- *Basic Research*

Sense of Happiness and Optimism: The Role of Time Perspective among Community-Dwelling Older Adults, Alexandria, Egypt

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Abstract

Background: Older adults' perception of happiness and optimism is greatly influenced by their temporal orientation toward their time perspectives. **Objective**: To investigate the relationship between community-dwelling older adults' time perspective and their happiness and optimism. **Methodology:** A descriptive correlational design was used. After providing informed consent, 200 older adults volunteered in this study. They were randomly selected from the El-Wafaa, Al-Hayah, and Al-Amal clubs. Socio-Demographic and Clinical Data, the Arabic Scale of Happiness, the Arabic Scale of Optimism and Pessimism, and the Short Version of the Zimbardo Time Perspective Inventory are utilized to collect the data. **Results:** A statistically significant association was discovered between the investigated older adults' perspectives on their past negative, present-fatalistic, future-negative, present-hedonistic, and future-positive and their feeling of happiness (P =.000, .012, .000, .000 and .006) with regression affect 35.53%. Furthermore, a significant correlation was found between the studied older adults' perspectives on their past positive, present fatalistic, future negative, future positive, and their sense of optimism (P =.000, .017, .000, and .000) with a regression effect of 40%. **Conclusion:** The time perspective plays a substantial part in older adults' happiness and optimism. Conversely, their negative view of the past, present, and future affects their happiness and optimism. In essence, their constructive perspective on the present and future was positively associated with their sense of happiness.

Keywords: Sense of Happiness, Optimism, Time Perspective, Community-Dwelling Older Adults.

Introduction

The global population of older adults is growing. By 2050, it is estimated that 21% of the world's population will be 60 or older (Lee et al., 2020). With aging, complaining from certain chronic conditions, the impending death of a loved one, and loneliness become an everyday experience. These concerns may influence older adults' functional capacities and overall sense of happiness and well-being (Maciantowicz et al., 2018). Numerous studies have defined happiness as how people understand their lives, situations, and feelings. These assessments concern a person's judgments about his or her emotional state and life (Uchida & Oishi, 2016; Yang et al., 2021). Older age is a less happy life stage compared to earlier life stages. For people above 60, there is a negative association between age and happiness levels (Luchesi et al., 2018).

A recent study has explored the factors that contribute to perseverance in the face of adversity and the restoration of a sense of happiness among aged people, one of which is optimism (Martínez-Martí & Ruch 2017). Optimism is a psychological resource that refers to the inclination to be hopeful, confident in the future, and to expect favorable outcomes (Chopik et al., 2015; Hamby et al., 2018). It has been documented that those higher levels of motivation, achievement, and physical well-being are associated with an optimistic mentality, as are lower levels of depressive symptoms (Kleiman et al., 2017).

Optimism for the future is more of an explanatory style than having one personality trait. People with a positive outlook on the future feel that long-term goals are attainable (Martínez-Martí & Ruch, 2017). It has been proposed that optimism and happiness can buffer older adults from the detrimental impacts of high-stress situations (Wrosch et al., 2017). Optimism and happiness are related to hope, self-efficacy, and self-confidence and are associated with improved physical and mental health (Bai et al., 2017). It has been demonstrated that optimism is one of the health-promoting variables for the aged, notably against cardiovascular disease and mortality (Boehm et al., 2018). Nonetheless, optimism and happiness are crucial in supporting older adults in creating a positive impression of being healthy and storing the strength to tackle life's challenges (Chopik et al., 2015).

Furthermore, another element, such as time perspective (TP), might influence the association between optimism and happiness in older people. Time perspective refers to the attitude and orientation toward the future, present, and past. It has been argued that older adults are strongly influenced owing to their time perspective (Stolarski et al., 2014; Keykhosravi Beygzadeh et al., 2015). Evidently, as people get older, they experience time differently. During their youth, they have an optimistic outlook, and time is viewed as long-term objectives and ambitions are selected. Meanwhile, older adults regard time as a

short-term aim, preferring to prioritize emotional regulation, interpersonal ties, and social support (Tseferidi et al., 2017; Szczesniak & Timoszyk-Tomczak, 2018). Strough et al. (2016) revealed that throughout middle age, people concentrated more on future opportunities than on the fact that time is limited, and this transitioned to focusing less on future opportunities and more on-time constraints for those aged 60 years or beyond.

The time perspective has six subscales that are either positive or negative in nature and pertain to the past, present, and future, according to Zimbardo and Boyd (2008). The past-negative (PN) perspective denotes a propensity to ruminate on negative experiences from the past with regret, whereas the past-positive (PP) perspective refers to a tendency to look gratefully, almost with pleasure, at earlier events. Older adults have a more favorable attitude toward history than younger people. It has been confirmed that people's memories become happier as they age, with fewer negative tones. A positive association between the past positive and age and a negative relationship between the past negative and age was found (Oyanadel & Buela-Casal, 2014; Wiesmann et al., 2018).

The present-hedonistic (PH) perspective is complemented by a self-indulgent interpretation of current events. Older adults frequently rely on their experience and knowledge and are more selective in their social connections, structuring their objectives and obtaining more significant control over their life (Tomich & Tolich, 2019). While the present-fatalistic (PF) is associated with an inert and indifferent explanation of circumstances, older adults occasionally prefer to minimize their experiences and risk-seeking tendencies. Finally, the future perspective implies the intensity of being more alert and concentrating on future occurrences. A future time perspective can be future positive (FP) or future negative (FN). Future negative relates to a pessimistic view of the future, filled with worry and anxiety, with behavior dominated by avoidance of losses and suffering. On the other hand, future positive reflects a positive view of the future, as when an aged person's confidence in his future is judged to be optimistic, he is predicted to be happy (Przepiorka, & Sobol-Kwapinska, 2021; Hall et al., 2015).

