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A STUDY ON DEPRESSION OF ELDERLY WOMEN RESIDING IN OLD AGE HOMES IN WAYANAD DISTRICT OF KERALA STATE

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ABSTRACT :

Aging starts with life and continues throughout the life cycle. Old age is a representation of the final stage of life. In India, elderly people prefer to live with their offspring, who see it as their responsibility to take care of them. The old age home, however, becomes their only option when they have no family to assist them. This study investigates the frequency of depression among elderly women living in old age homes in Kerala's Wayanad District. Due to the country's aging population and shifting family dynamics, old age homes have become a key part of elder care in India. This study's main goal is to measure the level of depression among elderly women living in old-age homes in Wayanad. The research design adopted by the researcher is descriptive. This will be selected to assess the level of depression among elderly women residing in old-age homes. This research will be carried out by using primary sources of materials such as interviews and questionnaires. This study was done from August to September 2023 among 40 elderly women residing in four old age homes from Wayanad District. The tools were the general profile and Beck's Depression Scale (BDI-II). The result of the study shows that out of 40 participants, (5) 12.5% of them have severe depression, (18) 45% of them have moderate depression, (8) 20% have mild, and (9) 22.5% of them have minimal depression. There is an association between socio-demographic factors and depression among the elderly women residing in the old age home.

KEYWORDS : Depression, Elderly women, Beck Depression Inventory scale, old age homes.

INTRODUCTION:

Aging is a natural process, there has been a significant rise in the population of older people. This stage is seen as the culmination of one's life experiences in society. As a result, society provides an area for elders to be respected. The elderly serve as the sole authority, transmitters, and stores of wisdom and information in such a community. (Panday, Kiran, Srivastava, Srivastava, & Kumar, 2015). A joint report by the United Nations Population Fund and Help Age International in 2012 said India currently has about 100 million older individuals, and by 2050, that figure is projected to rise to 323 million, or 20% of the country's overall population (Govil, & Gupta 2016).

In India, elderly people prefer to live with their children, especially elderly women and they consider it as their duty to look after them. But sometimes when the elderly do not have a family to support them, the old age home becomes their last resort. As a result, today we are witnessing a massive increase in the number of old age homes. Elderly people experience a sense of security and friendship when they share their joys and sorrows in the institution, even though they may have feelings of loneliness, emptiness, being unwanted, etc. But whatever may be the facilities available at the old age home, life in a family can never be substituted by an institution. So, this might lead to depression (Sinha, Shrivastava, & Ramasamy, 2013).

In India, the joint family system has long been the norm, and sons, in particular, have traditionally taken care of their aging parents especially elderly women. The inevitable process of growing older is accompanied by several social, psychological, hormonal, and physical changes. The quality of life for the elderly is impacted by these changes (Singh, 2014). As a result, the physical and mental health of the elderly population is changing, and old age homes are becoming more common. (Menezes, &Thomas,2018).

On the other hand, some people are compelled to enter an old age home because they did not receive adequate emotional support from their children and instead suffered from verbal and occasionally physical abuse, neglect, and contempt. They appear to choose to reside in the comfort of their house with their children and grandkids despite all the hardship and difficulty. (Dubey, Bhasin, Gupta, & Sharma, 2011) People experience mental distress owing to social maladjustment as they become older, which causes them to go through a phase of depression. (Karthik, Vishwantha, Shobha, Ranganath, & Sushmitha, 2016).

The study on depression among elderly women residing in old age homes in Wayanad District, Kerala, carries significant importance for the well-being of this vulnerable population. It has the potential to inform policies, interventions, and support systems, ultimately improving the mental health and quality of life for elderly women in the district. By addressing this issue, we can work towards a more inclusive and compassionate society that values and cares for its elderly members. The study aims to assess depression among elderly women residing in old age homes in Wayanad district, Kerala State. The result of the study can help elderly women to lead a more happy and healthy life.

AIM AND OBJECTIVES

- To Assess the level of depression among elderly women in the old age homes in Wayanad district of Kerala state.
- To find out the association between depression and socio-demographic factors among elderly women in the old age homes in the Wayanad district of Kerala state.

