



# QUALITY OF LIFE AND PERCEIVED SOCIAL SUPPORT AMONG THE INSTITUTIONALIZED ELDERLY IN KERALA

**Fr. Aju Philip Varghese**

Assistant Professor

Department of Social Work

St. Thomas College, Konni, Kerala.

**Abstract:** The end of life is one of the most significant phases of human life cycle. Regarding the increasing number of elderly people, there quality of life is more important. Even though the main challenge of general health in 20<sup>th</sup> century was “enhancing the life expectancy” the most important issue in this regard in 21<sup>st</sup> century is “life with better quality”. The population ratio of the older people in India has been growing at an increasing rate and the recent trend is expected to continue in the future years too. The ratio of elderly in Kerala is also increasing at a high rate. It is high when compared to other states of India. The transformation in traditional family system and modern-day changes in the psychosocial networks frequently force the older people to stay alone or to move away from their own house to other old age homes. Social relationships and involvement in activities are key protective factors in maintaining quality of life in elderly. The study aims to investigate the quality of life and perceived social support among the elderly residing in old age homes in Pathanamthitta District, Kerala. A cross sectional study was conducted among elderly aged above 60 years of age. After taking a written consent and matching for age and sex and socioeconomic status, 100 elderly from 10 OAHs were selected randomly. The WHOQOL-BREF questionnaire and Multidimensional Scale of Perceived Social Support were used to assess quality of life and perceived social support in elderly. The findings of the study show that majority of the elderly living in old age homes are having an average level of quality of life as well as low level of social support. The finding shows that there is a significant positive relationship between quality of life and social support of the institutionalized elderly. The results of this study reveal that the higher level of social support among the elderly, the greater is their quality of life. A holistic approach integrating physical, psychological, social and spiritual aspects is needed for enhancing the better quality of life among the institutionalized elderly.

**KEYWORDS:** Quality of Life, Old Age Home, Institutionalized Elderly, Perceived Social Support

## 1.INTRODUCTION

The end of life is one of the most significant phases of human life cycle. The human life is a continuum from conception to death, with growth and development. Regarding the increasing number of elderly people, there quality of life is more important. One of the effective issues on quality of life, especially in the elderly is health status. Even though the main challenge of general health in 20<sup>th</sup> century was “enhancing the life expectancy” the most important issue in this regard in 21<sup>st</sup> century is “life with better quality” (Kumar, 2016). Old age

has been viewed as problematic period of one's life where one indulges in introspection and starts getting meaning out of his life and weak physique makes them increasingly dependent on others and fearful anticipatory speculations of life process makes them anxious whereas, low income and consequent declining position in the family and society leaves them in deep despair (Kumar & Pillai, 2017)

The population ratio of the older people in India has been growing at an increasing rate and the recent trend is expected to continue in the future years too. In India, the population ratio over the age of sixty is projected to increase from 8 percent in the year of 2015 to 19 percent in 2050 (Mane, 2016). Modern life style has created barriers and time has become very precious in this rat race leaving elderly people unattended. It is being said "A home is heaven where elderly and younger ones are been cared". This has promoted the concept of old age homes where their loved ones manage to find a middle path. Changing cultural and family value system in present situation is one of the major reasons for increase in old age homes (OAHs) over the country as it causes economic compulsion to children which become the reason behind the abuse and negligence of elderly (Kumar, 2017). Quality of life is determined by conditions of events and decisions during childhood and adulthood including environmental and lifestyle factors. The life-course approach to health means paying attention to individual life stages and transitions. The quality of life is one of the important aspects of elderly health status which has often been neglected.

## **2.RATIONALE OF THE STUDY**

According to United Nations Report, "the number of older adults is expected to more than double, from around 841 million people in 2013 to more than 2 billion in 2050 (World Health Organization, 2013). A collective research done by UNFPA and Help Age International in 2016 reported that "India has around 100 million older adults and the number is expected to increase to 323 million by 2050" (UNFPA, 2017). The ratio of elderly in Kerala is also increasing at a high rate. It is high when compared to other states of India. The rising impact of globalization and emerging life new styles have made drastic changes in traditional value system in our society, the joint family system is breaking down and the now traditional concept of Indian is now replaced with nuclear families. This phenomenon has made a rise to nuclear family structure. The transformation in traditional family system and modern-day changes in the psychosocial networks frequently force the older people to stay alone or to move away from their own house to other old age homes (Kumar & Pandya, 2017).

