RELATIONSHIP BETWEEN MENTAL HEALTH AND WISDOM OF RETIRED PROFESSIONALS

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ABSTRACT

The purpose of the investigation is to find out the relationship between mental health and wisdom among retired professionals. The current article deliberates the relationship between mental health and wisdom in terms of studying the mean differences in wisdom according to the mental health status and also studying the type of relationship exists between these two. A sample of 180 retired professionals was selected for the study. To measure the mental health, psychological well-being scale developed by the Dr. Devendra Singh Sisodia which has five dimensions in it. For the current study, we have included only 'mental health' component. To measure the wisdom of retired professionals, a scale was developed and standardized called self-measured wisdom scale. The results of the study indicated that, a significant chi-square value was observed for age group indicates a significant difference in age groups and mental health of retired professionals. Further, the results have also shown, highly significant mean differences were in wisdom, in relation to the mental health status, however mental health was positively and significantly related to wisdom along with its components. Therefore, it was found from the results of the study that mental health was considered to be a key aspect and plays an essential role in making the people wise.

KEYWORDS: Mental Health, Psychological Well-Being, Well-Being, Wisdom and Older Adults

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INTRODUCTION

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence, through adulthood.

With better mental health, older adults, those aged 60 or above, make important contributions to society as family members, volunteers and as active participants in the workforce. While most have good mental health, many older adults are at risk of developing mental disorders, neurological disorders as well as other health conditions such as diabetes, hearing loss, and osteoarthritis. Furthermore, as people age, they are more likely to experience several conditions at the same time.

The concept of wisdom has its roots in religion and philosophy (Ardelt, 2004; Baltes and Smith, 2008). Wisdom is a complex, multi-faceted construct, there is no consensus on its definition and several rating scales for assessing wisdom.

Although, wisdom has been defined in many ways, there is some consensus that, wisdom involves the use of certain types of pragmatic reasoning, that are prosocial, and which helps to navigate important challenges in

social life.

Wisdom, then, increases with lived experiences, much like crystallized intelligence, but then at some point in early late life, limitations in cognitive, physical, and social resources contribute to a decline in wisdom.

The relationship between wisdom and mental health is complex (Ardelt, 2011; Richards & Hatch, 2011), and depends to an extent on the measures of wisdom used (e.g., questionnaire, self-narratives, think aloud protocols, and peer ratings; Redzanowski & Gluck, 2012), as well as the facets of well-being (e.g., values, happiness, life satisfaction) employed across studies.

The theoretical relationship between wisdom and mental health is contentious (Bergsma & Ardelt, 2011); some authors (Mansfield, McLean, & Lilgendahl, 2011; Staudinger & Gluck, 2011) contend that since wisdom is likely to develop through coping with negative life events.

The connection between wisdom and age, and between wisdom and mental health are intricate with empirical results, often inconsistent. Richard & Hatch (2011), used a lifespan sample and broad, psychometrically sound measures of wisdom and mental health, to test for possible age trends in wisdom and its subcomponents, as well as the relationship between wisdom and hedonic and eudaimonic aspects of well-being. The Results of the study found that, a significant quadratic trend indicated that middle-aged adults scored higher on wisdom than younger and older adults. Investigation of wisdom subcomponents illustrated that a complex pattern of increases and decreases in different aspects of wisdom helped account for these age findings. Bivariate correlations showed the expected positive association between wisdom and mental health. Hierarchic regression analyses indicated that the positive association between wisdom and mental health remained significant after accounting for demographic variables (i.e., sex, age, education) and personality traits (i.e., neuroticism, extraversion, and openness to experience).

In this study, we addressed the two aspects between mental health and wisdom such as a) role of mental health in developing wisdom by studying the mean scores of wisdom in relation to mental health status, b) relationship between mental health and wisdom among older adults. The following methodology was adopted to study the relationship between mental health and wisdom among retirees.

METHODOLOGY

Sampling Procedure

- **Sampling criteria**

Retired professionals belonging to the age group of 61-75 years were selected for the study.

- **Technique for sample selection**

Purposive sampling technique was adopted for the study (since persons are retired, educated, and willing to fill the questionnaire were included in the study).

- **Size of the sample**

Retired professionals about 180 members were selected for the study.

Measurement Tools

Psychological Wellbeing Scale

To examine the relationship between mental health and wisdom, the investigator used 'Psychological well-being scale', developed by the Dr. Devendra Singh Sisodia, which has five dimensions in the scale. For the current study, we have included only 'mental health' component. The scale was standardized for its reliability and validity. The test-retest reliability: 0.87, consistency, value of the scale: 0.90 and concurrent validity: 0.94.

Scale on Wisdom

To measure the wisdom among older adults, a scale was developed by the investigator and standardized. The Cronbach's alpha of the scale was 0.81.

Procedure

The retired professionals belonging to the age range of 61-75 years were purposively selected from the Hyderabad city to conduct the study. The collected data were coded and analyzed using, chi square, ANOVA and Pearson correlation to identify the relationship between mental health and wisdom of retired professionals.

RESULTS

Table 1: Mental Health Status of Retired Professionals Based on Age, Gender and Retired Occupation (N=180)

S. No	Category	Mental Health category			Chi Square	Prob
		High	Moderate	Total=180		
	Age Group					
1	61-65 years	21(43%)	28(57%)	49(27%)	13.35*	0.0013
2	66-70 years	25(21%)	93(79%)	118(66%)		
3	71- 75 years		13(100%)	13(7)		
	Total=180	46(26%)	134(74%)	180(100%)		

The above table presents the retired professional mental health status. Chi-square analysis was carried out, to find out the respondent's mental health and its association with their age.

