



RESEARCH ARTICLE

A STUDY TO IDENTIFY THE CONTRIBUTING FACTORS FOR LIVING IN SELECTED GERIATRIC HOME BY ELDERLY AT TIRUPATI

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ABSTRACT

A study to identify the contributing factors for living in selected geriatric homes by elderly at Tirupati.

OBJECTIVES: To identify the contributing factors for living in Geriatric home by elderly. To find the association between contributing factors for living in Geriatric home by elderly with their selected socio demographic variables.

METHODOLOGY: By using Non probability-Convenient Sampling Technique, Non experimental-Descriptive Research Design was adopted, 100 school teachers were taken for the study and data was collected by using a self structured questionnaire and analysed by using descriptive and inferential statistics.

RESULT: Pertaining to the level of contributing factors of elderly regarding selected geriatric homes. Out of 100 elderly majority 64 (64%) were female followed by 36 (36%) were males. Out of 100 samples, 23 (23%) were strongly disagreed, 37 (37%) were disagreed, 18 (18%) were neutral, 19 (19%) were agreed and only 3 (3%) were strongly agreed.

CONCLUSION: In this study, contributing factors for living in geriatric homes by elderly, 50 (50%) were disagreed, 23 (23%) were strongly disagreed, 17 (17%) were agreed, 7 (7%) were strongly disagreed and 3 (3%) were neutral. The obtained mean value for contributing factors was 2.46 and standard deviation was 0.79.

INTRODUCTION

Population ageing is one of the most discussed global phenomena in the present century. Countries with a large population like India have a large number of people now aged 60 years or more. The population over the age of 60 years has tripled in last 50 years in India and will relentlessly increase in the near future (Shamsi Akbar, Tiwari et al, 2014).¹ One of the important components of social and individual life of people is their age factor. Children of age zero to fourteen basically depend on their parents for living, studying and developing in every aspects of life. Whereas, adults of age fifteen to fifty nine are independent and they are economically too. Likewise, senior citizens of age sixty and above are both independent and dependent. However, senior citizens are supposed to be dependent in general do not involve in economic activities.

So they need some sort of care by the people. In this regard the additional support and the care may be taken as burden by family members and thus senior citizen may face various problems in their rest of life(SushmaLamichine, 2017).²⁰

NEED FOR THE STUDY: The last century has observed a speedy increase in the population of the elderly people within the developed and the industrialized nations. This phenomenon is not restricted just to the western world, but many countries such as India are in the present world feeling the influence of this operation. This situation could be featured to an amalgamation of things such as increase in age, long life and decreased death rates due to progress in the field of medicine, science, technology, health care, enhancement of life expectancy at birth, and development in the average span of life, India ranks 4th in terms of absolute size of elderly population.

The country is not effectively prepared to look after their special health needs and the transformation within the traditional value system. A sense is now develop among the younger production towards them is not as longing. India like many other developing countries in the world is witness the fast ageing of its population. Urbanization, modernization and globalization have led to transformation in the economic structure, the weakening down of societal norms, declining of social environment, the younger generation is insightful for new individuals including economic liberty and redefined social roles within, as well as outside the family. The transforming economic structure has declined the dependence of rural families on land which has developed the authority and control to create links between generations (Dubey, Basin, Gupta, 2011).⁹

METHODOLOGY

This chapter deals with the description of research method adopted by investigator. Methodology is the most important part of any research study, which enables the research to form a blue print for the study undertaken. Research methodology refers to the controlled investigations related to the ways of obtaining; organizing and analyzing data. Research methodology is the way to systematically solve the research problem. Methodology occupies a key position as far as research documentation is concerned. It may be understood as a science of studying how research is done.

It involves systematic procedure by which the researchers start from the initial identification of the problem to its final conclusion. The research methodology presents the research approach and the research design. The design of the study describes about the setting of the study, population, sample, sample size and sampling technique, criteria for sample selection, development and description of tool, content validity of the tool, reliability of the tool, pilot study, method of data collection, and methods of data analysis based on the objectives. This chapter describes the methodology related to "A study to identify the contributing factors for living in selected geriatric home by elderly at Tirupati."

RESEARCH APPROACH: Non experimental Approach.

RESEARCH DESIGN: Descriptive Research Design

SETTING OF THE STUDY: The present study conducted at **Mother Theresa Trust and old age home, Tirupathi, Chittoor District.**

STUDY POPULATION: The population for this study includes elderly people residing in Tirupati.

