

A Comparative Study to Assess the Level of Depression among Old Age People Residing at Old Age Home and Within Family, in Selected Areas of Kheda District

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Key words

Level of depression, old age home, old age people, within family

Abstract

Background of Study: Even with the best nutrition and medical care, ageing is a normal, universal, and unavoidable change. It is a lifelong shift that is tied to time. 1 The worldwide population is ageing quickly; by 2050, there will be twice as many persons 60 and older than there were in 2006. According to World Health Organization (WHO) predictions, cardiovascular disease will continue to be the major cause of disability and death worldwide through 2020, with depression coming in second.²

Objectives: 1. To assess the level of depression among old age people residing at old age home and within family. 2. To compare the level of depression among old age people residing at old age home and within family. 3. To find the association between the level of depression with selected demographic variables.

Methodology: The research method adopted was quantitative. The study used a non-experimental research design. With the Non-Probability Convenient Sampling Method, a total of 50 samples were chosen among residents of senior care facilities and homes for families. After receiving informed consent, the researcher used the geriatric depression scale (30) to gather data in the local language.

Results: The elderly who reside in nursing homes were 8 (32%) normal, 12 (48%) mildly depressed, and 5 (20%) had severe depression. When compared to older adults who live with their families, 19 (76%) of them had normal moods, compared to 5 (20%) who had mild depression and 1 (4%), who had severe depression. Age, Religion Status, Educational Status, Marital Status, Number of Children, and Frequency of Child Visits were taken into account for determining the association with level of depression. Chi-square analysis was used to determine the association between the mean difference level of depression among elderly people living at home and their chosen demographic variables.

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1. Introduction: Exaggerated feelings of melancholy, despair, low self-esteem, loss of interest in previously enjoyed activities, and pessimistic thinking are all characteristics of depression, a mood disorder. The most prevalent affective condition that affects older people is depressive disorders. Depression was more common in older people with recent or ongoing illnesses.³

Depression is the most prevalent psychiatric disorder affecting this at-risk population. 1 in 20 persons, or 11.5 million people overall, are affected annually. One to six percent of the population in India suffers from depression.⁴ Death by depression is silent. Elderly people with co-morbid conditions are especially likely to experience depression at old age homes (OAHs), where they appear to be openly abandoned by the community. Improving quality of life requires its early detection and treatment⁵.

Over 322 million individuals worldwide suffer from depression. Depression is the leading cause of disability worldwide (7.5% in 2015) and a key factor in suicides (800,000 yearly). According to the 2011 India Census, senior people (those 60 years of age and above) make up 8.6% of the country's population; by 2050, that percentage is expected to rise to 19%. Depressive disorders in the elderly are therefore likely to constitute a major contributor to the burden of disease in the future.⁶

Even in nations like India, the idea of old age homes will be on the rise due to the increased urbanisation and industrialisation of those nations. So, the goal of the current study was to assess the prevalence of depression among older

residents of nursing homes and to identify potential preventive or treatment strategies.⁷

In many Indian states, the obligation of children to look out for their parents' welfare is codified in the country's legal systems in addition to being recognized on a moral and social level. However the family has undergone significant structural and functional changes as a result of modernity, industrialization, and globalization. Due to these socio-demographic shifts, older persons occasionally may relocate from their homes to nursing homes or other facilities⁸.

2. Methodology:

Research Approach:-Quantitative research approach

Research Design: -The design of the study was used Cross sectional research design.

Sampling method: - Non probability convenient sampling technique

Study population: -In the present study, the target populations are old age people residing at old age home and within family.

Study Setting: Selected old age homes and areas of Kheda district.

Study Size: - 50 elderly persons who reside in old age homes and other regions of the Kheda district made up the study's sample size.

3. Results:

TABLE-1: Frequency and percentage distribution of socio-demographic variables of old age peoples living at old age home.

