CHAPTER 1
INTRODUCTION

Erik Homburger Erikson, psychologist said, "It is human to have a lengthy childhood; it is civilized to have an even longer childhood. Long childhood makes a technical and mental virtuoso out of man, but it also leaves a life-long residue of emotional immaturity in him" (Bhatia B.D, 2008)

In psychology ego integrity can indicate mainly to the development of ego or mainly to one of the levels of development proposed by E. Erikson. He explains that human beings pass through eight stages of development, out of which ego integrity is the last stage. At each point, the person would face a problem and either resolves it to move through to the next, or fail and remain at a stage of arrested development. Eriksson’s investigations were mainly vital, as he was one of the first psychologists to specifically look at the developmental role of aging. (Barnes, 1968)

As the persons progress and matures, socially, spiritually and physically from his/her birth through childhood, adolescence and after the age of 30yrs changes occur that displays normal decline in the activities of the body, then it is known oldage. This process of oldage is called senescence.

Elder person should actively resolve their age related issues in their holistic aspects of life, and the person must keep on modifying the activities that he had done in his adulthood. Geriatric older persons predicts that their attitudes and overall personalities will remain as it is over with their life span, even they know that physical changes are occurring. (Morgan, 2007)

The human beings experience of life expects to encounter and concern with the many factual realities indulged within one’s world. The phenomenon of aging and the unavoidable fact of death are two such current facts that many human have historically struggled to accept within one’s life. Human Beings are having caliber to be aware of their own demise, this burden of awareness lead
to fear and anxiety not only about what may occur after demise, but also about the importance value of one’s lived life both in the present time and in the past. (Clement I, 2010)

A hopeful approach to life, which shows pliability in the face of difficulty, is common in geriatric life. Both open-ended interviews and personality measuring scales disclose that elderly people achieve willingness, becoming highly amenable, and kind hearted well into late life. Willingness seems to vary individual who have dealt with life regardless of its faults and failures. They have assembled a lifetime of self-maturity, prime to more concrete and composite knowledge of themselves than at earlier ages. Persons, who reach at a sense of satisfaction, feel complete, absolute and pleased with their desires.

Increasingly, geriatric persons are using their newly found autonomy from work and nurturing roles to follow their improving interests and goals. While doing such, they are returning back to their societies and pretending as role models for younger generations.(Gupta M.C,2005)

In the Erikson’s (1950) theory, ego integrity v/s despair which is the final stage that indicates coming to terms with one’s individual existence. They have attained to unavoidable triumphs and disappointments and believe that the paths they pursued, abandoned, and never chosen were necessary for a worthwhile life span.

The opposite result of this level that is despair, occurs when older adults feel that they have made many wrong proposition, yet the time is so short to find any path or way to have a fruitful life.(Okamoto H,2008)

In advanced stage of adult hood, Erikson argued that people must move through a stage, which is distinguished by a psychological conflict between ego integrity and despair. In this level, elder adults display their life and then assess their self-achievements. A positive discernment of their life experience
leads to ego integrity while a negative self-evaluation results in despair and dissatisfaction. Geriatrics with ego integrity achieves insight, acquire the universal levels of humanity, and obtain their mortality. Those who get themselves into despair suffer with what Kierkegaard mentioned to i.e. dissatisfaction with undo demise. Dissatisfied individuals may lose their desire to live life, become aloof, depressive and finally expect social isolation.(Bevaztas F.Y, 2011)

To review the life is not important for adjusting well to old age. Indeed, a display that is self-focused, occupied in to decrease boredom and strengthen bitter events, is related to adjustment issues. Dissatisfied olders tend to contemplate, retaining their negative feelings by dwelling on painful past experiences (Lavoie, & Gfeller, 2001).

An elder individual with abundant physical disabilities and chronic diseases has reduced physical competence, thereby reducing the level of social and physical requests with he or she can manage. Such individual needs supports in the form of environmental adjustment or occasional help from family and caregivers to increase their independence.