In that sense, older adults' time perspective is fundamental in determining their sense of happiness (Moeini et al., 2018). With an evaluation of what has been documented, time perspective is one of the influential factors that affect happiness and optimism. A balanced time perspective, in which an individual has the mental ability to transition flexibly between past, present, and future viewpoints based on situational needs, is believed to result in optimal performance (Zimbardo & Boyd, 2015). A balanced time perspective profile is distinguished by high levels of the past-positive view, somewhat high levels of the present-hedonistic and future perspectives, and low levels of the past-negative and present-fatalistic perspectives. According to research, having a balanced temporal

perspective is associated with improved well-being, such as higher life satisfaction, happiness, and positive affect (Stolarski & Cyniak-Cieciura, 2016).

Finally, time perspective is the foundation of both current and future planning. It reflects one's perception of self in the past, present, and future, as well as one's conduct in the present. The cognitive process of time perspective influences how older individuals view themselves and their interpersonal relationships. To the authors' knowledge, there have been few empirical investigations into the association between past, present, or future TP, optimism, and happiness in older people. Most research studies are narrowly focused on one of the three primary TPs, and as a result, they need to provide a comprehensive picture of TP (Boniwell & Zimbardo, 2004). Nonetheless, the literature identifies TP as one of the most essential aspects of human life, with strong links to various psychological notions such as optimism and happiness.

To this end, the study aimed to investigate the relationship between community-dwelling older adults' time perspective and their feelings of happiness and optimism.

Research Questions

What is the relationship between community-dwelling older adults' time perspective and their happiness and optimism?

Materials and Procedures

Research Design

A descriptive correlational research design was adopted in the current study.

Setting:

The study was conducted in two social clubs: El-Wafaa club in Moharram Bec, Al-Hayah, and El-Amal club in Sidi-Bishr in Alexandria, Egypt. These organizations are affiliated with the Ministry of Social Solidarity and provide services to older adults. The overall number of older adults who visited the two clubs was around 350 out of 750 registered in both. A daily average of 10 to 12 elderly people visit the El-Wafaa club. The club is located on the fourth level in the National Establishment for Family and Social Development building. The Al-Hayah and El-Amal club are open from 10 a.m. to 5 p.m., with an average of 15 to 17 older individuals attending each Sunday and Tuesday. These two locations were chosen because the older adults' attendance rate is high, and the registered older adults come from across Alexandria; they are also suitable venues for gathering data.
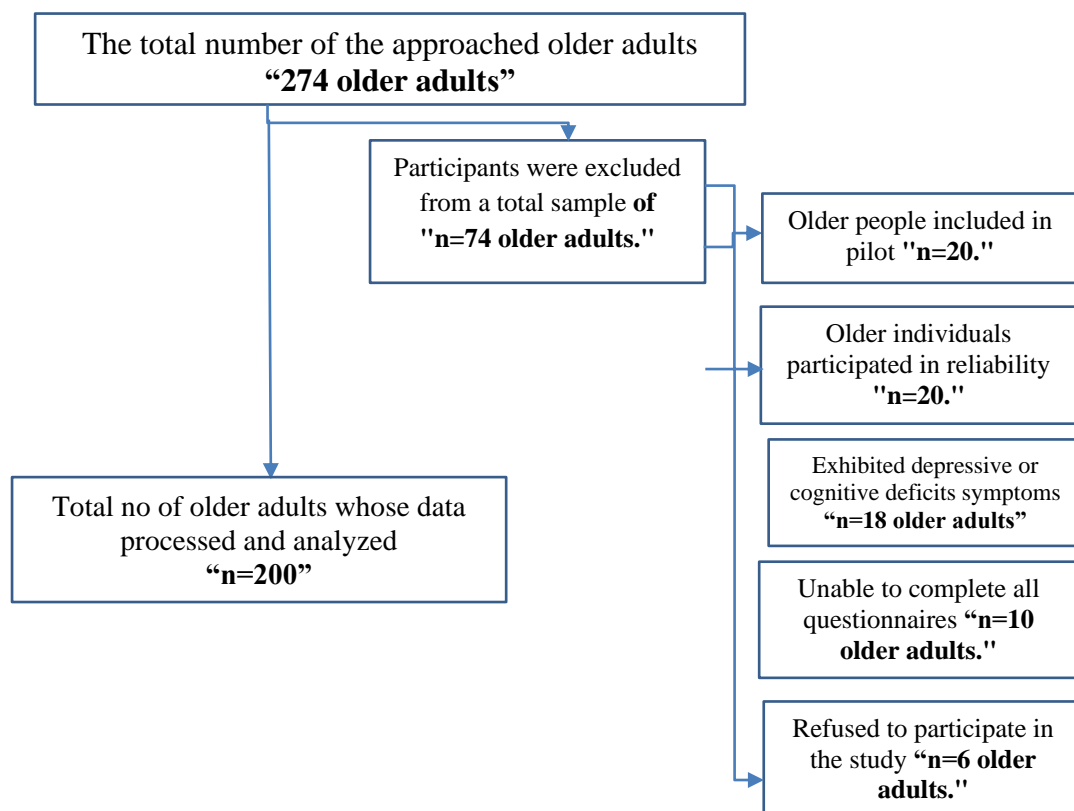
Fig. 1. Participants' Recruitment Process Flow Chart

The study measures: four instruments were used for data collection as follows.

