

**Psychological well-being and self-efficacy in institutionalized older adults in Mexico****Bienestar psicológico y autoeficacia en personas mayores mexicanas institucionalizadas****Bem-estar psicológico e autoeficácia em idosos mexicanos institucionalizados**

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ABSTRACT

Introduction: The number of older adults is increasing significantly worldwide, leading to the possibility of institutionalization. This transition can provoke a myriad of situations for this population, making it essential for the nursing profession to address factors such as psychological well-being and self-efficacy among institutionalized older adults. **Objective:** To identify the relationship between psychological well-being and self-efficacy in institutionalized older adults in the city of Puebla. **Methodology:** A descriptive, cross-sectional, correlational study was conducted in an institution for older adults in Puebla. The sample, comprised of 30 participants, was selected by convenience employing a sociodemographic data form, Ryff's Psychological Well-Being Scale, and a self-efficacy scale. The ethical foundation was based on the regulations of *ley general de salud en materia de investigación para la salud* [General Health Law for Health Research]. **Results:** Of the 30 participants, 22 were women (73.3%). A significant proportion of the sample (36.7%) reported having a university education, while 20% indicated reaching only primary education. Regarding marital status, nearly half of the participants (46.7%) were widowed, and only 16.7% were married at the time of the study. Concerning the objective, no statistically significant relationship was found

between the proposed variables. **Conclusion:** Nursing plays a crucial role in developing knowledge for better addressing the needs of institutionalized older adults. Disseminating this research contributes to the body of knowledge in the field.

Keywords: Aged; Health of Institutionalized Elderly; Psychological Well-Being; Self-Efficacy; Nursing.

RESUMEN

Introducción: Las personas mayores están aumentando considerablemente en todo el mundo, esta situación involucra la posibilidad de institucionalización, esta transición puede dar pie a diferentes situaciones en esta población, por lo que es importante que enfermería aborde factores como el bienestar psicológico y autoeficacia en las personas mayores institucionalizadas. **Objetivo:** Identificar la relación que existe entre el bienestar psicológico y la autoeficacia en personas mayores institucionalizadas de la ciudad de Puebla. **Metodología:** Estudio descriptivo transversal, correlacional, en una institución para personas mayores en la ciudad de Puebla, una muestra intencionada por conveniencia de 30 personas, se utilizó una cédula de datos sociodemográficos, la escala de bienestar psicológico de Ryff y la escala de autoeficacia, el fundamento ético fue basado en el reglamento de la ley general de salud en materia de investigación para la salud. **Resultados:** De las 30 personas, 22 fueron mujeres (73,3%), por otro lado, gran parte de la muestra estudiada (36,7%) mencionó tener educación universitaria, sin embargo, parte importante (20%) respondió solo contar con la educación primaria, al cuestionar sobre el estado civil, cerca de la mitad de la muestra (46.7%) mencionaron ser viudos y solo el 16,7% se encontraban casados en el momento del estudio. Con respecto al objetivo, no se encontró relación estadísticamente significativa entre las variables propuestas. **Conclusión:** Enfermería tiene una responsabilidad muy importante en el desarrollo de conocimientos para el mejor abordaje de la población de personas mayores institucionalizadas, la difusión de estas investigaciones aporta al cuerpo de conocimientos de la disciplina.

Palabras clave: Anciano; Salud del Anciano Institucionalizado; Bienestar Psicológico; Autoeficacia; Enfermería.

RESUMO

Introdução: Os idosos estão aumentando consideravelmente em todo o mundo; essa situação envolve a possibilidade de institucionalização; essa transição pode levar a diferentes situações nessa população, por isso é importante para a enfermagem abordar fatores como bem-estar psicológico e autoeficácia em idosos institucionalizados. **Objetivo:** Identificar a relação entre o bem-estar psicológico e a autoeficácia em idosos institucionalizados na cidade de Puebla. **Metodologia:** Estudo transversal descritivo, correlacional e descritivo em uma instituição para idosos na cidade de Puebla, uma amostra intencional por conveniência de 30 pessoas, foi usado um questionário de dados sociodemográficos, a escala de bem-estar psicológico de Ryff e a escala de autoeficácia, a base ética foi baseada nos regulamentos da lei geral de saúde sobre pesquisa em saúde. **Resultados:** Das 30 pessoas, 22 eram mulheres (73,3%); por outro lado, uma grande parte da amostra estudada (36,7%) mencionou ter formação universitária; no entanto, uma parte importante (20%) respondeu que tinha apenas o ensino fundamental. Quando perguntados sobre o estado civil, quase metade da amostra (46,7%) mencionou ser viúva e apenas 16,7% eram casados no momento do estudo. Com relação ao objetivo, não foi encontrada nenhuma relação estatisticamente significativa entre as variáveis propostas. **Conclusão:** A enfermagem tem uma responsabilidade muito importante no desenvolvimento do conhecimento para uma melhor abordagem da população idosa institucionalizada, e a divulgação desta pesquisa contribui para o corpo de conhecimento da disciplina.