Care of older person presents one of the biggest incitement. The upsurge population of older adults suggest that the problem will go on even into the 21st century. Older individuals experience many failures, leading to deprivation overload. They are prone to depression and to feeling of low self-confidence. The oldage population depicts a inequitable big number of people who commit suicide. Delirum and dementing problems are most common psychopathology in old age people.(Gomez .L,2009)

The person who is behind in exploring this idea and concept is Erik Erikson. He was one of the few personality theorists that examined aging as a level of development. He explained personality in a hierarchical order through eight stages. Each level is combined with a psychosocial crisis that is resolved or remain unresolved. If not resolved then it results in hindrance and decline for
normal development of the personality and restriction of other personality developments.(Narahari Gita, 2008).

Understanding and interaction of positive and negative emotions into a properly arranged self-illustration, which increases from teenage through middle age and then declines as fundamental information-processing skills reducing in elderly stage. But older, display a balancing emotional power. They improve in having hope, the ability to intensify positive feelings and decline negative feelings, which give rise to their remarkable adjustment.

The eighth level of Erik's psychosocial model is Ego Integrity v/s Despair and it occurs in late adulthood period, usually age after 60 years. Dissatisfaction is indicated by a fear of one’s own demise, also the loss of loved companion and friends. He thinks that this last level starts when the person begins to feel a perception of mortality. This may be realization to job completion, the demise of a life partner or close friend, or simply resulting in improving social roles. In this level proud over one’s accomplishments prevents low mood and anxiety about one’s death. The main and common question that people ask themselves during this stage is "what kind of life have I led ?" and the question starts from the sense of mortality. (Morgan, 2007)

Individuals who turn back on their lives of past with pleasure and feel that they have lived a well rounded and fullfledge life which achieve self satisfaction and they will not be afraid of death. Individuals extends self satisfaction and accept their lives if they success, and develop a sense of intuition a "unseparateable concern with life itself in the face of demise itself". If an individual look behind on their life achievements and experiences and remember wrong thoughts and desire with life they will develop dissatisfaction and feel a fearfulness and anxiousness about demise. On the other hand there is a saying that healthy children won't fear life if their olders have enough integrity not to fear demise. (Ayranci.U,2005)
Respect is important for every individual in the society and it should be given for the elder patient’s feelings and emotions. A restriction of physical and mental caliber does not indicate that the person should be humiliated or treated as being capable of normal human being feeling, emotions and responses.

For each individual old age experience is a weird experience. It is predominantly nice for some and a worst experience for others. this is like a continuum that there are two extremas of best and worse quality. Erikson has described the two opposite ends, satisfaction and desire, likewise the 'integration' and 'despair'. (Mcghie Andrew, 1969)

Describing the concept of Erikson, the two possibilities of emotional positioning of the older individuals facing the old age: if the older subject strive to acheive a secure sense of the ego and a assumption of his/her legacy, be it through their family or work, he/she attain an ego integrity, whereas the failure to provide for a solution for this conflict upshot simultaneously in disappointment with his/her own self and, therefore, dissatisfaction. (Flávio M F Xavier, 2003)

A flexible, happy approach to life, which fosters resilience in the face of adversity, is common in increasing age. Both open-ended interaction and personality tests reveal that olders attain in agreeableness, becoming increasingly liberal, acquiescent, and good-natured well into late life.

The development of a increase sense of spirituality is the dominant perspective among the elderly. Religion is not the same as spiritual thoughts: An motivational sense of life’s definition can be found in creativity and social interactions. But for abundant people, religion leads to beliefs, signs and rituals that guide this desire for meaning.

The physical, spiritual and mental health of elder persons has positive effects. A modified physical space and dependent elders overcome physical mobility
limitations, thereby enabling greater social participation and a more active lifestyle. And in social gatherings where old age leads to decreased status, age-separation living can be satisfying, opening up important roles and leadership chances. Also, the elderly people think that environment is socially supportive, the more they interact with one another in adjusting with stressors of increasing age and in providing help to other residents (Lawrence & Schigelone, 2002).