Sr. No	Demographic Variables	Frequency	Percentage
1.	AGE IN YEARS		
	60- 65 years	8	32.0%
	66-70 years	6	24.0%
	71-75 years	5	20.0%
	>75 years	6	24.0%
2.	GENDER		
	Male	19	76.0%
	Female	6	24.0%
3.	RELIGION STATUS	24	96.0%
	Hindu	1	04.0%
	Christian	0	00.0%
	Muslim	0	00.0%
	Others		
4.	EDUCATIONAL STATUS	9	36.0%
	Primary	13	52.0%
	Secondary	3	12.0%
	Higher Secondary	0	00.0%
	Graduate and above		
5.	MARITAL STATUS	6	24.0%
	Married	3	12.0%
	Unmarried	2	8.0%
	Divorced	14	56.0%
	Widow/Widower		
6.	NUMBER OF CHILD	7	28.0%
	Zero	6	24.0%
	One	8	32.0%
	Two	4	16.0%
	More than two		
7.	FREQUENCY OF CHILD VISIT	14	56.0%
	Once in a month	3	12.0%
	Once in six month	2	08.0%
	Once in Year	6	24.0%
	Never		
8.	HEALTHY HABITS	18	72.0%

	Book Reading	7	28.0%
	Exercise, yoga, Meditation		
09.	ANY BAD HABITS	3	12.0%
	Tobacco	1	04.0%
	Alcohol	21	84.0%
	Not any bad Habit		

Table no- 1 revealed that the distribution of the sample's age groups was as follows: sample 8 (32%) belongs to the 60–65 age group, sample 6 (24%) to the 66–70 age group, sample 5 (20%) to the 71–75 age group, and sample 6 (24%) to the age group beyond 75.

Regarding the gender old age people out of 25 samples, 19(76%) were Male and 6(24%) were Female. Regarding the Religion of old age people out of 25 samples, 24(96%) was Hindu, 0(0%) Muslim, 1(4%) Christian and other religion 0 (0%). Regarding education status out of 25 samples, 9(26) were completed primary education, 13(52) were completed secondary education, 3(12) were completed higher education. Regarding the Marital status out of 25 samples, 6(24%) were married, 3(12) were unmarried, 2(8) were divorced, 14(56) were widow.

Regarding the number of child of old age people out of 25 samples, 7 (28%) has zero, 6(24) has one, 8(32) has two, 4(16) has more than two. Regarding the frequency of child visit 14(56) visited once in a month, 3(12) once in a six month, 2(8) once in year, 6(24) never visited. Regarding healthy habits 18(72) interest book reading, 7(28) exercise, yoga, meditation. Regarding bad habits 3(12) tobacco, 1(4) alcohol, 21(84) no any bad habit.

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TABLE-2: Frequency and percentage distribution of socio-demographic variables of old age peoples living at home.

Sr. No	Demographic Variables	Frequency	Percentage
1.	AGE IN YEARS		
	60- 65 years	11	44.0%
	66-70 years	6	24.0%
	71-75 years	3	12.0%
	>75 years	5	20.0%
2.	GENDER		
	Male	11	44.0%
	Female	14	56.0%
3.	RELIGION STATUS	16	64.0%
	Hindu	9	36.0%
	Christian	0	00.0%
	Muslim	0	00.0%
	Others		
4.	EDUCATIONAL STATUS	13	52.0%
	Primary	7	28.0%
	Secondary	5	20.0%
	Higher Secondary	0	00.0%
	Graduate and above		
5.	MARITAL STATUS	22	88.0%
	Married	0	00.0%
	Unmarried	1	4.0%
	Divorced	2	8.0%
	Widow/Widower		
6.	NUMBER OF CHILD	0	00.0%
	Zero	2	8.0%
	One	12	48.0%
	Two	11	44.0%
	More than two		
7.	FREQUENCY OF CHILD VISIT	16	64.0%
	Once in a month	5	20.0%
	Once in six month	3	12.0%
	Once in Year	1	4.0%
	Never		
8.	HEALTHY HABITS	9	36.0%
	Book Reading	2	8.0%
	Exercise, yoga,	3	12.0%

	Meditation	11	44.0%
	Listening music		
	Chatting in a Group		
09.	ANY BAD HABITS	6	24.0%
	Tobacco	2	08.0%
	Smoking	1	4.0%
	Alcohol	16	64.0%
	Not any bad Habit		

