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"A STUDY TO ASSESS THE EMOTIONAL PROBLEMS AMONG ELDERLY PEOPLE RESIDING AT SELECTED OLD AGE HOMES IN BELGAVI CITY IN A VIEW TO DEVELOP AN INFORMATION BOOKLET."

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ABSTRACT:

Ageing is a normal universal change taking place even with the best nutrition & health care. During the old age, the scope & sphere of their social interaction is reduced mainly in the family circle. Studies have shown that most common old age problems are economical dependency, loneliness, insecurity and diminished self-concept. In the families when the elderly cease their functional ability they may viewed as a burden for the family, community and may end up in institutionalization. Living in an institution demands specific adjust mental tasks to cope with the problems. Some individuals make good adjustments and some find it difficulty which results in stress, anxiety, tension, etc. complications. After the administration of linkert questions result shows that majority of the participants 92(92 %) were having moderate emotional Problems, 8 (8 %) were having severe emotional problems and no participants had mild emotional problems. Demographic variables like meeting with family, gender, were statically significant in development of emotional problems

Key words: Elderly, Emotional problems, Old age homes, information booklet.

INTRODUCTION

Demographic ageing is a global phenomenon. In the words of Seneca; 'Old age is an incurable disease", but more recently, Sir James Sterling Ross commented: "You do not heal old age. You protect it; promote it; you extend it". Therefore old age should be regarded as a normal, inevitable, biological phenomenon. The world's population is ageing. By 2025, the world's population is expected to include more than 830 million people at

an age of 65. The percentage of the population >= 65 will be highest in developed countries, but the absolute number will be higher in developing countries. Developing countries such as China and India have the largest total population, and will continue to have the largest absolute number of elderly people. With a comparatively young population, India is still poised to become home to the second largest number of older persons in the world.

In primary aging there is degeneration of 'regulatory mechanism' controlling various organic tissues especially of nervous, endocrine and immune systems. In brief, with age skin gets dry, wrinkles appear, hair grays and drops, hearing decreases, bodily powers wane, sleep pattern is altered, loss of memory occurs. Conditions imposed by primary factors are stepped up by secondary factors like disease, malnutrition etc. Weakening of the body provide inroad to microbial attacks and the situation is often aggravated with multiple ailments (Subramanya G, 2000)

STATEMENT OF PROBLEM

"A study to assess the emotional problems among elderly people residing at selected old age homes in Belgavi city in a view to develop an information booklet"

OBJECTIVES OF THE STUDY

- 1. To assess the emotional problems among elderly people residing in selected oldage homes.
- 2. To determine the association between emotional problems with selected demographic variables of elderly people residing in selected old age homes.
- **3.** To develop an information booklet based on the findings of the study.

HYPOTHESIS

- H0: There will be no significant association between selected demographic variables with developing emotional problems.
- **H1**: There will be a significant association between selected demographic variables with developing emotional problems.

DELIMITATION

- Elderly people those residing in old age homes since past one year. 1.
- Elderly people above 60 years of age. 2.
- Elderly people who can read and understand English and Marathi. 3.
- Both the sexes (male & female) will be included in this study. 4.

PROJECTED OUTCOME

The study findings will help to assess the emotional problems in elderly people living in the old age homes in the city of Belgavi.

REVIEW OF LITERATURE:

The review of literature for this study was organized under following headings.

- Emotional problems of elderly people.
- Emotional problems of the elderly residing in old age homes
- Psychosocial changes in elderly people.

Research Methodology:

The research approach used for this study was Quantitative research approach. The proposed study was undertaken in selected old age homes of Belgavi city and the elderly above the age group 60 years were selected.

POPULATION

Target population

Elderly people above the age group 60 years and those living in old age homes all over Belgavi city.

Accessible Population

Elderly people residing in the two old age homes of Belgavi city Garukul old age home and Bharat Suresh old age home.

SAMPLING TECHNIQUE:

In this study, the sampling technique used was non probability purposive sampling, the selection of sample depended upon the readily availability and fulfillment of the inclusive criteria until a designed size of 100 was reached.

CRITERIA FOR SAMPLE SELECTION:

The samples were selected based on the following inclusion and exclusion criteria

Inclusion criteria

- Elderly people those residing in old age homes since past one year.
- Elderly people above 60 years of age.
- Elderly people who can read and understand English.
- Both the sexes (male & female) will be included in this study.

Exclusion criteria

- People living with their spouse in the old age home.
- People with known case of physical illness and psychological conditions.

VARIABLES:

Independent Variables

In this study, information booklet was the independent variable.

Dependent Variable

In this study, assessment of emotional problems in elderly people living in old age homes was dependent variable.

