



A Study on Empty Nest Syndrome Prevalence and Associated Factors in Middle-Aged Women in Ahvaz City in 2015

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ABSTRACT

Objectives: Several factors that underlie depression have been associated with menopause, including the loss of the mother or the Empty Nest Syndrome. Therefore, this study was conducted to investigate the prevalence of empty nest syndrome and the risk factors among middle-aged women in Ahvaz in 2015. **Methods:** The study was cross-sectional. Six hundred samples were selected using random sampling and data were collected using a questionnaire and analyzed using Chi-square, independent t-test, and Pearson correlation coefficient using SPSS version 22. **Results:** The frequency of Empty Nest Syndrome was calculated at 40%. The average age in the group with Empty Nest Syndrome was 58.48 years and without Empty Nest Syndrome was 55.63 years. Empty Nest Syndrome results showed a significant correlation between the level of education ($P<0.001$), employment ($P<0.001$), marital status ($P<0.001$), religious commitment ($P<0.001$), socio-economic status ($P<0.001$), and some children ($P<0.001$). **Conclusions:** The results showed that Empty Nest Syndrome with increases age, marital status, employment status, education, number of children, socioeconomic status and religious commitment was linked. Regarding the recognition of risk factors can be scheduled to apply the necessary interventions in the prevention and treatment of this syndrome.

Keywords: Empty Nest Syndrome, Middle-Aged Woman, Loneliness, depression, risk factors.

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INTRODUCTION

Empty Nest Syndrome is a general feeling of loneliness, sadness, and/ or grief that parents/ or other guardian relatives may feel when their children leave home. This condition, more prevalent in women, is more common in modern times probably because extended families are

becoming uncommon and the elderly are more commonly left living by themselves [1, 2].

According to the increase in the aging population, the prevalence of Empty Nest Syndrome has increased in Europe and America and the increase of 2015 will continue. A study in America showed that when children leave their house, 46 % of parents experience the Empty Nest Syn-

drome 3. The prevalence of an Empty Nest Syndrome in China is 25% and in Beijing 35%, which is estimated to reach 90% by 2030 [3]. In China, the number of people suffering from this condition is increasing, especially in rural areas. The overall economic situation as follows: the process of increasing urbanization, economic development imbalance between the hinterland and coastal areas, rural areas and migration of additional workers relates to the eastern coastal city and major concerns. [4]

Parents, especially mothers, may suffer from all kinds of symptoms when their children leave homes, such as a sense of loss, grief, and depression. These feelings of anxiety and stress can be further strengthened by concerns about the welfare of the children [5]. Feelings of guilt may also occur for example about the (in)-adequacy of one's parenting skills, and also the guilt about the feeling of relief to no longer having to fulfill the active parenting role. Alternatively, parents may feel rejected because the children appear to no longer need their parents. All these (conflicting) feelings will hit over-involved parents, usually mothers, hardest [6].

There is some disagreement about the actual numbers of parents who suffer from the Empty Nest Syndrome [7], but it is clear that over-committed parents run a higher risk than parents who have other, meaningful relations and activities in life such as a job, a good education, extended family networks, and good skills to cope with stress [8]. Other risk factors are an unstable relationship between the parents, when the separation between parents and children happens abruptly or was not anticipated, ignoring the possibility that the syndrome may occur, and negative pressures in the environment for example when the media glorify parenting (mothering) skills too much [9].

Women with a limited role like that of family care, losing their role like that of mother role after the marriage or the departure of a child and narrow social network have been described to suffer more from the Empty Nest Syndrome, depressive illnesses and substance-related disorders. Loss and changes may lead to a lack of meaning and connection to life, and life can become abysmal when self-medicating with alcohol becomes addiction [10].

