



Institutional Life of Elderly Persons in the Old-age Homes of Janaseva Foundation, Pune

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Abstract:

This research article delves into the lived stories and institutional dynamics shaping the lives of elderly citizens within the old-age homes of Janaseva Foundation, situated in the serene Ambi Campus of Pune. Through a qualitative lens, the look at examines the multifaceted factors of aged institutional life, encompassing social interactions, healthcare provisions, recreational sports, and usual quality of lifestyles inside this precise setting. By combining observations, interviews, and thematic analysis, the studies target to offer insights into the demanding situations, possibilities, and nuances characterizing the institutional care panorama for the elderly in modern-day society.

Keywords: Old Age Home, Elderly, Economic Condition, Mental Health, Institutional Life, Quality of Life

Introduction:

As populations age globally, the supply of institutional care for the aged becomes a more and more essential aspect of social welfare and healthcare systems. Amidst this backdrop, vintage-age homes end up sizable institutions tasked with addressing the various wishes of senior residents who, for various motives, discover themselves dwelling away from their familial homes. Within this context, the Janaseva Foundation, nestled within the picturesque Ambi Campus of Pune, stands as a beacon of care and aid for the aged population.

The decision to transition to an antique-age home frequently represents a complex interaction of things, ranging from fitness issues and familial dynamics to societal norms and personal options. For many old people, this transition marks a great juncture of their lives, necessitating adjustments to new environments, workouts, and social networks. Understanding the intricacies of institutional lifestyles within vintage-age houses is consequently paramount for ensuring the properly-being and dignity of aged citizens.

The Janaseva Foundation, with its commitment to providing compassionate care and holistic support, serves as an ideal setting for exploring the lived experiences of elderly individuals in institutional settings. Situated amidst lush greenery and tranquil surroundings, the Ambi Campus offers a conducive environment for fostering community engagement, recreational pursuits, and personalized care initiatives tailored to the diverse needs of residents.

This research endeavours to illuminate the nuanced dynamics of elderly institutional life within the confines of Janaseva Foundation's old-age homes. By adopting a qualitative approach grounded in participant observation, in-depth interviews, and thematic analysis, the study seeks to unravel the complexities of social interactions, healthcare provisions, leisure activities, and overall quality of life experienced by elderly residents.

By shedding light on the strengths, challenges, and areas for improvement within the Janaseva Foundation's old-age homes, this study endeavours to inform policy discussions, programmatic initiatives, and community-driven interventions geared towards promoting the dignity, autonomy, and well-being of elderly individuals in institutional care settings.

Aims and Objectives:

The main aim of the study is to know and understand the life of the elderly living in the old age homes of Janaseva Foundation in terms of their daily living, health and hygiene and mental health.

- To know and understand the socio-economic and demographic background of the elderly living in the old age homes of Janaseva Foundation, Pune.
- To probe into the physical health status of the elderly living in the old age homes of Janaseva Foundation, Pune.
- To understand the mental health of the elderly living in the old age homes of Janaseva Foundation, Pune.
- To make concrete suggestions to the elderly living in the old age homes of Janaseva Foundation, Pune as regards to their social, mental, and physical health.

Review of Literature:

A study by Janbandhu et al. (2022) explored the lifestyle changes and perceptions of elderly residents in Pune, India. Surveying over 500 residents across 23 old age homes, the study found that nearly half the residents experienced challenges adjusting to the new environment. Many reported feelings of homesickness and abandonment by family. Despite these adjustments, the study highlights the significant impact old age homes have on residents' lives. However, the research acknowledges limitations due to its focus on a single city and the potential for social desirability bias in responses, where participants may have felt pressure to provide positive answers.

Dignity and the provision of care and support in 'old age homes' in Tamil Nadu, India: a qualitative study (2022) by Srinivasan et al. This study explores the experiences of residents in Indian old age homes. It finds that while basic needs are met, residents may face challenges to their dignity and autonomy. The qualitative approach with a small sample (20 residents) limits generalizability, but provides valuable insights. ([BMC Geriatrics])

A study on quality of life between elderly people living in old age homes and within family setup by Undetermined Author. This research compares the quality of life for older adults in old age homes versus family settings. Findings are inconclusive without details, but the focus on comparing these living arrangements highlights a key area of research in elder care. ([ResearchGate])

Lifestyle Changes and Perception of Elderly: A Study of the Old Age Homes in Pune City, India (2012) by Jadhav et al. This study examines the lifestyle changes and perceptions of elderly residents in Pune. It reveals that social isolation and psychological issues can be concerns, alongside highlighting the need for staff training to better address the needs of aging individuals. The limitations include a focus on a single city and a potentially small sample size, but it emphasizes the social and emotional aspects of life in old age homes. ([Gavin Publishers])

Status of the Elderly and Emergence of Old Age Homes in India (2018) by Menezes & Thomas. This article explores the factors contributing to the rise of old age homes in India. It highlights the changing social fabric and the inability of traditional family structures to always meet the needs of older adults. While not directly focused on resident experiences, it provides valuable context for understanding the growth of this sector. ([ResearchGate])

A study on changed lifestyle of the elderly living in old age homes of Pune city (2000) by Jamuna. This earlier study (2000) examines lifestyle changes for elderly residents in Pune. It finds both positive and negative aspects, with social interaction and a sense of community balanced by potential feelings of isolation and a loss of autonomy. The limited date and potential for a smaller sample size are considerations, but it offers a historical perspective on the experiences of residents in old age homes. ([Research Square])

Methodology:

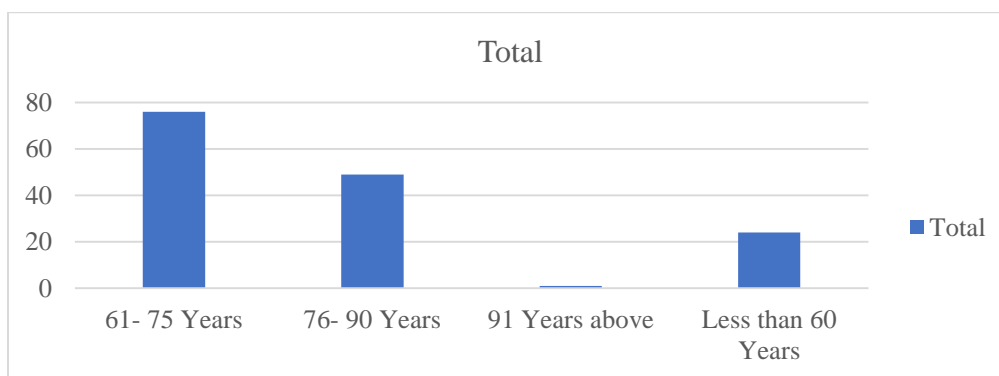
The selection of respondents for this study involves a purposive sampling technique. A sample size of 150 out of the total population of 170 elderly residents was selected for this study

