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A descriptive study to assess the level of depression among the elderly people in Hisar district

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Abstract

Depression is a medical problem that is commonly seen among elderly people which is sometimes unrecognized public health problem. So, a study was conducted in 50 elderly people above 60 years in Hisar district with the help of brief questionnaire in which the respondents were asked to respond to 30 questions as per long form of Geriatric Depression Scale (GDS) to assess the depression among them. Out of total 50 respondents were found to have mild and severe score of depression. The results indicate that 40% male and 36.67% female respondents were found to be mildly depressed as per the Geriatric Depression Scale with a score ranging to 10-19. Whereas 15% male and 16.67% female respondents were found to be severely depressed with a score of 20-30. Results revealed that 43.75% of total respondents were found depressed in urban area and 45.45% in rural area. Out of the total respondents, 56.25% residing in urban area and 63.64% respondents residing in rural area were found to be financially independent. Significant association was also found between sociodemographic factors (age, financial dependency and living status) and depression.

Keywords: Depression, elderly, financial status and GDS

Introduction

Aging is the process of becoming older, a process that is hereditary determined and environmentally modified. In most Gerontological literature, people above 60 years of age are considered as old constituting the aging segment of the population also called senior citizen. Senior usually exhibits multiple health problems with complex interaction. All these condition affect the mental status of elderly, which may sometime leads to dementia and depression. Depression first develops in later life usually after 60 years and it more commonly associated with physical health problems that accompany elderly. An old person in good physical health with no history of episode has a relatively low risk of developing depression at a later age (Sharma and Seelan 2017) [1].

The expectancy of life at birth in 2011-16 is projected to be 67 and 69 years respectively for males and females. Between the years 2000 and 2050, the worldwide proportion of persons over 65 years of age is expected to more than double, from the current 6.9% to 16.4%. Around 60% of the 580 million older people in the world live in developing countries, and by 2020, this value will increase to 70% of the total older population. As health care facilities improve in countries, the proportion of the elderly in the population and the life expectancy after birth increase accordingly (Jariwala *et al.* 2010) [3].

Gerontology in India is very much in a nascent stage. With such a huge mismatch in the urban-rural population and health care system, geriatric medicine in India faces an uphill task. Only sporadic data has been collected on mental health conditions of the elderly in India. 3-7 It is important to prepare health providers and societies to meet the specific needs of older populations (Chauhan P. *et al.* 2016) [2].

Hence, the present study is to assess the level of depression among elderly people in Hisar district from both in urban and rural setting.

Methodology

A sample size of 50 respondents was selected from both rural and urban areas of Hisar district in Haryana State. Further, one village and one urban locality was selected randomly and equal number of respondents were selected from place both (25 from each). The male and female elderly people in the age group of more than 60 years were the criteria for the selection of respondents. Depression among respondents was assessed using of Geriatric Depression Scale (GDS) in both areas.

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Results and Discussion

Table 1: Socio demographic profile of the respondents (n=50)

Variables	Urban, n=25 f (%)	Rural, n=25 f (%)
Age		
60-69	6 (24)	8(32)
70-79	15(60)	13(52)
80-90	4(16)	4(16)
Gender		
Male	10(40)	10(40)
Female	15(60)	15(60)
Education		
Illiterate	5(20)	8(32)
Literate	7(28)	3(12)
Middle	7(28)	10(40)
Metric	6(24)	4(16)
Type of family		
Nuclear	13(52)	10(40)
Joint	12(48)	15(60)
Financial dependency		
Dependent	9(36)	13(52)
Independent	16(64)	12(48)
Living status		
Living with spouse	4(16)	7(28)
Living with children	9(36)	8(32)
Living with spouse and children	12(48)	10(40)

The data reported in Table 1 indicate that 60% of the respondents were in the age group of 70-79 years in the urban area and 52% in rural area. Near about half 48% of the respondents in urban area and 40 percent in rural area were living with their spouse and children. Less than half of the respondents 28% were literate and middle class from urban area and about 40% from rural area. In the urban area more

than half 52% of the respondents belonged to nuclear families whereas from rural area majority of 60% the respondents were lining as joint families. Further, more than half of the respondents 64% from urban area and above half 52% from rural area were found financially independent.

