



EFFECTIVENESS OF AROMATHERAPY MASSAGE ON LEVEL OF ANXIETY AMONG ELDERLY PEOPLE.

Mental Health Nursing

Sati Vandana

Department of Mental Health Nursing, State college of Nursing, 107 Chander Nagar, Dehradun.

Chitra K

Department of Mental Health Nursing, State college of Nursing, 107 Chander Nagar, Dehradun.

ABSTRACT

Background: Aging is the result of the natural course of time that led physiological and mental changes. Most often is anxiety, unpleasant feeling that accompanied by one or more sign of physical and mental change like depression. Aromatherapy is complementary medicine method use of essential oil of aromatic herbs for relaxing body, mind, spirit. Especially lavender benefits as anti-anxiety, antidepressants, anti-headache effects. Aromatherapy promote relaxation and reduces anxiety. More encouragingly, aromatherapy appears to be without the adverse effects of many conventional drugs. **Material and Methods:** Quantitative approach and Quasi experimental research design with non-randomized control was used in this study. Sample size of 60 old people residing in Nari Niketan Dehradun were included in this study (30 experimental and 30 control group) by using purposive sampling technique. An Spielberger's State-trait anxiety inventory used to evaluate effectiveness of aromatherapy level of anxiety of elderly people. **Result:** The mean age of maximum age group (61-65 years) was 56.7%. The mean of experimental group was 110.63 were as post test score 96.47 with the mean different was 14.16. the mean pre-test score of control group was 111.70, and post-test control group was 108.90, with the mean difference was 2.8. The calculated t' value 11.651 is greater than the tabulated t' value 0.001, which is significant. it revealed that aroma (lavender oil) was effective decreasing the level of anxiety among the elderly people. **Conclusion:** The study indicate that the aromatherapy was effective to reduce the level of anxiety among elderly people.

KEYWORDS

Aromatherapy, Effectiveness, Anxiety level.

INTRODUCTION

Aging is the Normal Process of time related changes, begins with birth and continues throughout life. The aging of population is a global phenomenon, the later years of life the conventionally seen as one where pathologic of body, minds and social relationship takes place. One of the biggest changes seen in the twenty-first century is the large increasing rate of the elderly population. According to the World Health Organization's report, the number of individuals over the age of 60 is expected to reach two billion by the year 2050. In the same year, 434 million senior individuals are estimated to be over the age of 80 years old (WHO, 2018). The older population itself is aging. They currently make up 11 percent of the 60+ age group and will grow to 19 percent by 2050. In some developed countries today, the proportion of older persons is close to one in five. During the first half of the 21st century that proportion will reach one in four and in developing countries one in two. As the tempo of aging in developing countries is more rapid than in developed countries, developing countries will have less time than the developed countries to adapt to the consequences of population aging. The current demographic revolution is predicted to continue well into the coming centuries. One out of every ten persons is now 60 years or above; by 2050, one out of five will be 60 years or older; and by 2150, one out of three persons will be 60 years or older. The older population itself is aging. They currently make up 11 percent of the 60+ age group and will grow to 19 percent by 2050.

MATERIAL AND METHODS

Study Design

The study was conducted at Nari Niketan Dehradun Uttarakhand from 25th august to 7th September 2022. Quasi -experimental non randomized control research design was used in this study. The investigator used purposive sampling technique for selecting 60 sample.

Inclusive Criteria:

- Elderly people above 60 yrs. of age.
- Those who were having mild and moderate level of anxiety.
- Both male and female elderly people.
- Those who were willing to participate.

Exclusive Criteria:

- Elderly people who are allergic to lavender oil.
- Those with any systemic illness.
- Those with any chronic skin infection.

Tool Description

It includes socio demographic variables and Spiel Berger's state -trait anxiety inventory was used to assess the effectiveness of aroma therapy.

Section: A

It consists of demographic variables. It includes age, sex, marital status, occupation, income, religion, number of children, mode of admission and duration of stay at old age home.

Section: B

It consists of Spielberger's State-trait anxiety inventory. This is a self-evaluation questionnaire developed by Charles. D. Spielberger's in 1968. It is standardized tool consists of 40 items with 20 state and 20 trait anxiety statement. No time limit but the persons is instructed to do as quickly as possible.

DESCRIPTION	SCORE
No anxiety	1- 40
Mild level of anxiety	41-80
Moderate level of anxiety	81-120
Sever level of anxiety	121-160

Statistical Analysis

The data were presented as mean and standard deviation. paired 't' test were performed to find the significant mean difference between the pre and post-test level of assessment and chi-square was to find out the association between pre-test score of anxiety level with their selected demographic variables.

RESULTS:

Table 3.1: Comparison Between Experiment And Control Group In Mean Pre-test And Post-test Level Of Anxiety Among Elderly People In Selected Old Age Home.