Age was found to be significantly associated with mental health, i.e., significant variations were observed in mental health, among three age groups. The majority of the sample, (79%) from 66-70 years age group old and more than fifty percent of the sample (57%), from 61-65 years age group was found in moderate mental health category. It was also evident from the table that, high mental health status was seen in 61-65 years age group retirees (43%) than 66-70 years old retirees (21%), and no one from 71-75 years old retirees were observed in the highest category.

The prominent finding from the above table is, mental health was decreasing with an increase in age. Because, the results show, a high mental health status was seen in first age group retirees (61-65years), moderate mental health was seen more in second age group retirees (66-70) and nobody from the last age group (71-75) were found on high mental health level, which shows with increase in age mental health was decreasing. The reasons might be like decreased physical, cognitive and social functioning, and greater self-neglect due to increase in age might affect the mental health among older age group retirees.

Table 2: Mean Differences in Wisdom Based on Mental Health of Retired Professionals (N=180)

S. No	Dimension	Mental Health	Means	F value	Pr>F
1	Self-knowledge	High	41.80	58.58**	<.0001
		Moderate	37.05		
2	Life knowledge	High	41.67	22.83**	<.0001
		Moderate	39.07		
3	Life skills	High	41.59	40.32**	<.0001
		Moderate	38.47		
4	Judgement	High	43.65	27.88**	<.0001
		Moderate	41.66		
5	Emotional maturity	High	42.07	52.40**	<.0001
		Moderate	38.71		
6	Reflection	High	35.33	0.46 NS	0.5004
		Moderate	35.60		
7	Interpersonal understanding-Altruism	High	36.41	39.27**	<.0001
		Moderate	33.09		
8	Interpersonal understanding-Inspirational engagement	High	34.83	28.71**	<.0001
		Moderate	31.54		
9	wisdom	High	317.35	77.01**	<.0001
		Moderate	295.20		

*Significance at ($P<0.05$), **Significance at ($P<0.05$), NS- Not Significant

The table above depicts the details of the differences in means of wisdom, in relation to the mental health score categories. It was noteworthy to mention that, there were highly significant mean differences in wisdom at 1% level of significance. At the same time, there were also significant mean differences noticed in self-knowledge, life-knowledge, life skills, judgement, emotional maturity altruism and inspirational engagements. The highest mean score was observed on high mental health score category.

It means that, the selected sample had high mental health and also had a high mean score of wisdom, and the sub-scales of wisdom than the sample who had moderate mental health.

It indicates a good status of mental health, was considered to be an important factor, for the development of wisdom. This might be due to the fact that, the available financial resources might help them to use healthy aging approaches, by adopting healthy habits, good living conditions and the living atmosphere might allowed retired professionals to lead healthy and integrated lifestyles might have supported better mental health, which was resulted in better wisdom.

A study conducted by Ferrari M, (2013), found the role of mental health in facilitating the wisdom. The results of the study revealed that, mental health is an important factor for skillful use of knowledge acquired through life experiences, lowered anxiety in the face of difficult life decisions, careful reflection on the mental states of oneself and others, and action based in compassion and prosocial behaviour, and these are important characteristics of a wise person. Thus, a well-balanced state of mental health has a key function and fosters wise reasoning abilities, among retired professionals.

Table 3: Mental Health Relationship with Dimensions of Wisdom

S. No	Dimensions of Wisdom	Mental Health	
		Pearson Correlation (r)	Sig. (2-Tailed)
1	Self-knowledge	.607**	0.000
2	life knowledge	.544**	0.000
3	Life skills	.589**	0.000
4	Judgement	.418**	0.000
5	Emotional maturity	.542**	0.000
6	Reflection	-0.034	0.653
7(a)	Altruism	.499**	0.000
7(b)	Inspirational engagements	.375**	0.000
8	Wisdom	.679**	0.000

**Correlation is Significant at the 0.01 Level (2-Tailed)

*Correlation is Significant at the 0.05 Level (2-Tailed)

Mental health was found to be highly positively and significantly, related to wisdom. It means as increase in mental health was also increased in wisdom. Similarly, it was also noticed from the table that, mental health was again positively and significantly related to wisdom's dimensions such as: self-knowledge, life-knowledge, life-skills, judgement, emotional maturity, altruism and inspirational engagements, indicates better mental health status resulted in increased skills, among above stated dimensions.

This might be due to the reason that, the years of experience and exposure to stressful situations might have taught the retired professionals, to increase their mental health status. With balanced mental health, the retired professional might be able to understand their self (self-knowledge), increase in awareness about life (life-knowledge), able to handle the daily affairs (life skills), able to synthesize multiple perspectives (judgement), able to balance the emotions (emotional maturity), showing concern for others (altruism), and willingness to help the people (inspirational engagements).

This finding was in line with the study of Staudinger & Gluck (2011), who found that, wisdom is likely to develop, through coping with negative life events and mental health play, a critical role in dealing with negative life events. Hence, mental health has a key role in facilitating the wisdom.

CONCLUSIONS

The connection between mental health and wisdom are intricate. Mental health has a crucial role in using and applying the wise reasoning abilities, in varied situations. A better mental health status is considered to be important for overall well-being of the people across the ages. The findings of the study also revealed that, mental health status was positively related to the wisdom, it means a person can become wise and can use their wise reasoning abilities, with a balanced mental health.

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