

Psycho-social Status of Senior Citizen and Related Factors

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KEYWORDS Ageing. Physical. Psychological. Hormonal. Senior Citizens Depression. Retirement. Old Age Homes

ABSTRACT Aging is a part of life and its degeneration nature exposes the individual several physical social and psychological problems. Therefore the present study was under taken to study the psycho-social status of institutionalized senior citizen. The study was conducted in purposively selected state Haryana. A sample of 60 respondents (30 males and 30 females) from ten institutes was selected randomly. Regarding psychosocial economic status of the respondent, results indicated that maximum percentage of the respondent was in the moderate to severe level of depression had natural attitude towards institution, moderate social, good health status and poor in economic status. Further results revealed that maximum percentage of the respondents were feeling insecure in their own house, neglected by family members and wanted to meet their basic needs. Result indicated that overall institutional facilities had positive significant correlation with attitude and health status. Age was negatively correlated with leisure time activities and health status. Overall psychosocial-economic status of the respondents had positive significant correlation with attitude, leisure time schedule, social and health status of the senior citizen.

INTRODUCTION

Aging is an inevitable developmental phenomenon bringing along a number of changes in the physical, psychological, hormonal and the social conditions (Neuhaus and Neuhaus, 1982). Birren and Renner (1977) define aging in terms of the biology, referring to "the regular changes that occur in mature genetically representative organisms living under representative environmental conditions as they advance in chronological age."

Old age has been viewed, as problematic period of one's life and this is correct to some extent. The aged become increasingly dependent on others. As man grows, his reduced activities, income and consequent decline in the position of the family and society makes his life more vulnerable. Chaudhary (1992) pointed out that 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 old person feels neglected and humiliated. This may lead to the development of psychology of shunning the company of others

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, penury and misery. Older people are, therefore, in need of vital support that will keep important aspects of their life-styles intact while

improving their overall quality of life (Kivelt and Scott, 1979).

At present, besides government run old age homes, several voluntary organizations for social welfare and also the religious groups are running these homes. Private organizations have also established old age home which has well made schedules which cater to the needs of elderly, provide them with treatment and look after them in caring and methodical way.

With the family increasingly nuclearised and with the progressive lengthening of the average life span, it becomes necessary that special steps be taken for the welfare of retired and needy aged people. Dhillon (1992) stated that sudden retirement does have an adverse impact on healthy persons who have seen working for generations as it results in loss of role, status, power, opportunities for interactions and loss of an occupational identity and in turn it leads to low moral, decreased level of satisfaction, depression and feeling of loneliness and helplessness. Chadha et al. (1997) reported that institutionalized elderly exhibit significantly smaller social networks than non-institutionalized elderly. The institutionalized aged was found to have greater feeling of loneliness, depression and hopelessness.

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identity and in turn it leads to low moral, decreased level of satisfaction, depression and feeling of loneliness and helplessness. Thus the problems associated with ageing are numerous. Broadly speaking the main problem of the aged in our country is related to socio psychological-economic and health problems etc.

Old age homes are a need of today as the life-styles are changing fast and diminishing acceptance of family responsibilities towards one's elders. Older people are, therefore, in need of vital support that will keep important aspects of their life-styles intact while improving their overall quality of life (Kivelt and Scott, 1979). The above studies demand that we should understand the concept of old age homes thoroughly and evaluating psycho-social status of senior citizen and related factors.

METHODOLOGY

The present study was carried out in the old age home of state Haryana. Ten institutions from Haryana were selected randomly. A sample of 60 respondents (30 males and 30 females) from Haryana was selected randomly and there by making the total sample of 120 respondents.