The scope of this study encompasses a comprehensive examination of various aspects of institutional life experienced by elderly individuals in the old age homes of the Janaseva Foundation at the Ambi Campus. This includes but is not limited to, the quality of accommodation, healthcare facilities, social interactions, recreational activities, and overall satisfaction with the living arrangements.

This research holds significant implications for both academic and practice. The findings of this study can inform policymakers, social workers, and caregivers about the specific needs and challenges faced by elderly residents in institutional settings, thereby facilitating the development of more effective support systems and interventions tailored to their needs.

Results and Discussion:

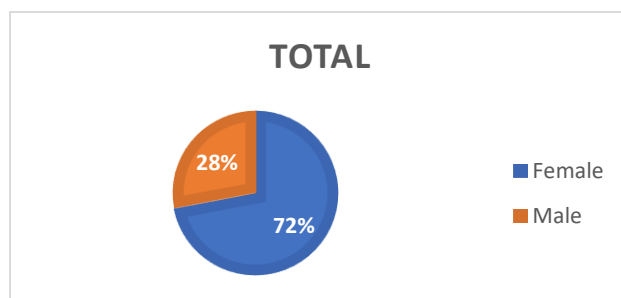
- Age



The data table provides a breakdown of the count of individuals based on their age groups. Most individuals fall within the 61-75 years age range, constituting 76 counts, followed by the 76-90 years age range with 49 counts. There is a smaller representation of individuals aged 91 years and above, with only 1 count, while those less than 60 years old amount to 24 counts.

In conclusion, the analysis highlights a significant portion of the population falling within the 75-90 years age range, indicating an aging demographic trend. The data underscores the importance of healthcare and social policies with regards to the age, tailored to address the needs of the elderly population.

- Gender



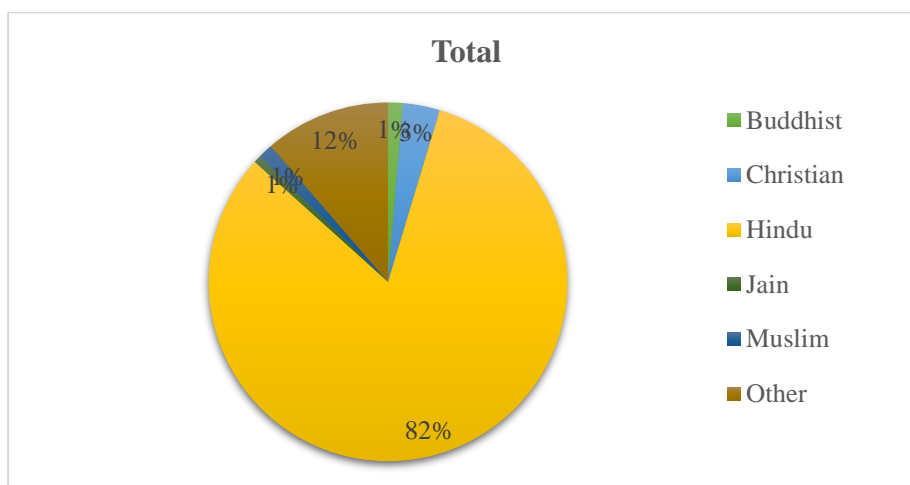
The data table presents a breakdown of gender distribution, with 108 females and 42 males, totalling 150 individuals. In conclusion, the data highlights a significant gender disparity, with females outnumbering males in the observed population. Further investigation into the underlying factors driving this disproportionality may be warranted.

- Marital Status**

Row Labels	Count of Marital Status
Married	71
Never Married	34
Separated	5
Widow/ Widower	40
Grand Total	150

The data table provides a breakdown of marital status among a total of 150 individuals. Among them, A majority are married, constituting 47.33% of the total, followed by widows/widowers at 26.67%. Never married individuals represent 22.67% of the total, while those separated account for 3.33%. This indicates a significant portion of the population being either married or widowed, with a smaller proportion being never married or separated.

- Religion**



The data table provides a breakdown of religious affiliations within a sample of 150 individuals. It reveals a predominant representation of Hinduism with 123 individuals, followed by Christians with 5, and other religions with 17.

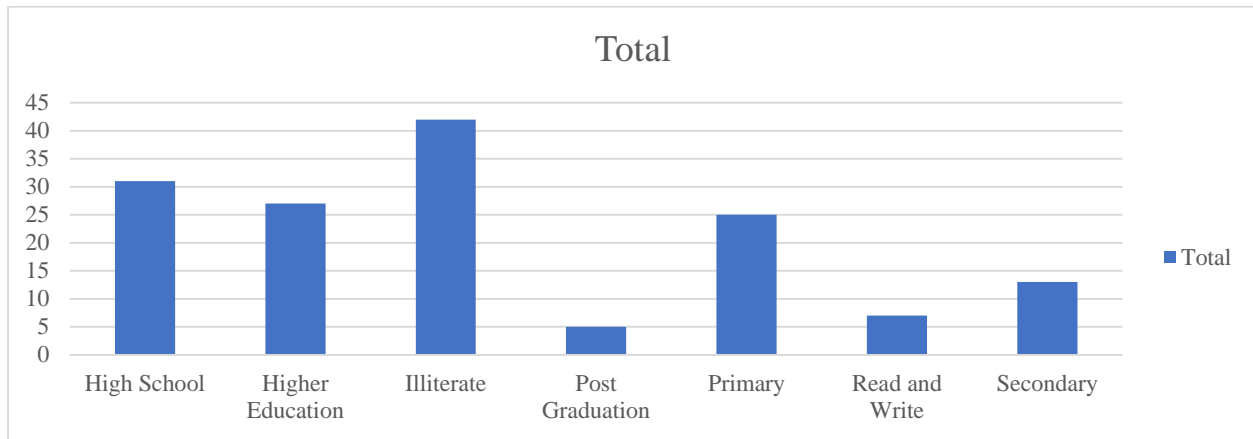
In conclusion, the data suggests a significant majority of individuals in the sample identify as Hindu, while Christian and Other religions form smaller but notable proportions.