HYPOTHESES

- There will be a high level of depression among the elderly women residing in the old age homes in the Wayanad District of Kerala state
- There will be an association between depression and socio-demographic factors among elderly women in the old age homes in the Wayanad district of Kerala state.

REVIEW OF THE LITERATURE

According to the study Datta, A. (2017). results indicated that in India, the old population has grown significantly over the past ten years, placing a heavy responsibility on young people to care for their elderly relatives. Old-age homes have been the ideal solution to this issue because they offer superior services and care for the elderly, and as a result, older residents are said to feel happier there. Menezes, S., & Thomas, T. M. (2018). Results indicated that families are typically unable to provide better services to the elderly due to various reasons. Because of this old age homes have emerged and are playing a significant role in caring for the elderly. Elderly people are more dependent on the younger generation, which makes the younger generation feel like a burden.

The study of Javier Jerez-Roig, Nayara Priscila, & Dantas de Oliveira, (2016) reveals that children have moved to many foreign countries as well as locations far from their original homes. Therefore, even if they would like to, they are unable to take care of their parents there. Sonam Kumari, Mithilesh Verma, & Sangeeta Gupta, (2016) conducted a study on the reason for Shifting People to Old Age Homes. They found that 82.5% of respondents moved into an old age home because they felt loneliness. George Krucik, (2016) says that elderly men and women are more likely to experience depression due to the loss of a loved one.

Saurabh Kumar, Sharon Joseph, & Athul Abraham, (2021) expressed through their study that depression was a somewhat common condition among elderly women living in old age homes. How

long they had been residents of old age homes, institutionalized elderly women were more likely to experience depression if they had fewer interactions with their peers and worse functional ability scores. According to the result of the study by Sinha, Shrivastava,& Ramasamy, (2013). mild depression is prevalent among elderly people residing in old age homes, especially in women and elderly widows. Denny, & Vidya, (2023) suggested that to reduce the gap between old age homes, the family, and other community members, it is vital to raise age awareness among the general public and among medical professionals, as well as to improve the elderly's access to high-quality healthcare.

RESEARCH METHODOLOGY

The researcher approached elderly women residing in the four old age homes in the Wayanad district. The study ensured a representative population based on the homogeneity of the population selected for the study. Fourty elderly women in the age group of 60 to 79 were considered for the study. The results of the study were analyzed and discussed with experts. A questionnaire was prepared in tune with the requirements of the present research. The items selected for the study were subjected to reliability and validity tests.

Inclusion Criteria

- 1. The elderly women residing in old age homes between the age group of 60 to 79 years
- 2. The elderly women who gave consent to participate in the study
- 3. The elderly women who were available at the time of data collection
- 4. The elderly women who were able to respond appropriately

Exclusion Criteria:

- 1. The women below the age group 60 and above 79
- 2. The women who were seriously ill.
- 3. The women from outside Wayanad District.

Study period: August to September 2023.

Study tool:

The questionnaire consisted of two sections:

Section 1: A self-structured questionnaire consisting of questions related to socio-demographic factors. It contains characteristics such as age, gender, education, religion, marital status, no of children, types of visitors, frequency of visits, Satisfaction with the healthcare services provided, the recreational and leisure activities that suit their interests and abilities, the voice in decision-making processes, Availability of emotional support and companionship, personal space and privacy and satisfaction of the quality of the food provided.

Section 2: A standard, pre-tested, externally validated depression scale ie. Beck Depression Inventory-II (Aaron Beck). The Beck Depression Inventory-Second Edition (BD-II) is a 21-item self-report instrument for measuring the severity of depression of aged 13 and older. Each item is rated on a 4-point scale ranging from 0 to 3.

Validity:

The validity of a scale is defined as the accuracy with which it measures what it is intended to measure. The content validity of the depression scale was ensured by checking and making modifications. The validity was assessed by experts. The language used was simple. The questions were translated from English to Malayalam (local language) and validated by vice versa.

