

# The Breadth and Width of Self-Control Practices of Filipino Older People

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## Abstract

The present study's aim was to validate a proposition on the Theory of Self-control in Old-age which states that older adults exercise self-control differently. Case study design was employed in the study enlisting five sixty-year-old residents of Iligan City who qualified for an in-depth one-on-one interview. The study design was qualitative in nature using thematic case analysis approach revealing a significant finding indicating that in old-age, older people exercise self-control differently. Themes generated were: varying contexts shape how older adults display self-control; acknowledging that actions and behaviors are consequential and differing manifestations of self-control for each older adult. The exercise of self-control which varied uniquely for each older adults, was displayed in their day-to-day choices of dealing with other people, in the actions that affect their health, and in the way they utilize and handle their living resources.

**Keywords:** Self-control, case study, high self-control, low self-control, self-control manifestations, self-control consequences, cross case analysis.

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## INTRODUCTION

People are unique in many ways and deal with numerous life situations in different manners. Individuals are engaged in various decisions and choices on a daily basis in terms of their relationships with other people, in matters of finances, in health-related choices and many other matters. Since there is a constant interaction of human beings and the environment, the exercise of restraint is of importance. Human beings have the capacity to practice self-control; however, the display of self-restraint may differ from one individual to another.

According to Vohs and Baumeister (2004), self-control is the ability of a person to suppress or inhibit behaviors or responses intentionally and consciously. Essentially, self-control pertains to a person's ability to change responses in regard to some form of standards such as ideals, values, morals and social expectations, in pursuing long-term targets (Baumeister, Vohs, & Tice, 2007). In psychological and philosophical perspectives, there is a contention that self-control is needed to suppress an immediate urge to consume. Restraining oneself from smoking, drinking

alcoholic beverages or consuming fatty foods are just some examples of exhibiting self-control.

The concept of self-control has been viewed as relating to many other concepts like self-regulation, delayed satisfaction, willpower, timing, distraction, impulsiveness hyperactivity and conscience (Moffitt *et al.*, 2011). Self-control is a capacity most people have to a larger or lesser degree as stressed by Edmund (2008). Additionally, people who have low levels of self-control is characterized to have the tendency to seek immediate pleasure rather than delaying it.

In a theory of self-control in old-age, it is stipulated that self-control among the older adults differs and that the practice of self-control is consequential in nature (Caorong, 2019). It is a known fact that the growing elderly population has been steadily increasing globally. This could mean that their life choices and decisions would impact not only on them but also on the society. Understanding how older adults apply self-control on their everyday life choices and the actions they take is very significant since self-control exercise is consequential. Meaning that the choice of actions, behaviors and conduct by older people would lead to some consequences. Discovering

how differently older adults exercise self-control would yield a better viewpoint on how varied are their self-control practices in late life.

Some exploration in the field of psychology examine the development of self-control in early childhood and its changes over the life course. It was discovered that people with high self-control are found to be more successful in terms of relationships with other people and that individuals who exercise self-control were seen to also have satisfying interpersonal relations (Kochanska, Coy, & Murray, 2001; Jackson, Bog, Walton, Wood, & Harms, 2009). Additionally, exercising self-control likewise indicates a positive influence on the way people cope with stress as well as guarding their emotional health (Finkel & Campbell, 2001; Englert & Bertrams, 2015).

Several researches consider self-control to range from poor to good behavioral control (Dick et al., 2010). Many investigators adopted the assumption which suggests that good and poor self-control are different in a qualitative sense (Hofmann, Friese, & Strack, 2009; Friese & Hofmann, 2009; Strack & Deutsch, 2004). Good self-control is said to involve conscious regulatory process which include several subcomponents. They include one's ability to adjust and monitor one's behavior when anticipating results, delaying gratification, suppressing problematic behavior and being goal directed. On the other hand, poor self-control is more spontaneous hindering the capacity to make plans, defer self-gratification and appropriately alter behavior (Pearson, Kite, & Henson, 2013).

In accomplishing daily mundane tasks, which often requires decision-making, self-control is indeed needed. Many people however find it extra challenging to exert self-control which leads to failure in accomplishing tasks such as eating healthy, doing exercise to saving money (Baumeister, Bratslavsky, Muraven, & Tice, 1998; Baumeister, Vohs, & Tice, 2007; Carver & Scheier, 1998).