SAMPLE & SAMPLE SIZE: Sample is a set of population selected by the investigator to participate in a research project.

Sample size refers to the number of participants or observations included in a study. The sample comprises of **100 elderly.**

SAMPLING TECHNIQUE: In this study **Non probability-Convenient Sampling Technique** will be adopted to select the sample based on inclusive and exclusive criteria.

CRITERIA FOR SAMPLE SELECTION

It involves selecting cases that meet some predetermined criterion. It is based on inclusive criteria and exclusive criteria. Inclusive criteria are characteristics that the prospective subjects must have if they are to be included in the study. Exclusive criteria are those that disqualify prospective subjects from inclusion in the study.

- **Inclusion criteria**

Elderly people who are

- Willing to participate in this study.
- Aged between 60 – 84 years.
- Residing at Mother Theresa Trust and old age home.

- **Exclusion criteria**

Elderly people who are

- Not present at the time of data collection.
- Aged less than 60 years and more than 84 years.
- Residing in other than Mother Theresa Trust and old age home.

VARIABLES

Variables are qualitative properties or characteristics of the person, things or situation that change or vary. The variables included in this study are independent variables and dependent variables.

Independent Variables: It is a stimulus or activity that is manipulated or varied by the researcher to create the effect on the dependent variable. In this study independent variables include demographic variables such as age, gender, educational status, occupational status, marital status family income per month type of diet, religion, duration of stay in old age home and able to do their own activities.

Dependent Variable: Dependent variable is the outcome or response due to the effect of the independent variable; which researcher wants to predict or explain. In this study the dependent variable includes contributing factors for living in selected geriatric homes by elderly.

DEVELOPMENT AND DESCRIPTION OF THE TOOL

The tool acts as an instrument to collect data from the respondent of the study (Polit and Beck, 2004) and at the same time it adds to the body of general knowledge in the discipline, that enables to collect the data or to answer the researcher question or to test hypothesis and evaluate outcome of particular collection. The researcher developed the tool based on the review of relevant literature, text books, journals, internet references. An interview schedule was used to collect the necessary data from the samples. The data was collected by using Likert scale. The tool consists of II sections.

Section-I: Socio-demographic data

It consists of various demographic variables such as age, gender, educational status, occupational status, marital status, family income per month, type of diet, religion, duration of stay in old age home and able to do their own activities.

Section-II: Contributing factors for living in selected geriatric homes by elderly

Likert scale consists of items to assess the contributing factors for living in selected geriatric homes by elderly. A total of 21 items were included in this check list. It consists of 5 point scale with Strongly disagree (1), disagree(2), Neutral (3), Agree (4) and Strongly agree (5). The factors are divided into clusters as follows-

Table 1. Distribution of items related to Contributing factors for living:

S. No.	CONTRIBUTING FACTORS	QUESTION NUMBERS
1.	Behavioural factors	1, 10, 11, 15, 16
2.	Social factors	5, 6, 7, 8, 17, 19
3.	Stress factors	3, 4, 12, 14, 20
4.	Health factors	9, 13, 21
5.	Income factors	2, 18

VALIDITY OF THE TOOL: Validity refers to the degree to which an instrument measures what it is intended to measure. When an instrument is valid, it truly reflects the concept, it is supposed to measure. The validity of the tool was established in consultation with 7 Nursing experts in the field of Community Health Nursing department and two experts in Medical college. As per the suggestions of the experts, the investigator had made necessary modifications in the tool with permission of the guide. The tool was developed in Telugu & English language and its appropriateness was obtained from Telugu & English literatures. Thus, the tool was put to the test in pilot study and main study.

RELIABILITY OF THE TOOL: The reliability of the measuring instrument is a major criterion for assessing the quality and adequacy. Reliability of the tool defined as the extent to which the instrument yields the same results in repeated measure. It concerns with stability, internal consistency and homogeneity. The reliability was conducted in mother foundation trust; the tool was tested by using Cronbach's alpha reliability formula to assess the internal consistency. The obtained reliability score was $r = 0.94$ which indicates the tool was reliable.

PILOT STUDY: The pilot study is a small version of trial runs done in preparation for major study. Prior formal permission was obtained from the authorities of Telugu Thalli old age home before conducting the pilot study, done for one week from 22-03-2021 to 28-03-2021 to find the feasibility of the study. The investigator explained the purpose of the study to the subjects prior to the study. The researcher introduced about the study to the elderly and established rapport with them. The tool was administered to 10% samples that are not included in the main study. Demographic variables and contributing factors for living in geriatric homes by elderly was assessed by using Likert scale through interview schedule. Pilot study revealed that it was feasible, reliable and practicable to conduct the main study.

