Self-Esteem, Coping Strategy, and Social Support as Correlates of Life Satisfaction among Middle-Aged Malay Women

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ABSTRACT
Women in their middle age hold different challenging roles as a mother, a wife, a daughter, a grandmother, and career-wise, as a worker or an employee. They encounter a diversity of expectations and burdens, while their psychological and physical health is at risk because of the hormonal changes and aging process that they have to go through. Social support, coping strategies, and self-esteem may equip middle-aged women to face changes and challenges in this phase of life, and thus achieving life satisfaction. This study presents the preliminary study of the relation between self-esteem, coping strategy, social support, and life satisfaction among middle-aged Malay women in Kuala Lumpur. By employing the purposive sampling, 38 working and non-working women were selected to participate in this study. This study utilizes the MOS Social Support Survey, The Rosenberg Self-Esteem Scale, Coping Strategies Inventory Short-Form, and Life Satisfaction Index (z). The analysis of the Pearson Correlation showed that self-esteem correlated at \( r = 0.667 \), \( p < 0.001 \), coping strategy at \( r = 0.562 \), \( p < 0.001 \), and social support at \( r = 0.341 \), \( p < 0.05 \) with life satisfaction. Therefore, we have been able to gather that high self-esteem, good social support and positive coping strategy are the elements which promote life satisfaction. Once all of these elements are in excellent condition, life satisfaction is also at its peak. Women can gain life satisfaction by improving these three important aspects of their lives. Social workers, counselors, and policy makers can benefit in planning programs which can enhance the life quality of middle-aged women.

Keywords: Life satisfaction, self-esteem, coping strategy, social support, middle aged women

INTRODUCTION
Apart from subjective well-being and happiness, life satisfaction is among the most
popular measurements of psychological well-being. It can be assessed specifically to either specific or global domain. Life satisfaction is not only one’s evaluation towards his/her life, but it is also one’s recognition, gratitude, appreciation, and optimism towards their lives. Life satisfaction has been defined as an individual’s overall assessment towards their quality of life, including the perception that they are progressing towards achieving important goals of life (Diener et al., 1999). Research suggests that people’s perception of their life satisfaction is due to comparisons that they make between what they have, what others have, and what they wish to have (Sousa & Lyubomirsky, 2001).

Most studies on life satisfaction have not been directly focused on the experiences and perceptions of women. Only few studies have explored the unique predictors of life satisfaction among women. For example, researches have shown that, education level (Shichman & Cooper, 2004), equal opportunity to education (Sousa & Lyubomirsky, 2001), personal income (Jan & Masood, 2008; Shichman & Cooper, 2004), religiosity (Park et al., 2011; Saundra & Hughey, 2003), and marriage (Kousha & Moheen, 2004; Shichman & Cooper, 2004) have all predicted life satisfaction among women.

The current study focuses on middle-aged women as middle age is an episode which is overwhelmed by expectations and constraints. The psychosocial theory of Erik Erikson regards this stage as a phase of changes and stress (Feldman, 2008). Middle age is the period of generativity versus stagnation, depending on crisis resolution before entering the stage. Middle-aged adults are expected to train, educate, guide, and lead the younger generation with the knowledge, skills, and values. Successful middle aged adults can contribute to the betterment of their family and the society based on their precious past experiences (Feldman, 2008).

In this phase of life, middle-aged women are undergoing physical, cognitive, social, and emotional changes. They may make changes in the meaning and purpose of life after encountering various experiences. Their perspectives towards religion or spirituality may also become altered. These changes can indirectly affect the perceptions towards life satisfaction or well-being (Santrock, 2011). They tend to consider different options and alternatives, choose what to do, decide on how to spend time and resources, and re-assess all aspects of life. They will also tend to reflect on where they have been and what they have done in life.

It is also considered as a phase of emptiness and depression. Middle-aged women have been reported to face the empty nest syndrome, intergenerational conflict, hormonal changes as the effect of perimenopause and menopause, role conflict, and health problems (Santrock, 2011; Sheehy, 1992). Research conducted in the United States establishes that 26% of the respondents experience mid-life crisis (Wethington et al., 2004). Most of the crises reported are caused by negative life events (such as death of a spouse, divorce, and job loss) which are not the outcome of aging.
Nevertheless, research has also indicated that individuals in their middle age have less psychological disorders (Kessler et. al., 1992), more coping resource availability (Hamarat et. al., 2001) and better health status (Merill & Verbrugge, 1999). Consequently, they are also reported to have higher levels of life satisfaction (Hamarat et. al., 2001). As Vaillant (1977) points out, only the minority of middle-aged adults experience mid-life crisis. This may be due to the social support (Albarracin et. al., 1997), self-esteem (Swartz, 2008), and coping strategy practiced by this generation of adults (Ouwehand et. al., 2008) as it may minimize the impact of life changes.