Community-Dwelling Older Adults Socio-Demographic and Clinical Data Structured Interview Schedule. The researchers developed this instrument to assess the study participants' demographic features and clinical profiles. It included age, gender, level of education, present profession and work type before retirement, marital status, financial situation, presence of chronic disease, and drugs consumed.

Arabic Scale of Happiness (ASH)

The Arabic Scale of Happiness (ASH) was developed by **Abdel-Khalek, (2013**). It comprises 15 brief items and five fillers (items 3, 6, 8, 14, and 17) to assess happiness features (e.g., I am happy with my lifestyle and enjoy what I do). The items are rated on a 5-point Likert-type scale, with 1 being not at all and 5 being extremely high. With a total

score ranging from 15 to 75, a high score indicates a high sense of satisfaction. It is worth noting that the overall score is obtained after the five-filler items are removed. Cronbach's Alphas and test-retest reliabilities ranged from 0.82 to 0.94, indicating good internal consistency and temporal stability. This study assessed the internal consistency using the Alpha Cronbach's test (α=.86), representing good reliability.

Arabic Scale of Optimism and Pessimism (ASOP)

The ASOP was developed by **Abdel-Khalek & Alansari (2006).** It consists of two scales optimism and pessimism. Each subscale has fifteen statements to be answered on a five-point Likert-type intensity scale: 1: No, 2: A little, 3: Moderate, 4: Much, and 5: Very much. The total score can range from fifteen to seventy-five for each subscale, with high scores representing high optimism or pessimism. Cronbach's alpha reliability was 0.93 for the optimism subscale. The optimism subscale was the only one used in this study and was tested for its reliability, and the results revealed excellent reliability with a Cronbach's alpha of 0.95.

Short Version of the Zimbardo Time Perspective Inventory (SZTPI)

The ZTPI-short **(Košt'ál et al., 2015)** is comprised of 18 items to explore time perspective in six subscales: Past Negative (PN), Present Fatalistic (PF), Past Positive (PP), Present Hedonistic (PH), Future Negative (FN) and Future Positive (FP). Each scale includes 3 items that emerged from the original ZTPI (**Zimbardo and Boyd, 1999).** PN represents a negative or aversive view of the past (e.g., painful past experiences are replayed in my mind). PP indicates a warm, sentimental attitude towards the past (e.g., "Happy memories of good times spring readily to mind"). PH suggests an orientation towards present pleasure with a bit of concern for future consequences (e.g., taking risks keeps my life from becoming boring).

Future-Negative FN indicates behavior linked to doubts, anxiety, and fear about the future. Meanwhile, PF reflects a helpless and hopeless attitude toward the future and their life (e.g., "Since whatever will be will be, it doesn't matter what I do"), and FP points to behavior ruled by struggling for rewards and future goals (e.g., "When I want to achieve something, I set goals and consider specific means for reaching those goals"). The 3 items for the FN scale were selected from the FN scale of a Swedish study by **Carelli et al. (2011)** (e.g.,"thinking about my future makes me sad"). Responses were on a five-point Likert-type scale, ranging from one (very unlike me) to five (very much like me), and the scale had an excellent internal consistency of 0.75. The scale showed a moderate-to-high level of Cronbach's alpha reliability of 0.73. The SZTPI was translated into Arabic and then assessed by bilingual specialists in Psychiatric and Mental Health Nursing and Gerontological Nursing. A jury of five experts in Gerontological and Psychiatric Nursing

and Mental Health assessed their face and content validity, including comprehensiveness, clarity, relevance, and application.

Procedure

The approval of The Research Ethics Committee (REC), Faculty of Nursing, Alexandria University, was obtained for the study settings to gather the necessary data. A pilot study was undertaken to assess the study instruments' applicability, clarity, and practicality. It was carried out on 20 older adults who were not included in the study's participants. The pilot's findings revealed that no changes were required.

Implementation phase

The researchers attended the study areas on all weekdays except Fridays. The researchers met with the club directors and described the study's purpose. The directors then announced the purpose of the study and the beginning date of data collection across social media (the club's Facebook page and WhatsApp group). Afterward, the researchers introduced themselves to the older adults who attended the clubs and described the study's goal. To gather the essential information, the researchers individually conducted a structured interview schedule with the older adults in the morning and afternoon in comfortable, pleasant, well-lit, and well-organized rooms, which lasted 30–40 minutes on average. Individual interviews with the older adults were done when they decided to participate in the study and met the inclusion criteria after signing a written consent form. The researchers informed the older adults that their responses would be kept anonymous and confidential. During the data collection period, general precautionary measures were used, including regular hand washing, use of a hand sterilizer, wearing of a mask, and keeping an acceptable distance to assist in keeping the older adults and researchers safe from the COVID-19 pandemic. The data collection started in April 2022 and ended in August 2022.

Data Analysis

After gathering the data, it was examined, coded, and put into IBM SPSS (Statistical Package for Social Science program). For data analysis, Version **26** was employed. To describe quantitative data, ranges (minimum and maximum), means, standard deviations, numbers, and percentages were employed. The Cronbach's Alpha test was used to measure tool reliability. The Pearson coefficient was used to analyze the correlations between two quantitative variables, and linear regression attempts to model the relationship between two variables by fitting a linear equation to the observed data. The level of significance used for this investigation was a p-value between .05 and .01.

Results

Table 1 indicates that the mean age of the studied older adults is 64.99 ± 4.369 years and ranges from 60 to 80 years. 53.5% of the studied older adults are between 60 and 65. 50% of the studied older adults are female, and 50% are male. Regarding marital status, 61% of the studied older adults are married, and 32% are widowed. Regarding education level, 43.5% of the studied older adults have a primary education, while 27% have a university education or more. As for the older adults' previous occupations, this table shows that 47% were employees. Regarding income, 41% of the studied older adults reported having enough income to some extent. Concerning residence, 60% of the studied older adults reported living in their marriage house.