- Social Category**

Row Labels	Count of Social Category
OBC	7
Open	96
Other	40
SC	6
ST	1
Grand Total	150

'Open' category comprising the highest count at 96, followed by 'Other' at 40, 'OBC' at 7, 'SC' at 6, and 'ST' at 1. This indicates a significant representation of individuals falling under the 'Open' category compared to others, suggesting potential disparities in social categorization within the sampled population.

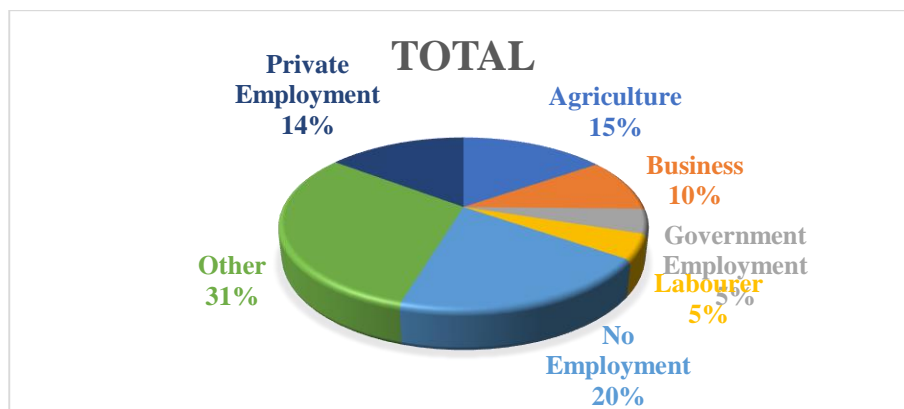
- **Education**



It reveals that the largest portion of the sample is classified as illiterate, comprising 42 individuals, followed closely by those with a high school education at 31 individuals. Notably, post-graduates represent the smallest group with only 5 individuals.

In conclusion, the data highlights a concerning prevalence of illiteracy and a relative scarcity of individuals with post-graduate education within the sample, suggesting potential disparities in access to education and opportunities for advancement among the surveyed population.

- **Nature of work/ Job before admitting to old age home**



A majority of residents had previously been engaged in "Other" types of work, comprising 46 individuals, followed by those with no employment history at 30. Agriculture and private employment also represent significant proportions with 23 and 22 counts respectively. Meanwhile, government employment, labourers, and business categories show comparatively lower counts, at 7 for each.

In conclusion, the data indicates a diverse range of prior employment among residents admitted to the old age home.

- **Monthly Income before Admission to old age home**

Row Labels	Count of Monthly Income Before admitting to old age home.
Less than 10,000	67
10,001 to 20000	6
20,001 to 30,000	6
30,001 to 40,000	4
Above 50,000	3
Higher Earning in lakhs	2
No Income	62
Grand Total	150

It indicates that A majority of individuals have low income, with 67 having less than 10,000 monthly income, followed by 62 individuals with no income. The distribution becomes progressively smaller as income

increases, with only a few individuals falling into higher income brackets such as above 50,000 and higher earnings in lakhs.

In conclusion, the data suggests that a significant portion of individuals admitted to old age homes have low to no income, indicating potential socioeconomic challenges.

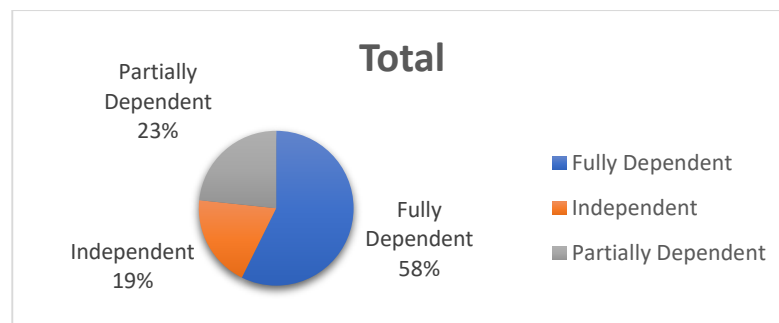
- **Current Sources of Income**

Row Labels	Count of What are the current sources of income?
Family Business income	13
Income from properties	1
Investment in Banks/ Insurance	6
Pension	14
Other	13
No income	103
Grand Total	150

It reveals that Many respondents, 103 out of 150, report having no income. Pension income follows with 14 respondents, while family business income and other sources each account for 13 respondents. Investment in banks/insurance has 6 respondents, and income from properties is the least reported category, with only 1 respondent.

In conclusion, the analysis demonstrates a significant portion of the sample population relies on sources other than traditional employment for income, with a notable number reporting no income.

- **Economic Dependency**



Among the 150 respondents surveyed, 86 are fully dependent on others for economic support, 29 are fully independent, and 35 are partially dependent.

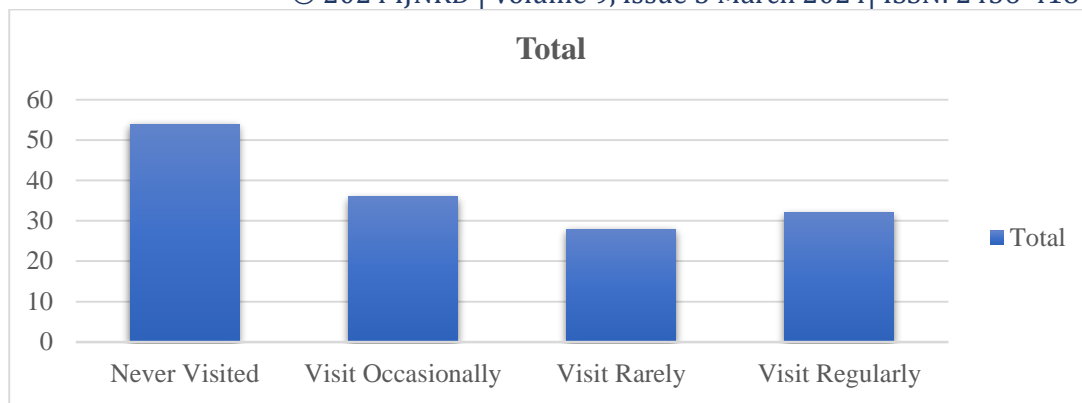
In conclusion, A majority of respondents appear to be either fully or partially dependent on others economically, highlighting the need for tailored interventions to support financial independence and alleviate dependency.