The variable of two types i.e. independent and dependent was studied. The independent variables included age, gender occupation, place of residence, marital status, family type and family size. The dependent variables taken were the attitude, depression, social status, economic status, health status, leisure time activities and overall psychosocial-economic status. The data were collected personally with the help of self structured and pre-tested interview schedule and a standardized depression scale of Kohli et al. (1996)

RESULTS AND DISCUSSION

Personal Variables

Regarding the personal variables of respondents the Table 1 reveals that 40.00 percent respondents were in the age category of 60-70 years followed by 38.33 percent who belonged to 70-80 years age group and 21.67 percent in the age group of 80-90 years. Data regarding gender wise population in the institute reported that in total sample, there were 50.00 percent males and 50 percent females.

Analysis of the respondents according to their educational qualification revealed that 40.0 percent respondents were Matriculate followed by Illiterate (31.61%) and Graduate, Post Graduate (28.33%).

Place of residence was another variable and data revealed that 71.67 percent inmates came from urban area, 15 percent from semi-urban and the remaining i.e. about 13.33 percent were from rural area. Obviously the number of inmates coming from urban area was large because they were likely to know about the old age home, and there were other reasons also like shortage of housing due to urbanization in urban area.

Social Variable

The social profile includes information regarding religion, family type, and family size, joining institution and leisure time activities of senior citizens before joining the institution.

The results of Table 1 depicted that more than fifty percent (53.33%) of the respondents belonged to nuclear families, followed by 36.67 percent of respondents who had the joint families before joining the institution.

The result pertaining to family size point out that 40.0 percent of the inmates had small family size before joining the institutions followed by large (35%) and medium (27.5%).family. It is evident from Table 1 that out of the total sample majority of the inmates (81.67%) joined the institution willingly followed by 18.33 percent who were sent by their family members. The increasing trend of joining the institutions willingly shows that the senior citizens in both states don't want to be burden on others and prefer their independence.

Regarding the work schedule of senior citizens, the table further revealed that more than fifty percent respondents (60%) were in the category of somewhat busy, followed by 23.33 percent of the inmates who belonged to the busy activity pattern during the leisure time. Riddict (1985) found that leisure activity emerged as an important predictor of life satisfaction for the aged.

Economic Variables

The occupation of the respondents explains the main work done by senior citizens before joining the institute. Table highlights that 36.67

Table 1: Distribution of respondents on the basis of personal and socio-economic variables.

Variables	Respondents	n=60 f (%)
I. Personal Variables		
<i>Age</i>		
60-70 yrs.	24	(40.00)
70-80 yrs.	23	(38.33)
80-90 yrs.	13	(21.67)
<i>Gender</i>		
Male	30	(50.00)
Female	30	(50.00)
<i>Education</i>		
Illiterate	19	(31.67)
Matriculation	24	(40.00)
Graduate/Postgraduate	17	(28.33)
<i>Marital Status</i>		
Unmarried	10	(16.67)
Married	22	(36.67)
Widow	20	(33.33)
Widower	8	(13.33)
<i>Place of Residence</i>		
Rural	8	(13.33)
Semi-urban	9	(15.00)
Urban	43	(71.67)
II. Social Variable		
<i>Family Type</i>		
Nuclear	32	(53.33)
Joint	22	(36.67)
Extended	6	(10.00)
<i>Family Size</i>		
Small (0-5)	24	(40.00)
Medium (5-8)	15	(25.00)
Large (above 8)	21	(35.00)
<i>Joining institution</i>		
Willingly	49	(81.67)
Sent by family members	11	(18.33)
<i>Leisure Time Activity Pattern</i>		
Somewhat busy (30-36)	36	(60.00)
Busy (37-43)	14	(23.33)
Highly busy (44-50)	10	(16.67)
III. Economic Variables Occupation		
Labour	11	(18.33)
Home Manager	22	(36.67)
Farming	4	(6.67)
Business	12	(20.00)
Service	11	(18.33)
<i>Source of Financial</i>		
Assistance	7	(11.67)
Self	9	(15.00)
Children Institution	44	(73.33)

percent had taken care of domestic chores, followed by 20 percent of the respondents who were doing their own business, such as running small shops before they moved to an old age home. Mathur and Sen (1989) revealed that successful and better adjustment in old age is associated with economic status of the individual. Lower income is the cause for decreased adjustment with advanced age