Table 2 shows the clinical data of the studied participants; it can be noted that 82.5% of the study's older adults reported having chronic diseases. Hypertension, diabetes mellitus, and cardiac diseases are the most prevalent chronic diseases reported by 60%, 45.5%, and 17.0% of the study's older adults, respectively. As for medication consumption among participants, 59.0% reported taking antihypertensive medications, 44.6% of them using anti-diabetic medications, and 16.7% of them taking cardiovascular medications.

Table 3 illustrates the mean and standard deviation of the studied older adults' time perspective. Time perspective is investigated using six subscales: past negative (PN), past positive (PP), present fatalistic (PF), present hedonistic (PH), future negative (FN), and future positive (FP). Concerning the PN and PP subscales, it is noticed that the mean perspective of the studied older adults toward past positive and negative experiences is (6.87±1.495 and 6.85 ±1.462) respectively. As for the studied older adults' their mean perspectives towards the present fatalistic and hedonistic experiences are (5.96 ±1.535 and 5.74±1.599) respectively. Regarding the future time perspective subscales, it is noticed from this table that the studied older adults' mean perspective toward the upcoming negative future experiences is (5.52 ±1.650). On the other hand, the mean perspective of the studied older adults toward their upcoming positive future experiences is 6.73 ±1.562.

Table 4 reveals that 81% of the studied older adults experience a moderate sense of happiness, while 14.5% experience a high sense of happiness. As well, it is noticed from this table that the studied older adults' mean sense of happiness is (42.05 ± 9.671). As for the older adults' sense of optimism, 66.5% and 31.5% reported having a moderate to a high sense of optimism, respectively. Moreover, table (3) shows that the studied older adults' mean sense of optimism is 47.69 ±10.462.

Table 5 illustrates the correlation between the studied older adults' time perspectives, sense of happiness, and optimism. It is noticed from this table that there is a statistically significant relationship found between the studied older adults' perspectives toward their PN and PP experiences (r = 0.347 & P = 0.000). Further, this table shows a statistically

significant relationship between the studied older adults' perspective of their PN and their PF experiences (r = 0.201 & P = 0.004). Moreover, a statistically significant relationship was found between the studied older adults' perspective of their PN and their expected FP experiences (r = 0.198 & P = 0.005). Concerning the relationship between the studied older adults' perspective toward their PN experiences and their sense of happiness, it is noticed from this table that there is a statistically significant negative relationship between them as (r = -0.374 & P = 0.000).

Regarding the relationship between the studied older adults' perspective toward their PP experiences and their other time experiences, a statistically significant relationship is found between their PP experiences perspective and their perspective on PF and FP experiences as (P = 0.000) for both. Furthermore, a statistically significant relationship is observed from this table between the studied older adults' perspective of their PP experiences and their sense of optimism (r = 0.276 & P = 0.000). As for the relationship between the studied older adults' perspective toward their present fatalistic experiences and their other time experiences, a statistically significant relationship was found between their PF experience perspective and their PH and FN experiences (P = 0.012 and P = 0.000), respectively. Moreover, this table shows a statistically significant negative relationship between the studied older adults' PF perspective and their sense of happiness and optimism (r = -0.178, -0.168, and P = 0.012, 0.017), respectively.

Regarding the relationship between the studied older adults' perspective toward their present hedonism, their other time experiences, sense of happiness, and optimism, a statistically significant relationship is found between their PH experience perspective and their FP experiences, as well as their sense of happiness as (P = 0.000) for both. Furthermore, this table shows a statistically significant negative relationship between the studied older adults' future negative perspective, FP experiences, sense of happiness, and optimism (r = - 0.260, -0.373, and -0.546) and (P = 0.000) for all of them. Furthermore, a statistically significant relationship was noticed between the older adults' perspective of their expected positive-future experiences and their sense of happiness and optimism (P = 0.006 and 0.000), respectively. Moreover, a highly positive and statistically significant relationship is found between the seniors' sense of happiness and optimism (r = 0.601, P = 0.000).

Table 6 shows the relationship between older adults' time perspectives (past negative, future negative, and present hedonistic) and their sense of happiness using linear regression. In this model, the study subjects' time perspectives are expressed as an independent variable, while their sense of happiness is expressed as a dependent variable. The result of the regression model demonstrated a significant negative relationship between the study subjects' past and future negative time perspectives and their sense of

happiness (t = -6.152 and -6.466 with P = 0.000, respectively). In addition, this table shows a significant positive relationship between the study subjects' present hedonistic time perspectives and their sense of happiness (t = 5.444 and P = 0.000). Moreover, it is noticed from this table that the older adults' past and future negative and present hedonistic time perspectives affect their sense of happiness by 35.53% (R^2 = 35.53%). By referring to the ANOVA results and its P-value (F = 36.012, P = 0.000), it can be concluded that the model is valid and there is a correlation between the study subjects' past and future negative and present hedonistic time perspectives and their sense of happiness as follows: Happiness = 58.98-2.291*past negative -2.190*future negative +1.897 *present hedonistic.