N=60

Anxiety level	Experiment group (mean ± SD)	Control group (mean ± SD)	Independent t test	DF	P-value	Result
Pre test	110.63 ± 8.946	111.70 ± 9.545	0.447	58	0.657	Non-Significant
Post test	96.47 ± 13.305	108.90 ± 9.725	4.132	58	0.001	Significant

Table 3.1 shows that comparison between experiment and control group in mean pre-test and post-test level of anxiety among elderly people in selected old age home. There was no statistical significance comparison between experiment and control group in pre-test anxiety level with P=0.657. There was no such different in mean score in both groups.

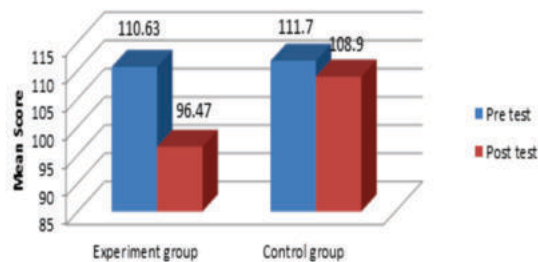
There was statistical significance comparison between experiment and control group in post-test anxiety level with P=0.001. There was greater mean score in control group than the experimental group.

Table 3.2: Comparison Between Pre And Post-test In Mean Level Of Anxiety Among Elderly People In Selected Old Age Home In Experiment Group.
N=60

Anxiety level	Pre test (mean $\pm$ SD)	Post test (mean $\pm$ SD)	Paired t test	DF	P-value	Result
Experiment group	110.63 $\pm$ 8.946	96.47 $\pm$ 13.305	11.651	29	0.001	Significant

Table 3.2 shows that comparison between pre and post-test in mean level of anxiety among elderly people in selected old age home in experiment group. There was statistical significance comparison between pre and post-test of level of anxiety in experiment group with $P=0.001$ is less than 0.05 level of significance.

There was statistical significance comparison between pre and post-test of level of anxiety in control group with $P=0.008$. Pre-test had greater mean score than post-test that mean intervention are helping in decreasing the anxiety level.

Comparison between pre and post test of level of anxiety in experiment and control group .**Table 3.3: Association Between Pre-test Levels Of Anxiety With Selected Demographic Variable Among Elderly People Residing In Selected Old Age Home In Experiment Group.**
N=30

S. No.	Socio demographic Variable (Experiment group)	Category	Pre-test level of Anxiety			Chi-square value	DF	P-value	Result
			Mild (N=0)	Moderate (N=21)	Severe (N=9)				
1	Age	61-65 years	0	12	5	0.423	4	0.809	Insignificant
		%	0.0%	57.1%	55.6%				
		66-70 years	0	8	3				
		%	0.0%	38.1%	33.3%				
		71-75 years	0	1	1				
2	Sex	%	0.0%	4.8%	11.1%				
		Male	0	0	0	0	2	>0.05	Significant
		%	0.0%	0.0%	0.0%				
		Female	0	21	9				
		%	0.0%	100.0%	100.0%				
3	Education	Illiterate	0	8	2	10.249	4	0.0364	Significant
		%	0.0%	38.1%	33.3%				
		Primary	0	12	2				
		%	0.0%	57.1%	33.3%				
		High school	0	1	5				
4	Religion	%	0.0%	4.8%	33.3%				
		Hindu	0	20	9	0.443	4	0.506	Insignificant
		%	0.0%	95.2%	100.0%				
		Muslim	0	0	0				
		%	0.0%	0.0%	0.0%				
5	Marital Status	Christian	0	1	0				
		%	0.0%	4.8%	0.0%				
		Unmarried	0	7	0	3.913	2	0.0479	Significant
		%	0.0%	28.6%	33.3%				
		Married	0	14	9				
6	Number of children	%	0.0%	71.4%	66.7%				
		No children	0	6	3	3.333	6	0.504	Insignificant
		%	0.0%	28.6%	33.3%				
		One	0	2	0				
		%	0.0%	9.5%	0.0%				
		Two	0	8	2				
		%	0.0%	38.1%	22.2%				
		Three and above	0	5	4				
		%	0.0%	23.8%	44.4%				
7	Mode Of Admission	Voluntary admission	0	0	0	0.408	6	0.523	Insignificant
		%	0.0%	0.0%	0.0%				
		Admission through relatives/ friends	0	9	5				
		%	0.0%	42.9%	55.6%				
		Admission through police	0	12	4				
		%	0.0%	57.1%	44.4%				
		Admission through NGO's	0	0	0				
		%	0.0%	0.0%	0.0%				
8	Duration of stay at old age home	Below 1 year	0	2	0	5.64	6	0.227	Insignificant
		%	0.0%	9.5%	0.0%				
		1-3 years	0	12	3				

	%	0.0%	57.1%	33.3%				
	3-5 years	0	3	4				
	%	0.0%	14.3%	44.4%				
	Above 5 years	0	4	2				
	%	0.0%	19.1%	22.2%				