People vary in the degree to which different behaviors require them to exercise self-control (Davisson & Hoyle, 2012). Accordingly, there are people who find it easy to control their eating behavior but find it difficult to go to the gym. On the other hand, other individuals have the opposite struggle. This very finding strongly supports the notion that people really differ in their self-control exercise.

The theory of self-control in old-age posits that self-control as the capability of displaying self-restraint differs among older people (Caorong, 2019). Little is known on the degree at which older adults exercise self-control. Hence, the prime objective of this study to

figure out how differently older adults exercise self-control in later life.

The study aimed to validate one of the assumptions of the theory of self-control in old-age which states that older adults exercise self-control differently.

## **MATERIALS AND METHODS**

This study utilized a case study research design to validate one of the propositions of the theory of self-control in old age which is that older adults exercise self-control differently. Using a case study method of inquiry engendered a better and deeper understanding on how older adults display their self-control in old-age. The result yielded a fuller elaboration on the exercise self-control by the older adults in later life.

A case study research is a systematic method of investigation which involves an in-depth, profound and detailed investigation and inquiry of the subject under study as well as other related factors in the subjects' circumstance. The researcher, explored and sifted through relevant data on the different ways older adults display self-control. As described by Stake (1995), case study methodology is a strategy of inquiry in which the researcher explores in-depth a program, event, activity, process or one or more individuals.

The research participants were selected purposively following certain inclusion criteria which included the following: willingness to participate in the research study; sixty years old; resident of Iligan City or Lanao del Norte; no cognitive disabilities; and able to articulate or express thoughts, ideas and experiences. Cognition level was assessed utilizing the short portable mental status questionnaire or the SPMSQ by Pfeiffer (1975). Participants who committed two or less errors were asked to join the study. However, those who committed three or more errors using the (SPMSQ) indicating cognitive impairment were not included.

The researcher recruited five older adults with different backgrounds in terms of gender, age, religion, marital status, educational attainment, occupation, source of income and social support to join the study. An in-depth one-on-one interview was employed to gather data using a semi-structured questionnaire for 30-45 minutes. The interview process was carried out in one session only. Data collection was completed within two weeks. During the interview process, each of the participants' preference was considered in selecting the interview site.

The data collected were treated with utmost confidentiality and the data gathered were placed in a secure location accessed only by the researcher. Both the written and electronic records were kept secured

until the researcher passed the course. These will be carefully disposed of before the end of 2019.

There are five established components of case study according to Yin (2009). Case study includes the formulation of a research question, the determination of the study aim, the inclusion of unit analysis, linking of the data to the study proposition and the benchmark for data interpretation. This can be achieved by choosing the appropriate questions to ask to yield a rich qualitative data.

The second essential component in a case study is to clearly define the purpose of the inquiry. For this research endeavor, the intention was to validate the assumption which states that older adults exercise self-control differently. Through case study inquiry, the study results were used to corroborate and substantiate the researcher's supposition.

Fundamental to case study research methodology is the unit analysis. Unit analysis as described by Yin (2009) is the area of focus in case study analyzes. Appropriate and sound unit analysis follows a well-established inquiry which is accurately identified. Analysis of qualitative data taken is repeatedly tied to the established research question. In this research, each of the selected participant's exercise or demonstration of self-control was analyzed to understand the mechanism of self-control in old-age. To understand the mechanism of self-control of older people in a broader sense, the unit analysis were linked to other cases thereby collecting a much bigger picture gaining a better understanding of the phenomenon of interest (Yin, 2014).

Another important component of case study design was to connect the data obtained to the proposition at hand. The connection was made following data collection, as themes emerged. During the data analysis, the researcher matched patterns as it appears to the propositions of the study. The emerging themes thus served to answer the following research question: How do older adults differ in their exercise of self-control? Data interpretation included coming up with subthemes, developing themes, extracting implications, and understanding to support and shed light on the exercise of self-control in old age.

The study participants were selected purposively following certain inclusion criteria. The participants included older adults who were at least sixty years old cognitively, physically and psychologically well, female and male residents of Iligan City and Lanao del Norte. Each of the participants was provided copies of the informed consent duly approved by the Cebu Normal University-Research Ethics Committee (CNU-REC) with CNU REC Code 335/ 2019- 06 Caorong. The researcher was

able to submit the study protocol to the Cebu Normal University- Ethics Review Committee and was given approval before data gathering.