Table 7 shows the relationship between older adults' time perspectives (future negative, future positive, and past positive) and their sense of optimism by using linear regression. In this model, the study subjects' time perspectives are expressed as an independent variable, while their sense of optimism is expressed as a dependent variable. The result of the regression model demonstrated a significant positive relationship between the study subjects' past and future positive time perspectives and their sense of optimism (t = 4.317 and 2.202 with P = 0.000, respectively). Also, this table shows a significant negative relationship between the study subjects' future negative time perspectives and their sense of optimism (t = -8.118 and P = 0.000). Moreover, it is noticed from this table that the older adults' past and future positive and future negative time perspectives affect their sense of optimism by 40% (R^2 = 40%). By referring to the ANOVA results and its P-value (F = 44.139, P = 0.000), it can be concluded that the model is valid and there is a correlation between the study subjects' past and future positive and future negative time perspectives and their sense of optimism as follows: Optimism = 45.63 - 2.941*future negative + 1.765* future positive + 0.934* past optimistic.

Figures 1 and 2 shows the normality assumption that can be examined through several methods. These methods include investigating residuals' histograms and standard P-P plots. Moreover, to inspect any outliers, the residual statistics were examined. By referring to the two models' histograms in figures 1 and 3, it can be noticed that there is normality. However, the standard P-P plots in figures (2 and 4) showed minor deviations from normality, as P-P plots should follow more of a diagonal straight line.

Table 1: Distribution of the studied older adults according to their socio-demographic.

Socio-demographic data	Total (N=200)	
	Frequency	**%**
Age (years)		
▪ 60-	107	53.5
▪ 65-	61	30.5
▪ 70+	32	16.0
Mean ± SD.	64.99 ± 4.369	
Sex		
▪ Female	100	50.0
▪ Male	100	50.0
Marital status		
▪ Married	122	61.0
▪ Widowed	64	32.0
▪ Divorced	14	7.0
level of education		
▪ Basic education	87	43.5
▪ Secondary education	59	29.5
▪ University and more	54	27.0
Occupation before retirement		
▪ Employee	94	47.0
▪ Housewives	49	24.5
▪ Craft and commercial workers	57	28.5
Income		
▪ Not enough	75	37.5
▪ Enough to some extent	82	41.0
▪ Enough	43	21.5
Residence		
▪ Marriage house	120	60.0
▪ Son's house	66	33.0
▪ Alone	14	7.0

Table 2: Distribution of the studied seniors according to their clinical data.

Clinical Data	Total (N=200)	
	Frequency	%
Health history of chronic diseases		
▪ No	35	17.5
▪ Yes #	165	82.5
▪ Hypertension	99	60.0
▪ Diabetes Mellitus	75	45.5
▪ Cardiac diseases	28	17.0
▪ Other diseases	41	25.0
Consuming medications		
▪ Yes #	168	84.0
▪ Antihypertensive medications	99	59.0
▪ Anti-diabetic medications	75	44.6
▪ Cardiovascular medications	28	16.7
▪ Other medications	68	40.3

 # Multiple responses questions

Table (3): Mean and standard deviation of the studied older adults' time perspective

Time Perspective (TP)	IQR		N=200
	Min	Max	Mean ± SD
Past-Negative*	3	15	6.87 ±1.495
Past-Positive*	3	15	6.85 ±1.462
Present-Fatalistic*	3	15	5.96 ±1.535
Present-Hedonistic*	3	15	5.74 ±1.599
Future-Negative*	3	15	5.52 ±1.650
Future-Positive*	3	15	6.73 ±1.562

* A higher mean of past negative indicates older adults' more negative and aversive view of the past
*A higher mean of past positive reflects that older adults have more warm and sentimental attitude toward the past
*A higher mean of present hedonistic indicates a more risk-taking and pleasure-oriented attitude of older adults toward life
*A higher mean of present fatalistic reflects that older adults have an increased belief that the future is uninfluenced by individual action
*A higher mean of future negative and future positive indicates that older adults have more positive or negative views of the future

Table (4) shows the distribution of the older adults studied based on their level of happiness and their sense of optimism.

level of happiness and their sense of optimism	Degree	No.	%	Mean ± SD
Sense of Happiness*	▪ Low ▪ Moderate ▪ High	9 162 29	4.5 81.0 14.5	42.05 ± 9.671
Sense of Optimism *	▪ Low ▪ Moderate ▪ High	4 133 63	2.0 66.5 31.5	47.69 ±10.462

*Low (15 – 25)   **Moderate (26 – 50)**   **High (51 – 75)**

Table (5): Correlation Matrix between the studied older adults' time perspectives,

<table>
<tr><th colspan="10">Correlations</th></tr>
<tr><th></th><th></th><th>PN</th><th>PP</th><th>PF</th><th>PH</th><th>FN</th><th>FP</th><th>Happiness</th><th>Optimism</th></tr>
<tr><td>Past-Negative (PN)</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td>.347**
.000</td><td>.201**
.004</td><td>.034
.634</td><td>.082
.247</td><td>.198**
.005</td><td>-.374**
.000</td><td>.008
.914</td></tr>
<tr><td>Past-Positive (PP)</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td></td><td>.266**
.000</td><td>.077
.276</td><td>-.107
.130</td><td>.365**
.000</td><td>-.001
.986</td><td>.276**
.000</td></tr>
<tr><td>Present-Fatalistic(PF)</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td></td><td></td><td>.177*
.012</td><td>.448**
.000</td><td>-.005
.943</td><td>-.178*
.012</td><td>-.168*
.017</td></tr>
<tr><td>Present-Hedonistic (PH)</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td></td><td></td><td></td><td>.096
.177</td><td>.315**
.000</td><td>.266**
.000</td><td>.131
.065</td></tr>
<tr><td>Future-Negative (FN)</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td></td><td></td><td></td><td></td><td>-.260**
.000</td><td>-.373**
.000</td><td>-.546**
.000</td></tr>
<tr><td>Future-Positive (FP)</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td></td><td></td><td></td><td></td><td></td><td>.196**
.006</td><td>.432**
.000</td></tr>
<tr><td>Sense of Happiness</td><td>Pearson Correlation
Sig. (2-tailed)</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>.601**
.000</td></tr>
<tr><td colspan="10">**Correlation is significant at the 0.01 level (2-tailed).</td></tr>
<tr><td colspan="10">*Correlation is significant at the 0.05 level (2-tailed).</td></tr>
</table>

sense of happiness, and optimism.

