

Psychological Well-Being and Depression Among Inhabitants of Old Age Homes of Jaipur, Rajasthan

KEYWORDS	Aging, Depression, Eld	lerly, Old age homes, Psychological well-being			
*Mohd	Wasim Mughal	Dr. Nishi Fatma			
	linical Psychology from Nims ır. *Corresponding Author	Assistant Professor and Head, Department of Psychology, Nims University, Jaipur			
These pe	ople are faced with numerous phys	nd growing due to advancement of health care education sical, psychological and social role changes that challenge we context a study was conducted to understand the psyc			

These people are faced with numerous physical, psychological and social role changes that challenge their sense of self and capacity to live happily. In the above context, a study was conducted to understand the psychological well-being and depression among inhabitants of old age homes. This study was carried out on 60 elderly people (both males and females) of 60 years of age and above residing in selected old age homes of Jaipur city. The tools used for this study were Beck's Depression Inventory and Ryff's Psychological Well-being Scale. T-test was applied to check the difference of depression and psychological well-being among elderly males and females and the Karl-Pearson 'r' method was used to check the correlation. Result reveals that a significant difference in depression and psychological well-being with respect to both elderly males and females. While correlation between depression and psychological well-being among elderly males and females reveals that there is positive correlation among elderly males and a negative correlation among elderly females.

INTRODUCTION

Aging is not a disease, but the final stage of normal life. "Old age is an incurable disease". "You do not heal old age", "You protect it", "You promote it", and "you extend it"¹.

The World Health Organization (WHO) postulates three components in its definition of health - the mental, the physical, and the social components. Edward J. Stiegitz defines aging "as the element of time living". According to him "Aging is a part of living". Aging begins with conception and ends with death. Old age means reduced physical ability, declining mental ability, the gradual giving up of role playing in socio-economic activities, and a shift in economic status moving from economic independence to economic dependence upon others for support. Define aging in terms of the biological; referring to "the regular changes that occur in mature genetically representative organism living under reprehensive environmental conditions as they advance in chronological age". The world elderly population in the last 50 years from 1950 to 2000 had increased from 8 to 9.9 percent of total population. The proportion of elderly population is expected to increase from 9.5 percent in 1955 to 14.6 percent in 2025. According to 2001 census, in India, there are about 75 million (7.3%) elderly people. It is expected to be around 179 million by 2031, 301 million by 2051 and 340 million in 2061. The population of elderly in India (over 60 years) ranks second in the world (Sharma, 1992)². The main reason for this is latest technology, medicine, world class treatment and social protection etc (Sahoo, et al., 2009)³.

Ageing bring along a number of changes in the physical, psychological, hormonal and the social conditions. Potter and Perry (2005)⁴ stated that ageing is a life spanning process of growth and development from birth to death. Old age is an integral part of the whole, bringing fulfillment and self actualization. The ageing process occurs in every living species, as also in human beings by graying of hair, wrinkling of skin, hardening of arteries, aches and pains in joints and weakening of eye sight. Old age is called

"dark" not because the light fails to shine but because people refuse to see it (Gowri, 2003)⁵. Like the physical, psychological, and lifestyle changes in old age, changes in interests are inevitable. A number of conditions are responsible for this, the most important of which are health, social status and economic status, place of residence, sex, marital status and values.

Due to rapid modernization and industrialization in India, people in many ways have been affected. Fluctuations in their socio-economic conditions have adverse effect on the traditions of Indian society. With the passage of time, joint family system is disappearing, which was usually considered as the symbol of love and affection. It has created serious problems for the senior citizens. Besides physical inability, they are having various health problems such as depression, loneliness and adjustment problems. People go to institutions mainly because they have no relatives to care for them. Consequently, their dependency on old age homes is increasing now a day. Old age homes are a need of today as the life styles are changing fast and diminishing acceptance of family responsibility towards one's elders. An old person begins to feel that even his children do not look upon him with that degree of respect, which he used to get some years earlier. The traditional sense of duty and obligation of the younger generation towards their older generation is being eroded. The older generation is caught between the decline in traditional values on one hand and the absence of adequate social security system on the other (Gormal, 2003)⁶. The expectancy of life in India is much less than 60 years. Psychologically too, most Indians appear to consider themselves old earlier than the chronological age of 60 years and the Indian women regard themselves to be old even much earlier (Montross et al., 2006)7.