Section A

It was about demographic profile such as Age, Gender, Religion, Type of family, Marital Status Educational qualification, Meet Family Member, Support System, Financial Support, Health Status

Section B

A semi-structured questionnaire which consists of 28 Likert questions was used to identify the sources of emotional problems in elderly living in old age homes

RELIABILTY OF THE TOOL

The tool was tested for reliability on 10 respondents' i.e. elderly people at old age home. The reliability was assessed using split-half method. Chronbach's alpha was calculated to be 0.82 which is sufficiently high to conclude that the tool is reliable.

DATA COLLECTION PROCEDURE:

The purpose of the study and the method of data collection were explained to the subjects for getting their true responses. They were also given assurance regarding the confidentiality of the information. An informed consent was obtained from the respondents indicating their willingness to participate in the study. Subjects who fulfilled the sampling criteria were selected from the two selected old age homes of Belgavi city Garukul old age home and Bharat Suresh old age home from whom the samples were selected by non-probability purposive sampling technique. The participant was interviewed personally and the questionnaire was filled individually. The data was collected from 22 June to 28th June 2018 and the collected data was compiled for analysis.

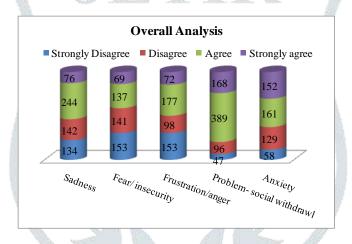
Results:

The analysis of the data related to emotional problems of the elderly living in old age homes

OVERALL ANALYSES OF EMOTIONAL PROBLEMS

Area	Strongly Disagree	Disagree	Agree	Strongly agree
Sadness	134	142	244	76
Fear/ insecurity	153	141	137	69
Frustration/anger	153	98	177	72
Problem- social withdrawal	47	96	389	168
Anxiety	58	129	161	152

OVERALL ANALYSES OF EMOTIONAL PROBLEMS



CATEGORIZATIONS OF THE EMOTIONAL PROBLEMS

	A. Carrier and Car		
Category	Frequency	%	
Mild	0	0%	
Moderate	92	92%	
Severe	8	8%	
Total	100 10		

From the above it shows that majority of the participants 92(92 %) were having moderate emotional Problems, 8 (8 %) were having severe emotional problems and no participants had mild emotional problems

The association between emotional problems with selected demographic variables was assessed by using ANOVA. The summary results of ANOVA are tabulated below.

Demographic variable	F	P
Age	0.44	0.78
Gender	6.69	0.01
Religion	0.23	0.88
Type of family	4.7	0.03
Marital Status	1.69	0.17
Education	1.22	0.31
Meet Family Member	3.05	0.02
Support System	1.21	0.27
Financial Support	0.88	0.45
Health Status	0.4	0.53

p-values corresponding to Gender, Type of family, Type of OAH and Frequency to meet family member are 0.01, 0.03, 0.05 and 0.02 the values which are less than 0.05, hence the null hypothesis of no significance is rejected for these demographic variables.

ONEWAY ANOVA: SCORE BY GENDER.

ANOVA					
Score					
	Sum of Squares	Df	Mean Square	F	Sig.
Gender	146.143	1	146.143	6.691	0.011
Error	2140.447	98	21.841		
Total	2286.59	99			

THE GENDER SPECIFIC AVERAGE SCORE.

Gender	Average score
Male	77.78
Female	75.05

The score was found to be higher for males than that for females.

ONEWAY ANOVA: score BY Meet family member.

ANOVA					
Score					
	Sum of Squares	Df	Mean Square	F	Sig.
Meet Family Member	260.121	4	65.03	3.049	0.021
Error	2026.469	95	21.331		
Total	2286.59	99			

Since p-value is less than 0.05, null hypothesis is rejected, concluding that the association between Frequency of meeting family member and emotional problems is statistically significant.

Following table gives the frequency of meeting family member specific average score.

Meet Family member	Average score
Weekly	70.75
Monthly	75.81
Half Yearly	76.25
Once a year	77.18
Anytime	71.86

From the above table, it is clear that lesser the frequency of meeting family member, higher is the score.

CONCLUSION:

Keeping in view the findings of the study, the following recommendations were made.

- A similar study may be replicated on a larger sample; thereby findings can be generalized for a larger population.
- A comparative study can be carried out among elderly people residing in old age homes with those living in family setting.
- A comparative study can be carried out among elderly people residing in urban areas with those living in rural areas.
- Individual case studies can be done on those old people who are satisfied with their life.
- A study to assess the physical, mental, socioeconomic, cultural and spiritual status of the elderly can be done.

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