



RESEARCH ARTICLE

ELDERLY IN THE INSTITUTIONAL CARE – A CASE STUDY

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ABSTRACT

Old age is the closing period of life span. It is an inevitable phenomenon in all biological species. In this stage the living arrangement is very important in terms of providing support for the elderly and in general it guarantees their well being. In India where the family has an obligation to take care of the elderly is no more entrusted to serve them. The younger generation would like to be separated and expected to live away from the elderly and migrates towards cities and sometimes to abroad. Under this situation the elderly would be deserted or sometimes institutionalized. In this situation it is very essential to understand their problems that they have come across in their life. Hence the study was conducted at Nirashritara Parihara Kendra, Mysore. The present study tried to understand the problems of the elderly and the reasons for institutionalization of the elderly.

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INTRODUCTION

Old age is the closing period of life span. It is a “period of moving away” from previous and more desirable period – the prime of life or the years of usefulness. In “moving away” from the earlier periods of the life span, the individual looks back on his earlier life, often regretfully and tends to live in the present, ignoring as much as possible the future (Bhattacharya, 2008). The population of elderly is increasing every-day. It is no longer an exclusive characteristic of industrialized society. India is also heading towards the similar demographic pattern (low birth rate and low death rate) like any other developing countries. The age group of 60 plus in India is projected to increase from current level of seven percent to nearly nine percent by 2016 and 21 percent by 2050. By 2050 India will have a significant proportion of older population which may become a great task for the Government to take care of the huge number of elderly population. Hence the family’s needs help to be prepared to take care of their own elderly persons. In modern times, the changing values and growing independence of families directly affect the elderly population. There is increased trend among the children migrated to cities or abroad with their families and relatives tend neglect the elderly back at home. They feel isolated and unworthy of living since they do not contribute or are unable to contribute towards the family’s economy. “In such circumstances elderly persons are transferred to alternative care/institutional care. Nowadays, old age home are established to take care of the elderly.

The idea of institutionalization of elderly borrowed from the western culture. In the context of dynamism in the society, the problem of the aged has been given utmost importance. There is a gap between the need of the elderly and the availability of the services in the institution. Further research has to be taken to fulfill the needs and services more effectively” (Kumar & Nallabala, 2012).

Institutional adjustment

Adjustment to the new environment is not an easy task. Adjustment means accommodation of oneself to fit in with certain demands of the environment. It refers to how one is related to the environment in which he exists, a process of constant interaction between the individual and the environment, both being modifiable, whether it is physical, social or psychological (Babu and Reddy, 2012). Hurlock (1976) discussed several factors which influences adjustment in adulthood. The most important of them were the earlier experiences, satisfaction of needs, social attitudes, personal attitudes, preparation for old age, and method of adjustment to health, living conditions and economic conditions. The methods employed by the elderly to achieve adjustment may be rational or irrational. A number of studies have reported the age trends in adjustment, though evidence on worsening adjustment in adulthood years is not conclusive; nevertheless it is clear that the individual has to make fresh adjustment in the middle or older years and play new roles that are socio-culturally determined (Sunnanda, 1986). Willoughby (1939) noted a general decrease of adjustment after middle age and Cavan *et al.* (1949) also pointed out poorer adjustment in the older year.

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Nirashritara Parihaara Kendra, Mysore

The Central Relief Committee works under Social welfare Department extensively on the rehabilitation of Beggars. It provides not only shelter and hygienic food but also gives training on various skills and strives for better living of Beggars and Beggars free Karnataka. The Nirashritara Parihaara Kendra, Mysore was established as early in 1969. This centre is functioning under the Chairmanship of the Deputy Commissioner and District Social Welfare Officer, Mysore. The Superintendent looks after the centre. The Centre is located with 10 acres of land and own building at Jyothinagar, Mysore. Currently a total of 230 inmates are accommodated in the centre.

The Mission and Vision

An Act to prohibit persons from resorting to begging and to provide for the detention, training and employment of Beggars, for the custody, trial and punishment of beggar offenders and for the relief and rehabilitation of such persons in the State of Karnataka.

Rehabilitation Process of Beggars

The detained able bodied inmates are being given vocational training programme. They are as follows.

- Carpentry
- Tailoring
- Cair mat making
- Agriculture
- Chalk piece making
- Black smithy
- Book binding
- Dairy
- Horticulture
- Phenol making etc.
- Each inmate is being paid Rs. 5/- as wages during the training period.

Miscellaneous: Facilities provided to the inmates

The detained Beggars of Nirashrithara Parihara Kendra are provided with breakfast, two meals daily in addition to this they are provided with bedding, uniforms, soap, oil, tooth powder etc., Medical and Psychiatric care services is also rendered by the Government Hospital i.e, Krishna Raja District Hospital, Mysore.

MATERIALS AND METHODS

The study was conducted in the Nirashrithara Parihaara Kendra, Mysore. In the institution a total of 230 inmates have been accommodated. For the purpose of the study the researcher has interviewed ten inmates who were willing to share their experiences. Among them the researcher has presented three case studies.

Objectives

- 1.To know the family background of the institutionalized elderly

- 2.To study the reason for the institutionalization of the elderly
- 3.To suggest social work interventions to reintegrate elderly with the community.