Depression is a mental illness in which a person experiences deep, unshakable sadness and diminished interest in nearly all activities. People also use the term depression to describe the temporary sadness, loneliness, or blues that everyone feels from time to time. It is the most common

RESEARCH PAPER

"psychiatric disorder and fourth major causes of disease worldwide" (World Health Organization (WHO); 2001)⁸ and is "the most common 'mental disorder' (APA, 2013)⁹. Depression in old age is quite complex and it is much difficulty in diagnosis due to medical illnesses, dementia syndromes and heterogeneity of patients in the population.

Psychological well-being refers to how people evaluate their lives. According to Diener (1997), these evaluations may be in the form of cognitions or in the form of affect. There are several psychological and social factors that have been linked to increased individual life expectancy and quality of life in older adults. Psychological well-being has been examined as an indicator of successful adaptation during old and very old age. Psychological well-being studied extensively as there is a need to improve the state of mental conditions of people. Researchers find a large number of people are getting affected by mental health problems.

REVIEW OF LITERATURE

Chalise (2014)¹⁰, A study was conducted in 2014 indicates that many elderly living in the Briddashrm are suffering from depression. Finding indicates that the prevalence of depression was 57.8%. Among them 46.7% had mild, 8.9% had moderate and 2.2% had severe depression. There should be some interruption from the concerned authorities so that depression can be reduced which will support to the well-being and quality of life of elderly

Ranjan, S., et al. $(2013)^{11}$ conducted a study on old age homes of Nepal. One hundred fifty elderly people residing in old age homes of Nepal were selected randomly for study which reveals that 47.33% of population had depression. Among the depressed population, 70.42% had mild depression and 29.58% had severe depression.

NEED OF THE STUDY

The elderly citizens are in need of urgent attention. They do not need our pity, but the understanding love and care of their fellow human beings. It is our duty to see that they do not spend the twilight years of their life in isolation, pain and misery. The present study is an attempt to find out the level of depression and psychological well-being among old age people residing in old age homes, with the following objective in view.

OBJECTIVES

The present study was undertaken with the following main objectives:-

- To measure the level of depression among males and females residing in old age homes.
- To measure the state of psychological well-being among males and females residing in old age homes.
- To examine the extent of relationship between depression and psychological well-being.

HYPOTHESIS

Based on the above cited objectives, following hypotheses were formulated.

- There is no significant difference in depression among males and females residing in old age homes.
- There is no significant difference in psychological well-being among males and females residing in old age

homes.

• There is no correlation between depression and psychological well-being

METHODOLOGY

The present study is based on an urban sample of 60 individuals aged 60 years and above. Out of these 30 were elderly males and 30 were elderly females. The data were collected from selected old age homes of Jaipur city, Rajasthan. Descriptive survey method was employed to collect data with the help of two selected questionnaires i.e., Beck's Depression Inventory (BDI-11) and Ryff's Psychological Well-being Scale. Random sampling technique was used to select sample for the study.

The data were collected in the months of February and March 2015. The data, thus, obtained was analyzed according to the respective manuals of the questionnaires. The results have been presented in the form of numbers and percentages with the help of diagrams.

RESULT AND DISCUSSION

The problems of the aged vary from society to society and have many dimensions in our country. The Indian family has traditionally provided natural social security to the old people. However, in more recent times, the traditional role of the family is being shared by institutions such as old age homes. After collecting data from the concerned institutions the scoring of the obtained data was done according to the manuals. Relevant statistical tools were applied and result tables were drawn. The interpretations of the results obtained are as follows.