During the recruitment process, the researcher explained comprehensively the informed consent in the language the participant understood. After giving explanation, each of the participants was asked to sign the informed consent. As there were older adults who had little schooling, they were provided with considerable opportunities to verbalize their concerns. As it was difficult to obtain consent from older adults who were physically infirmed, with mentally disabilities and impaired judgement, participants in this regard were excluded.

As the nature of the study involved an in-depth one-on-one conversation, the participants might experience psychological unease. However, all of the study participants did not experience any form of psychological discomfort. Although the researcher had contacted councilors who were experts in debriefing, their services were not availed of.

The main objective of this research study was to validate one of the propositions of the theory of self-control in old age. The generated knowledge will provide a better understanding of how older adults exercise self-control in later life. The information will engender an additional knowledge in the field of gerontology which will provide a better and new perspective concerning the aged members of the society in relation to self-control exercise.

In addition, the personal information of the participants were kept confidential and anonymous. In accomplishing this, their records were placed in a secure location accessed only by the researcher. No one was given the password to the device where data were stored. Written documents were placed in a locked file organizer. The records identifying the study participants were kept confidential and were not made publicly available to the extent permitted by law. Moreover, fictitious names were used in data presentation to conceal the identity of all participants.

During the interview, the participants were provided with refreshments. A token of appreciation in a form of a useful item was given. Each research participant was also asked to affix his or her signature in the Incentive Receipt Form for the Research Participants.

## RESULTS

Case analysis was utilized in this study to analyze the qualitative data collected from the participants. The in-depth conversations yielded a rich description of how differently older adults exercise self-control. This present study was aimed at validating one

of the assumptions of the theory of Self-control in Old-age which is that older adults exercise self-control differently. Through the utilization of case study method of inquiry, a better and a deeper understanding of how older adults display self-control in later year was engendered.

The qualitative data obtained from the selected five older adults who participated in the study were sifted through. This was done through unit analysis, linking the data to the proposition and interpreting the findings to help validate the proposition at hand. After the unit analysis, subthemes were created before further categorizing them into themes which were linked to the proposition of interest. To understand the mechanism of self-control in old age in a broader sense, the unit analysis was linked to other cases thereby collecting a much bigger picture gaining a better understanding of the phenomenon of interest (Yin, 2014).

There were five selected participants who were all older adult residents of Iligan City. They were recruited due to their age, gender, marital status, educational attainment, religion, occupation, source of income, health and social support.

Results revealed the following three main themes after data analysis: 1.) Varying contexts shape how older adults display self-control as the first theme, with such subthemes as grounded from the current circumstance; connected to past experiences and old habits and fervor of personal desires and preference; 2.) Differing Manifestations of self-control for each older adult as the second theme with such subthemes as control in the aspect of health; control in managing financial resources; control in consideration of the aging changes and expectations; control in the aspect social relationship; 3.) Acknowledging that actions and behaviors are consequential as the third theme with such subthemes as positive consequence of self-control; negative consequence of lack of self-control; and combination of both positive and negative consequences as sub-themes.

### Generated Themes

#### Theme 1: Varying contexts shape how older adults display self-control.

The exercise of self-control among the older people appears to be closely shaped by the varying circumstances and different life situations they experienced. The different experiences can be those that are experienced currently or those that the older adults previously experienced in life. The self-control displayed by the study participants are strongly tied to what they now experience in terms of health as well as their social and financial situations. Self-control demonstration is also deeply rooted in their decisions and personal preferences.

#### ***Grounded from the current circumstance***

People in general vary in their life situations including the elderly ones. The display of self-control by the older adults may be affected and closely connected to their current health state, their current financial situation or their current social circumstance. This means that self-control exercise is linked to various and different circumstances currently experienced by the older adults. The older adults' self-control display is as well influenced by their changing perception especially so that they now consider themselves as aged. They are aware that they now have some limitations and have this perception that they are not quite the same as before due to age.

