Research Article



Volume 4 Issue 3

Emotional Wellbeing among Elderly living in Institutionalized Home and Non-institutionalized Home

Mishra S1* and Mishra PC²

¹Department of Psychology, CCS University, Meerut, India ²Department of Psychology, University of Lucknow, India

*Corresponding author: Swati Mishra, Assistant Professor, Department of Psychology, Government Model Degree College, Arnia Bulandshahr CCS University Meerut, India, Email: premswatim10@gmail.com

Received Date: March 01, 2023; Published Date: April 27, 2023

Abstract

Old age is an inescapable progressive and developmental phenomenon bringing along a number of changes in the physical, psychological and social condition. The elderly become increasingly dependents on their younger. Emotional well being is the ability to produce positive emotions, mood, thoughts and feelings and adapt when confronted with adversity and stressful situations. One of its foundations is resilience, which allows you to navigate challenging life events. The sample size of 400 of which 333 from households and 67 from old age homes. The data was collected in Lucknow and adjacent District. Well-being scale was used to measure the emotional well-being of elderly. Result showed that there was a significant difference in emotional well-being of elderly living in Institutions and non-institutions settings.

Keywords: Health; Emotional; Wellbeing; Ageing; Lucknow District

Introduction

Aging is a biological and progressive phenomenon associated with gradual decay in the physiological functions of the body. With decline in the capabilities of the individual day by day, aging brings in a lot of challenges both physically and mentally. Physical illnesses and ailments get the timely intervention in most cases but the psychological problems are often neglected due to various factors. The common reasons include lack of awareness, misconceptions and social insecurity. Elderly people tend to report more depressive symptoms (eg changes in appetite or sleeping patterns and lack of energy) a syndrome that has been referred as dysthymia. Many of the symptoms of depression are affected by the aging process itself and in some cases may reflect underlying physical changes rather than psychological ones. Although generally considered to reflect diseases such as Alzheimer's disease rather than being a part of normal aging (i.e. They do not appear to be an inevitable part of aging no matter how long an individual lives), Cognitive changes related to dementia are most common in later life. Psychological changes may intersect with physical changes. For example a stroke can cause both psychological and physical impairments. Likewise social and psychological changes can interact resulting in a greater likelihood of depression for example following the loss of a spouse. Finally social, psychological and physical domains may all interact in the case of elder abuse. The emotional problems in the elderly can be apparent in a wide range of instant. Starting from simple and subtle changes in the mood or behavior it can extend to complex psychological disorders. Older are often prone to develop emotions like neglect, loneliness, emptiness, worthlessness and helplessness due to a physical

health problems, lack of support system, dependency on the family members financial constraints can affect their self-confidence and alter their self-esteem. Multiple other psycho-social factors can also play an important role in the development and progression of mental health disorders in elderly people.

In the new era of 21st century youngsters are engaged in money-oriented practices. They are very much materialistic having unresponsive attitude towards their families especially elderly people they even don't hesitate to send their parents to old age homes and day care centre due to which elderly get emotionally deprived as they are being neglected by their own children which have a negative impact on their quality of life. Due to modernization drastic change have been taken place in the society. The patterns of joint families are diminishing day by day into nuclear families leading to change in living arrangement. Modernization brings the culture of nuclear families and dual earning families which deprive the elderly to live along with families. The elderly is left either in old age homes or at least day care centre, so that there is nobody to take care of their regular need.

Emotional wellbeing is the state of mind in which the person feels calms, relaxed, open, present, reflective, creative and wise. It is a combination of feeling corking and function effectively. Emotional wellbeing for elderly is the ability to successfully handle life's stresses and adapt to change and difficult times. Emotional wellbeing is generally conceptualized as two general components.

- A global satisfaction with life. It is based on the individual's subjective cognitive appraisals about the life in general.
- Predominance of positive over the negative effects or the affective balance (happiness) [1-3].

Reported that there is no reduction in depression in older age; in fact for both men and women depression is at highest levels at this point in life. These problems are not recorded by the health or medical care system but contribute to poor emotional wellbeing, as we have defined it- including other common mental health problems and poor life satisfactionare likely to be much higher than the estimates of 20 to 25 percent of older people with depression.

Material and Methods

The sample was drawn from institutions of elderly located in Lucknow and adjacent District, where as for non-institutional elderly were taken from families residing in Lucknow and adjacent District [4]. The sample of 400 educated elderly was selected non-random and purposively out of which 333 respondents were from non-institutions and 67 respondents were from institutions. The research design adopted in the present study was Ex-Post facto research design Data was collected through in depth interviews with the help of Standardized scales and open ended questionnaire from the selected respondents. Well-being scale was used to measure the emotional well-being of the elderly. It is developed by Mishra; Mishra; and Vashishtha (2013). It consist of 30 items in which 7 items are related to emotional wellbeing.

Objectives of the Study

To find out the level of emotional wellbeing in the elderly living in institutionalized home and in families.

Hypothesis

There will be a high emotional well- being in the elderly living in homes with families rather than old age home.

Results

Level of Wellbeing	Household Elderly N=333		Institutionalized Elderly N=67	
	Males N=198	Females N=135	Males N=31	Females N=36
High	20.27%	60.74%	48.39%	2.78%
Average	78.28%	28.89%	51.61%	25%
Low	1.45%	10.37%	0%	72.22%

Table 1: Showing the levels of emotional wellbeing of theelderly residing in institutional and families.



Figure 1: Showing the levels of emotional wellbeing of the elderly residing in institutional and families.

Table indicates that 78.28% males reported average Emotional wellbeing, 20.27% males have high emotional well-being living in non-institutionalized home and 48.39% males reported high level of Emotional wellbeing living in institutionalized home. 72.22% females living in old age

homes reported low emotional wellbeing, 25% females reported average emotional well-being and 2.78% females living in old age homes reported high emotional wellbeing.

Discussion

The results of the present article confirmed that elderly subjects living in household have better emotional wellbeing than elderly living in institutionalized home [5]. Therefore, the hypothesis is accepted that old age home living elderly show low emotional wellbeing and those living in the homes with the families shows high level of emotional wellbeing. The elderly lives with their families they feel happy, enjoy their life and they express their feeling with other peoples in the families and they have better position in the home rather than the old age home.

Conclusion

There was a significant difference in the emotional wellbeing of elderly persons residing in institutional and noninstitutional home. It shows that the elderly persons residing in the non-institutions has higher emotional well-being as the elderly are provided with better social interactions and relationships, care from the family, medical facilities and financially independent when compared to the elderly living in institutions [6].

References

- 1. Andrews FM, Withey SB (1976) Social Indicators of Well-Being. Plenum, New York.
- 2. Campbell A, Converse PE, Rodgers W (1976) The Quality of American Life. Russell Sage, New York, pp: 600.
- Diener E (1984) Guidelines for National Indicators of Subjective Well-Being and Ill-Being. Social Indicators Research 7(4): 394-404.
- 4. Cattan M (2009) Mental health and well-being in later life. In: Cattan M (Eds.), Open University Press, Glasgow, pp: 1-8.
- 5. Crowther MR, Parker MW, Achenbaum WA, Larimore WL, Koenig HG (2002) Rowe and Kahn's model of successful aging revisited: positive spirituality-the forgotten factor. Gerontologist 42: 613-620.
- Sujini SP, Bilquis (2018) A Study on Psychological Well Being of Elderly Living in Institutional and Non – Institutional Settings. Int J Pure App Biosci 6(6): 492-496.