Figure (1): Illustrates the normal P-P plot of the effect of the study subjects' past and future negative and present hedonistic time perspectives on their sense of happiness.
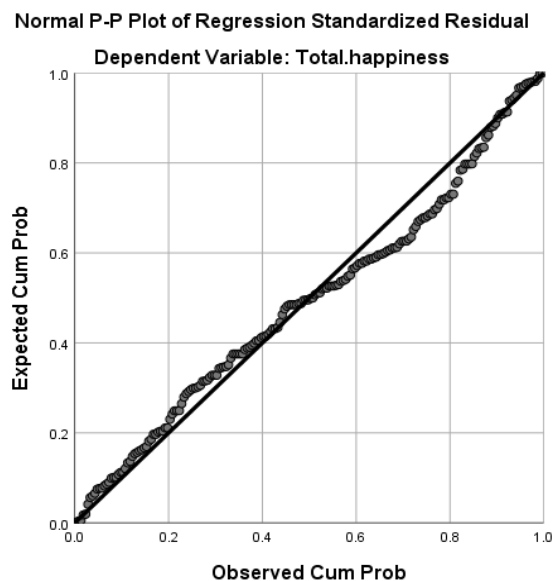

Figure (2): Illustrates the normal P-P plot of the effect of the study subjects' past and future positive and future negative time perspectives on their sense of optimism
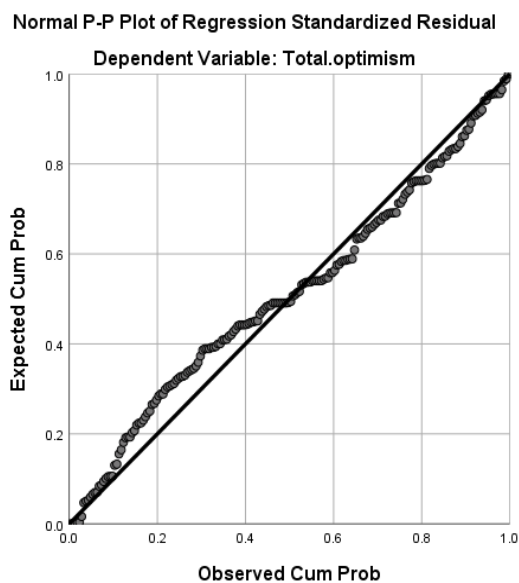
Table (6): Linear regression between the older adults' time perspectives (Past negative, Future negative and Present hedonistic), and their Sense of happiness

Coefficient [a]										
Model	**Unstandardized Coefficients**		**Standardized Coefficients**	**t**	**Sig.**	**F**	**Sig.**	**R Square**	**R Square Change**
	B	**Std. Error**	**Beta**						
1 (Constant)	58.687	2.998		19.578	0.000	32.254	.000[b]	14.01%	
Past negative	-2.422	0.426	-0.374	-5.679	0.000				14.0%
2 (Constant)	68.557	3.303		20.756	0.000	34.225	.000[c]	25.79%	
Past negative	-2.238	0.398	-0.346	-5.617	0.000				14.0%
Future negative	-2.018	0.361	-0.344	-5.592	0.000				11.8%
3 (Constant)	58.989	3.552		16.609	0.000	36.012	.000[d]	35.53%	
Past negative	-2.291	0.372	-0.354	-6.152	0.000				14.0%
Future negative	-2.190	0.339	-0.374	-6.466	0.000				11.8%
Present hedonistic	1.897	0.349	0.314	5.444	0.000				9.7%

a. Dependent Variable: Total happiness   b. Predictors: (Constant), Past negative

c. Predictors: (Constant), past negative, future negative   d. Predictors: (Constant), past negative, future negative, present hedonistic

Happiness = 58.98 -2.291*past negative -2.190* future negative +1.897*present hedonistic

Table (7): Linear regression between the older adults' time perspectives (Future negative, future positive and past positive), and their Sense of optimism.

	Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	F	Sig	R Square	R Square Change
		B	Std. Error	Beta						
1	(Constant)	66.791	2.172		30.752	0.000	84.236	.000[b]	30%	
	Future negative	-3.464	0.377	-0.546	-9.178	0.000				30%
2	(Constant)	49.967	3.728		13.403	0.000	62.563	.000[c]	39%	
	Future negative	-2.952	0.366	-0.466	-8.071	0.000				30%
	Future positive	2.081	0.386	0.311	5.384	0.000				9%
3	(Constant)	45.637	4.183		10.909	0.000	44.139	.000[d]	40%	
	Future negative	-2.941	0.362	-0.464	-8.118	0.000				30%
	Future positive	1.765	0.409	0.263	4.317	0.000				9%
	Past positive	0.934	0.424	0.131	2.202	0.029				1%

Coefficient [a]

a. Dependent Variable: Total optimism   b. Predictors: (Constant), future negative

c. Predictors: (Constant), future negative, future positive   d. Predictors: (Constant), future negative, future positive, past positive

Optimism =45.63 - 2.941*future negative + 1.765* future positive + 0.934*past positive.