Below were some of the revelations of the older adult participants on how they exercise self-control given their current situations:

*[I now restrain myself from eating sweets because I am afraid of the consequences. The doctor really prohibited me from eating certain food like cakes, ice cream and other sweets.] SAM*

*[When I arrived at the debut party of my grandchild, I told them that I'll eat ahead because I was hungry that time. Even if they had roasted pig served, I really did not grab a bite of it because I know that I am not allowed to eat it because of my hypertension.] TES*

*[I actually stopped eating meat. I avoid it since I am already old now and also because of my hypertension. I actually have a maintenance for my hypertension.] PAZ*

*[I really give my wife due consideration when she says mean things to me that I dislike. I just let it pass because I don't like to be in conflict with her. She is asthmatic and I don't want to aggravate her condition.] SAM*

#### ***Connected to past experiences and old habits***

Past experiences leave an imprint on one's life. They can be a source of many learnings and wisdom in life. Past experiences can also become fundamental in building habits. Old habits are hard to break since the person can be so used to doing it that breaking or stopping it can be so difficult. The exercise of self-control by the older adults involved in this study is very much entangled with their past experiences in life and to their old habits. Past experiences in terms of their family upbringing as well as the influence they get from friends and company have some bearing on how they demonstrate self-control.

This can be substantiated by the following statements of the study participants:

*[My only vice is smoking tobacco. I started smoking at the age of four. My grandparents had tobacco plantation.] BEB*

*[I really was such a heavy drinker before. My friends and I even start our session before taking our breakfast. I easily get tempted by my friends.] RUS*

*[I actually grow up usually eating salted dried fish as a viand. I am so used to eating it. We often add it to our vegetable dishes. Now, I really like my food to be a little salty.] TES*

### **Fervor of personal desires and preference**

Older people have different personal desires and preferences. Personal preferences can be seen or shown in one's choices of things or display of emotions. More specifically, personal desire or preference can be displayed in one's actions or choice of food. Self-control by the older people is driven by the strong personal desires and preferences they have. They may derive pleasure or enjoyment by engaging themselves with what they prefer or want to do.

Below are some verbalizations of the study participants:

*[I really enjoy smoking but I usually do not smoke quite very often. I had two sessions already after waking up.] BEB*

*[After eating, I usually crave to smoke. I smoke a stick of cigarette after eating a meal. In one day, I could consume three sticks of cigarettes.] RUS*

*[During our drinking session, funny stories are shared by my friends which I greatly enjoy.] RUS*

### **Theme 2: Differing manifestations of self-control for each older adult**

Older adults differ in their exercise of self-control. Each older adult involved in this study had their own unique way of displaying self-control in the aspect of health through food choices, in handling finances and in maintaining social relationship with others. Some older adults display control in the aspect of health promotion and maintenance, managing financial resources, in consideration of the aging change and in the aspect of maintaining social relationship. However, there are also older adults who display lesser degree of self-control or poor control in the aspect of health restriction and verbal expression. Moreover, some older participants are unable to quit vices.

The subthemes below show the different areas of control of the older adult participants:

#### **Control in the aspect of health**

The first subtheme under the second theme indicates that older adults practice self-control in consideration of their health. Health is a significant life aspect for many older people. Notably there are older adults who display good self-control for instance in promoting and maintaining health. They are older adults who engage in better healthy lifestyle practices in following food restrictions, in performing physical exercises and even disengaged in longtime vices to have a much healthier life.

Some of the participants had the following to say:

*[I started jogging after knowing that I am diabetic.] SAM*

*[I decline sometimes those who invite me to eat mango since the doctor told me to consume half a slice of it only per serving.] PAZ*

*[It's been almost five years that I already stopped smoking. That happened when I was 65 years old. I quit smoking after hearing a lot of information that it could lead to a lot of diseases.] SAM*

*[I do exercise at home. I sometimes do exercise twice a week.] TES*

*[People at home usually like to eat chicken as part of their meal. So, I cook and serve them chicken but I avoid eating it myself for me not to suffer any physical ailment. When people at home have chicken as their viand, I resort to eating egg.] TES*

Some participants follow the health restrictions but some either partially or completely resist temptation or succumb to their desire and disregard the health restrictions. This is substantiated by the following statements below by the older study participants:

*[After being diagnosed as diabetic, the doctor really emphasized to me not to eat fatty foods. The doctor also told me to eat only a slice of mango or to consume only a single banana and to eat only a cup of rice per meal. However, I did not follow such recommendations because I think I will feel or get weaker when I follow such recommendations. I also think that it's okay because I also often do jogging.] SAM*

