

Original Research Article

## Psychosocial Problems: An Issue among the Elderly in Kathmandu, Nepal

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### ABSTRACT

**Introduction:** With an increasing population ageing and by the changing context of the world, elderly has been pushed into a state of loneliness, helplessness, frustration and meaninglessness leading them to various psychosocial problems. The study was conducted to compare the psychosocial problems and determine its relationship with the selected demographic variables of the elderly living in institutional and home settings in Kathmandu, Nepal.

**Methods:** The co-relational comparative study was carried out in 2013 among 132 elderly aged 60 years and/above residing in old age homes and home settings in Kathmandu by using pre-tested structured interview schedule. Data were analysed by using SPSS software version 19.

**Results:** The psychosocial problems were greater in institutionalized elderly and there was significant difference between psychosocial problems of the elderly living in institutional and home settings. The psychosocial problems had dependency on type of family, interpersonal relations, and gender in institutionalized elderly and with educational status, marital status, monthly income, interpersonal relations, and gender in home living elderly.

**Conclusions:** The institutionalized elderly are facing more psychosocial problems. The study shows the need of encouragement towards joint family norms. Older adults should be trained for active ageing. Old people should be involved in the family activities and useful works instead of keeping them away.

**Key Words:** Psychosocial problems institutionalized elderly, elderly.

### INTRODUCTION

Longevity is an achievement of the present century derived from tremendous advancement of science and medicine. The increase in life expectancy, decreased birth and death rate has resulted in the increased proportion of the aged people. With an increasing proportion of our population living for longer years, we are now confronted with the problem of not knowing

how to deal with growing problems of our elderly population. Simultaneously, our senior citizens too are challenged by how creatively and usefully occupy themselves in society.

Population ageing is expanding worldwide including developing countries like Nepal. The percentage of elderly population has increased from 4.6% in 2001 to 8.13% in 2011. <sup>(1)</sup> But due to the changing

societal norms young generation is living away from parental home as well as for family business for their livelihood. It is difficult for elderly to change homes and get adjusted to new place. Apart from this because of more and more working women, their traditional role of care giver of the elderly is abandoned. Besides, our social culture is also being broken by the changing context of the world, desire for a small family, poverty and urbanization process. In such circumstances, the society seems to have empathized the problems and needs of the elderly and hence have attempted, though not sufficient, to ease their life. In developing countries like Nepal number of old age homes and presence of aged patients in hospital is on rise. Elderly homes, religious sites are the only destination for senior citizens out of their family during the old age. Different activities from the side of government, NGOs and individuals are being done for the senior citizens. However, many of them are still deprived of proper care and support and basic need for comfortable survival. <sup>(2)</sup> Present day society has pushed down the old into a state of loneliness, helplessness, frustration, and meaningless, leading them to various psychosocial problems. Having ample scope, there is a relative paucity of researches done on psychosocial problems and coping strategies adopted by elderly in Nepal.

The present study the first of its nature had the objectives of comparing the psychosocial problems of the elderly living in institutional and home settings in Kathmandu and to seek the relationship of psychosocial problems of the elderly living in institutional and home settings with sex, education, marital status, type of family, monthly income, present job status and interpersonal relations

## **MATERIALS AND METHODS**

The co-relational comparative study was carried out among 132 elderly aged 60 years and/above residing in old age homes and home settings in Kathmandu, Nepal. The sample size was determined on the basis of prevalence of nervous system disorders among the elderly in an urban area of Udaipur Rajasthan, India. <sup>(3)</sup> At first ward number 14 was selected by simple random sampling for home setting. Then 66 elderly respondents were selected by systematic random sampling from ward that ward. Similarly, 66 elderly from five old age homes were selected by proportionate random sampling. A total of sixty-six elderly from both the settings were interviewed from 24<sup>th</sup> December 2012 to 25<sup>th</sup> February by using pre-tested structured interview schedule which was developed in consultation with five experts in the respective fields. The data were compiled and analysed by using SPSS version 19 and appropriate statistical tests were performed to draw the inference.

