



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

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ABSTRACT

Aging is a lifelong process that starts at conception and continues throughout the duration of a person's existence. It stands for the later stage of life, which is characterized by reflection, a slow realization of one's life's purpose, and introspection. Many older people suffer from depression for a variety of reasons, such as living alone and having no close family, as well as physical health issues and weakened ties to their own culture. In India, it is common for older people to want to live with their offspring. This is because it is a cultural standard for the younger generation to feel obligated to take care of and assist their elders. This generational link demonstrates how much society values close family relationships and the health of elderly family members. However, if they have no relatives to help them, the old age home ends up being the elderly person's last resort. The researcher employed a strategy known as descriptive study design. This will be used to determine the level of depression that senior citizens residing in assisted living homes are experiencing. This study will employ both primary and secondary sources of information, including interviews and surveys. A survey of sixty senior citizens residing in six senior living facilities in the Wayanad District was carried out in July and August of 2023. A pre-tested, externally validated version of the Beck Depression Inventory - Second Edition (BD-II) in the local language is used after gaining informed consent. The result of the study shows that out of 60 participants, 23.33% of them have severe depression, 50% of them have moderate depression, 23.33% have mild and 3.34% of them have minimal depression.

KEYWORDS: *Depression, Elderly, Beck Depression Inventory scale, Old age homes.*

INTRODUCTION

The notion of aging has been a matter of reflection since ancient times, representing a fundamental aspect of the human journey. Though frequently linked with adverse connotations, aging can be interpreted as an inherent process of development unfolding over a predetermined period. This concept encapsulates the gradual physiological and anatomical changes that occur with time, depleting physiological reserves and reducing functional capacities. Importantly, aging can also encompass positive dimensions, including maturation and the cultivation of commendable qualities (Haliburn, 2015). In a technical sense, the aging trajectory of all living organisms begins at the moment of conception. However, societal recognition of aging typically emerges when tangible effects, such as balding, graying hair, or the necessity for bifocals, become noticeable due to the gradual and continuous nature of the aging process.

The elderly frequently discover solace and companionship by exchanging their joys and sorrows within institutional settings, even as they contend with feelings of loneliness, emptiness, and a sense of

being unwanted. Nevertheless, it is crucial to acknowledge that, regardless of the amenities offered by institutions, the warmth and connection of a family environment remain irreplaceable. This contrast between institutional life and familial bonds can significantly elevate the risk of depression among the elderly (Chieffi 2017). Depression is a common emotional ailment that affects the elderly population. Characterized by heightened feelings of grief and despair, diminished self-esteem, a waning interest in previous activities, and a prevalence of negative thoughts, this mood disorder is prevalent among the aged. Various factors, including physical illness, functional disability, and cognitive impairment, significantly contribute to the increased frequency of depression in the elderly (Das 2013).

The researcher is working for the well-being of elderly individuals residing in old age homes within the Wayanad District of Kerala state. Through careful observation and interaction, it has become apparent that a significant proportion of the elderly population in these homes is grappling with symptoms of depression. Motivated by the desire to enhance their quality of life, the current research aims to investigate the socio-demographic factors linked to depression and assess the varying levels of depression among elderly people.

REVIEW OF LITERATURE

Amal Dev, (2016) stated that in our society, those who are 60 years of age or older are regarded as elderly and about 6% of India's population is over sixty years old. It is projected that Kerala will have 7.2 million senior citizens by 2021 and 11.9 million by 2051. According to Shakuntala Patil and Sunanda Itagi (2014), the age structure of the global population is changing quickly. Global mortality rates have decreased as a result of epidemiological and demographic changes. Fertility rates are also falling at the same time due to other socioeconomic factors and the accessibility of family planning options. Many people find that their old age is a trying time due to deteriorating health, lower income, losing a fulfilling job, or the passing of loved ones. Elderly adults may experience severe distress as a result of these issues, which may also harm their relationships with spouses and kids. In severe situations, this harm may result in sadness or mental disease.

Brian Krans (2012), remarked, "This unhappy situation in our society is the result of the breakdown of the joint family system and the introduction of the nuclear family; as a result, institutions have had to arise to meet the needs of the elderly people." In addition, no one is left to take care of the elderly's daily requirements at home since the ladies have started working from home. As a result of the study conducted by Lamichhane, Nepal, & Dhakal, (2022) 53.9% of elderly people in institution-based research of psychiatric morbidities in Jammu, India, were depressed, according to the results. Narkhede, Likhari, & Rana, (2012) conducted a study on depression in elderly inmates living in old age homes in Gujarat. A study conducted on depression in elderly people staying in old age homes, in Gujarat, found that 31.9% of the prisoners were in the 65 to 69 age range. Elderly persons who were not working inmates (65.8%) and those who had only recently entered an old age home (64.1%) were more likely to experience depression. Inmates who shared a residence with their wives experienced a lower incidence of depression (57.7%). Depression is defined as a mental condition characterized by feelings of severe despondency and dejection, typically associated with feelings of inadequacy and guilt, often accompanied by lack of energy and disturbance of appetite and sleep," according to a study by Fredrica Nyqvist and Mima Cattan (2013).