*[When my appetite is good, I really eat to my fill. However, I also do not skip my maintenance for hypertension.] PAZ*

*[I really do not like to eat bland foods. I really like my food to be a little salty. I easily loss my appetite when my food is bland.] TES*

*[I vow not to cook sweet rice cake as well as rice with coconut milk anymore. However, I still eat vegetable cooked with coconut milk only in small amount. I also sometimes consume soft drinks.] TES*

Additionally, it was also discovered from the deep conversations with the research participants that some of them have vices because they find it hard to resist temptation. Some reasons they have cited why they are unable to leave their vices are social pressure and addiction as in the case of those who smoke cigarettes.

The statements below support this claim:

*[I won't quit smoking tobacco. Many people told me to stop smoking and advised me to see a doctor. My children even told me to quit smoking since I already developed chronic cough.] BEB*

*[I cannot seem to quit smoking tobacco. This is my go-to when there are things I see or smell I dislike.] BEB*

*[I think I can manage to avoid drinking alcohol if I do not have friends who tempt me. I am usually tempted*

by my friends when they tell me to come for a drink.]  
**RUS**

#### *Control in the aspect of managing financial resources*

This subtheme under the second theme reflects the control of the older participants in managing their financial resources. There are older participants who are keen on spending and saving their money with individual motives such as to utilize the money saved for future use in case of need as well as spending it to benefit other people especially those closest to them such as family members. This particular subtheme is supported by the statements below:

[I seldom buy clothing. I usually save my money in case my children would ask some when they are in difficulty. I help them by giving them money.] **TES**

[I usually am not tempted to spend my money. I sometimes spend my money for my children and grandchildren. I am not the type of person who squander money. I don't have any vices.] **PAZ**

Most of the study participants are able to manage their financial resources well but some who are able to save money to pay bills, also allocate to support their vices.

Some of the participants shared the following statements:

[I actually rented a place owned by a friend for five hundred pesos a month. I often do not squander my money yet I really like to buy clothings. I usually purchase second hand clothing for a hundred pesos for fifteen pieces. I also save my earnings so that when time comes that I wanted to go to Cebu, I will have some money for me to use as fare. Yet sometimes, I spend my money to contribute for our drinking sessions. A bottle of Tanduay rum costs ninety-eight pesos.] **RUS**

[I go to the center of the town to sometimes purchase items I love to have such as tobacco, meats, chicken and fish.] **BEB**

#### *Control in consideration of the aging changes and expectations*

There are older people who also display self-control in consideration of the changes they experience in old age. They now are deliberated in their choice of food and in the way they consume it. Their reason being that some food choices are better not consumed by elderly people as they are unhealthy for them to take. Some study participants revealed the following statements below:

[I controlled myself in consuming meat since it is hard to digest especially that I am already old.] **TES**

[I stopped already eating meat since I am already old. I have maintenance for my hypertension. I avoid meat consumption because it's often not tender to chew.]  
**PAZ**

[I really changed in terms of food consumption. I usually eat to my fill before but I refrain doing that now because I am already old. No one will suffer the consequences of not following prohibitions but me. Besides it's very expensive to be in a hospital nowadays.] **TES**

#### *Control in the aspect of social relationship*

This subtheme indicates that there are some older adult participants of the study who demonstrate self-control so as to avoid conflict with other people. They also practice self-control to maintain good relationship to other people such as family members. This particular subtheme is substantiated by the statements below by some of the study participants:

[As for me, I don't usually get angry that easily. However, my wife nowadays easily gets irritated. She is actually not like that when she was still much younger. She changed now that she is already old. When she is in that state, I just remain patient with her and avoid responding so that we will not have any argumentation.]  
**SAM**

[I am not in conflict with anyone else. When my children and I argue, we settle things out and become friends thereafter. I also don't plant any grudges. I even treat my husband well now who wronged me big time before.] **TES**

Some study participants are less able to contain themselves in terms of expressing themselves verbally. Some of them retaliate verbally when provoked by other people. Anger is one reason given by the older adults why they express what they feel. They want to voice out their anger and be heard by the object of their anger. The participants had the following to say:

[When my wife raises her voice on me, I restrain myself from answering her back but when I can't take her words any longer, I also brush her off with words as well.] **SAM**

[I sometimes get angry with my grandchildren but I don't physically discipline them. I reprimand them.]  
**BEB**

[I cannot contain my voice from raising when my wife and I have disagreements. When that happens, the two of us usually would raise voices. I figured that raising my voice is wrong on my part.] **SAM**

#### **Theme 3: Acknowledging that actions and behaviors are consequential**

In the exercise of self-control, older adults really are cognizant that actions and behaviors are consequential. What is meant by consequential is that there are results following the action or behavior. The consequences of one's action are felt and experienced by the older adult himself or herself and the consequences are either positive or negative.