Discussion

Older individuals' decision-making, well-being, sense of happiness, and future vision appear to be influenced by the relative valence and focus ascribed to past, present, and future time perspectives **(Wiesmann et al., 2018)**. Aging is often thought of as a period of loss, with numerous declines in functional capacities, cognitive functioning, and mental well-being (**Wettstein et al., 2020**). It has been established that a suitable balance between the positive and negative features of TP in the three primary orientations (the future, present, and past) is a necessary condition for optimism, psychological health, and happiness **(Zimbardo & Boyd, 2015).** As a result, this study aimed to investigate the relationship between community-dwelling older adults' time perspective and their feelings of happiness and optimism.

The most exciting finding of this study is that most older adults reported a moderate level of happiness. This finding might be explained by the fact that around two-thirds of those seniors were married and lived in their marital homes, which leads to a sense of closeness that offers them physical, emotional, appraisal, and instrumental support **(Moeini et al., 2018)**. Indeed, family plays an essential part in the lives of older adult people and may foster a sense of contentment. Aside from that, such older adults were active members of community activities such as the older adults' Clubs. They develop networks with one another, which gives them a sense of belonging, trust, understanding, sympathy, and friendship, making them happy **(Aw et al., 2017)**.

This data is congruent with **Godoy-Izquierdo et al. (2012)**, who observed that the investigated older Spanish individuals reported an average happiness level of 6.6 (SD = 1.90). However, this result contradicts the findings of a study conducted in Western European countries by **Sand and Gruber (2018)**. They reported lower happiness levels among middle-aged and older immigrants than their native-born counterparts in Europe. They justified this finding by stating that several health and social factors may also drive happiness differently among immigrants and native-born older adults. In contrast, older adult immigrants are often perceived as a relatively more vulnerable group for lower happiness than the native older adult population due to marginalization, language barriers, and the subsequent hampered access to healthcare institutions.

The majority of the studied seniors expressed moderate to high levels of optimism. Despite being informed that they have medical problems and are taking various medications, most of the seniors in the study remain optimistic. This result might be explained by the socio-emotional selectivity theory and the positivity effect, which claim that as people age, they become more conscious of their restricted options. This heightened attentiveness subsequently assists older persons in ranking emotion regulation and emotional significance, paying more attention to and recalling more favorably related stimuli, and increasing optimism **(Reed & Carstensen, 2012).** This is consistent with the findings of **Chopik et al. (2015)**, who found that optimism gradually improved in older persons aged fifty to almost seventy.

A significant negative relationship between past-negative TP and a sense of happiness with a regressive impact percentile of 14.01% but not significant with optimism is found. In other

words, the older people remember the negative experiences that they had in the past with regret and guilt, the less old adults may feel happy. The critical explanation of these results is mentioned in a study done by **Wrosch et al. (2004),** who explained that because of the aging process is accompanied by an objective increase in adverse life events, for example, personal loss and physical deterioration. Furthermore, many studies have found that past-negative thinking is associated with more depressive feelings, less positive affect, and lower life satisfaction **(Desmyter & De Raedt, 2012; Przepiorka & Sobol-Kwapinska, 2021)**. In a study done by **Drake et al. (2008)** in a large sample, they found that the past-positive TP was positively correlated to self-reported subjective happiness, and the past-negative TP was negatively correlated to happiness.

It is worth mentioning that the past-positive TP was significantly associated with optimism. This could be attributed to the fact that the past is the most important part of older people's lives. Their past-positive experiences as children, wonderful and happy memories, how they were resilient in hard times, coped with difficult life circumstances, achieved their goals, and found the meaning of their life became the motivator for their upcoming life and gave them an optimistic outlook. Furthermore, it is a fact that a past-positive TP is related to a higher level of satisfaction with life because childhood and young adulthood call up the most pleasant memories, and older people experience positive feelings by recalling such pleasant memories. This is in line with other evidence that showed a significant relationship between satisfaction, realization, pleasure, and optimism as the chief positive emotions accompanying the past **(Stolarski et al., 2014; Przepiorka & Sobol-Kwapinska, 2021)**.

How older adults look at the past influences how we live and feel. The present-fatalistic TP (PF) negatively correlates with a sense of happiness and optimism. That means the more older people act with helpless and hopeless attitudes toward life and the future, the less they become happy and optimistic. With this pessimistic vision, older adults cannot enjoy the present moment and feel any pleasure or happiness. Present-fatalistic TPs are strongly correlated with feelings of depression, anxiety, anger, and aggression. This finding is consistent with the study of **Du et al. (2020)**.

Present-hedonistic TP is associated with a pleasant sensation of happiness with a regressive impact percentile of 9.7%. This observation might be ascribed to the older adults' tendency to see the positive side of everything around them that makes them joyful without feelings of dread or concern about future implications that can emerge from risk-taking actions. People with a high present-hedonistic score are oriented toward current pleasure, prefer taking chances, enjoy intensive activities, want excitement, and are receptive to friendships **(Tseferidi et al., 2017; Szczesniak & Timoszyk-Tomczak, 2018; & Desmyter & De Raedt, 2012).**

Future-negative TP has a significant negative relationship with happiness and optimism, with a regressive impact percentile of 11.8 % for happiness and 30 % for optimism. This could be connected to how old individuals who demonstrate future-negative orientation raise their attention to signs of future hazards and the negative implications of current decisions and actions in the future. These factors may add to their anxiety, make it difficult for them to enjoy activities, and feel positive feelings like pleasure, satisfaction, and happiness. It might also affect their

future ambitions, aspirations, and hopeful outlook. These findings have been repeated in other investigations (**Stolarski et al., 2014; Maciantowicz et al., 2018**).