- Most striking is the fact that only 6.67 percent inmates worked on their own farms before joining the institution. Of those who had been laborers, they formed 20.00 percent. Only 18.33% were in the service. The analysis of the financial assistance indicates that 73.33 percent senior citizens were financially dependent on the institution followed (15%) who were supported by their children. Oberoi and Dey (1993) reported in their study on physical, economic and psychological problem of old people in Bihar. Respondents ranked the financial problem on the top. It was followed by health, family and social. Least importance was attached to utilization of leisure time. The respondents had ambition of financial assistance from govt. in the form of increased pension of free medical aid or free education for their children etc.

Psychosocial-Economic Status of Respondents

The data in Table 2 highlights the distribution of senior citizens for psychosocial-economic status. The results indicate that out of the total sample 38.00 percent inmates were in the category of moderate and severe depression, followed by 35.00 percent of respondents who were in the

Table 2: Psychosocial-economic status of respondents

Variables	Respondents	n=60 f (%)
<i>Degree of Depression</i>		
Normal (0-6)	16	(26.67)
Moderate (7-13)	23	(38.33)
Severe (14-20)	21	(35.00)
<i>Attitude</i>		
Unfavourable (49-60)	13	(21.67)
Neutral (61-72)	25	(41.67)
Highly favourable (73-84)	22	(36.66)
<i>Leisure Time Activities</i>		
Somewhat busy (30-36)	36	(60.00)
Busy (37-43)	14	(23.33)
Highly busy (44-50)	10	(16.67)
<i>Social Status</i>		
Low (8-10)	7	(11.67)
Moderate (11-13)	28	(46.66)
High (14-16)	25	(41.67)
<i>Economic Status</i>		
Poor (13-16)	54	(90.00)
Average (17-20)	6	(10.00)
Good (21-24)	0	(0.00)
<i>Overall Psychosocial-Economic Status</i>		
Low (180-194)	20	(33.33)
Moderate (195-209)	26	(43.33)
High (210-224)	14	(23.33)

category of normal depression. Table further highlights the attitude towards institutional facilities had highly favorable. (36.66%).

Regarding leisure time activities schedule 60.0 percent inmates had somewhat busy, followed by 23.17 percent who had busy leisure time activities pattern. The data in table further reveals that, 46.66 percent respondents had moderate level of social status followed by 41.67 percent of the respondents who were in the category of high social status.

As far economic status is concerned, majority of the respondents (90%) were in the poor economic status, followed by average status category (10%). Data regarding health status shows 60 percent inmates possessed good health status followed by normal (31.61%). Saran (1989) found that economic problem of the aged from the unorganized sector seems to be larger which push them many elderly into destitution. This ultimately leaves them feeling insecure and neglected.

Overall psychosocial-economic status of respondents reveals that 43.33 percent respondents had moderate overall psychosocial-economic status followed by low (33.33%) and good (23.83%).

Reasons for Joining the Institutions/Old Age Home

The inmates' reasons for joining the Old Age Homes are presented in Table 3. The results indicate that out of the total sample, majority of the respondents (96.67 %) joined the institution for social security followed by to meet the basic needs (83.33%), their own interest (75.83%) and About 67 percent shifted to the institution, as

Table 3: Reasons for joining the institutions/senior citizen homes

S. No.	Reasons	Respondents (n=60) of%
1.	To meet the basic needs (food, clothing, shelter etc.)	50(83.33)
2.	Negligence or rejections by family members	40(66.67)
3.	Unproductivity	10(16.67)
4.	No one cares after demise of spouse	30(50.00)
5.	Not having own children to care	10(16.67)
6.	Unresolved conflicts with spouse	11(18.33)
7.	Not to be a burden on family members	45(75.00)
8.	For social security	58(96.67)
9.	Your own interest	50(83.33)

they never wanted to be burden on family members. Less than sixty percent of the respondents reported that rejections by family members forced them to shift to the institutions. Further the data reveals that 45 percent of the inmates had no one to take care of them at home after demise of their spouse. Another reason reported by 20.83 percent respondents was that they had no child to look after them.