Table 3.3 shows that there was no statistically significant association between pre-test levels of anxiety with age. The obtained χ^2 value 0.423 and the table value at df (4) 9.488 was not significant with $p>0.05$ level. There was no statistically significant association between pre-test levels of anxiety with sex. The obtained χ^2 value 0.00 and the table value at df (2) 5.991 was not significant with $p>0.05$ level. There was statistically significant association between pre-test levels of anxiety with education. The obtained χ^2 value 10.249 and the table value at df (4) 9.488 was significant with $p=0.0364$ level. There was no statistically significant association between pre-test levels of anxiety with religion. The obtained χ^2 value 0.443 and the table value at df (4) 9.488 was not significant with $p>0.05$ level. There was statistically significant association between pre-test levels of anxiety with marital status. The obtained χ^2 value 6.429 and the table value at df (2) 5.991 was significant with $p=0.0402$ level. There was no statistically significant association between pre-test levels of anxiety with number of children. The obtained χ^2 value 3.33 and the table value at df (6) 12.592 was not significant with $p>0.05$ level. There was no statistically significant association between pre-test levels of anxiety with mode of admission. The obtained χ^2 value 0.408 and the table value at df (6) 12.592 was not significant with $p>0.05$ level. There was no statistically significant association between pre-test levels of anxiety with duration of stay at old age home. The obtained χ^2 value 5.640 and the table value at df (6) 12.592 was not significant with $p>0.05$ level.

DISCUSSION:

The present study was conducted to assess the effectiveness of aromatherapy massage on level of anxiety among elderly people residing in selected old age home Dehradun. The investigator collected the sample by non-probability purposive sampling technique. The investigator collected the data by using Spiel Berger's state -trait anxiety inventory to assess the effectiveness of aromatherapy massage on level of anxiety among elderly people. The investigator uses quasi-experimental non randomized control research design. The tool consists of demographic variables, Spiel Berger's state -trait anxiety inventory to assess the effectiveness of aromatherapy massage on level of anxiety among elderly people residing in selected old age home. The main study was conducted in the august. On 60 old age people and who met the inclusive criteria, who were selected by non-probability purposive sampling technique. after the selection of sampling, to assess the effectiveness of aromatherapy massage on level of anxiety people residing in selected old age home was assessed by using the Spiel Berger's state -trait anxiety inventory. The descriptive statistics (frequency, percentage, mean, standard deviation) and inferential statistic (t-test) were used to analyse the data, and to test the study hypothesis. In experimental group showed a mean value of 96.47 with standard deviation of 13.305 in post-test and the control group showed a mean value of 108.90 with a standard deviation of 9.725 in post-test. The paired t test was 11.651 in experimental group Which showed that there was a significant difference between the post-test level of anxiety among experimental group. This findings revealed that the post-test level of anxiety was reduced in experimental group than the control group.

CONCLUSION

From the result of this study, it was concluded that providing aromatherapy massage to the elderly people was very effective in reducing anxiety. Therefore the investigator felt that more importance should be given for aromatherapy massage to reduce anxiety among the elderly people.

REFERENCES

- Ghosh, AB. (2006) Psychiatry in India. Need to focus on geriatric Psychiatry. *Indian Journal of Psychiatry*. 48:4-9.
- Barbara schoen Jonson (2004). *Psychiatric Mental Health Nursing*. (4th ed). Philadelphia: Lippincott.
- Barker (2003). *Psychiatric Mental Health Nursing*. (1st ed). London: Edward Arnold Publisher.
- Basavanthappa, B.T (2007). *Nursing Research*. (2nd ed). New Delhi: jaypee Brothers Medical publishers (P) Limited.
- David sample (2005). *Oxford Hand book of psychiatry*. (1st ed). London: Oxford university press.
- Fontaine & Fletche (2009). *Mental health Nursing*. (5th ed), New Delhi: Dorling Kindersley India (P) Ltd.
- Frisch & Frisch. (2007). *Psychiatric Mental Health Nursing*. (3rd ed). Haryana: Thomson Delmer Learning.

- Flin, A.J (2005). *Anxiety disorders*. Comprehensive Textbook of Geriatric Psychiatry. (3rd Ed). New York: Norton Publication.
- Gail, W. Stuart (2009). *Principles and practice of Psychiatric Nursing*. (9th ed). New York: Mosby publications.
- Geri Lobiondo-Wood. & Judith Haber (2006). *Nursing Research*. (6th ed). St. Louis: Mosby Publication.
- Gertrude, K., & McFarland Mary Durand. (2001). *Psychiatric Mental Health Nursing*. (5th ed). Philadelphia: Lippincott Company.
- Kozier & Erbs (2008). *Fundamentals of Nursing*. (8th ed). New Delhi: Pearson.