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Assessment of physical health problems and reasons among elderly people residing in old age home in Hisar

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Abstract

Ageing is a natural phenomenon and an unavoidable process. It is a gradual change in physical appearance and mental status that cause a person to grow old. As people grow old, they face many problems regarding their health. So, the present study was conducted to assess the health problems their causes among elderly people residing in old age home. Study was conducted on 50 elderly people (above 55 years) residing in Moksha Ashram in Hisar district. Results revealed that more than half of the respondents (58%) belonged to 55-65 years of age group and maximum (36%) were found to be illiterate. About 82 percent respondents were married. A majority of them had health problem such as joint pain (80%) followed by difficulty in walking (74%) and hearing problem (72%). Regarding reasons for residing in old age home, 26 percent respondents mentioned about the misbehavior of sons and daughters in law followed by 18 percent respondent who were found to have adjustment problems and 14 percent their were having no son i.e. no one to take care.

Keywords: Old age home, people, health problem and reason

Introduction

Ageing is a natural phenomenon and an unavoidable process. It is a continuous, universal, progressive, intrinsic and deleterious process. It process gradual change in physical appearance and mental status that cause a person to grow old. As the birth is an event and the pregnancy a process of it, similarly old age is an event and ageing is its process (Subba and subba, 2015) [9]. According to world health organization 2018, there are currently about 900 million senior citizens in the world and by 2020 approximately 80% of the senior citizens population will be living in developed countries. According to Population Census 2011, there are nearly 104 million aged peoples (aged 60 years or above) in India; 53 million females and 51 million males. A report released in 2017, by the United Nations Population Fund and Help Age India suggests that the number of senior persons is expected to grow to 173 million by 2026.

The physiological decline in ageing refers to the physical changes an individual experiences because of the decline in the normal functioning of the body resulting in poor mobility, vision, hearing, inability to eat and digest food properly, a decline in memory, the inability to control certain physiological functions, and various chronic conditions. Change in socio-economic status adversely affects the individual's way of life after retirement. The economic loss is due to a change from salary to pension or unemployment leading to economic dependency on children or relatives. A feeling of low self-worth may be felt due to the loss of earning power and social recognition (Lena *et al.*, 2009) [7].

Old age is the age of long life experience. "Old age is reduced physical ability, declining mental ability, the gradual giving up of role playing in socio-economic activities and a shift in economic status moving from economic independence to economic dependence upon other's for support" (Kumari, 2016) [6]. In traditional Indian societies, joint family system used to take care of most of these social issues.

However, with industrialization and urbanization, disintegration of traditional joint families has been the major social problem. It is thus necessary to strengthen the traditional family system through community education and social intervention. Change in family structure and contemporary changes in the psycho-social matrix and values often compel the elderly to live alone or to shift from their own homes to some institutions or old age homes (Kumar *et al.*, 2012) [5]. So, keeping the above facts in view the study on physical health problems and reason was taken into consideration

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- To assess the health problems among elderly living in old age home along with finding their causes

Methodology

A sample size of 50 respondents were selected from Moksha Ashram of Hisar district in Haryana State. Out of 50 respondents 25 male and 25 female were randomly selected. Age group (above of age 55 years) was kept as the criteria for the selection of respondents. Data was collected with the help of well-structured questionnaire and interview schedule.

Results and Discussion

Table 1: Socio demographic profile of the respondents

Variables	Male n=25 f(%)	Female n=25 f(%)	Total n=50 f(%)
Age			
55-65	13(52)	16(64)	29(58)
66-75	10(40)	5(20)	15(30)
76-85	2(8)	4(16)	6(12)
Marital status			
Married	19(76)	22(88)	41(82)
Unmarried	6(24)	3(12)	9(18)
Education			
Illiterate	7(28)	11(44)	18(36)
Literate	4(16)	2(8)	6(12)
Middle	6(24)	7(28)	13(26)
Metric	3(12)	2(8)	5(10)
Sr. sec.	5(20)	3(12)	8(16)

Results presented in table 1 reveals that more than half of the respondents (58%) belonged to 55-65 years of age group. About 82 percent of the respondents were married. Majority of the respondents (36%) were illiterate followed by middle, sr. sec. level, literate and metric level (26%, 16%, 12% and 10% respectively).