According to TABLE 1 the result obtained on the basic area of depression reveals a significant difference among elderly males and females.

TABLE 1: Showing the mean, variance, t-ratio and df	
value of a elderly males and females suffering from de-	
pression.	

Group	Ν	Mean	SD	SEM	t-ratio	df value
MALES	30	19.33	11.56	2.11		
FEMALES	30	32.7	9.78	1.787	-4.83	0.01

*Source: Old age homes of Jaipur

The elderly females received high mean score of 32.7 as compared to elderly males 19.33 with the standard deviation 92.61 and 129.222. The t-ratio was -4.91 that were significant at 0.01 levels. It means elderly females are more depressive as compared to elderly males living in old age homes. So we can say that the first hypothesis was not accepted.

According to TABLE 2 the result obtained on the basic area of psychological well-being reveals a significant difference among elderly males and females. The elderly males received higher mean score150.933 as compared to elderly females 131.867 with standard deviation 812.796 and 495.516. The t-value was 2.88, significant at 0.01 levels. Result show that elderly males fill more psychological wellbeing as compared to elderly females. So we can say that our second hypothesis was also not accepted.

TABLE 2: Showing Mean, Variance, t-ratio and df value of psychological well-being of elderly males and females.

Group	N	Mean	SD	SEM	t-ratio	df value
MALES	30	180.4	13.60	2.48		
FEMALES	30	131.27	46	4.21	10.04	0.01

*Source: Old age homes of Jaipur

TABLE 3: Showing Mean, SD, SEM and Correlation between depression and psychological well-being among elderly males and females.

Groups	Variables	Ν	Mean	SD	SEM	"r"
MALES	DEPRESSION		19.33	11.56	2.11	
	PSYCHOLOGI- CAL WELL- BEING	30	180.4	13.60	2.48	0.73
FEMALES	DEPRESSION		32.7	9.78	1.787	-0.81
	PSYCHOLOGI- CAL WELL- BEING	30	131.27	23.07	4.21	

*Source: Old age homes of Jaipur

CONCLUSION

Stressful family relationships and lack of family care precipitates the elder's poor psychological well- being. Sixty percent of respondents stated that they felt neglected by the family members. Therefore, it may be concluded that there is a significant difference between depression and psychological well-being among elderly males and females. While correlation between depression and psychological wellbeing among elderly males and females reveals that there is positive correlation among elderly males and a negative correlation among elderly females.



1. Anderson, A.J. (2002). Treatment of depression in older adults. International Journal of Psychosocial Rehabilitation, 32(6), 69-78. | 2. Sharma, REFERENCE New Delhi: Rawat Publications. J 4. Potter and Perry. (2005). Fundamental of Nursing (5thed.). New Delhi: Harcourt Pvt Ltd. J 5. Govri, G.B. (2003). Attitude to dependence of the second secon old age and ageing as shown by humor. Gerontologist, 17(2), 220-226. | 6. Gormal, K. (2003). Aged in India. Mumbai: Tics Publishers; 220-226. | 7. Montross, L., Depp, C., Daly, J., & Golshan, S., et al. (2006). Correlates of self-rated successful ageing among community dwelling other adults. The American Journal of Geriatric psychiatry, 14 (1), 43-51. | 8. World Health Organization. World Health Report: mental health – new understanding. New hope: Geneva, Switzerland, 2001. | 9. American Psychological Association, 2013 [homepage on the internet]. [access on 2015 Jan 10] Available from: http://www.apa.org/topics/depress/index.aspx. | 10. Chalise, H. (2014). Depression among elderly living in Briddashram (old age homes). Advance in Aging Research, 12(3), 6-11. | 11. Ranjan, S., Bhattarai, A & Dutta, M. (2013). Prevalence of depression among elderly people living in old age homes in the capital city of Kathmandu. Health Renaissance, 11(3), 213-218.