The following subthemes support this identified theme:

#### ***Positive consequence of self-control***

Since actions and behaviors are involved in the exercise of self-control, consequences can ensue thereafter. Positive consequences result when the actions and behaviors are directly linked to health promotion, preservation of good interpersonal or social relationships and managing well one's resources. The older adults experience positive consequences in their exercise of self-control when they upheld all these aspects in life. Below were examples of positive consequences experienced by the older adults upon exercising self-control:

[I am good at managing my money since I have no vices. I usually spend on things that give me benefits like buying food. I don't have vices like smoking. I spend my money sometimes to buy vitamins.] **SAM**

[I have been hypertensive for a while already. My blood pressure before was 160/100 (mmHg). There was this occasion when my grandchild celebrated her debut. They actually served roasted pig yet I really did not eat some since I am aware that it's part of my restriction due to my hypertension. So what I ate that time was the vegetable they had. My blood pressure now is 130/80 (mmHg).] **TES**

[I had some savings during the month of Ramadhan which is over a hundred thousand pesos. Because I had some savings, when there are things, I want to buy I could readily afford it. I also had my home repaired from that savings. I also bought two grinding machines. I actually still have some money left.] **TES**

#### ***Negative consequence of lack of self-control***

There are older adults who were not able control themselves and gave in to their desires, temptations and wants. Giving in to one's desires and temptations often leads to negative consequences. The negative consequence of low self-control exercise could very well affect the older adults' physical health and relationship with other people.

Here are some confessions of the study participants:

[I really haven't stopped indulging myself in tobacco smoking. There are many people who told me to quit it because of chronic cough.] **BEB**

[I sometimes experience itchiness all over my body when I disregard my doctor's prohibitions. When I do eat salty food, it causes me to feel itchiness all over my body.] **SAM**

[I am hypertensive. My blood pressure would sometimes reach 200/120 mmHg. My situation is not good when my blood pressure is that high. I had experienced such situation because I ate food restricted for me to consume. I had eaten sweet rice cake which I think caused my hospitalization. I consumed a lot of it to my fill. Nowadays, I don't want to eat sweet rice cake anymore. I learned my lesson because of that hospitalization and we even paid a huge amount of money for the hospital bill.] **TES**

[I have poor appetite when I drink alcohol. I also do not have the appetite to eat after the drinking session.] **RUS**

#### ***Combination of both positive and negative consequences***

This next subtheme, indicates that the exercise of self-control not only yields to either positive consequences or negative consequences but sometimes self-control demonstration results to a combination of both positive consequences of self-control and negative consequences of the lack thereof. The following narrations by the study participants substantiates this claim:

[There are some people who would ask me to lend them money and if I have money, I let them borrow some. However, there are also times that those who borrow money from me fail to pay me back. Although the amount is only minimal, they sometimes fail to pay me back.] **PAZ**

[I usually do not squander my money but I really like to buy t-shirts. For one hundred pesos, I could buy fifteen pieces of t-shirts already. I also usually deposit some of the money I earned from driving. There are also times that I spend my money for our drinking session.] **RUS**

[I am actually hypertensive and I have a lot of food restrictions such as oily foods and salty foods. However, I really cannot control myself from consuming salty foods. I like my food to be a little salty. I like to eat salted dried fish which is actually not allowed for me to consume. I had UTI because of consuming salty foods. On the other hand, what I controlled for myself is partaking meat products such as beef. My blood pressure now is 130/80 (mmHg).] **TES**

## **DISCUSSION**

Older adult participants of the study have been seen to exercise self-control in varied ways. More specifically, there are varying contexts which shape how they display self-control. There are as well different manifestations of the self-control practice of older people such as in the aspect of health, in managing resources, in consideration of the aging changes and expectations and in the aspect of social relationships. Additionally, the older participants also acknowledged that actions and behaviors are consequential.