- **Region**

Row Labels	Count of Which region do you Belong
Rural	49
Urban	101
Grand Total	150

Out of the total sample size of 150, 49 individuals reside in Rural areas, while 101 individuals reside in Urban areas. This indicates that a higher proportion of the sample resides in Urban regions compared to Rural regions.

- **Frequency of family visiting them**



It reveals that A majority of respondents (36%) have family members who visit occasionally, followed closely by those whose families never visit (36%). A smaller proportion of respondents have family members who visit regularly (21.3%), with the fewest reporting rare visits (18.7%).In conclusion, the analysis indicates that while a significant portion of respondents' families visit occasionally, a substantial number never visit at all.

- Number of children**

Row Labels	Count of How many Children/ Grandchildren do you have? [Children]
0	55
1	41
2	28
3	20
4	2
more than 4	3
Grand Total	149

A majority of respondents (55) reported having no children, followed by 41 respondents having one child, and decreasing counts as the number of children increases, with only 3 respondents reporting having more than four children. Notably, there are 24 blank responses, which could suggest uncertainty or non-response regarding the number of children.

In conclusion, the data indicates that a significant portion of respondents have no children, with decreasing counts as the number of children increases. However, the presence of blank responses suggests potential data incompleteness or uncertainty in reporting.

- Reason for getting admitted in old age home**

Row Labels	Count of What is the reason for admitting in old age home?
Children are out of country	1
Children cannot bear the expenses keeping us in a separate home	5
Children wish to live separately	11
No one to take care	97
Other	36
Grand Total	150

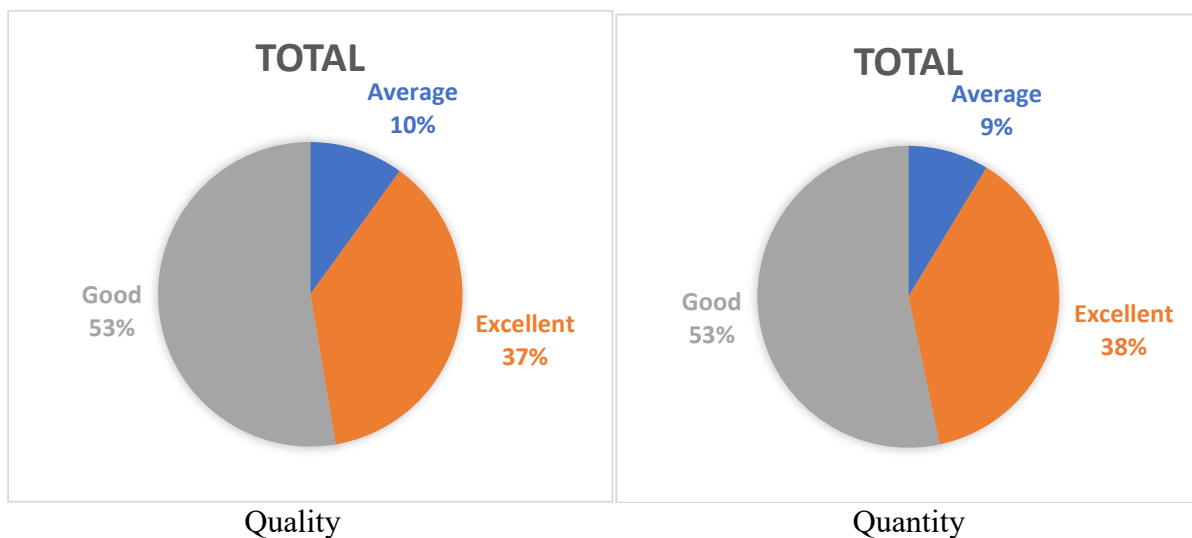
A majority of admissions (97 out of 150) are due to the absence of caregivers, indicating a significant societal issue. Additionally, a substantial number cite the desire for separate living (11) and financial constraints (5), pointing to complex familial and economic dynamics driving admissions. In conclusion, the data underscores the pressing need for societal support structures to address the growing challenge of elderly care.

- Duration of staying in this old age home**

Row Labels	Count of Since how long are you staying in this old age home?
0-5	100
11 to 15	15
16 to 20	9
21+	2
6 to 10	24
Grand Total	150

A majority (100) have been residents for 0-5 years, followed by 6 to 10 years (24), while relatively fewer have stayed for longer durations, with only 15 staying for 11 to 15 years, 9 for 16 to 20 years, and just 2 individuals staying for 21 or more years.

- Rating quality and quantity of food**



Among the 150 respondents, A majority (79) rated the food as 'Good', followed by 56 who rated it as 'Excellent', and 15 who rated it as 'Average'. This suggests that a significant portion of respondents perceived the food quality positively, with 'Good' being the most common rating. This indicates a generally satisfactory standard of food quality.

Among the 150 responses, A majority (80) rated the food as "Good," followed by 57 respondents who rated it as "Excellent," and 13 respondents who rated it as "Average." No responses were recorded for ratings lower than "Average."

Most respondents rated the food positively, with a significant proportion considering it "Good" or "Excellent," indicating overall satisfaction with the quantity aspect of the food.