Self-esteem plays a vital role in helping women and men in their midlife to address the challenges. Claims about the importance of self-esteem in the process of adaptation to aging have always been present. Advancing age and stressful life events can have an effect on middle aged women’s self-esteem (Krause, 1987). Researchers have speculated that stress may have a deleterious effect on the feelings of self-worth among older and middle aged adults. Stress diminishes the feeling of positive self-regard. As Kaplan (1975) argued that feelings of self-worth and positive self-regard are fundamental to the maintenance of psychological well being. He also suggested that the maintenance of positive self-esteem is a major motivational factor in social behavior.

The effect of stress and emotional disorders in middle age can also be relieved by the availability of strong social support. The existence of a person to offer help and support can protect individuals from the effects of illness. Croezen et. al. (2010) claims that social support is associated with decreased mortality in many studies. In reality, studies have shown a strong correlation between physical health, psychological well being, and social support in a healthy population and a population that suffers from chronic diseases such as heart disease, cancer, and diabetes (Thompson & Candace, 2004; Croezen, et. al., 2010; Albarracin et. al., 1997). Individuals were found to be healthier and happier when there is a friend or relative that can be expected to accompany and provide assistance (Albarracin et. al., 1997).

With increasing age, an individual should have more proactive and adaptive strategies. Aldwin et. al. (1996) showed that middle-aged adults practice coping strategies which are more problem-focused (problem-focused coping), than other age groups. Religious beliefs and practices are also believed to be so close to the lives of men and women in middle age. The study shows 70% of middle-aged adults in the U.S. admit that religious and spiritual practice is an important coping strategy in difficult times (Etaugh & Bridges, 2006). The study by Roos and De Jager (2010) found that approaching religion and being active in everyday life were major coping strategies proposed by the elderly. Adopted coping strategies can be influenced by respondents’ age, income, health, and social support.

Therefore, in this transitional period, middle aged women may need to rely heavily on social support for the sense of belonging,
love, and care. Self-esteem provides a unique definition of who they are, despite their noticeable physical deterioration. The coping strategy will prepare them mentally to encounter challenges and changes proactively. However, the questions are; how significant are these components (social support, self esteem, and coping strategy) as they are associated with life satisfaction? Or in other words, do middle aged women with good social support, high self esteem, and proactive coping strategy have excellent life satisfaction? Therefore, the present study attempts to assess the relationship between social support, self esteem, and coping strategy with life satisfaction.

METHOD

This is a preliminary study which employs the quantitative design. The survey method has been used to collect the data. The survey form consists of 5 variables used to gauge the demographic background, social support, self esteem, coping strategy, and life satisfaction. It is a self-administered questionnaire, in which participants are required to spend about 15-20 minutes. Participants were given informed consent forms prior to their participation in the survey process. Participants could withdraw from the study if they were unwilling to cooperate or provide any feedback.

The sample of the study is represented by middle-aged Malay women, living in Kuala Lumpur. The method of sampling used was purposive sampling, as only Malay women with certain characteristics were included in the study. These characteristics include women aged between 40-55 years old, living in Kuala Lumpur for at least 3 years, and mentally healthy. Thus, 38 Malay women were employed as the participants of the study.