Palavras-chave: Idoso; Saúde do Idoso Institucionalizado; Bem-Estar Psicológico; Autoeficácia; Enfermagem.

INTRODUCTION

The World Health Organization (WHO) defines "older adults" as individuals aged 60 years and above.¹ Globally, life expectancy has reached or exceeded 60 years, with projections indicating an increase in the population of older adults from 1 billion in 2020 to 1.4 billion by 2050.¹ Approximately 88.6 million people over the age of 60 were living in Latin America and the Caribbean as of 2022, accounting for 13.4% of the total population. According to statistics, this proportion is expected to continue growing.²

The number of older adults in Mexico in 2022 was 17,958,707, representing 14% of the total population.³ Puebla is among the states with the highest number of older adults, constituting 10.1% of the total population, amounting to 745,419 people.⁴

Older adulthood is a significant phase of life. Individuals should be equipped to understand psychological and social adaptive mechanisms that can influence their physiological conditions at this stage.⁵

From a biological perspective, aging results from accumulating various molecular and cellular deteriorations over time.⁶ Old age is also marked by complex health changes commonly called Geriatric Syndromes. These include conditions such as instability, urinary incontinence, falls, disorders, pressure ulcers, hearing loss, cataracts, back and neck injuries, osteoporosis, chronic obstructive pneumonia, diabetes, depression, and dementia.⁷

We can infer that institutionalization might exacerbate the challenges faced by older adults. Despite the difficulties older people face in nursing homes, it is possible to understand and adapt to changes. Therefore, addressing key aspects of this population, such as psychological well-being and self-efficacy, becomes essential.⁸

Psychological well-being is a universal concept that influences each person's emotional development. Moreover, it allows people to interact harmoniously with their environment.⁹ Carol Ryff considers psychological well-being a characteristic that individuals use to realize their potential, enabling them to visualize their achievements through effort and goal setting. In addition, it is influenced by sociodemographic indicators such as marital status, gender, age, and educational level.¹⁰

On the other hand, self-efficacy is a set of beliefs about one's capacity to execute actions necessary to achieve positive outcomes.¹¹ In the context of older adults residing in nursing homes, self-efficacy is crucial as it allows them to resolve conflicts satisfactorily. Thus, it can be understood as the beliefs institutionalized older adults hold regarding their ability to achieve desired success.¹²

The literature highlights the importance of family or health staff support in fostering psychological well-being and self-efficacy among institutionalized older adults. Such support helps individuals cope with changes during the aging process.⁹⁻¹²

As a discipline, nursing is dedicated to the care of individuals, families, and communities. This role is no different in nursing homes, as nursing staff are responsible for caring for older adults. Understanding the psychological well-being and self-efficacy of residents is crucial, as identifying their living conditions allows for more comprehensive, holistic care to enhance their quality of life.¹³ This includes alleviating symptoms, fostering better social relationships, promoting independence, and increasing motivation.⁵

Nursing care for institutionalized older adults should focus on positive aspects, emphasizing their understanding of the environment while respecting their values and beliefs. Failure to do so may complicate and hinder the approach and intervention of nursing in such institutions.¹⁴ Furthermore, nursing encompasses the care of both healthy and ill individuals. In this stage of life, health-related behaviors—such as exercising, maintaining a healthy diet, and managing stress—align with nursing activities. For this reason, it is prudent for nursing professionals to address psychosocial aspects, such as motivation and learning, related to health behaviors. By doing so, nursing interventions can include educational and assistance strategies that promote self-efficacy and its impact on health or illness.¹²

Based on the aforementioned, this study aims to identify the relationship between psychological well-being and self-efficacy among institutionalized older adults in Puebla. It also aims to provide a descriptive framework and enhance knowledge about psychological well-being and self-efficacy in older adults, thereby improving healthcare quality and nursing care for this population.