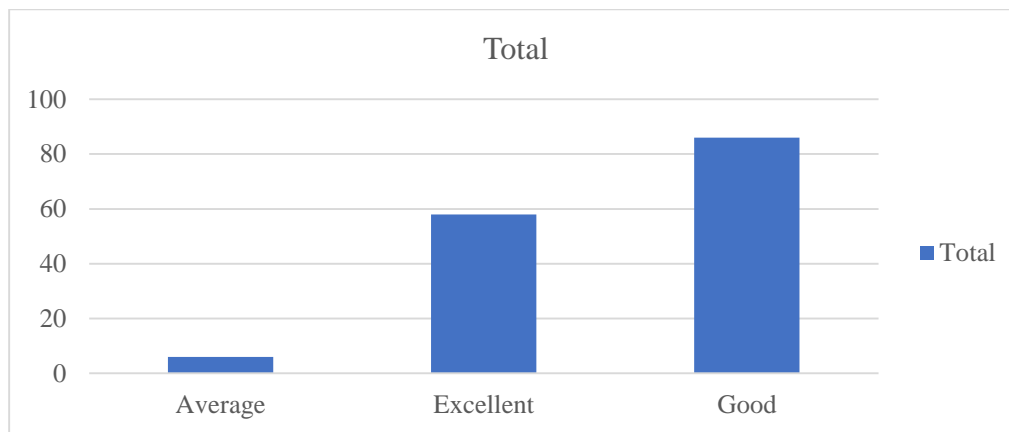
- Accommodation Rating**

Row Labels	Count of How about the accommodation?
Average	8
Excellent	64
Good	78
Grand Total	150

The data table provides insights into the distribution of responses regarding the accommodation quality, with 8 respondents rating it as average, 64 as excellent, and 78 as good out of a total of 150 responses.

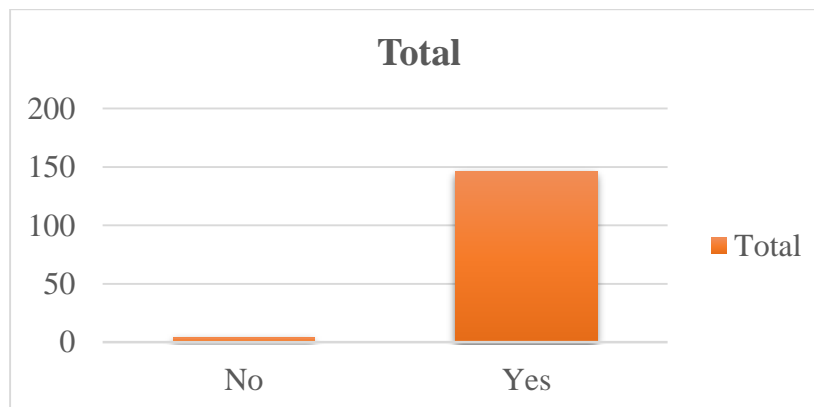
In conclusion, the analysis reveals a predominantly positive perception of the accommodation, with A majority of respondents rating it as good or excellent, indicating satisfaction with the quality of accommodation provided.

- **Rating Sanitary Conditions**



Most respondents rated the conditions positively, with 86 respondents considering them "Good" and 58 respondents rating them as "Excellent." However, there were also 6 respondents who rated the conditions as average. In conclusion, the data indicates that a significant portion of respondents perceive the sanitary conditions at the old age home positively, with a majority rating them as either "Good" or "Excellent."

- **Is the living spaces elder friendly**



Out of the 150 respondents, 146 indicated that the living spaces are elder-friendly, while only 4 respondents indicated they are not. This overwhelming majority suggests a strong perception among respondents that the living spaces are accommodating to elderly individuals, indicating a positive trend in accessibility and design for aging populations

- **Are the water facilities adequate**

Row Labels	Count of Do the water facilities adequate?
No	9
Yes	141
Grand Total	150

Out of 150 respondents, 141 (94%) answered 'Yes', indicating a high level of satisfaction with water facilities. Conversely, only 9 respondents (6%) answered 'No', suggesting a minority perceive inadequacies in water facilities.

In conclusion, the overwhelming majority of respondents, 94%, consider the water facilities adequate, while a small proportion, 6%, express dissatisfaction.

- **Are the caretakers and staff friendly**

Row Labels	Count of Do the water facilities adequate?
No	9
Yes	141
Grand Total	150

Among the 150 respondents, 134 reported the staff as "Very Friendly," while 16 respondents indicated that the staff were friendly "To some extent." In conclusion, the data indicates a high level of friendliness among caretakers and staff, with A majority of respondents describing them as very friendly, highlighting positive interactions within the caregiving environment.

- **Health**

Particulars	Yes	No	Don't Know	Total
Diabetes	44	105	1	150
Hypertension	45	102	3	150
Kidney Problem	4	144	1	150
Cancer	3	142	5	150
Musculoskeletal Problem	50	99	1	150
Asthma	13	135	0	150
Other	46	77	0	150

In conclusion, the data presented illustrates a concerning prevalence of chronic health conditions within the surveyed population. Diabetes, hypertension, and musculoskeletal problems appear as the most prevalent conditions, with significant proportions reporting affirmatively. However, it is alarming to note the sizable number of respondents indicating uncertainty regarding their health status, particularly regarding kidney problems and cancer. These findings underscore the importance of targeted health education and screening initiatives to increase awareness and early detection of such conditions. Moving forward, concerted efforts in healthcare promotion and accessibility are imperative to mitigate the burden of chronic diseases and enhance overall public health outcomes

Particulars	Yes	No	Total
Do you get proper medical treatment here	97	53	150
Do you get prescribed medicine here	130	20	150
Do you have any psychological problems	128	22	150
Do you get any treatment under psychiatrist before	13	134	150
Do you take sleeping pills for better sleep?	13	137	150