Ethical Considerations

Full information about the study and its purpose was given to the Orphanage Control Board and they obtained their written permission. Further, the data was collected by the researcher herself by using the interview schedule. Proper information was given to the staff of the old age homes. The

questionnaire to the participants was explained briefly. The participants were informed that the information provided would be treated confidentially.

Data Analysis and Findings

The data collection was done by the researcher individually from the respondents. All the doubts about the questions were clarified. The data obtained from the elderly women respondents were recorded in the interview schedule. Data was entered in Microsoft Excel worksheet 2013. The collected data had been entered into a master data sheet. A codebook prepared consisted of variable classification and codes to facilitate data processing, editing, and classification. It facilitated the proper arrangement of data. Tables and diagrams were used to present the data collected from the respondents.

Demographic profile of respondents

This section presents the demographic profile of the respondents. The researcher utilized frequencies and percentages to identify data characteristics.

Sl	Profile		Frequency	% of total	P Value
1	Age	60-64	16	40%	0.071
	_	65-69	12	30%	
		70-74	7	17.5	
		75-79	5	12.5%	
2	Education	No Schooling	7	17.5%	0.010
		1-7	24	60%	
		8-PDC	0	22.5%	
3	Religion	Hindu	12	30%	0.294
	_	Christian	28	70%	
		Muslim	0	0	
4	Marital Status	Widow	25	62.5%	0.135
		Divorced/	3	7.5%	
		separated			
		Single	12	30%	
5	Number of children	No children	21	52.5%	0.036
		1-2	13	32.5%	
		3-4	5	12.5%	
		Above 5	1	2.5%	
6	Frequency of visits	Never	10	25%	0.175
		Once in six months	28	70%	
		Once a year	0	0%	
		More than two	2	5%	
		years			
7	Satisfaction with the	Not at all	6	15%	0.644**
	healthcare services provided	Rarely	9	47.5%	
	by the old age home	Sometimes	11	27.5%	
		Often	4	10%	
8	Ability to access recreational	Not at all	6	15%	0.391*
	and leisure activities that suit	Rarely	15	37.5%	
	your interests and abilities	Some times	17	42.5%	
		Often	2	5%	

Table No.1 Association between Depression and Demographic Profile

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).



Chart No. 1 Distribution of Depression score

The present study was based on the selected 40 elderly women from four old age homes in the Wayanad district. The chart reveals that out of Fourty elderly women from the four old age homes, 5 (12.5%) of them have severe depression, 18 (45%) of them have moderate depression, 8(20%) have mild, and 9(22.5%) of them have minimal depression.

DISCUSSIONS

The analysis of data of the study reveals certain significant aspects which are termed as the major findings of the study. In this, the major findings were derived from data analysis. The result of the study shows that out of 40 participants, 5 (12.5%) of them have severe depression,18 (45%) of them have moderate depression, 8(20%) have mild, and 9(22.5%) of them have minimal depression. There is a significant association between socio-demographic factors and depression, in which age, marital status, number of children, frequency of visits, and healthcare services provided, recreational and leisure activities, were significantly associated with depression.

RECOMMENDATIONS

Provide access to counseling services, including individual and group therapy sessions, to address emotional and psychological needs, encourage group activities such as games, arts and crafts, or gardening to foster social interaction, and facilitate regular visits from family members and friends to maintain a strong support system.

CONCLUSIONS

Most of the elderly women in the institutions do not receive any support from their children or any other family members. The elderly women of the old age homes are protected by the old age home and well wishes of them due to their poor financial condition. Many of the elderly women have children and relatives but they have no interest in giving them care and emotional support. Even though the children are financially sound, their parents are not getting any help from them. Most of the elderly women are in old age homes because of the lack of love and irresponsibility of the children. A vast majority of the elderly women residing in the e old age homes have depression.

SCOPE FOR FURTHER RESEARCH

There is a scope for further studies; more research could increase our knowledge, which would help the younger generation to reduce the level of depression of elderly women through the deep knowledge received from the studies. And also motivates the elderly to engage in various activities. Gender differences in Depression can be studied. Depression other variables like loneliness, social support, general health, etc., can be studied.

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