Future-positive TP, optimism, and happiness were revealed to have a significant positive association. As well as the regression model showed a significant impact percentile between future-positive TP and optimism with 9%. This may be explained by the fact that the future time perspective is a domain that propels the positive psychological realm into another reality context, and that context is vital for goal attainment behavior. As a result, being optimistic and planning one's future objectives are vital to a positive future view. It has been shown that when older adults feel optimistic, they engage in protective or preventative health activities and adhere to treatment and nutrition regimens. This is partly linked to the notion that older adults expect a future pay-off for these practices.

Furthermore, a future-oriented viewpoint may be characterized by various positive aspects, such as drive, a feeling of responsibility, and the ability to plan and organize. Older adults may regard their future as a method to retain their current optimal conditions. Other investigations have demonstrated that hope, faith, and optimism represent desirable emotions associated with the future (**Van Tilburg & Igou, 2019**).

Finally, a significant relationship between happiness and optimism was observed. These findings confirmed prior findings that positive psychological qualities (such as optimism, positive relationships, and having a sense of purpose in life) were strongly related to a sense of happiness. According to **Argyle (2013)**, a happy person is typically in harmony with their surroundings, energetic, active, and joyful; it is overly optimistic. **Baltac and Soykan (2020)** also observed a strong, positive, and high-level link between optimism and happiness. Meanwhile, this contradicts the findings of **Godoy-Izquierdo et al. (2012)**, who investigated happiness predictors among older Spanish persons. Except for optimism, they discovered a tangible link between all the characteristics tested and current happiness.

Conclusion

The time perspective plays a substantial part in older adults' happiness and optimism. Conversely, their negative view of the past, present, and future affects their happiness and optimism. In essence, their constructive perspective on the present and future was positively associated with their sense of happiness.

Recommendations

According to time perspective theory, past negative orientation, psychological involvement with an unpleasant experience, present fatalist orientation, and future negative orientation are essential indications of psychological problems. To increase enjoyment and pleasure, gerontological and psychiatric nurses should use novel therapies like Time Perspective Therapy (TPT) to shift the older adult's time perspective frame to be more past-positive, present-hedonistic, and future-positive. It's also crucial to keep up with the third wave of behavior therapies, which include Dialectic Behavior Therapy (DBT), Mindfulness Cognitive Therapy (MCT), Metacognitive Therapy (MCT), and Acceptance and Commitment Therapy (ACT), which are effective with clients with depressive and anxiety disorders. Implementing a

psychoeducational program for older adults to promote a balance of the different TPs and educate them on how to visualize the future with a positive mentality would also make them happier and more hopeful. Future research is needed to look at the impact of temporal perspectives in older persons suffering from mental illnesses such as generalized anxiety disorder (GAD), obsessive-compulsive disorder (OCD), and depression.

Declarations

Ethics approval and consent to participate

The necessary formal approval and permission to conduct the study were taken by the Research Ethics Committee (Institutional Review Board=**IRB00013620/13/2/2022**) of the Faculty of Nursing, Alexandria University, Egypt. Informed written consent was obtained from each study subject in this study after an explanation of the purpose of the study and participants' anonymity and confidentiality was guaranteed. The right to withdraw from the study at any time was emphasized to older adults.

Availability of data and materials

The datasets used and/or analyzed during the current study are available from the corresponding author upon reasonable request.

Competing interests

The authors declare that there are no conflicts of interest.

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الملخص العربي

خلفية: يتأثر تصور المتعة والتفاؤل لدى الأفراد الأكبر سنا بشكل كبير بتوجههم الزمني نحو المستقبل والحاضر والماضي. **الهدف:** تحليل دور منظور الوقت في مشاعر السعادة والتفاؤل لدى كبار السن الذين يعيشون في المجتمع. **المنهجية:** تم إجراء البحث باستخدام تصميم وصفي ارتباطي. بعد تقديم الموافقة المستنيرة ، تطوع 200 مسن للمشاركة في هذه الدراسة. تم اختيارهم عشوائيا من أندية الوفاء والحياة والأمل. تم استخدام اداة البيانات الاجتماعية والديموغرافية والسريرية ، والمقياس العربي للسعادة (ASH) ، والمقياس العربي للتفاؤل والتشاؤم (ASOP) ، والنسخة القصيرة من اداة منظور الوقت زيمباردو (SZTPI) لجمع البيانات. **النتائج:** تم اكتشاف ارتباط ذو دلالة إحصائية بين وجهات نظر كبار السن الخاضعين للدراسة حول ماضيهم السلبي (PN) ، والحاضر القدري (PF) ، والمستقبل السلبي (FN) ، ومتعة المضارع (PH) ، والمستقبل الإيجابي (FP) وشعورهم بالسعادة (000. ، 000. ، 012. ، 000. ، P = 006. و). علاوة على ذلك ، تم العثور على علاقة ذات دلالة إحصائية بين وجهات نظر كبار السن محض الدراسة حول ماضيهم الإيجابي (PP) ، والقدرية الحالية (PF) ، والسلبية المستقبلية (FN) ، والإيجابية المستقبلية (FP) ، وإحساسهم بالتفاؤل (000. ، 017. ، 000. P = ، و 000.). **الخلاصة:** منظور الوقت له دور كبير في شعور كبار السن بالسعادة والتفاؤل. في جوهرها ، ارتبط منظورهم البناء للحاضر والمستقبل بشكل إيجابي بإحساسهم بالسعادة. وعلاوة على ذلك، فإن منظورهم الإيجابي للماضي والمستقبل مرتبط برؤيتهم المتفائلة. على الجانب الآخر ، تؤثر نظرتهم السلبية للماضي والحاضر والمستقبل على شعورهم بالسعادة. وبالمثل، فإن التفاؤل يتأثر بالنظرة السلبية للحاضر والمستقبل.