METHODOLOGY

Research Design

This is a correlational study with a cross-sectional scope.¹⁵⁻¹⁷

Population and Sample

The population consisted of 33 older adults residing in a nursing home in the city of Puebla. Due to the small population size, a purposive convenience sampling method was employed,¹⁵ resulting in a final sample of 30 participants, with a response rate of 90.9%. Inclusion criteria involved residents aged 60 years or older who agreed to participate in the study, signed the informed consent form, and met a cognitive capacity threshold determined by the Mini-Mental State Examination (MMSE). Specifically, individuals scoring above 24 points on the MMSE were eligible to participate.¹⁸

Data Collection Instruments

A sociodemographic data matrix was created to collect participant information, including variables such as age, gender, marital status, educational level, and religion.

The variable of psychological well-being was measured using Ryff's Psychological Well-being Scale, which consists of 39 Likert-scale items with response options ranging from 1 (strongly disagree) to 6 (strongly agree). Higher scores on this scale indicate a higher level of psychological well-being. For this study, the scale had a reliability coefficient of 0.941.¹⁹

The self-efficacy variable was measured using the General Self-Efficacy Scale developed by Bable, Schwarzer, and Jerusalem in 1993. This scale includes 10 Likert-scale items, with response options being Not at All True (1 point), Hardly True (2 points), Moderately True (3 points), and Exactly True (4 points). The possible final scores range from 10 points to 40 points. Higher scores indicate greater overall self-efficacy. In this study, the scale had a reliability coefficient of 0.817.²⁰

Data Collection Procedure

Approval was obtained from the nursing home before conducting the study. Once approved, the participants were approached, and the study's purpose and procedures were explained. Inclusion criteria were applied, including the Mini-Mental State Examination (MMSE). Based on the MMSE results, eligible participants were then administered the sociodemographic questionnaire and the instruments addressing the proposed variables. While the total population of the institution was 33 individuals, the final sample after applying inclusion criteria consisted of 30 participants. Once the data was collected, the researchers thanked the participants and the administrators for their cooperation.

Data Analysis

The SPSS software, version 25, was used to analyze the data. Regarding sociodemographic data for categorical variables, frequencies and percentages were used, while measures of central tendency and dispersion were applied for numerical variables. For inferential statistics, normality was assessed using the Kolmogorov-Smirnov test to determine whether parametric or non-parametric statistical methods should be applied. Non-parametric statistics were chosen to analyze the correlation between categorical variables and psychological well-being and self-efficacy using Spearman's rho test. The significance level was $p < 0.05$.

Ethical Considerations

Institutional administrators approved the study at the researchers' request to ensure the ethical integrity of the research process. Additionally, the study adhered to ethical principles outlined in *Reglamento de la Ley General de Salud en Materia de Investigación para la Salud*.²¹ Informed consent was also obtained from all participants before their involvement in the study.

RESULTS

Table 1 presents the frequencies and percentages for the participants' categorical variables. Of the 30 participants, 22 were women (73.3%). Regarding educational level, a significant portion of the sample (36.7%) reported having achieved university education, while 20% indicated that they only completed primary education. When asked about marital status, nearly half of the participants (46.7%) identified as widowed, and only 16.7% were married at the time of the study. All participants reported being Catholic. The average age of the participants was 74 years (SD = 8).

The Kolmogorov-Smirnov test was applied to determine the normality of the *psychological well-being* and *self-efficacy* variables. The psychological well-being instrument yielded a p-value of 0.000, indicating non-normality, while the self-efficacy scale produced a p-value of 0.200, indicating normality. However, non-parametric statistical methods were selected for further analysis since the distribution was not normal for both variables.

Table 1. Distribution per categorical variables for sample characterization. (N = 30)

Variable	<i>f</i>	%
Gender		
Man	8	26,7
Woman	22	73,3
Educational Level		
Primary	6	20
Secondary	8	26,7
High School	5	16,6
University	11	36,7
Specialty	0	0
Master's	0	0
Doctorate	0	0
Marital Status		
Single	7	23,3

Married	5	16,7
Widowed	14	46,7
Divorced	4	13,3
Religion		
Catholic	30	100
Christian	0	0
Other	0	0

Note: f= frequency %= percentage

Source: Created by the authors (2024).