Lorente T (2015) stated that depression is a prevalent affective illness observed in the elderly. Characterized by heightened feelings of grief and despair, diminished self-esteem, a loss of interest in past activities, and the prevalence of negative thoughts, this mood disorder is noteworthy in older age. Physical illness, functional disability, and cognitive impairment are factors that significantly influence the increased frequency of depression in the aged. Gautam, Shivalingesh, Kushwaha, Shoaib & Mahar, (2022) remarked that in contrast to individuals living with spouses (10% in old age homes and 14% in family settings) and those who were never married (10% in old age homes and 14% in family settings), widows/widowers exhibited a higher percentage of older adults experiencing depression (52% in old age homes and 46% in family settings). An examination of depression in older individuals residing in family settings versus nursing homes revealed a statistically significant difference between the two

groups ($p < 0.001$). Tripathi, (2014), conducted a study aimed to evaluate the geriatric challenges encountered by senior residents in old age homes and explore the connection between demographic factors and the geriatric issues experienced by the elderly. The survey results revealed that 78% of respondents reported mild psychological issues, 20% reported moderate concerns, and only 2% reported severe psychological problems.

OBJECTIVES

- To know socio-demographic factors associated with depression among the elderly people in the old age homes in Wayanad District.
- To know the level of depression among elderly people in the old age homes in Wayanad District of Kerala state

RESEARCH METHODOLOGY

The study ensured gender representation, with 30 male and 30 female elderly people in the age group of 60 to 79 considered for the study. The researcher approached elderly people residing in 6 old age homes in the Wayanad district. The study ensured a representative population based on the homogeneity of the population selected for the study. The results of the study were analysed and discussed with experts. A questionnaire was prepared for the requirements of the present research. The items selected for the study were subjected to reliability and validity tests. The construct validity and content validity were determined before the final consideration of the questionnaire.

Inclusion criteria

Elderly men and women between the age group of 60 to 79 years residing in the old age homes, Men and women who gave consent to participate in the study, men and women who were available at the time of data collection, and Men and women who were able to respond appropriately.

Exclusion Criteria:

Men and women below the age group 60 and above 79, men and women who were seriously ill, and men and women from outside Wayanad District.

Study period: July to August 2023

Study tool

The questionnaire consisted of two sections:

Section 1: A self-designed, pretested semi-structured questionnaire consisting of questions related to socio-demographic factors.

Section 2: A standard, pre-tested, externally validated depression scale ie. Beck Depression Inventory-II (Aaron Beck).

Validity: Validity assesses the meaning of measurement. 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 Social Justice Department Wayanad District and 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 inmates 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 people respondents were recorded in the interview schedule. Data was entered in Microsoft Excel worksheet 2013 and analyzed using SPSS version 16.

The collected data had been entered into a master data sheet. A codebook was prepared which consisted of variables classification and codes to facilitate the processing, editing, and classification of data. It facilitated the proper arrangement of data. Tables and diagrams were used to present the data collected from the respondents.