Case Studies

Case study 1

Maraiah (name changed) aged 68years native of Guntur, Hyderabad is an inmate of the institution since last 5years. He was married at the age of 45years with puttagowri, ten years younger than him. The couple did not enjoy their life because they spent most of the time quarreling with each other. Misunderstandings, lack of communication, conflict were common in their marital life. Even his wife was not ready to lead life with maraiah as she was having affair before the marriage and the relationship continued even after the marriage. The couple could not have any children as there was no relationship at all between the couple. Maraiah had a petty business of his own, earning enough income to lead his life and his wife was also employed in a garment industry. Suffering for the past seven years with her husband, puttagowri one day deserted her husband and left home. This shocking incident made him to be upset and he became depressed. Societal blame, isolation, loss in business made him to get addicted to the consumption of alcohol. He began to consume alcohol throughout the day. He gave up his business and started begging to fulfill his habit of drinking. He left Hyderabad to forget the incident, started his journey towards Karnataka and landed at Mysore railway station. He was caught by the NPK volunteers, during the act of begging outside the Railway station and later he was taken to the institution. His only desire is to get moksha at his native place. Presently he has adjusted himself with the institution and has made friends. He feels sad for not having any of the family members to look after him. After getting into institution he has been helped to give up his habit of drinking and he has been involved in agarbathi making and has saved little money.

Case study 2

Timmanna (name changed) aged 62yrs resident of Kollegala Taluk, Chamarajanagar district. He was the head of the family, his wife was a home maker. He had three children – one male and two female children. He was an agriculturist and owned five acres of land and received profit from it. But he never had the habit of saving the earnings made from growing jowar instead he was utilizing it for the preparation of desi arrack (local spirit) in his own place. Timmanna consumed alcohol on a regular basis with his friends and never bothered about attending family matters. He was spending the profit lavishly going to neighboring city and squandering away with his friends. His behaviour had become headache to his family. Witnessing such an irresponsible behavior of his father, his son took over the family responsibilities, very importantly financial matters of the family. By this Timmanna's presence was neglected and he was not given much importance by his family. No financial support was given to him. The family completely ignored him for his alcoholic behavior. With this background Timmanna started slowly begging in front of the temple at Chamarajanagar. He made an attempt to visit the

neighboring city but he could not as he did not have enough money to commute. After earning enough money from begging he went to another town and started begging in front of the temple. Continuously for about three months he was able to get the helping hands, but not for longer time. The volunteers from NPK observed him for three to four days begging in front of the temple. Later he was taken to institutional care. Now he wishes to get back home as soon as his family contacts the institution. He is craving to meet his family members and has shown keen interest in reuniting with his family. In the institution he has taken interest in gardening and he does it with keen interest and he is given few beedis to smoke as a token of reward for working in the garden.

Case study 3

Rajappa (name changed) 63yr from Vijayanagar Bangalore was caught at the Sub-urban Bus Terminal, Mysore. Back at home Rajappa was leading happy life with wife and two children one son who had finished SSLC and his daughter studied till Middle school, further she did not show interest in studying, hence she was married off. Rajappa was working as a tailor in a private garment. The income he was earning was not enough to meet the needs of the family; hence his wife also joined the same garment factory. Unfortunately Rajappa met with an accident where he had an injury and his right hand bone was fractured partially. Doctor suggested him to be on the rest for about six months. But Rajappa never had shown interest in going for work even after six months, he became very lethargic, spent time in watching TV at home, by evening spending time with the peer group, coming home late. In spite of convincing him to go back to work he refused. This behavior was not tolerated by the family members and his son often quarreled with him and day by day the relationship was worsened with his wife and children. Immediately after the incident Rajappa left home without informing anyone and went to Mysore and was begging near bus stand, where he was caught by the volunteers of the NPK during the act of begging. Now since nine months he is spending his time in the institution by involving himself in gardening and agarbathi making and saving some amount of money. He also involves himself actively in group activities conducted in the institution. He has no wishes of returning back to his family as he feels the family has deserted him.

Social Work Intervention

Social workers working at NPK can be involved in the following activities.

- Social workers can organize programmes in receiving the benefits from the Government.
- Social workers can provide awareness on different issues which are currently faced by the Elderly in the institute.
- Social workers can educate and create awareness among the staff and other inmates within the institution.
- Social workers can create awareness on health and hygiene and on geriatric problems.
- Social workers can focus on improving the holistic health of the elderly in the institution.
- Social workers can act as a liaison between the institution and the outside community to facilitate interaction and awareness.
- Individual home visits can be made to create awareness among the family members and to reintegrate the elderly with the family.
- Social Group Work: Regular group work activities can be taken up for different groups depending on their ability to involve in group activities. Simple games can be organized for the elderly to help them to overcome their loneliness and isolation.
- Regular health - check up and health camps can be conducted to the elderly. Friendly group of people are coming on regular basis to form social circles performing pooja, bhajan's, yoga, conducting recreational activities.
- Social work trainees can motivate the elderly to involve in Vocational training programmes if they have ability to do work.
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- Social workers can focus on improving the holistic health of the elderly in the institution.

Conclusion

There is a need for taking care of elderly by the younger generation. It is one of the duties and responsibility of the younger one's to shower the required care and protection at the end stage of their life. Respecting their presence, considering them as part/ asset of the family, obeying the decisions taken up the elderly at home are to be respected / followed by the youngsters to preserve the family structure as an institution.

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