Table 2 shows the comparison between categorical variables for both psychological well-being and self-efficacy. Psychological well-being was higher in women. Regarding educational level, individuals educated at the university level showed higher levels of psychological well-being, while those with a high school education obtained the lowest scores. Concerning marital status, single participants achieved the highest psychological well-being scores. The difference between genders was minimal for self-efficacy, with men scoring slightly higher. Participants with secondary education scored the highest for self-efficacy, and divorced individuals obtained the highest scores within the marital status category. These results offer a perspective on the impact of sociodemographic variables on psychological well-being and self-efficacy.

Regarding inferential statistics, normality testing showed that one variable did not follow a normal distribution; therefore, Spearman's rho test was used. Based on the results, it can be concluded that the variables of psychological well-being and self-efficacy are independent in this sample, with a correlation coefficient of -0.004 ($p > 0.05$).

Table 2. Comparison of the variables' psychological well-being' and 'self-efficacy' in relation to sociodemographic categorical variables. (N=30)

Variable	Mean Psychological Well-being	Mean Self-Efficacy
Gender		
Man	121,63	24,75
Woman	128,59	24,32
Educational Level		
Primary	127,17	23,83
Secondary	120,38	25,13
High School	120,20	24,40
University	134,09	24,27
Marital Status		
Single	139,71	24,57
Married	129,00	24,80
Widowed	117,0	23,0
Divorced	118,0	28,0

Source: Created by the authors (2024).

DISCUSSION

Within the sociodemographic data of the group, gender was of significant importance, with the majority of the sample being women. Similar findings have been reported in the literature.^{19, 22-24} One possible explanation for this phenomenon is that, in the state of Puebla, where this study was conducted, the population of older adults predominantly consists of women.⁴

The results indicate that women exhibit higher levels of psychological well-being than men. In contrast, the self-efficacy variable was found to be higher in men than in women. This contradicts the study by Mesa et al., which found that psychological well-being is not associated with age or gender. However, the set of psychological factors unique to each person influences self-efficacy and psychological well-being, considering that the study was conducted in an institution for older adults.²⁵

Concerning the sample, the study by Mendez et al.⁹ worked with a similar number of participants. While such a sample size may be limiting for obtaining broad or definitive conclusions, the present study used census sampling, encompassing the entire institution's population based on predefined selection criteria. Thus, the results obtained highly represent the nursing home's resident population.

The age range of the participants was 63 to 85 years, a result consistent with the literature,^{9, 19, 22-25} which reports similar age ranges in samples of older adults. It is important to note that older adults living in nursing homes are mainly within this age range, according to the literature.²⁶

No statistically significant findings were observed when examining the relationship between sociodemographic variables and the proposed variables (psychological well-being and self-efficacy). In this context, the study by Mesa et al.,²⁵ shows that the relationship between these variables is positive and statistically significant. This difference may be attributed to the characteristics of the studies; the participants of Mesa et al.,²⁵ were community-dwelling older adults, while the ones in this research were institutionalized, which may serve as a confounding factor influencing the proposed variables.

This research had certain limitations that may have hindered a deeper understanding of the phenomenon, notably the limited population within the institution where the study was conducted and the lack of availability of some residents for the survey.

CONCLUSIONS

The objective of this study was successfully achieved by identifying a relationship between psychological well-being and self-efficacy in a group of institutionalized older adults from the city of Puebla, with similar sociodemographic factors: both men and women with no restrictions regarding education level, marital status, or religious affiliation, and with the ability to read and write.

Although the sought-after relationship was not evidenced, significant achievements were made. For example, it can be argued that there is a need for Nursing research in the population of institutionalized older adults, as it has specific care needs. As the number of studies grows in this population, so will the knowledge regarding nursing care for older adults in nursing homes.

Based on the findings and methodological strengths of this study, the following recommendations are proposed: conducting more research on older adults, as the literature on the subject matter is limited; replicating this research in hospitals and health centers as well, in order to improve or perfect the current situation of older adults in those settings; and encouraging older adults to participate in physical, recreational, social, and cognitive activities, thereby promoting their well-being.

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AUTHORSHIP:

SJED: Conceptualization, Data Curation, Investigation, Methodology, Writing – Original Draft Preparation, Writing – Review & Editing

FJAC: Supervision, Writing – Original Draft Preparation, Writing – Review & Editing.

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