## **RESULTS**

The finding of the study showed that around 70% of the respondents from home settings were in the age group 60- 69 followed by 24% and 3% each in the age group 70-79, 80-89 and 90 and/above years respectively. Similarly, in the institutional setting 41% were in the age group 70-79 followed by 30%, 24% and 5% in the age group 80-89, 60-69 and above 90 and/above years. In both the settings, male and female were in equal proportion. Only 9% of the elderly from institutional setting were literate. While more than the halves of the elderly (55%) home settings were literate. Most of the respondents (59%) were married and living together in home settings where as in institutional settings around 64% of the elderly were widow/ widower or unmarried.

The result also showed that around 27% of the respondents from the home settings were employed whereas 97% of the institutionalized elderly were retired and not employed. More than the halves of the elderly in institutional settings (54.5%) had minimum income up to NRs 2000 per month. But in home settings, around 35% of the elderly had income more than NRs 10000 per month. The elderly who lived in joint family constituted 71% of the elderly in home setting whereas 58% of the elderly

were from nuclear family in institutional setting.

Mean score and rank of the type of psychosocial problems of the elderly in both the settings are presented in Table 1. Neglect by family ranked first in institutional setting (mean percentage score = 83.8) whereas anxiety ranked first in home setting (mean percentage score = 30.25). It was also noted that the mean percentage score of all the psychosocial problems were greater in institutionalised elderly than the home living elderly.

**Table 1: Mean Score and Rank of Type of Psychosocial Problems of the Elderly**

Types of Psychosocial Problems	Maximum Possible Score	Institutional Setting			Home Setting		
		Mean Score	Mean % Score	Rank	Mean Score	Mean % Score	Rank
• Depression	16	8.13	50.8	6	3.4	21.5	6
• Loneliness	12	6.69	55.7	3	2.9	24.6	5
• Social Isolation	12	6.45	53.7	4	2.3	19.4	7
• Anxiety	12	4.6	38.3	7	3.6	30.2	1
• Neglect	10	8.38	83.8	1	2.5	25	4
• Lack of self confidence	10	5.81	59.1	2	2.8	28.7	2
• Memory loss	4	2.06	51.5	5	1.04	26	3

Severity of the psychosocial problems of the elderly is presented in Table 2. Severe psychosocial problems were higher in institutional settings (around 29%) than home settings (6%). Moderate

psychosocial problems were present in 51% of the institutionalized elderly whereas most of the home living elderly (around 76%) were having only mild psychosocial problems.

**Table 2: Severity of Psychosocial Problems of the elderly**

S.N.	Severity of Psychosocial Problem	Range of Scores	Elderly in Institutional Setting		Elderly in Home Setting	
			Frequency	Percentage	Frequency	Percentage
1	Mild	1-25	13	19.7	50	75.8
2	Moderate	26-50	34	51.5	12	18.2
3	Severe	51-76	19	28.8	4	6.1

The difference in psychosocial problems of the institutionalized and home living elderly is presented in Table 3. It clearly depicts that there was significant difference between mean scores of the elderly living in institutional and home settings for psychosocial problems as 't' value obtained (8.28) is greater than

tabulated value ( $t=2.62$ ) at 0.01 level of significance. Thus, it can be inferred that the obtained mean difference of 21.28 was not by chance, but was a true difference. This clearly showed that elderly living away from their homes were facing more psychological problems.

**Table 3: Comparison of Psychosocial Problems of institutionalized and home living elderly**

Variable	Elderly in Institutional Setting n = 66		Elderly in Home Setting n = 66		Mean D	SE D	't' value	Sig. (2-tailed)
	Mean	SD	Mean	SD				
Psychosocial Problems	40.12	14.79	18.83	14.7	21.28	2.56	8.287**	0.000

\*\*t value significant at 0.01 and 0.05 level of significance.

$t_{(130), .001} = 2.62$  and  $t_{(130), 0.05} = 1.98$

Chi-square values are presented in Table 4 which shows the association between psychosocial problems and selected demographic characteristics of the elderly. The table depicts that the psychosocial problems of the elderly in institutional setting had significant association with type of family belonged, interpersonal relations, and gender and no association with education, marital status, present job status and monthly income. It also indicated that the psychosocial problems of the elderly living in home setting had significant association with educational status, marital status, monthly income, interpersonal relations, and gender and no association with present job status and type of family of the elderly.