A small percentage of the respondents i.e. 13.33 percent reported that conflicts with spouse were main reason for joining the institutions followed by 12.5 percent not having their own children to look after

Regarding reasons for joining the institutions/old age home, it can be concluded that most of the respondents faced insecurity, had poor economic status and wanted to meet their basic needs. All these led to the interest of the senior citizens to form a secure place for old age which is the old age home. As Dandekar (1993) reported lack of homely care as the prominent reason cited by the elderly towards their preference to stay in old age home

Correlations Between Institutional Facilities and Overall Psychosocial-Economic Status of Senior Citizens: The Table 4 unveils that the clothing and infrastructure facilities were positively significantly correlated with the health status of the respondents ($r = 0.61, 0.30, p < 0.05$). It means better the clothing and infrastructure facilities in the institutions, better are the health status of senior citizens.

Further, all the aspects of institutional facilities had positive significant correlation with psychosocial-economic status of respondents, r values ranged from 0.32 to 0.58, $p < 0.05$. It means that if food, medical, clothing and infrastructure facilities provided by the institutions are of good quality, and it improves the overall psychosocial-economic status of the respondents.

Table 4: Correlation between institutional facilities and overall psychosocial-economic status of senior citizens (n=60)

Facilities	Health	Psychosocial and economic status
Food	0.22	0.54*
Medical	0.25	0.49*
Clothing	0.61*	0.32*
Infrastructure	0.30*	0.58*

* Significant at 0.05 level

Correlation Between Psychosocial-Economic Status of Senior Citizen and Overall Institutional Facilities: Table 5 portrays that overall institutional facilities had positive significant correlation with attitude, health and overall psychosocial-economic status of the senior citizens $r = 0.61, 0.40, 0.62, p < 0.05$ respectively. It can be interpreted that attitude, health and overall psychosocial-economic status of respondents improve if institutions provide better quality of facilities.

Table 5: Correlation between psychosocial-economic status of senior citizens and overall institutional facilities (n = 60)

Facilities	Overall existing institutional facilities
Depression	-0.13
Attitude	0.61*
Leisure time activities	0.06
Social	0.06
Economic	0.20
Health	0.40*
Overall psychosocial- economic status	0.62*

* Significant at 0.05 level

Correlation Between Psychosocial-Economic Status of Institutionalized Senior Citizens and Personal Variables of Senior Citizens: Correlation between psychosocial-economic status of the senior citizens with personal variables of senior citizens presented in Table 6. The table shows that depression was positively significantly correlated with age and residing

Table 6: Correlation between psychosocial-economic status of institutionalized senior citizens and personal variables of senior citizens (n = 60)

Personal variables	Age	Education size	Family period/ time spend	Residing
Depression	0.29*	-0.16	-0.11	0.34*
Attitude	-0.07	-0.04	-0.25	-0.32*
Leisure time activities	-0.28*	0.05	0.14	-0.21
Social	-0.14	-0.02	0.08	-0.25
Economic	0.29*	-0.02	0.06	0.13
Health	0.65*	0.12	-0.11	-0.63*
Overall psychosocial-economic status	-0.29*	0.04	-0.19	-0.46*

* Significant at 0.05 level

period in the institution ($r = 0.29, 0.34, p < 0.05$). It shows that as the age and length of residing period increases, the depression level of the respondents also increases.

Further, length of residing period was negatively significantly correlated with attitude, health and overall psychosocial-economic status of the senior citizens ($r = -0.32, -0.63, -0.46, p < 0.05$). It is interpreted that as the residing period in the institution increased, health and overall psychosocial-economic status of the respondents decreased, as well as their attitude became negative.

Table further portrays that the leisure time activities and overall psychosocial-economic status was negatively significantly correlated with age of respondents ($r = -0.28, -0.29, p < 0.05$). Kelly (1989) supported the results of the present study.

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