METHOD OF DATA COLLECTION: In order to collect the data formal written permission was obtained from the authority person of Mother Theresa Trust and old age home before conducting the study. The data collection was done for a 30 minutes period of two weeks (05-04-2021 to 02-05-2021).

The investigator introduced herself to the respondents to ascertain their cooperation for the study. Later, the investigator collected data from the elderly after obtaining their consent. Data was collected from 100 elderly people who were residing at Mother Theresa Trust and old age home aged 60 – 84 years of age. Demographic data collected and interview schedule was adopted to assess the contributing factors for living in selected geriatric homes by elderly. Each subject interviewed and responses were noted in Likert scale. This process continued till 100 sample size is achieved. The investigator thanked the elderly people and authorities for their co-operation & supports prior to the study and after the study.

Table 2. The Schedule adopted for data collection procedure

Date	Time	Number of samples per week	Duration of data collection
05/04/2021 – 10/04/2021	10am – 2pm	25 samples/ week	30 min/each sample
12/04/2021 – 19/04/2021	10am – 2pm	25 samples/ week	30 min/each sample
20/04/2021 – 26/04/2021	10am – 2pm	25 samples/ week	30 min/each sample
27/04/2021 – 02/05/2021	10am – 2pm	25 samples/ week	30 min/each sample

PLAN OF DATA ANALYSIS: The data was planned to analyze in view of the objectives of the study. It is a process of inspecting, cleaning, transforming and modeling data with the goal of discovering useful information. Informing conclusion and supporting decision making. In this study it was planned to analyze the data by using Descriptive and Inferential Statistics.

Descriptive Statistics: Descriptive Statistics deals with the enumeration, organization and graphical representation of data. Descriptive Statistics was used to analyze the Frequency and Percentage distribution of demographic data. Mean, median and standard deviation were used to calculate knowledge score.

Inferential Statistics: Inferential Statistics deals with populations and uses sample data to make an inference about the population or to test the hypothesis. Inferential Statistics are used to find the association. Chi-square was used to find the association between contributing factors for living in Geriatric home by Elderly with their selected socio demographic variables.

DISCUSSION

Objectives

- To identify the contributing factors for living in geriatric home by elderly.
- To find the association between contributing factors for living in geriatric homes by elderly with their selected socio demographic variables.

A total number of hundred elderly were selected using convenient sampling technique. Contributing factors for living in geriatric homes by elderly was assessed by using 5 point Likert scale. The first objective of this study was to identify the contributing factors for living in geriatric home by elderly. Regarding contributing factors, out of 100 elderly 50 (50%) were disagreed 23 (23%) were strongly agreed 17 (17%) were agreed, 7 (7%) were strongly disagreed and 3 (3%) were

neutral. The obtained mean value for contributing factors was 2.46 and standard deviation was 0.79. Regarding Q.no.10 i.e., (children do not want to keep elderly with them due to physiologically / physical illness) majority 69(69%) were agreed and only 24(24%) were disagree, about Q12 (To live independently or unable to tolerate interference of Family members), 55(55%) were agreed and 25 (25%) were disagreed, related to Q.15,(Negligence), most of them 64 (64%) were and only 29 (29%) were disagreed. Regarding Q.16 (Modern life styles), Majority 61(61%) were agreed, only 32 (32%) were disagreed, about Q.no21 (health issues), 3/4th sample i.e., 71 (71%) were agreed and least 26 (26%). This objective is supported by previous cross sectional studies conducted by SHAMSI AKBAR et al. in 2014 at Lucknow, India. Study was carried for the purpose of reasons for living of elderly to in old age homes. 74 elderly residing in 14 different old age homes were chosen by this study. Study findings shown that misbehavior of son and daughter in law (29.8 %) was found to be most common reasons for residing in old age home.