Chart No: 1

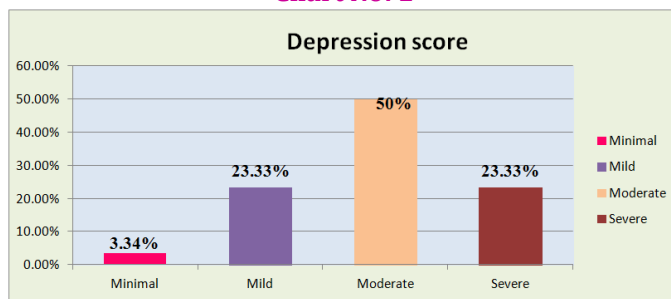


Table No.1 Association between Depression and Demographic Profile

Demographic Profile	Depression				Total	p-value
	Minimal	Mild	Moderate	Severe		
Age (Years)						
60 - 69	1 (3%)	9 (26%)	18 (51%)	7 (20%)	35	0.914
70 - 79	1 (4%)	5 (20%)	12 (48%)	7 (28%)	25	
Gender						
Male	1 (3%)	10 (33%)	11 (37%)	8 (27%)	30	0.148
Female	1 (3%)	4 (13%)	19 (63%)	6 (20%)	30	
Education						
No Schooling	0 (0%)	2 (13%)	10 (67%)	3 (20%)	15	0.668
1 - 7	1 (3%)	7 (24%)	15 (52%)	6 (21%)	29	
8 - PDC	1 (9%)	3 (27%)	4 (36%)	3 (27%)	11	
Above Degree	0 (0%)	2 (40%)	1 (20%)	2 (40%)	5	
Religion						
Hindu	1 (3%)	7 (21%)	17 (52%)	8 (24%)	33	0.989
Christian	1 (4%)	6 (25%)	12 (50%)	5 (21%)	24	
Muslim	0 (0%)	1 (33%)	1 (33%)	1 (33%)	3	
Marital Status						
Widow/Widower	0 (0%)	9 (35%)	13 (50%)	4 (15%)	26	0.049
Divorced	1 (33%)	0 (0%)	0 (0%)	2 (67%)	3	
Separated	1 (9%)	1 (9%)	5 (45%)	4 (36%)	11	
Single	0 (0%)	4 (20%)	12 (60%)	4 (20%)	20	
Number of Children						
No Children	1 (3%)	6 (19%)	19 (61%)	5 (16%)	31	0.211
1 - 2	0 (0%)	7 (32%)	7 (32%)	8 (36%)	22	
3 - 4	1 (17%)	1 (17%)	3 (50%)	1 (17%)	6	
Above 5	0 (0%)	0 (0%)	1 (100%)	0 (0%)	1	

Years in the Institution						
0 - 1	0 (0%)	7 (41%)	8 (47%)	2 (12%)	17	0.092
2 - 3	0 (0%)	4 (33%)	6 (50%)	2 (17%)	12	
4 - 5	1 (25%)	0 (0%)	3 (75%)	0 (0%)	4	
Above 5	1 (4%)	3 (11%)	13 (48%)	10 (37%)	27	
Type of Visitors						
Children	0 (0%)	5 (36%)	5 (36%)	4 (29%)	14	0.469
Relatives	0 (0%)	4 (24%)	11 (65%)	2 (12%)	17	
Nobody	2 (7%)	5 (17%)	14 (48%)	8 (28%)	29	
Frequency of Visits						
Never	2 (7%)	5 (17%)	15 (50%)	8 (27%)	30	0.816
Once in 6 Months	0 (0%)	7 (28%)	12 (48%)	6 (24%)	25	
Once a Year	0 (0%)	1 (33%)	2 (67%)	0 (0%)	3	
More than Two Years	0 (0%)	1 (50%)	1 (50%)	0 (0%)	2	
Total	2 (3%)	14 (23%)	30 (50%)	14 (23%)	60	

The findings reveal that out of 60 participants, 23.33% of them have severe depression, 50% of them have moderate depression, 23.33% have mild, and 3.34% of them have minimal depression.

Discussions:

The present study was based on the selected 60 elderly people from 6 old age homes in the Wayanad district. The above table shows the association between depression scores and other independent variables and they are;

Regarding the relationship between age and depression score, the 60-year-old individuals' p-value is 0.914, suggesting a high level of significance, while the relationship between gender and depression score is indicated by a p-value of 0.148, suggesting a medium level of significance. The correlation between education and depression score is highly significant, as indicated by the p-value of 0.668 for the education and depression score and 0.989 for the religion and depression score.

In the case of marital status and depression Score the p-value of 0.049, the association is significant, and number of children & and depression Score's, the p- p-value is 0.211 indicating a medium level of significant association. Years in institution & Depression Score: The p-value of 0.092 indicates that the association is a medium level of significance Type of Visitors & Depression Score: The p-value of 0.469 indicates a high level of significant association. Frequency of Visits & Depression Score: The p- p-value is 0.816 indicating a high level of significant association.

Limitations of the study

The participants exhibited reluctance to divulge details about their offspring. Most of the elderly individuals were reluctant to respond to questions about themselves or their family members. Another constraint was the element of time. The interview session lasted between fifty and sixty minutes for every participant.

RECOMMENDATIONS

- The curriculum should incorporate the duty of children to care for their ailing parents and sick siblings starting in primary school.
- To address their financial crisis, the government should offer financial assistance in the form of health insurance and pensions.
- Every institution should have access to a counselor once a week, provided by the government.
- Those who are elderly should be encouraged to work in vegetable or flower gardens, take care of pets, and do other projects that will help them feel less alone, insecure, and depressed.

CONCLUSIONS

The majority of elderly individuals residing in institutions receive no support from their children or other family members. Being in an assisted living facility is not the result of a lack of resources or education. The elderly residents of the facility are lonely and anxiously await the arrival of their loved ones. The children don't provide their parents any assistance, even if they are financially secure. Because of the children's lack of love and carelessness, the majority of elderly people are living in institutions. The research not only contributes valuable insights into the mental well-being of elderly residents but also opens avenues for further exploration into the factors influencing depression in this context. By investigating the relationship between demographic factors and geriatric issues, the study provides a foundation for targeted interventions and support systems tailored to the specific needs of elderly individuals in Wayanad district.

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