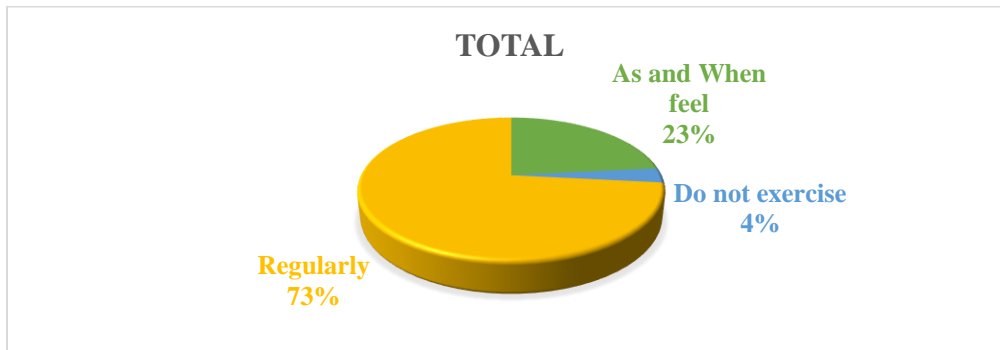
The data table presents responses to various healthcare-related questions among 150 individuals. A significant portion, 97 out of 150, reported receiving proper medical treatment at the given facility. Additionally, most respondents, 130 out of 150, confirmed receiving prescribed medication. However, concerning psychological care, a notable disparity emerges with only 13 individuals reporting previous treatment under a psychiatrist, contrasting sharply with the 128 individuals acknowledging psychological problems. This suggests a potential gap in mental health services provision. In conclusion, while there appears to be a satisfactory provision of general medical care and medication, there is a clear need for enhanced access to psychiatric services and mental health support within the facility.

- **Are recreational programmes and social activities organized**

Row Labels	Count of Are recreational programmes and the social activities organized?
Never	4
occasionally	58
Regularly	88
Grand Total	150

It's evident that a significant portion, 88 out of 150 respondents, reported that these activities are organized regularly, indicating a proactive approach towards community engagement. However, there is a notable proportion, 58 respondents, who reported these activities being organized only occasionally, suggesting a potential room for improvement in consistency.

- Frequency of people who exercise**



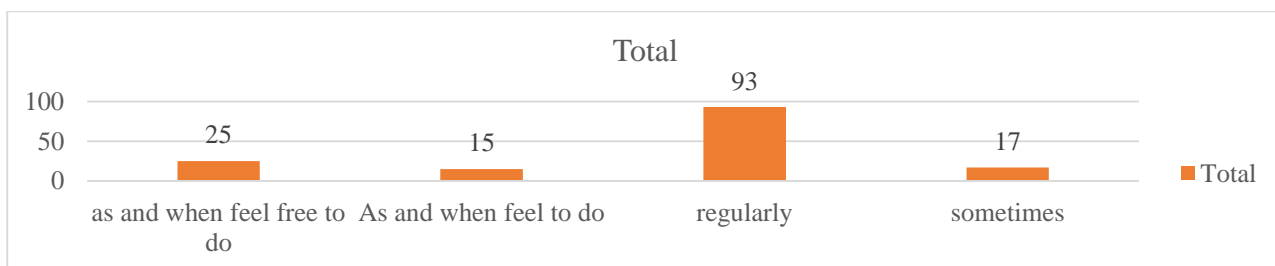
The data suggests that a significant proportion of the respondents, 73.3%, exercise regularly, while a smaller percentage, 23.3%, exercise on an as-and-when basis. Only 3.3% of the respondents reported not exercising at all.

- Frequency of people who do Pranayama/ yoga**

Row Labels	Count of Do you do the pranayama/ yoga?
Never	24
Regularly	69
Sometimes	57
Grand Total	150

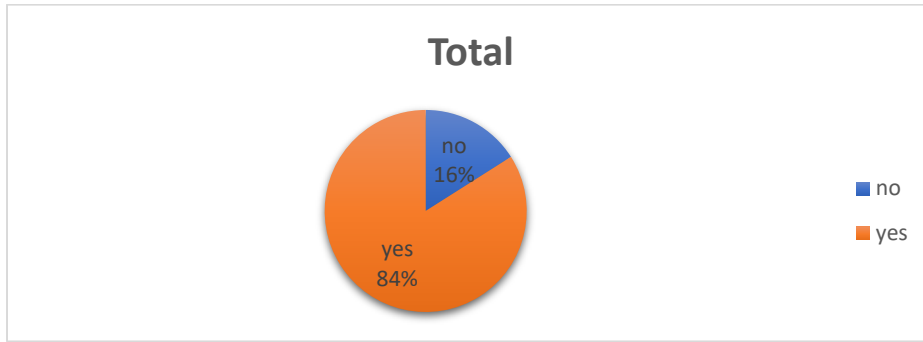
Among 150 respondents, 24 reported never engaging in pranayama or yoga, while 69 reported doing so regularly, and 57 reported practicing it sometimes. This distribution indicates a significant interest and engagement in pranayama/yoga practices, with a majority of respondents either practicing regularly or occasionally, suggesting a positive inclination towards incorporating these activities into their lifestyle for health and wellness benefits.

- Frequency of people performing pooja**



Among 150 respondents, A majority (93) perform Pooja regularly, while 25 do so "as and when feel free to do," 15 do so "as and when feel to do," and 17 do so only sometimes. The data suggests that a significant portion of respondents adhere to a regular Pooja routine, while a smaller proportion perform it less frequently or sporadically.

- **Having owns Friends circle within this old age home**



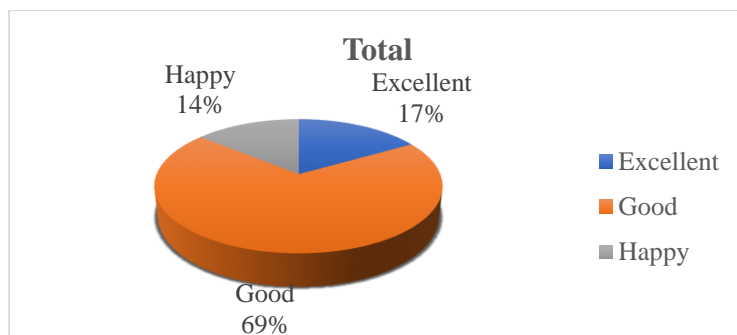
Out of 150 individuals surveyed in an old age home, 126 respondents reported having their own friends circle within the facility, while 24 stated they did not. This suggests that a significant majority of residents have formed social connections within the home, potentially contributing to their overall well-being and quality of life. However, the relatively small number who indicated not having their own friend circle may point to opportunities for enhancing social integration and support within the community.