<table>
<thead>
<tr>
<th>Instruments</th>
<th>No of item</th>
<th>Scaling of items</th>
<th>Alpha value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The MOS Social Support Survey</td>
<td>17</td>
<td>Never, Rarely, Sometimes, Most of the times</td>
<td>0.97</td>
</tr>
<tr>
<td>(Sherbourne &amp; Stewart, 1991)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Coping Strategies Inventory Short-Form</td>
<td>16</td>
<td>Never, Rarely, Sometimes, Most of the times</td>
<td>0.70</td>
</tr>
<tr>
<td>(Addison, 2007)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. The Rosenberg Self-esteem Scale</td>
<td>10</td>
<td>Strongly Disagree, Disagree, Agree, Strongly Agree</td>
<td>0.83</td>
</tr>
<tr>
<td>(Classen et al., 2007)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Life Satisfaction Index</td>
<td>13</td>
<td>Strongly Disagree, Disagree, Agree, Strongly Agree</td>
<td>0.79</td>
</tr>
<tr>
<td>(Neugarten et al., 1981)</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
The current study utilizes 4 inventories which include the MOS Social Support Survey Sherbourne, Stewart, 1991), The Rosenberg Self-Esteem Scale (Classen et al., 2007), Coping Strategies Inventory Short-Form (Addison, 2007), and Life Satisfaction Index (z) (Neugarten et al., 1961)(please refer to table 1). All inventories are based on a 4-point Likert scale. The statistical analysis used to gain the results of the study is the Pearson Correlation. The latest version of SPSS, which is SPPS 20.0 was employed to process the data. The analysis of the reliability of all scales based on the 38 middle-aged Malay women points to high Cronbach alpha values which range from 0.70-0.97.

RESULTS AND DISCUSSION

Table 2 shows the results of respondents’ socio-demographic characteristics. The analysis of frequency shows that most participants (59.5%) are secondary school leavers. Some of the respondents (35.1%) have a higher educational background, namely Bachelor/Master/PhD degree holders. In terms of their marital status, the majority of them are married (70.3%), 24.3% are widowers, and 5.4% are unmarried. Most of them (89.2%) are reported as healthy based on their perceived health. The majority of respondents (83.8%) are career women, compared to only 16.2% representing the non-working women.

The analysis of the Pearson Correlation shows that self esteem is highly correlated with life satisfaction ($r = 0.667$, $p<0.001$). It is followed by coping strategy ($r = 0.562$, $p<0.001$). Meanwhile, social support is also found to be correlated with life satisfaction with $p<0.01$ (Table 3). This shows that social support, coping strategy, and self-esteem are associated with the life satisfaction of middle-aged Malay working women in Kuala Lumpur. If the level of the variables is high, life satisfaction is also high and vice versa.

<table>
<thead>
<tr>
<th>Socio-demographic characteristic</th>
<th>Categories</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational level</td>
<td>No schooling</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>Primary school</td>
<td>5.4%</td>
</tr>
<tr>
<td></td>
<td>Secondary school</td>
<td>59.5%</td>
</tr>
<tr>
<td></td>
<td>University/College</td>
<td>35.1%</td>
</tr>
<tr>
<td>Marital status</td>
<td>Unmarried</td>
<td>5.4%</td>
</tr>
<tr>
<td></td>
<td>Married</td>
<td>70.3%</td>
</tr>
<tr>
<td></td>
<td>Widower</td>
<td>24.3%</td>
</tr>
<tr>
<td>Health status</td>
<td>Healthy</td>
<td>89.2%</td>
</tr>
<tr>
<td></td>
<td>Unhealthy</td>
<td>10.8%</td>
</tr>
<tr>
<td>Occupation</td>
<td>Working</td>
<td>83.8%</td>
</tr>
<tr>
<td></td>
<td>Non-working</td>
<td>16.2%</td>
</tr>
</tbody>
</table>

TABLE 2
Respondents’ socio-demographic characteristics
versa. Conclusively, women at this age are influenced by these three elements to feel happy and satisfied about their lives.

Social support was also found to be vital to the lives of middle-aged and even older adults. Previous research has established that being healthy, having good social relationships, and having secure personal finance are most important for middle-aged and older adults (Ouwehand et al., 2008). Albarracin et al. (1997) further suggest that both formal and informal social support determine psychological well-being. They improve physical and psychological health and subsequently decrease mortality rates.

Social support is viewed as a buffering mechanism when people, especially adults are in crisis (Nichols, 2009). In social support research, there are two types of support, which are the perceived and received social support (Young, 2006). The present study measures perceived social support among middle-aged women. Perceived social support is measured by asking people the extent to which they believe that social support is available to them. Meanwhile, the received support is a measurement of the actual support received from the network. As asserted by Forjaz (2000), satisfaction with the perceived social support is the aspect that should be measured in research, as research evidence suggests that perceived social support is more significantly related to life satisfaction (Kazarian & McCabe, 1991).