Erston, in a study, after comparing the motivations of four middle-aged groups found that

women who work more years raising their children, experience more depression when their children leave home than the other three groups (homeowners, volunteers and those who are working later). Mother Workers who work from the beginning feel guilty about leaving their families and unfinished homework tasks, although they have done well [11]. The results of Zhang *et al.*'s study (2009) showed that depression is more common among people with Empty Nest Syndrome (79.7 %). Social support, coping with stress, socioeconomic status, marital status, and religious belief can be influential in predicting depression. Researchers believe that Empty Nest Syndrome related depression can be effectively reduced by counseling and family support [12]. Dacher studied Empty Nest's effects on marital relationships and the results were mixed. Dacher found that the quality of marital life in the aftermath of parents does not change or improve. But Blown and Wolf learned of evidence of marital discord that could result from leaving their children at home [13]. Glenn states that women are less happy after their children leave home, enjoying life and experiencing marital satisfaction less than women of the same age with their children in the family. White and Edwards did a study to determine the effects of children leaving home on parents' welfare. The interview was conducted for five years. The result of this study was that in all the empty nest parents improvement in marital satisfaction and life satisfaction, was observed only with constant communication with children [14]. Between Coping practices, religion can play a key role; because religion can fill the space with positive values of life, social support, exposure to stress and adaptability for the position and give meaning to life and death. Research shows the relationship between religion and a sense of meaning in life and that religion and religious attitudes, makes a sense of meaning in life [15]. Unfortunately, the Empty Nest Syndrome phenomenon is growing rapidly and has become a major social issue that cannot be ignored. Therefore, this study has been designed to determine the prevalence and Empty Nest Syndrome risk factors in middle-aged women can step toward effective interventions for the prevention and diagnosis of this syndrome. This research is a cross-sectional study. It was conducted with permission from the Ahvaz Univer-

sity of Medical Sciences and officials of health centers in East and West health centers.

METHODS

This research is a cross-sectional study with permission from the Research deputy of Ahvaz University of Medical Sciences and, officials of health centers in East and West health centers under a code of ethics (IR.AJUMS.REC2015.29), there are two health centers in east and west and each consists of several centers. The number of population in the 11 West Centers and 12 Central Easts was calculated and then the total number of centers were calculated and divided by the number of samples based on population, and the number of samples in each center was determined and a total of 600 people (total volume of sample) were selected. Selecting a middle-aged woman was done by visiting family files and notes addresses and telephone and the invitation was done through phone calls or healthy volunteers. And if those were not referred to health centers, interviews were conducted by going door to door. If there were no address selected middle-aged woman right and left home plaques were elected as an alternate. Sampling continued until the completion of the sample size after verbal and written consent was acquired and reminding that all questionnaires will be anonymous and confidential. The participants are allowed to opt-out at any stage of the interview, then the interview was conducted. Every interview lasted 30 minutes for each participant. Using Youka Loneliness Scale samples were divided into two groups with Empty Nest Syndrome and without Empty Nest Syndrome. Participants religious commitment questionnaire was Worthington et al, socioeconomic status of Garmaroudi and standardized questionnaire to collect demographic information (such as age, number of children, gender, marital status, employment status, years after menopause, age of last child time to leave the house by children, type of delivery) presentation and through interviews were completed questionnaire. The people who were able to read and write completed the questionnaire by themselves but for those who were illiterate the questionnaires were completed by the researcher. After completing the questionnaire, the obtained information was coded. SPSS statistical

software version 22 and chi-square tests, t-test, and Pearson correlation coefficient were used for the final analysis.

RESULTS

The results showed that 40% of participants suffered from Empty Nest Syndrome, and 60% had no Empty Nest Syndrome. The average age in the group with Empty Nest Syndrome was 58.48 years and without Empty Nest, Syndrome was 55.63 years. The findings showed that the majority of the Empty Nest Syndrome group of widowed marital status and education level, employment status, respectively are illiterate (or elementary education) and housewives. However in the group without Empty Nest Syndrome, the majority of them were married and had higher levels of education and employment status was retired. Also, the average of number children without the Empty Nest Syndrome group was 6 and in Empty Nest Syndrome group was 2 (Table 1). The results showed that in patients with the syndrome, Empty Nest 24.5 % of people have a high religious commitment, while in the group that syndrome Empty Nest had a 75.5 % religious commitment. This difference reflects the higher religious commitment Empty Nest Syndrome and those without it. Comparing the average religious commitment (in both up and down) with Empty Nest Syndrome factors showed that the mean isolation, lack of community, lack of cordial and loneliness in the group with lower religious commitment. This difference was also statistically significant. Findings of correlation coefficient showed that four of Empty Nest Syndrome with internal religious commitment negatively but associated positively with external religious commitment (Table 2).