Similar findings occurred that maximum 50.0 per cent respondents belonged to 66 and above years, whereas 23.4 per cent belonged to 61-65 years, 16.6 per cent respondents belonged to 56-60 years and 10.0 per cent respondents belonged to 50-55 years (Kumari *et al.*, 2016) [6].

Table 2: Common health problem of respondents

Common Health problem	Male n=25 f(%)	Female n=25 f(%)	Total n=50 f(%)
Vision problem	14(56)	17(68)	31(62)
Hearing	17(68)	19(76)	36(72)
Verbal communication	11(44)	9(36)	20(40)
Walking difficulties	17(68)	20(80)	37(74)
Joint pain	19(76)	21(84)	40(80)
Backache	15(60)	19(76)	34(68)
Asthma	4(16)	9(36)	13(26)
Insomnia	9(36)	11(44)	20(40)
Stomach ache	11(44)	13(52)	24(48)
Blood Pressure	13(52)	10(40)	23(46)
Constipation	10(40)	13(52)	23(46)
Skin disease	7(28)	4(16)	11(22)
Urinary problem	4(16)	8(32)	12(24)
Diabetes	7(28)	5(20)	12(24)
Heart disease	5(20)	7(28)	12(24)

Perusal of table 2 clearly depicts that majority of the respondents (80%) were having joint pain followed by walking difficulties (74%) and other health problems like; hearing problem (72%), backache (68%), vision problem

(62%), stomachache (48%) and blood Pressure (46%). Similarly those reporting respiratory disease, eye problem and gastritis were 39%, 30% and 29% respectively (Bista *et al.* 2012) [2].

Table 3: Reason for living in old age home

Variables	Male n=25 f(%)	Female n=25 f(%)	Total n=50 f(%)
Misbehaviour of sons and daughters-in-law	6(24)	7(29)	13(26)
Poverty/ lack of financial support	2(8)	2(8)	4(8)
Loneliness	3(12)	2(8)	5(10)
Adjustment problems	5(20)	4(16)	9(18)
Having no son or child to take care	4(16)	3(12)	7(14)
Having children settled abroad	1(4)	2(8)	3(6)
Abandoned by children due to psychiatric and/or physical illness	4(16)	2(8)	6(12)

The findings presented in table 3 revealed that about one forth of the total respondents (26%) were found to be misbehaved by their sons and daughters-in-law followed by adjustment problem (18%), having no son or child to take care (14%), children do not want to keep due to psychiatric physical illness (12%) and loneliness (10%). Least of respondents (8%) were found to have financial support and (6%) were having children's settled in abroad which made them to live in old age home. Similar study found that most common reasons for were the misbehaviour of children (29.8 %) towards their old parents and poverty/no-financial support (29.3%) and other factors for in old age home were to serve the almighty God (9.1%), loneliness (8.0%), adjustment problem (5.7%), nuclear family system (5.1%), having no son to take care (5.1%), children settled in abroad (2.2%), abandoned by children due to psychiatric and/or physical illness (2.2%), life threats from children (1.7%) and (1.1%) better facility in old age home (Akbar, *et al.*, 2014) [1].

Conclusion

The results of this study showed that majority of respondents found, having joint pain, difficulty of walking with elderly age people and misbehavior of sons and daughters, having no son or child to take care these are mainly cause of residing in old age home a sense of neglect by their family members. And, in present scenario along with other reasons old age homes are being considered as a better alternative to reside. There is a need to generate emotional support facilities in these homes and the government and voluntary agencies in India must make arrangements for institutional support and care for the elderly.

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