Table 2: Level of Geriatric Depression profile of the respondents (n=50)

GDS score	Urban, n=25, f (%)		Rural, n=25, f (%)		Total, f (%)	
	Male n=10	Female n=15	Male n=10	Female n=15	Male n=20	Female n=30
Normal (0-9)	4(40)	5(33.33)	5(50)	9(60.00)	9(45)	14(46.67)
Mild (10-19)	5(50)	7(46.67)	3(30)	4(26.67)	8(40)	11(36.67)
Severe (20-30)	1(10)	3(20.00)	2(20)	2(13.33)	3(15)	5(16.67)

Table 3: Depression among the urban and rural respondents n = 27

Variable	Depressed	
	Urban n=16 f (%)	Rural n=11 f(%)
Age		
60-69	5(31.25)	4(36.36)
70-79	7(43.75)	5(45.45)
80-90	4(25.00)	2(18.18)
Education		
Illiterate	4(25.00)	4(36.36)
Literate	6(37.50)	4(36.36)
Middle	4(25.00)	2(18.18)
Metric	2(12.50)	1(9.09)
Type of family		
Nuclear	9(56.25)	5(45.45)
Joint	7(43.75)	6(54.54)
Financial dependency		
Dependent	7(43.75)	4(36.36)
Independent	9(56.25)	7(63.64)
Living status		
Living with spouse	6(37.50)	2(18.18)
Living with children	5(31.25)	6(54.54)
Living with spouse and children	5(31.25)	3(27.27)

The results indicate that 40% male and 36.67% female respondents were found to be mildly depressed as per the

GDS with a score ranging to 10-19. Whereas 15 percent male and 16.67% female respondents were found to be severely depressed with a score of 20-30. Similar findings were found in study done by Sundru and Goru in Visakhapatnam in 2013. Table 3 shows that 43.75% of respondents between 70-79 years were found depressed in urban area and 45.45% in rural area. Similarly, study occurred in the rural and urban areas of Visakhapatnam, Andhra Pradesh, reported a comparatively higher prevalence of depression in the rural area 36.0% than in the urban area 27.0%. However, another community-based study carried out in Ludhiana, Punjab reported a low prevalence (10.10% in the urban area and 7.30% in the rural area) of depression among the elderly population. It is also evident that 37.50% respondents were literate in urban area and 36.36% respondents of rural area were found equally illiterate and literate. More than half (56.25%) of the urban respondents were belonged to nuclear families whereas 54.54% rural respondents were belonged to joint families. Urban area majority of the respondents 56.25% were found to be financially independent whereas 63.64% respondents from rural area. Less than half (37.50%) of the respondents in urban area were found to be living with their spouse and 54.54% of the rural respondents were living with their spouse and children.

Table 4: Association between socio-demographic variable and depression among elderly (n=27)

Variable	Depression urban, n=16 f(%)	Depression rural, n=11 f(%)	χ^2	p value
Age				
60-69	5(31.25)	4(36.36)	1.23	0.01*
70-79	7(43.75)	5(45.45)		
80-90	4(25.00)	2(18.18)		
Gender				
Male	6(37.50)	5(45.45)	1.12	0.06
Female	10(62.50)	6(54.54)		
Education				
Illiterate	4(25.00)	4(36.36)	2.35	0.10
Literate	6(37.50)	4(36.36)		
Middle	4(25.00)	2(18.18)		
Metric	2(12.50)	1(9.09)		
Type of family				
Nuclear	9(56.25)	5(45.45)	2.12	0.15
Joint	7(43.75)	6(54.54)		
Financial dependency				
Dependent	7(43.75)	4(36.36)	1.24	0.02*
Independent	9(56.25)	7(63.64)		
Living status				
Living with spouse	6(37.50)	2(18.18)	1.32	0.05*
Living with children	5(31.25)	6(54.54)		
Living with spouse and children	5(31.25)	3(27.27)		

Table 4 shows the association between socio demographic factors (age, financially dependent and living status) and depression was significantly. Similar trends in the prevalence of depression with increasing age were observed in studies carried out by Ankur Barua in Manipal and Sengupta and Benjamin in Ludhiana. Another study in Pakistan also reported female gender, elderly without a spouse, low level of education, and unemployment to be independent predictors of depression.

Conclusion

This study in the elderly found that 60% of the respondents were in the age group of 70-79 years in the urban area and 52% in rural area.

The results indicate that 40% male and 36.67% female respondents were found to be mildly depressed as per the GDS with a score ranging to 10-19. Whereas 15 percent male and 16.67% female respondents were found to be severely depressed with a score of 20-30.

Less than half 43.75% of respondents between 70-79 years were found depressed in urban area and 45.45% in rural area.

It is also evident that 37.50% respondents were literate in urban area and 36.36% respondents of rural area were found equally illiterate and literate.

More than half (56.25%) of the urban respondents were belonged to nuclear families whereas 54.54% rural respondents were belonged to joint families.

Urban area majority of the respondents 56.25% were found to be financially independent whereas 63.64% respondents from rural area.

Less than half (37.50%) of the respondents in urban area were found to be living with their spouse and 54.54% of the rural respondents were living with their spouse and children.

The association between socio demographic factors (age, financially dependent and living status) and depression was significantly.

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