In Kerala, the culture of sending elderly persons to Old Age Home is fast developing. The orphanage control board under the Kerala Social Justice Department is receiving six to eight applications each month 2017-18, seeking permission to begin old age homes in Kerala (Sreemol, 2019). Most of the applications are from Kottayam, Pathanamthitta, Ernakulam and Thrissur. The number of old age homes in Kerala that are managed by the state government and institutions registered under Board of Control for Orphanages and other charitable homes have increased 631 from 520 during 2015-2019 (Sreemol, 2019). Therefore, measuring the quality of life and daily activities are effective methods in evaluating their functional independence.

## **3.AIM AND OBJECTIVES OF THE STUDY**

The study aims to investigate the quality of life among the elderly residing in old age homes in Kerala. To achieve this aim, the following specific objectives are framed:

- a) To find out the socio-demographic profile of the respondents.
- b) To analyse and assess the quality of life of the study group.
- c) To explore the relationship between quality of life of the study group and their social support.

## **4.METHODS AND MATTERIALS**

A cross sectional study was conducted among elderly aged above 60 years of age. After taking a written consent and matching for age and sex and socioeconomic status, 100 elderly from 10 OAHs were selected randomly. The WHOQOL-BREF questionnaire (WHOQOL-BREF, 1996) was used to assess quality of life. The WHOQOL-BREF is divided into four domains which are physical health, psychological, social relationships and environmental domain. It contains total 26 items The Multidimensional Scale of Perceived Social Support (Zimet, et al.,

1988) scale was used to assess perceived social support in elderly. The instrument taps the individual's perception of socio-emotional support from these sources. The MSPSS comprises 12 items and four items in each of three subscales (Family, Friends and Significant Others). The data were analysed using simple frequencies, Crosstabs and diagrams in SPSS. For the statistical analysis and inferences or tests both the SPSS and Microsoft Excel were used in the study. The descriptive and analytical statistics techniques were used in the study to understand the averages, variations and associations.

## 5.MAJOR FINDINGS

The findings of the study depict that as per the scoring of quality of life profile, none of the institutionalized elderly had better Quality of Life as well as Social Support, whereas majority of the respondents are having average level of quality of life and poor social support. The finding shows that there is a significant positive relationship between quality of life and social support of the institutionalized elderly. The results of this study reveal that the higher level of social support among the elderly, the greater is their quality of life ( $P \leq 0.01$ ). The findings may be concluded that better social support system may contribute to disease rehabilitation and improvement of quality of life among the institutionalized elderly. The socio-demographic variables like gender, age and education are significantly related to the quality of life of elderly residing in old age homes ( $P \leq 0.05$ ). The result shows that the quality of life of female subjects (Mean-  $56.56 \pm 8.68$ ) is better than the quality of life of male subjects (Mean-  $53.32 \pm 8.58$ ). The result of the study shows that the elderly who belong to 75-79 group have the highest mean score ( $M=58.12$ ) where as those who are in 65-69 age have the lowest mean score ( $M=53.89$ ). The elderly who belong to 60-64 ( $M=55.23$ ) and 70-74 ( $M=54.12$ ) age groups have medium mean scores. Therefore, the quality of life of elderly who are above 75 years of age is higher than as compared to young old age group. The result of the study shows that the elderly those who with a high school level education have the highest mean score ( $M= 60.12$ ), whereas those who are illiterate have the lowest mean score ( $M= 55.42$ ). The elderly who have educational qualification, graduation and post-graduation attained medium mean score ( $M=57.33$ ;  $M=58.12$ ). Therefore, the quality of life of institutionalized elderly with a high school level education is higher than the quality of life of elderly who are above high school education (graduation, post-graduation) and those who are illiterate.

