



Quality of life among senior citizens residing at homes and old age homes of Pune city

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Abstract

Quality of life among senior citizens (QOL) is becoming even more relevant with demographic shift happening towards an ageing society. Among seniors there is variation between those living in old age homes and those living in general population. The present cross sectional descriptive study was conducted in Pune city with an aim to assess and compare the quality of life of senior citizens residing at homes and old age homes. 1000 senior citizens aged more than 65 years were selected by using non probability convenient sampling. A comprehensive Quality of Life (QOL) Scale was used to assess the quality of life. The study revealed that senior citizens residing at homes had high quality of life scores than seniors residing at old age homes. Age, gender, education, marital status and money were found to be significantly associated with quality of life in both groups.

Keywords: quality of life, senior citizens, residing

1. Introduction

According to recent Population Census there are nearly 104 million elderly persons in India. Both the share and size of elderly population is increasing over time. From 5.6% in 1961 the proportion has increased to 8.6% in 2011. Today, the elderly population is the main focus of the various social planners and service providers. Under the impact of industrialization and modernization, there is a simultaneous monitoring of the growing population with the study of aging in terms of socio-economic impact, family relations, health, living conditions and productivity. Health and quality of life (QOL) are inter-linked. Though the basic definition of quality of life is undisputed, the key dimensions and domains still elude many working in the field. The World Health Organization describes QOL as a broad-ranging concept that incorporates individual's physical health, psychological state, level of independence, social relationships, personal beliefs and their association to salient features of the environment.

There are indications that concerns related to QOL in elderly people are different from that of general population. In India, there is low awareness about special needs of elderly and care takers are yet to understand the basics of elderly care (physical and mental health, psychological, & social support). Furthermore, among elderly there is variation between those living in old age homes and those living in general population. In the view of this, the investigator felt need to assess quality of life of elderly in all dimensions and to compare the same among senior citizens residing in old age homes and homes or

families.

2. Materials and Methods

Mixed research approach was adopted to conduct this study and design used for this study was cross sectional descriptive survey. Non-probability purposive sampling technique was used for the selection of the representative samples for the study. Data was collected from 1000 subjects residing at selected homes and old age homes of Pune city. The data collection tool used for the present study was modified Wisconsin Comprehensive Quality of life scale for older adults. The Quality of Life Index for Older Adults (A-QLI) is a comprehensive multidimensional measurement tool that reflects the complexity of QoL outcomes in older adults. Seniors were asked to report on their physical, emotional and social well-being, and to respond to questions about their mood, feelings, and personal goals.

Criteria for sample selection

Inclusion criteria

- Senior citizens who are residing at old age home and families at Pune city
- Those who are willing to participate in the study
- Those who can understand Marathi or English.

Exclusion criteria

- Senior citizens who are admitted in the hospital
- Those who are critically ill but not admitted in the hospital

3. Results & Discussion

Demographic details of the senior citizens

Table 1: Description of samples based on their personal characteristics in terms of frequency and percentages, N=500, 500

Demographic variable	Home		Old Age Home	
	Freq	%	Freq	%
Age				
65-70 years	330	66.0%	113	22.8%
71-75 years	112	22.4%	146	29.2%
76-80 years	41	8.2%	155	30.8%
> 80 years	17	3.4%	86	17.2%
Gender				
Female	250	50%	250	50%
Male	250	50%	250	50%
Education				
U.G.	225	45.0%	284	56.8%
Graduate	188	37.6%	162	32.4%
P.G	87	17.4%	54	10.8%
Marital status				
Married	426	85.2%	374	74.8%
Widow/ widower	74	14.8%	126	25.2%
Money				
Family	170	34%	258	51.6%
Pension	188	37.6%	104	20.8%
Savings	142	28.4%	138	27.6%

In a group of senior citizens residing in home, 66% of the senior citizens were aged 65-70 years, 22% of them had age 71-75 years and 8.2% of them had age 76-80 years. In old age home group, 22.8% of the senior citizens were aged 65-70 years, 29.2% of them had age 71-75 years, 30.8% of them were in age group 76-80 years and 17.2% were above 80 years of age. In both family and old age home group, 50% were

males and 50% females.