The mechanism of self-control by an individual is developed from the early years of his life (Mehta, 2010). This finding underscores the results of this study that self-control is connected to the past experiences. The past experiences are an influential consideration in the self-control practice. For the older adult participants of the study, the experiences they had in the past are sources of learnings for them which contribute to the way they make decisions and choices shaping their self-control practice.

In this current study, the older participants display self-control in the health aspect. This discovery reflects the common fact that health is an important consideration of older people in old-age. Self-control is considered to be deliberate, conscious and effortful subset of self-regulation (Baumeister, Voh, & Tice, 2007). This seems to explain why participants in this study exercise deliberateness in their choice of actions for instance that promote and maintain their health. Some of them were deliberated in their choice of food and in the way they consume it. Their reason being that some food choices are better not consumed by them as they are unhealthy for them to take. Moreover, it was essentially discovered that self-control was positively related to healthy food choices and healthy eating patterns (Kuijter, et. al., 2008). Some older adult participants of the study deliberately and conscientiously avoid food that are prohibited for them to eat. They do not give in to temptations and exercise self-control in their food choices so as to prevent untoward complications in relation to their existing chronic disease. One prominent definition of self-control states that it is the capacity to override one's internal response as well as stopping undesired tendencies in terms of behavior (Tangney, Baumeister, & Boone, 2004).

Many of the study participants also exercise self-control in the aspect of managing their resources. There are those who appropriate their money for living costs, for purchase of medicines while others have some of their money saved.

Studies show that people's behavior in terms of saving money is affected by how they practice self-control. Persons with self-control issues due to lack of planning, monitoring or commitment have lesser wealth accumulation (Biljanovska & Palligkinis, 2015). Another study also found out that people who are less able to control themselves are less likely to have enough money save during retirement (Choi, Laibson, & Madrian, 2011).

Notably, due to the aging changes, there are older adults who practice self-control in consideration of it. The finding of this current study is not at all surprising since many changes go with aging. According to a study, physiological changes occur with aging (Boss & Seegmiller, 1981). With self-control, there is the tendency to interrupt, change or inhibit personal responses that are undesirable. People use different strategies that increase adherence to a long term-goal and decrease the likelihood of adhering to temptations (Fishbach & Trope, 2005). This seemingly explains why older adults, since most of them have chronic diseases and health issues in old-age, now do engage in healthy practices with the goal of maintaining health and avoid suffering health complications.

Moreover, some older participants control themselves to maintain social relationships so as to avoid being in conflict with other people. Various outcomes have been associated with self-control exercise. According to Tangney, Baumeister, & Boone (2004), self-control is positively related to the performance of task, the quality of relationships with others as well as the emotional responses. It cannot be discounted that there were older participants who deliberately demonstrated self-control in their interactions with other individuals. This finding is in line with the outcome of a study which concluded that in the practice of self-control, there is the tendency of an individual to avoid responding destructively to negative behaviors especially to those who are close to the person (Rusbult, Verette, Whitney, Slovik, & Lipkus, 1991).

Furthermore, it was revealed from this current study that the older participants have the acknowledgment that self-control practice is consequential. Older adult participants are cognizant of the fact that actions and behaviors have consequences. A wide variety of both positive and negative outcomes have been implicated with self-control. Control demonstration has been linked to a number of outcomes such as harmonious interpersonal relationships (Finkel & Campbell, 2001). Meanwhile, self-control failure has been implicated with maladaptive outcomes such as overeating (Vohs & Heatherton, 2000), aggressive behavior (DeWall, Baumeister, Stillman, & Gailliot, 2007), substance dependence, financial problems, and health problems (Moffitt *et al.*, 2011).

Finally, the study participants' revelations and disclosure have been helpful in highlighting how varied are the self-control practices of the older adults in old-age. Hence, older people in old age, really exercise self-control differently.

## CONCLUSION

There is a strong indication that in old age, older people exercise self-control differently. The exercise of self-control varied uniquely for each older adults which are displayed in their day-to-day choices of dealing with other people, the actions they do that affect their health and in the way they utilize and handle their living resources.

## RECOMMENDATION

It is recommended that a further study be conducted enlisting older adults with different backgrounds in terms of health, financial status, social support and religious commitments to add to the study results.

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