- **Are you taken out on different socio-cultural occasions**

Row Labels	Count of Are you taken out on different socio-cultural occasions
frequently	22
Never	30
Rarely	40
Yes	58
Grand Total	150

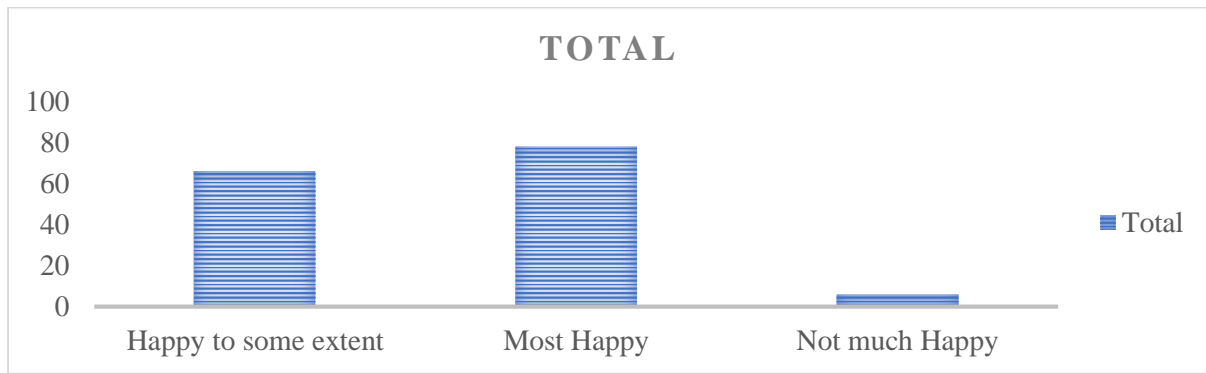
It indicates that 58 out of 150 respondents answered "yes" to this question, suggesting a significant portion have experienced such outings. However, it is noteworthy that a considerable number, 70 in total (combining "never" and "rarely"), indicate infrequent or no participation in these activities, potentially implying room for increased engagement or interest in such leisure activities.

- **Rating of social environment over here**



Many respondents, 104 out of 150, described the social environment as "Good," indicating a generally positive perception. Additionally, 25 respondents rated the social environment as "Excellent," while a smaller proportion, 21, described it as "Happy," suggesting a generally positive but slightly less prevalent sentiment compared to the "Good" category.

- **Are you happy at the old age home**



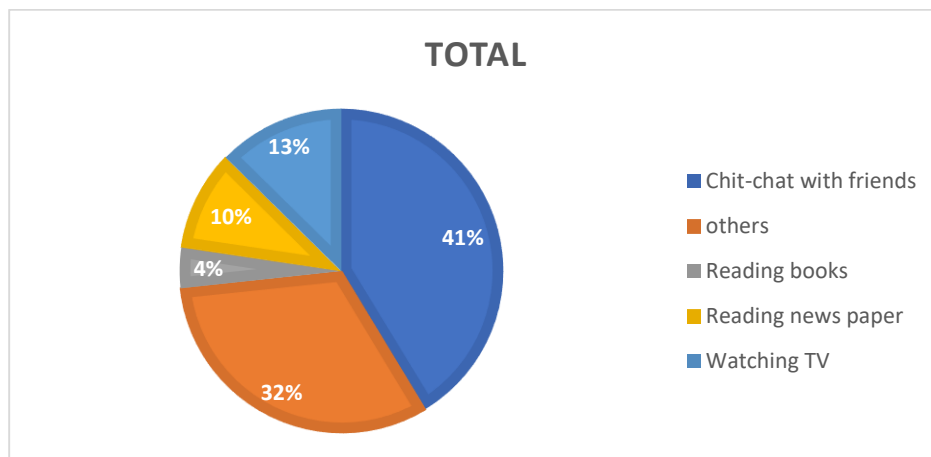
The data table presents responses from residents of an old age home regarding their happiness levels. Out of the 150 respondents, 66 indicated being happy to some extent, 78 reported being most happy, and only 6 expressed not being happy much. This suggests that a majority of residents are content or very content with their living situation in the old age home, indicating a generally positive atmosphere within the facility

- **Average sleep hours of residents at old age home**

Row Labels	Count of How many hours do you get sleep at night
6	19
7	66
8	54
9	4
Less than 6	7
Grand Total	150

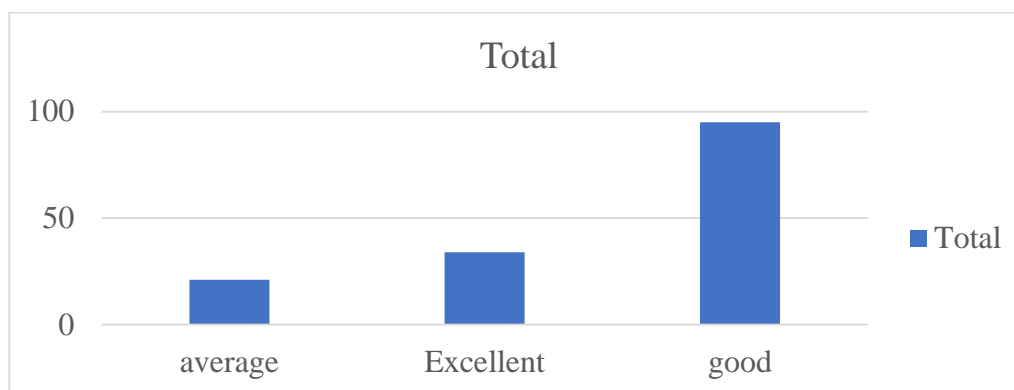
A majority of respondents, constituting 66 individuals, reported sleeping for 7 hours nightly, followed by 54 individuals who reported 8 hours of sleep. However, it's concerning that 7 respondents reported sleeping less than 6 hours, suggesting a portion of the population may be experiencing insufficient sleep, which could have implications for their health and well-being.