According to the results, 95.1% of Empty Nest Syndrome of people were without the proper socioeconomic status and only 4.9 % Empty Nest Syndrome had a good socioeconomic status. This was a statistically significant difference. Correlation between four Empty Nest Syndrome with two groups of socioeconomic status showed that the mean isolation, social, lack of intimacy and feeling lonely person in the group with top socioeconomic status is fewer and this difference was also statistically significant (Table 3).

DISCUSSION

According to results, Empty Nest Syndrome increases with maternal age. In this regard, Harz and Boil's studies have shown and there is a significant positive relationship between age and loneliness [16]. In this study, Jay, et al (2013) in China also had reported there is a positive relationship between age and loneliness [17]. Jay's study (2004) showed that there is a positive relationship between age and Empty Nest Syndrome. But this increase is not only due to aging but also because of increased disability and reduced social communication [18].

The findings related to the distribution of marital status in the two groups showed a significant difference so that the Empty Nest Syndrome was reported a lower prevalence of married people. These findings are agreement with results from Sheikholeslami et al (2011) [19]. Jones and Victor's study showed that loneliness is associated with being a widow, especially for those who recently lost their spouse. One of the most important causes of loneliness in this study was the death of their spouse and the amount of that in the married group was much less than those of other groups [20]. In the Holman. al's study (1992), the highest prevalence of loneliness was seen in women whose husbands had died [21]. The results of Jay,et al (2013) showed that Single is positively associated with loneliness (Empty Nest Syndrome) [17].

The results of the distribution of education showed a significant difference in the two groups. Groups with a higher level of education were reported a lower prevalence of Empty Nest Syndrome. Educated parents, for the following reasons, cope better and adapt to the children's independence and leave them with their father's house a norm event. They considered this event not only as a positive thing but also a success in raising children. Educated parents that have self-esteem, a feeling of personal satisfaction, are likely better and more positive engagement of the child and concerning their independence, show a more accurate response. Generally, parents that have higher education, have higher self-esteem and also this subject inure to their social understanding in life and as a result, have better actions on raising their children and more easily understand the children's left out of their home. The results of Fateme Mahdi Yar and his

colleagues in 2014 showed that parents who were more educated were experiencing anxiety depression and loneliness less (Empty Nest Syndrome) [22]. Results of a study showed that Empty Nest Syndrome in urban areas is better because of the higher education level and higher income in urban areas this is probably due to the differences in life chances of the lower rural people to continue education [23]. In another study, Zhou et al (2012), the majority of people without Empty Nest Syndrome had higher education were in rural and urban areas [24]. Distribution of employment status showed that the majority of people with Empty Nest Syndrome are housewives. These findings conform to Shraam (1979). He showed adapting with this Empty Nest Syndrome for the women who do the traditional role of housekeeping with being a wife and working out of home, are more successful [25]. The findings of Wang et al (2013) showed that the lower-income will increase the anxiety associated with the Empty Nest Syndrome [26]. The results from various studies indicate that the vitality and health of women working significantly more positively than women are unemployed [27, 28].

The average number of children in the group with Empty Nest Syndrome has been reported above. Using independent t-test showed a significant difference was observed between the number of children and Empty Nest Syndrome. In a study, Mehdi Yar et al (2014) also without Empty Nest Syndrome patients were higher than the number of children. To illustrate this hypothesis, we can say that in cultural and traditional Iranian society a few decades ago extended families, including grandparents, parents, and children traditionally lived together And the culture of dependency in children, in the Iranian society is rooted in the field of culture that although parents tend to progress, on one hand, marriage and independence for their children, on the other hand, can avoid the problems they deal with Also, because today the number of children is less than before and even single-family children, is common. The first experience of mothers whose children leave home for the first time face the problem home away from children and his empty place, Due to the lack of prior experience have more psychological damage than women who their sons leave their homes before. It is notable about the mothers

who have only one child and know him as the biggest intellectual capital leaving the child has severe psychological damage caused [22].