The average age among seniors living in the community was below that observed among institutionalized seniors. Several studies reports that the individuals living in institutions are 10 years older on average. Advanced age is a strong predictor of institutionalization due to the risk of functional incapacity and the development of chronic diseases doubles with every decade.

Table 2: Quality of life among senior citizens residing at homes and old age homes, N=500, 500

Domain	Quality of life scores	Home group		Old age home group	
		Freq	%	Freq	%
Physical Health	Low (Score 14-31)	50	10.0%	386	77.2%
	Moderate (Score 31-48)	49	9.8%	53	10.6%
	High (Score >48)	401	80.2%	61	12.2%
Self-care	Low (Score 8-18)	68	13.6%	329	65.8%
	Moderate (Score 18-28)	69	13.8%	117	23.4%
	High (Score >28)	363	72.6%	54	10.8%
Pain and symptoms	Low (Score 2-5)	22	4.4%	23	4.6%
	Moderate (Score 5-8)	202	40.4%	418	83.6%
	High (Score >8)	276	55.2%	59	11.8%
Social relations and support	Low (Score 6-14)	64	12.8%	407	81.4%
	Moderate (Score 15-22)	33	6.6%	32	6.4%
	High (Score >22)	403	80.6%	61	12.2%
Psychological well being	Low (Score 20-47)	49	9.8%	389	77.8%
	Moderate (Score 48-74)	48	9.6%	50	10.0%
	High (Score >74)	403	80.6%	61	12.2%

80.2% of senior citizens residing at home had high quality physical health and 72.6% of them scored high in self-care domain. Majority of senior citizens residing at old age home had low quality physical health and 65 % scored low in self care domain.

80.6% senior citizens residing at home showed high QOL in

social relations and support, 6.6% of them had moderate social relations and support and 12.8% of them showed low social relations and support. 80.6% of them showed high psychological well-being, 9.6% of them had moderate psychological well-being and 9.8% of them had low psychological well-being.

Comparison of quality of life among senior citizens residing at homes and old age homes

Researcher applied Mann Whitney U test for comparison of quality of life of senior citizens residing at home and old age

home. Quality of life score in home group was higher than that for old age home group. The senior citizens residing at home had significantly better quality of life as compared to those residing in old age homes.

Table 3: Comparison of the quality of life among senior citizens residing at homes and old age homes, N=500, 500

Domain	Group	Median	Mean Rank	Sum of ranks	Mann-Whitney U	Z	p-value
Physical Health	Family	58	683.73	341865	33385	-20.12	0.000
	Old age home	28	317.27	158635			
Self-care	Family	30	668.11	334053	41196	-18.44	0.000
	Old age home	18	332.89	166446			
Pain and symptoms	Family	10	605.01	302503	72447	-11.66	0.000
	Old age home	7	395.99	197997			
Social relations and support	Family	27	686.33	343166	32083	-21.35	0.000
	Old age home	12	314.67	157333			
Psychological well being	Family	86	678.92	339460	35789	-19.61	0.000
	Old age home	43	322.08	161039			

Association of quality of life with selected demographic variables among senior citizens residing in homes and old age homes

Persons Chi – square test was applied to find out the association of QOL with selected demographic variables. In senior citizens residing at homes, gender and money were found to have significant association with physical health. In senior citizens residing at old age homes only money is found have significant association with physical health. Gender is found to have significant association with self care activities at home residents. Senior citizens residing at homes showed significant association of social relations and support domain with age, gender and money. However in senior citizens residing at old age home there is significant association of social relations and support with the money.

4. Conclusion

Quality of life is subjective and dependent upon individual perceptions. This study compared the QOL of the senior citizens living at homes and old age homes of Pune city. There is significant difference in quality of life of senior citizens residing at homes and old age homes. Comparatively senior residing at homes experience high quality of life than seniors residing at old age homes. Age, gender, education, marital status and money were found to be significantly associated with quality of life domains.

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