- **How residents spend their most of time**



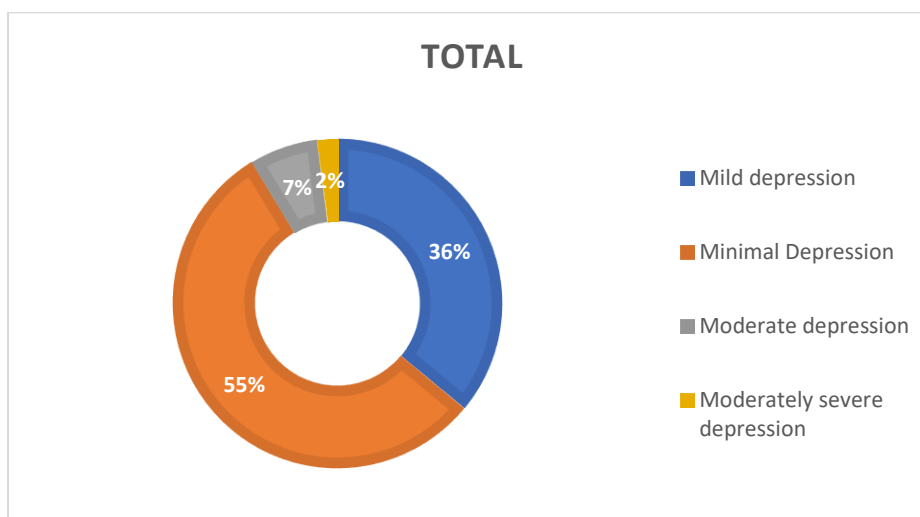
The data table provides insight into how individuals spend their time in a particular setting, with chit-chatting with friends being the most common activity, accounting for 62 out of 150 responses. Interestingly, activities such as reading books, reading newspapers, and watching TV seem to be less favoured, with only 6, 15, and 19 responses respectively. This suggests that social interaction and engagement with others are prioritized over solitary activities in this environment.

- **Residents rating about their mental health**



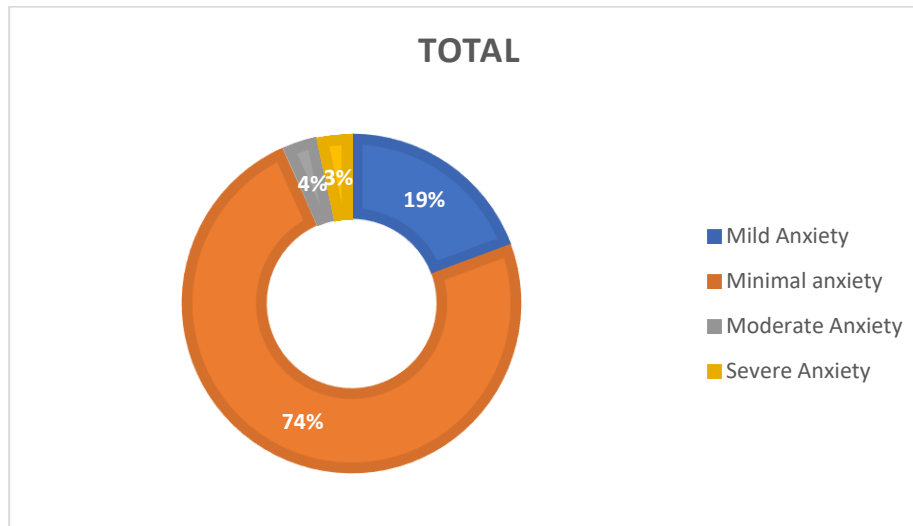
Among the respondents, A majority rated their mental health as good, comprising 63.3% of the total count. Meanwhile, 22.7% rated themselves as average, and the smallest proportion, 14%, rated themselves as excellent. This distribution suggests that a significant portion of the sample perceives their mental health positively, while a notable portion falls into the average category, indicating potential room for improvement in mental health support and awareness.

- **Interpretation of Depression Severity**



A majority of the sample, 83 individuals, reported experiencing minimal depression, while mild depression was the next most prevalent category with 54 individuals. Moderate depression was reported by 10 individuals, and only a small portion reported moderately severe depression, totalling 3 individuals. Overall, the data suggests that a majority of individuals in the sample experience mild to minimal levels of depression, with only a small minority reporting moderate to moderately severe symptoms.

- **Interpretation of Anxiety Severity**



The data table presents the distribution of anxiety severity levels among 150 individuals, with minimal anxiety being the most prevalent (74%), followed by mild anxiety (19.3%), moderate anxiety (3.3%), and severe anxiety (3.3%). This distribution indicates that Most individuals surveyed experience minimal to mild levels of anxiety, while a smaller proportion experience moderate to severe levels. This suggests a spectrum of anxiety severity within the sample population, highlighting the importance of tailored interventions targeting different levels of anxiety severity.

Findings and Suggestions:

The analysis highlights a concerning prevalence of illiteracy and a relative scarcity of individuals with post-graduate education within the sample, suggesting potential disparities in access to education and opportunities for advancement among the surveyed population. It also highlights a significant majority of individuals in the sample identify as Hindu, while Christian and Other religions form smaller but notable proportions. It shows significant portion of individuals admitted to old age homes have low to no income, indicating potential socioeconomic challenges. The information gathered indicates a diverse range of prior employment among residents admitted to the old age home. A majority of respondents appear to be either fully or partially dependent on others economically.

The analysis shows a generally satisfactory standard of food quality and overall satisfaction with the quantity aspect of the food. A majority of respondents indicated satisfaction with the quality of accommodation and sanitary conditions provided. The living spaces are accommodating to elderly individuals, indicating a positive trend in accessibility and design for aging populations. The analysis highlights high level of friendliness among caretakers and staff, with many respondents describing them as very friendly.

There appears to be a satisfactory provision of general medical care and medication, there is a clear need for enhanced access to psychiatric services and mental health support within the facility. A significant portion of the sample perceives their mental health positively.

A significant majority of residents have formed social connections within the home, potentially contributing to their overall well-being and quality of life. A majority of residents are content or very content with their living situation in the old age home, indicating a generally positive atmosphere within the facility.

Many individuals in the sample experience mild to minimal levels of depression, with only a small minority reporting moderate to moderately severe symptoms. It also indicates that most individuals surveyed experience minimal to mild levels of anxiety, while a smaller proportion experience moderate to severe levels.

Conclusion:

In conclusion, there are positive aspects to be noted, including satisfactory standards of food quality, accommodation, and overall satisfaction among residents. The presence of social connections and generally positive perceptions of mental health and well-being indicate a supportive environment within the facility. However, there is a clear need for enhanced access to psychiatric services and mental health support to address the varying levels of depression and anxiety reported among residents.

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