## 6.SUGGESTIONS

The findings of this study have the potential to equip social workers in developing programmes and activities to strengthen families, caregivers and service providers to create appropriate living conditions that fosters the quality of life among the institutionalized elderly. The suggestions of the present research study can be looked at different dimensions:

- a) **Suggestions to the Government:** Government has started various efforts to introduce more Senior Care Homes in the state of Kerala. Also, the state policy on older citizens is promoted with the view to provide care and support for the elderly. Apart from the promotion of the institutionalization, the focus must be on the de-institutionalization and should encourage the children to take care of their older parents. The government should ensure the service of a Multi-disciplinary team for the care of the elderly in Care Homes. The Multi-disciplinary team should consist of physician, social worker, nurse, dietician, diabetologist, psychologist. The team need to work together for ensuring the best service to the senior citizens.
- b) **Suggestions to the Management of Care Homes:** In Kerala, unlike in Western Countries, the infrastructure facilities of the care homes are not to the adequate facility. The ramps are lacking in almost all the care homes. The care homes must follow the instructions put forth by the International Associations and Research centers. The facilities in the care homes must be adequate and helpful for the easy walking and usage of the elderly in care homes. Also the recreational activities for the elderly must be given utmost importance. The efforts must be directed to help the elderly to deal a life with gracefully. The care homes need to encourage the community participation. The community must also be apart for sharing. The interaction with the community provides the best source of recreation for the elderly under the residential care.

## 7.CONCLUSION

Even when the number of old age homes are on the rise, studies do show that institutionalization is not the best answer in Kerala context. Residents of the old age homes still long to be with their families. But with the changing scenario, residential institutions are not evil as their role in the rehabilitation and care of the older people should be appreciated because they care for those who are left uncared for by their families and society. But some of these institutions must make enough effort to improve and enhance the psychological well-being of their residents, and enough scope should be provided for their interaction with the society. The study analysed the quality of life of the institutionalized elderly in relation to their social support and other socio-demographic variables. It is evident that due to socio-economic changes in the wake of urbanization and increase in the proportion of the aged in the population, the problems of the aged have become formidable. The vital responsibility for caring the aged is shifting from the family to secondary institutions. The study identified various factors contributing towards elderly taking up the shelter in old age homes. Some of them are migration of younger people from rural areas to urban areas in search of better job opportunities, difference in attitude and values of young generations, medical needs or ill health of elderly not being taken care of by the children, risk of safety due to crimes against senior citizens especially in the context of living alone, abandonment arising from property disputes or financial hardships etc. This elderly residing in old age homes experiences many psycho-social problems such as depression, stress, anxiety, loneliness and social isolation. A holistic approach integrating physical, psychological, social and spiritual aspects is needed for enhancing the better quality of life among the institutionalized elderly.

## References

- Kumar, A., & Pillai, R. (2015). Elderly in India: A Quality of Life of Elderly Persons in Institutional Settings. *International Journal of Development Research*, 5/1, 2845-2851.
- Kumar, P., & Pandya, R. (2017). Quality of life among elderly living in old age home: A Brief Overview. *Delhi Psychiatry Journal*, 20/2, 1-6.
- Sreemol, T. C. (2019, February 19). The Number of Old-Age Homes Increases in Kerala. A Shift in Kerala Traditional Family. *The Times of India*. Retrieved from [http://timesofindia.indiatimes.com/articleshow/62977544.cms?utm\\_source=contentofinterest&utm\\_medium=text&utm\\_campaign=cppst](http://timesofindia.indiatimes.com/articleshow/62977544.cms?utm_source=contentofinterest&utm_medium=text&utm_campaign=cppst)
- United Nations. UNFPA. (2017). *Report of the Committee on Caring For Our Elders: India Ageing Report* (United Nations Population Fund Committee).
- World Health Organization. "WHOQOL-BREF: Introduction, Administration and Scoring. Programme on Mental Health, Geneva. WHO (1996). Retrieved from [http://www.who.int/mental\\_health/media/en/76](http://www.who.int/mental_health/media/en/76)
- World Health Organization. National Institute on Ageing, Quality of Life, Demographic Transitions, Global Health and Ageing." *Annual Report* (2013, March). Retrieved from <http://www.who.health/ageing/publications.html>
- Zimet, G.D., Dahlem N.W., Zimet, S.W., & Farley, G.K. (1988). The Multidimensional Scale of Perceived Social Support: Scoring and Procedure. *Manual for the Assessment of MSPS*. Retrieved from <http://www.yorku.ca/rokada/psycstest/socsupp.pdf>