The second objective of this study was to find the association between contributing factors for living in Geriatric homes by elderly with their selected socio demographic variables. There was association between the selected socio demographic variables with behavioural factors for living in geriatric homes by elderly. Socio demographic variables such as educational status and occupational status had significant association at $p < 0.01$ level. There was association between selected socio demographic variables with social factors for living in geriatric homes by elderly. Socio demographic variables such as education status, occupational status and family income had significant association at $p < 0.01$ level. There was significant association between selected socio demographic variables with stress factors for living in geriatric homes by elderly. Socio demographical variables such as educational status, occupational status and family income had significant at $p < 0.01$ level and marital status had significant at $p < 0.05$ level. There was significant association between selected socio demographic variables with health factors for living in geriatric homes by elderly. Socio demographical variables such as educational status, occupational status and religion has significant $p < 0.01$ level. This was significant association between the selected socio demographic variables with income factors for living in geriatric homes by elderly. Socio demographic variables such as Gender, educational status, type of diet and Religion has significant at $p < 0.01$ level. The above objective is supported by a study conducted on factors for living in Geriatric home by Aruna Dubey et al. at Jammu in (2011). 30 samples of elderly women were selected by using purposive sampling technique. The data was collected by interviewing schedule. The results of the study revealed that most of the elderly felt the attitude of the younger generation is unsatisfactory. There was significant association between reasons for living in old age homes with selected socio demographical variables like Age, Education, Type of Family and number of family members.

IMPLICATIONS

The implications drawn from the present study is of vital concern to health teams includes nursing practice, nursing education, nursing administration, nursing research and so on.

Nursing Practice:

- In the community, small teaching sessions can be conducted regarding prevention of psychological and physical health problems.
- Counseling sessions are to be scheduled in the old age home on fixed days for elderly or senior citizens regarding prevention of psychological issues. Realize their responsibility in planning implementing health education and counseling sessions.
- The nurse acts as an organizer for conducting mass health awareness programmes and counseling sessions for elderly regarding prevention of physical and psychological problems in order to improve their knowledge and healthy practices.

Nursing Education

- The community health curriculum needs to be strengthened to enable nursing students in order to identify the contributing factors for living in geriatric homes by elderly.
- The community health nurse educators should plan and conduct in service and continuing education programme on contributing factors for living in geriatric homes by elderly.
- Community health nurses can develop educational material for teaching the geriatrics regarding prevention of psychological problems and to adopt healthy practices in their daily lives.

Nursing Administration

- Conduct regular counseling teaching sessions on prevention of psychological problems like depression and anxiety in various geriatric homes in the community.
- Administration policies should allow for conducting training, workshop for nurses regarding identification of contributing factors for living in geriatric homes and prevention of psychological issues to apply knowledge, lifestyle changes into practice.
- Administration policies should allow for conducting routine medical checkups of elderly by health officers in development of strategic plans towards practice healthy habits regarding prevention of psychosocial problems and identify the contributing factors for living in geriatric homes.

Nursing Research:

- The nurses and nursing students should be encouraged to do research in the field of interest like identify the reasons or contributing factors for living in geriatric homes by elderly and their psychosocial problems etc.
- Utilization of research findings in clinical practice has to be encouraged.

LIMITATIONS

- Study is limited to elderly.
- Study is confined to Mother Theresa Trust and old age home.
- Study is limited to elderly with the age group of 60 – 84 years.

RECOMMENDATIONS

- A similar study can be conducted to compare elderly living in payments and with at payment old age homes.
- A comparative study can be conducted to identify contributing factors for living in geriatric homes by male and female elderly.
- A study can be conducted to assess the effectiveness of structured teaching programme on knowledge among elderly regarding prevention of psychosocial problems.
- Large scale survey can be conducted to identify the contributing factors for living in geriatric homes by elderly.
- Field trials can be conducted to improve the healthy practices among elderly.
- A similar study can be conducted on large sample for better generalization.
- A study can be conducted to assess the effectiveness of teaching programme on prevention of falls and injuries among elderly.

CONCLUSION

In this study, contributing factors for living in geriatric homes by elderly, 50 (50%) were disagreed, 23 (23%) were strongly disagreed, 17 (17%) were agreed, 7 (7%) were strongly disagreed and 3 (3%) were neutral. The obtained mean value for contributing factors was 2.46 and standard deviation was 0.79.

- Children do not want to keep elderly with them due to psychological/physical illness (Q.No.10), 69 (69%) were agree and 24 (24%) were disagree.
- To live independently or unable to tolerate interference of family members (Q.No.12), 55 (55%) were agreed and 25 (25%) were disagreed.
- Negligence (Q.No.15), 64 (64%) were agreed and 29 (29%) were disagreed.

- Modern life styles (Q. 16), 61 (61%) were agreed, 32 (32%) were disagreed.
- Health issues (Q. 21), 71 (71%) were agreed and 26 (26%) were disagreed.

These findings suggested that extensive health education programmes were planned on psychological issues and coping strategies for elderly. So nurses need to encourage to plan health camps for elderly in prevention of psychological problems.

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