Table - 2:- Revealed that the distribution of the sample's age groups was as follows: sample 11 (44%) belongs to the age group of 60–65 years, sample 6 (24%) to the age group of 66–70 years, sample 3 (12%) to the age group of 71–75 years, and sample 5 (20%) to the age group beyond 75 years. Regarding the gender old age people out of 25 samples, 11(44%) were Male and 14(56%) were Female. Regarding the Religion of old age people out of 25 samples, 16(64%) was Hindu, 0(0%) Muslim, 9(36%) Christian and other religion 0 (0%). Regarding education status out of 25 samples, 13(52%) were completed primary education, 7(28%) were completed secondary education, 5(20%) were completed higher education. Regarding the Marital status out of 25 samples, 22(88%) were married, 0(0 %) were unmarried, 1(4 %) were divorced, 2(8%) were widow.

Regarding the number of child of old age people out of 25 samples, 0 (0%) has zero, 2(8%) has one, 12(48%) has two, 11(44%) has more than two. Regarding the frequency of child visit 16(64%) visited once in a month, 5(20%) once in a six month, 3(12%) once in year, 11(44%) never visited. Regarding healthy habits 9(36%) interest book reading, 2(8%) exercise, yoga, meditation, 3 (12%) listening music, 11 (44%) chatting in a group. Regarding bad habits 6(24%)

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tobacco, 2(8%) smoking, 1(4%) alcohol, 16(64%) no any bad habit.

Table - 3: Distribution of the old age people according to level the depression.

Level of Depression	No. of Samples	
	Old Age Home	Old Age Home
Normal	8 (32%)	19 (76%)
Mild	12 (48%)	5 (20%)
Severe	5 (20%)	1 (4.0%)
Total	25 (100%)	25 (100%)

The data from the above table shows that, old age people live in old age home, 8 (32%) old age people were having normal, 12(48%) having mild depression, 5(20%) had severe depression. Whereas old age people who live with their family, 19 (76%) old age people had normal, 5(20%) having mild depression, 1(4%) having severe depression.

Table-4: Comparison of the level of depression among old age people residing at old age home and within family, outcome of the Independent Sample T-test

Comparison	Mean Score	SD	Mean Difference	Independent t-test
Old Age Home	12.52	6.56	4.36	2.738** df= 48 Sig.=0.009 P>0.00** S
Residential Home	8.16	4.50		

(S)= Significant At 0.05 Level

The results of an independent t-test analysis used to compare the mean levels of depression among elderly residents of old age homes and residential homes are shown in the above table. The Independent t-test result of 2.738 df=48, which was significant at the 0.05 level, was found. It indicates that there is a significant mean

difference in the level of depression among elderly persons between old age homes and residential homes.

Table - 5: Comparison the level of depression among old age people residing at old age home and within family, outcome of the One Way ANOVA

Comparison	Mean Score	SD	df	One Way ANOVA
Old Age Home	12.52	6.56	48	7.496** Sig.=0.009 P>0.00** S
Residential Home	8.16	4.50		

(S)= Significant At 0.05 Level

The above table depicts the outcome of One Way ANOVA analysis carried over to assess the significance comparison mean score of level of depression regarding among old age peoples living at Old age home and Residential Home. The One Way ANOVA test score 7.496 df=48, was found to be significant 0.05 level. It means there is significant mean difference between Old age home and Residential Home in level of depression among old age peoples.

4. Conclusion:

Depression was found among old age people residing in an old age home and those residing with the family. However, the old age people residing at old age home had severe depression four times more than old age people living with the family.

The analysis has been organized and presented under various sections like description of demographic variables, distribution of the old age people according to the level of depression, comparison the level of depression among old age people residing at old age home

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and within family and association between the levels of depression with the selected demographic variables.

Conflict of Interest: Nil

Source of Funding: College Management

Ethical Clearance: The study was approved by the research committee, IEC – DPCN/2nd IEC/2020-2021 and a formal written permission was gathered from the old age home.

Statement of Informed consent: Informed consent was acquired from the participants

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