty more likely to be satisfied with life compared to their counterparts with functional difficulty.

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Table 1: Predicted probabilities of life satisfaction by socio-demographic and health determinants according to sex, 2007 PSOA

SOCIO-DEMOGRAPHIC AND HEALTH DETERMINANTS	LIFE SATISFACTION									
	MALE					FEMALE				
	Yes, very satisfied	Yes, somewhat satisfied	No, Not satisfied	N cases	Sig	Yes, very satisfied	Yes, somewhat satisfied	No, Not satisfied	N cases	Sig
AGE										
60-69	32.9	52.2	14.9	854		35.0	55.6	9.4	1031	
70-79	28.3	58.4	13.3	334	n.s.	35.5	52.6	11.9	538	n.s.
80+	33.7	52.1	14.3	100		37.4	50.8	11.8	243	
Access to health care										
NO	30.3	53.6	16.1	1038		34.1	54.6	11.3	1588	
YES	37.8	54.5	7.7	250	***	45.0	50.5	4.4	225	***
Socio-economic status										
POOR	33.9	54.6	11.5	470		35.4	55.0	9.6	693	
NON-POOR	30.5	53.3	16.2	819	n.s.	35.5	53.5	11.0	1119	n.s.
Education										
ELEMENTARY & BELOW	30.44	55.49	14.1	867		32.5	57.2	10.3	1220	
HIGH SCHOOL & HIGHER	34.5	50.3	15.2	421	n.s.	41.6	47.6	10.8	593	***
Type of residence										
RURAL	38.2	54.2	7.6	635		40.4	51.7	7.9	729	
URBAN	25.5	53.4	21.1	653	***	32.1	55.7	12.2	1084	***
Living arrangement										
NOT LIVING WITH ANY CHILDREN	29.9	54.9	15.2	341		38.5	52.2	9.3	556	
LIVING WITH AT LEAST ONE CHILD	32.5	53.4	14.2	947	n.s.	34.1	54.9	11.0	1257	n.s.
Marital status										
NOT IN UNION	34.4	48.1	17.6	269		35.4	53.5	11.2	1057	
IN UNION	31.1	55.3	13.6	1019	n.s.	35.6	54.9	9.4	755	n.s.
Activities for daily living (ADLs)										
NO DIFFICULTY	34.3	53.0	12.7	1136		38.8	53.5	7.7	1491	
WITH AT LEAST ONE DIFFICULTY	12.6	59.7	27.8	152	***	20.0	56.7	23.3	322	***

\*\*\*p-value < .01

n.s. - not significant