**Table 4: Association between Psychosocial Problems and Selected Demographic Characteristics of the elderly.**

S. N.	Respondent Characteristics	Elderly in Institutional Setting			Elderly in Home Setting		
		Chi-Square Value	df	Asymp.Sig. (2-sided)	Chi-Square Value	df	Asymp. Sig. (2-sided)
1	Educational status	15.603	10	0.112	25.897*	12	0.011
2	Marital Status	12.880	8	0.116	14.134**	4	0.007
3	Present Job Status	1.941	4	0.747	9.320	8	0.316
4	Monthly Income	10.691	6	0.098	26.458**	8	0.001
5	Type of family belong/belonged	9.393**	2	0.009	4.440	2	0.109
6	Interpersonal Relations	35.061**	4	0.000	34.949**	4	0.000
7	Sex	8.150*	2	0.017	9.000*	2	0.011

\*Significant at 0.05 level of significance

\*\*Significant at 0.01 and 0.05 level of significance

## DISCUSSION

A comparison of the personal data of the institutionalized and home living elderly revealed that almost 41% of the elderly in institutional settings had no income whereas in home settings, 76% of the elderly had income of their own. Also, majority of the elderly (59%) were married and living together in home settings whereas in institutional settings, 64% of the elderly were widow/ widower or unmarried. The findings of the study are in consistence with the study conducted by Nagpal and Chadha (1991) who found that the incidence of

widowed persons was relatively higher in institutional group (48.3 per cent), compared with that of family group (25%). Also it was found that the number of subjects with no income was significantly higher (16.6%) in the institutional group as compared with that of the family group (1.6%).<sup>(4)</sup>

The study findings showed that mean of psychosocial problems in institutional settings (40.12) were higher than that in home settings (18.83), indicating that more psychosocial problems were faced by the elderly in institutional setting. It was also

noted that the mean percentage score of all the psychosocial problems were greater in institutionalized elderly compared to those with the elderly living in home setting. These findings are in conformity with the findings of the study conducted by Agarwal and Srivastava (2002) which indicated that the emotional states like anxiety, depression, loneliness, neglect by family members, lack of self confidence, social isolation are more in old people living in institutions. <sup>(5)</sup> The findings also get support from the study of Kanwar and Chadha (1998) according to which depression and loneliness of institutionalized elderly was higher than that of non-institutionalized elderly. <sup>(6)</sup> Hence, it can be concluded that the elderly staying in institutional setting suffer from more psychosocial problems due to lack of communication and psychosocial separation.

The psychosocial problems of the elderly living in both home setting and institutional setting showed significant association with gender in the present study. Female elderly in home setting and institutional setting had more psychosocial problems with mean scores 26.94 and 45.73 respectively than male elderly with mean scores 10.73 and 34.52 respectively. This finding is in consistence with the findings of study conducted by Sharma and Sidhu (2009) which showed lower level of subjective well being and more stress in female elderly when compared to male elderly. <sup>(7)</sup>

The results indicated that the elderly people need special attention as a special concern group. There is much scope to reduce the physical and psychosocial problems and improve the quality of life of the elderly by providing health care services based on the needs of the elderly. There is also a need for organising counselling programmes for the caretakers and the elderly living in family

and staying in the geriatric homes. Much of the psychosocial problems can be prevented or minimized with communication and having people to share the problem.

## CONCLUSION

The psychosocial problems were higher in the elderly living in institutional settings. There was significant difference in mean scores of psychosocial problems in institutional and home setting. This shows that the institutionalized elderly were facing more psychosocial problems and they were not able to cope with those problems in an effective manner as the elderly in home settings do. This may be due to neglect from the family members. Also the psychosocial problems among institutionalized elderly were dependent of type of family belonged, interpersonal relations, and gender and independent of educational, marital status, present job status and monthly income.

The psychosocial problems of the elderly living in home settings showed dependency with educational status, marital status, monthly income, interpersonal relations, and sex and were independent of present job status and type of family of the elderly.

The study shows the need of families' encouragement towards joint family norms. Old people should be involved in the family activities instead of keeping them away. They help in better ways to look after the children and can supervise household work. Elderly should not be detached from the children. The planning for old age should be started while the parents are at adulthood with respect to finances, type of work, involvement in decision making, taking benefit of their lifelong experiences. Older adults should be trained for active ageing so that they can participate in the development of nation. Institutionalized elderly as per their capability should be involved in useful

works that they know and we can make use of their experiences.

It is the time to understand that if we do not plan now, our future can be same as theirs and if our children do not see us caring for our elderly, one day we can also be in the same situation.

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