Among cancer patients, social support has promoted their health and helped them fight against depression (Forjaz, 2000). This will consequently improve their well-being and life satisfaction. Furthermore, researches on people with long term mental illness (Young, 2006); people with somatization disorder (Ali et al., 2010); elderly Korean immigrants (Park et al., 2011); adult ostomates (Nichols, 2009); and older adults (Celso et al., 2003) also show that social support is the predictor of life satisfaction.

Consistent with the current findings, the correlation between coping strategy and life satisfaction has also been found by Hamarat et al. (2001), Horstmann et al. (2012), Chan (2004), Dubey and Agarwal (2007), and Chang (2010). They studied middle and older adults and proved that coping strategy was the predictor of life satisfaction. The coping strategy guides middle-aged adults on how to deal with difficult life transitions. As these particular adults face the task of adapting to potential threats related to aging, such as physical health deterioration, financial burden, and sensory problems, the transactional model of stress suggests that coping is a process for dealing with stress that involves an interaction between the

<table>
<thead>
<tr>
<th></th>
<th>Self-esteem</th>
<th>Coping strategy</th>
<th>Social support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life satisfaction</td>
<td>0.667**</td>
<td>0.562**</td>
<td>0.341*</td>
</tr>
</tbody>
</table>

** p < 0.001
* p < 0.01
Self-Esteem, Coping Strategy, and Social Support as Correlates of Life Satisfaction among Middle-Aged Malay Women

individual and his/her environment (Lazarus & Folkman, 1984).

Proactive coping has been found to be the predictor for three measures of well-being; purpose in life, personal growth, and life satisfaction among older Australians (Sougleris & Ranzijn, 2011). Similarly, Hamarat et al. (2001) demonstrate that self-appraisal measures of perceived stress and coping resources effectiveness are predictors of global life satisfaction. Besides, they have found that coping resource effectiveness is a better predictor of life satisfaction among middle and older adults compared to younger adults.

The study of 235 university students at the University of Tehran reveals that Big Five Personality traits and self-esteem can well predict life satisfaction (Joshanloo & Afshari, 2011). Big Five personality traits explain about 25% of the variance in life satisfaction. Among the big five traits, extraversion and neuroticism are found to be the strongest predictors of life satisfaction. Besides that, self-esteem significantly predicts life satisfaction and fully mediates the influence of conscientiousness and agreeableness on life satisfaction. Self-esteem also partially mediates the influence of extraversion and neuroticism on life satisfaction (Joshanloo & Afshari, 2011). This supports the result of the present study on the relationship between self-esteem and life satisfaction.

Those who have lower self-esteem are more prone towards developing depression, anxiety, and practicing external locus control (Kathleen et al., 1981). Research has also revealed that low self-esteem can lead to the worsening of health status, psychological function, and quality of life of older adults (Okomoto & Tanaka, 2004). Furthermore, a research by Moon (2010) strengthens the present finding by advocating that self esteem predicts life satisfaction. He discovered that self-esteem, social support, and sleep patterns have been able to explain 50% of the variance of life satisfaction among adults.

In short, social support, coping strategy, and self-esteem are correlated with life satisfaction among middle-aged working Malay women in Kuala Lumpur. These three elements are fundamental to their lives as they need to confront numerous transitions and challenges in this phase of life.

CONCLUSION

Women in the middle age hold different challenging roles as a mother, a wife, a daughter, a grandmother, and most probably a worker if they are still employed or are working. They have to brave a lot of expectations and shoulder many burdens, while their psychological and physical health is often at risk because of their inevitable hormonal changes and aging process. Thus, women at this stage require an optimal amount of emotional strength to fulfill their responsibilities in the best way possible.

Therefore, high self esteem, good social support, positive coping strategy are the elements which promote life satisfaction. Once all these elements are in excellent condition, life satisfaction is considered to be
at its peak. Women can gain life satisfaction by improving these three important aspects of their lives. This conclusion can be generalized to middle-aged Malay women in Kuala Lumpur. The result of this study can benefit social workers, counselors, and policy makers in planning programs that can enhance the life quality of these women. Counselors at work should pay attention, and work at promoting and educating adaptive coping strategies in middle-aged women Companies or employers can also contribute by celebrating women employee’s contributions and work, by way of endorsing their sense of accomplishment and at the same time, elevating their self-esteem. In a smaller unit, a family may help women at this stage gain happiness and life satisfaction by providing better support for them.

REFERENCES


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