Based on the results, Empty Nest Syndrome is reported higher than those with no religious commitment that this difference was statistically significant. In this study, Zhou and colleagues (2012) more without Empty Nest Syndrome was in both urban and rural people to have religious commitment [24]. In a study by Zhang et al (2009) also without Empty Nest Syndrome majority of people have religious commitment [12]. Mack Innis and Wise, in a study, said that people use a connection with God and prayer, as a way of dealing with their feelings of loneliness [15]. Experts believe that belief in God and religious practices play an important role in bridging the gap and overcome the loneliness of life [29]. The results of Peymanfar .et al. showed that the people in the final years of life have a strong religious attitude, less than those who have low and medium levels of religious attitudes, feel loneliness [30]. Studies have shown, religious practices play a basic role in raising the level of physical health (possible further improvements in the disease, reducing disease and increasing longevity) as well as increased levels of mental health (reducing depression, gaining self-esteem, social support increases, increasing the quality of life and increase social communication) is very effective; and all these things, at reducing loneliness [31].

According to the results, people without Empty Nest Syndrome had a good socioeconomic status. That statistically, this difference was significant in both groups. These findings conform to the results of the study, Liu et al (2007) [32]. The findings of Wang et al (2008) showed that the economic situation harms people Empty Nest Syndrome [23]. The study findings Zhang et al (2009) showed that the inappropriate economic conditions a significant relationship with Empty Nest Syndrome [12]. The results Jay. et al (2013) in China showed that the decrease in people's income had higher loneliness (Empty Nest Syndrome) [17].

Strengths and Limitations

Research strengths Study a large number of middle-aged women have randomly selected samples also an entirely new issue. Research

limitations honest people in response that is the out of control researchers

CONCLUSION

This research is a cross-sectional study. The results showed that Empty Nest Syndrome was linked with increasing age, marital status, employment status, education, number of children, socioeconomic status and religious commitment. Regarding the recognition of risk factors, it can be scheduled to apply the necessary interventions in the prevention and treatment of this syndrome.

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Conflict of interest

The authors have no conflicts of interest to disclose.

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Table 1: demographic characteristics of patients studied to separate groups

Empty nest syndrom		Variable	NO		YES		P-Value
			Percent	Number	Percent	Number	
Education	illiterate	5	18	46.6	115	<0/001	
	reading and writing	5.6	20	29.9	80		
	Low literate	10.3	37	9.2	22		
	Diploma	14.2	51	4/2	10		
	Higher Education	65.1	234	7.4	18		
Marital Status	Married	87.2	314	16.7	40	<0/001	
	Truce	1.9	7	10	24		
	divorced	1.7	6	10.8	26		
	Widow	9.2	33	62.5	150		
Employment Status	Retired	48.6	175	7.5	18	<0/001	
	housewife	25	90	85.4	205		
	Practitioner	26.4	95	7.1	17		
Age	The mean (SD)	55.63(4.58)		58.48(4.15)		<0/001	
Number of children	The mean (SD)	6.10(1.82)		2.93(1.62)		<0/001	

Table 2: Mean scores of empty nest syndrome research units to separate religious commitment

Empty nest syndrom	Low religious commitment			high religious commitment			P-Value
	Standard deviation	The mean	Number	Standard deviation	The mean	Number	
Isolation	2.68	10.92	139	2.98	6.34	461	<0/001
Not social	5.005	22.14	139	5.73	13.73	461	<0/001
Lack of cordial	2.11	8.64	139	2.5	4.91	461	<0/001
Feeling lonely	3.38	3.38	139	1.13	1.82	461	<0/001

Table 3: Mean scores of empty nest syndrome research units to separate economic situation

Empty nest syndrome	Poor socio-economic situation			Appropriate socio-economic situation			P-Value
	Standard deviation	The mean	Number	Standard deviation	The mean	Number	
Isolation	3.55	8.30	436	1.84	5.02	164	<0/001
Not social	6.74	17.38	436	3.25	11.14	164	<0/001
Lack of cordial	2.94	6.50	436	1.51	3.84	164	<0/001
Feeling lonely	1.28	2.50	436	0.69	1.33	164	<0/001