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DEPRESSION AND SELF-ESTEEM AMONG ELDERLY RESIDING IN OLD AGE HOMES

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ABSTRACT A cross-sectional descriptive study was done to study depression and self esteem among elderly people living in old age homes. The sample comprised of 204 elderly persons (113 men and 91 women) in the age group of 60-80 years. Elderly (age 60 years) enrolled in old age homes in south India were the study population. Non probability purposive sampling technique was used to include the requisite number of respondents from OAHs. The Beck Depression Inventory was used to identify depressive symptoms; (BDI) is a 21-item self-report scale measuring supposed manifestations of depression. Rosenberg self esteem scale was used to identify self esteem among elderly. Formal ethical approval was taken from the Institutional Ethical Review Committee. The overall prevalence of depression was found to be 71.25%. Among those with depression, a majority (80%) had mild and moderate degree of depression. The prevalence of severe and profound depression was 7.5% and 6.7%, respectively. In this present study it is found that 58% of elderly were having low self-esteem and 42% of elderly were having moderate self-esteem.

KEYWORDS : Depression, self-esteem, elderly, old age homes.

INTRODUCTION

Aging is a series of processes that begin with life and continue throughout the life cycle. It represents the closing period in the lifespan, a time when the individual looks back on life, lives on past accomplishments and begins to finish off his life course. Adjusting to the changes that accompany old age requires that an individual is flexible and develops new coping skills to adapt to the changes that are common to this time in their lives.

Depression is a major mental health problem, which is yet to be recognised as an important public health challenge. About 322 million people affected with depression worldwide. Depression is the single largest contributor to global disability (7.5%, 2015) and a major contributor to suicides (~ 800,000 annually). In India, elderly persons (60 years and above) constitute 8.6% of the total population (India Census 2011), which is projected to reach 19% by 2050. Thus, depression among elderly population is likely to be a major cause of disease burden in the future.

Depression is one of the most common illnesses in the elderly population. Among elderly people, chronic diseases, restricted mobility, bereavement, elderly abuse, isolation, and loss of income are major risk factors for depression, in addition to common risk factors in all age groups. Depression in the elderly persons may have a varied presentation and may be difficult to diagnose. It has devastating consequences and contributes significantly to misery in this phase of life. It is associated with increased risk of morbidity, decreased physical, cognitive and social functioning and greater self-neglect. Depression not only decreases the quality of life but also influence prognosis of other chronic diseases that further aggravates disability. Consequently, elderly persons with depression have significantly higher suicidal and non-suicidal mortality. Early identification and management of depression can improve quality of life. However, healthcare systems in low and middle income countries like India are not resilient enough to deal with mental health problems including depressive disorders .

MATERIALS AND METHODS

A cross-sectional descriptive study was done. Elderly (age 60 years) enrolled in old age homes in south India were the study population. Non probability purposivesampling technique was used to include the requisite number of respondents from OAHs. The Beck Depression Inventory (BDI) is a 21-item self-report scale measuring supposed manifestations of depression. The internal consistency for the BDI ranges from 0.73 to 0.92, with a mean of 0.86. The BDI demonstrates high internal consistency, with alpha coefficients of 0.86 and 0.81 for psychiatric and non psychiatric populations, respectively. The scale has a split-half reliability coefficient of 0.93. Rosenberg self esteem scale was used to identify self esteem among elderly. Rosenberg's Self Esteem Scale: It is a standardized tool which measures in a 4 point Likert scale (0-3) consisting of 10 items related to self-esteem which has 5 positive items and 5 negative items where it can be categorized as (0-14) low self-esteem, (15- 22) moderate self-esteem and (23-30) high self-esteem. The calculated Cronbach Alpha Internal consistency was 0.91. Formal ethical approval was taken from the Institutional Ethical Review Committee (ERC) (letter no- RIN/2020/04, August 2020). A formal permission was taken from the significant authorities (Chairman/managing director) of the selected old age homes. The study objectives were explained to all participants and they were assured their personal data and responses would be kept confidential. Informed written consent was taken from all participants. The subjects for the sample were selected from the older adults of a south India based region residing in Old age homes. These elderly persons were contacted personally, and the questionnaires were administered to them.

RESULTS

The sample comprised of 204 elderly persons (113 men and 91 women) in the age group of 60-80 years. The mean age of the sample population was 67 years.

Table 1: Depression in elderly using BDI

Grades of depression	Male (%)	Female (%)
Denial	19 (18)	18 (20.1)
Normal	13 (11.5)	7 (7.8)
Mild	28 (25.3)	28 (30.7)
Moderate	32 (29.5)	27 (29)
Severe	8 (6.9)	8 (8.2)
Very Severe	9 (8.8)	4 (4.4)
Total	113	91

The overall prevalence of depression was found to be 71.25%. Among those with depression, a majority (80%) had mild and moderate degree of depression. The prevalence of severe and profound depression was 7.5% and 6.7%, respectively.

Table 2: Self-esteem among elderly

Variable	Gender	n	Mean	t value	p value
Self esteem	Male	131	14.14	0.06	0.76
	Female	91	13.62		

Table 2 reveals that there is no statistically significant difference in self-esteem scores across gender among elderly.

DISCUSSION

The present study population comprises with subjects who are age 60 years and above and among them, more than half of the subjects i.e. 57.1% were male and 42.9% of the study subjects were females. These findings were consistent to a study conducted by Deok-jo Kim, Sung-je Cho el al (2015) on Psychological State and Self-Esteem of Elderly in Relation to Socio-Demographic Characteristics where it was found that more than half of the study participants (53.8%) were male and the remaining 46.2% were females.

In this present study it is found that 58% of elderly were having low self-esteem and 42% of elderly were having moderate self-esteem. The findings were consistent with the study conducted by Franak J, Malek M et al (2012) to assess the self-esteem among elderly in Kermanshah, Iran where they found one third of the elderly had a low self-esteem.

Regarding the limitations of the study; the sample size was restricted to few older persons. Therefore in future, an analogous study must be

conducted on a bigger section of the older population. For deciding gender variations, each male and feminine constituents of the sample ought to be equivalent all told respects. Moreover, no formal designation of depression was created within the sample employed in the study. Becks inventory was used for deciding the extent of depressive symptoms within the older persons. Keeping in sight the on top of limitations, longitudinal studies on a bigger cluster of older men and ladies are required in future.The speedy growth of the old population highlights old care as a very important issue. This study showed that old folks are littered with high depressive symptoms, stress and anxiety and low self worth. Study sheds new light-weight on the result of psycho- educational intervention on psychological distress and self worth. Health care policy manufacturers and care suppliers could embrace these tailored psychological interventions into commonplace look after old in community and hospital settings to boost their psychological state.

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