Geriatrics prefer similar and familiar, already developed relationships to new ones, friendship development continues throughout the pace of life. But with increasing age, old age persons report the incidences that friends they feel closer to be very less in number and survive in the same community as well as society. Ladies are more prone to have close friends; males depend on their wives and, to a decreased extent, their sisters for communication in an open and warm way. (Helvik A.S, 2011).

People who reach up to integrity or a level of satisfaction, display on their life styles and lives as being meaningful, important and rich and are not having fear of death. In opposite to it, persons in despair or lack of satisfaction are more likely prone to be dissatisfied and have difficulty in making sense with there past. They get entangled with many unresolved problems, which contribute to their life long suffering like depression, fear of death, suicide etc. (Barnes Elizabeth, 1968).

The biggest issue for current widowed geriatrics is profound loneliness. But adjustment varies widely like depending on age, social support and care, and personality. On the other hand, old age reflect modest age-related things in extraversion and openness to their life long experience. So this displays narrow social interactions as people become increasingly selective about relations and as family members and friends. (Lund, 1993)

It is the crucial time for elderly people to get through one of the best, yet the toughest part of their mortal life. Community support and their interaction must
extend beyond the grieving and crisis period for ongoing help and caring relationships. Members of the family and close friends can assist and help by giving support to cope up with their despair period of life of old age.

SCOPE OF THE STUDY

Erikson explained the feeling of “ego integrity” as a sense of “enduring completeness,” an affectively integrated belief that one’s life leads sense and cope together in a important way. A man who has attained integrity get peace in the thought that past life long memories and experiences are attached into history and are intangible. The failure or lack to achieve ego integrity is to feel despair or dissatisfaction.

The person who did a big deal to identify this concept is Erik Erikson. He was one of the few important personality theorists that evaluated aging as a stage of development/ progress. Erik Erikson given a theory that personality development had eight stages that were arranged hierarchical and were ordered. Each level is related with a psychosocial crisis that can be resolved or not. If not resolved it leads to the results ie. failure to complete the formation of the individual personality and restriction of other personality formations.(Narahari .G,2008)

In the late 19th era, when more number of men survived past with their important working life, community viewed old age as a time of dependency and fall. In the developing countries, ie. currently 1 man in 15 is aged 75 or over, but in future for the year 2020 assumes that the values will have narrowed to 1 in 10. At a time when elderly people are displayed or viewed as a “burden” on the financial funds of the state, it is vital for both those in the helping professions and the old age individuals themselves to realize not just the losses that may occur with increasing years, but also the optimistic aspects and potential for further progress. Investigator observed that various socio demographic variables are affecting ego integrity among male and female geriatric population. (Hareven, 1978)
Exploring the links among integrity, hope, desire among male and female geriatric population which has been studied in western developed countries and the great number of variables acknowledge that it is a complex problem. This problem is to be explored in order to help the geriatric people to have better quality of life, which will promote them to alleviate their sufferings and gain self-confidence.

Increasing age has become challenging and it motivates that there is need to give more attention and importance towards the care and protection of older persons. Most of the elders prefer being aged in their own survival place, remaining in a familiar area where they have control and freedom to everyday life. For healthy geriatrics, staying in one’s own resident offers the greatest personal control and pleasure.

In Peck’s theory, ego integrity needs geriatrics to move forward beyond their life’s activities, their bodies, and their individual identities. Research suggests that as elders grow older, they will be more emphasising on psychological, social strengths and introducing toward a bigger, more distant future.

Life demands and expectations have risen everywhere in the world is of concern to every country to be strong, efficient and able to look after its geriatric population and to teach them for a healthy and mobile ageing. As we are in 21st century we identify that the certain age profiles of nearly all country’s populations has either already undergone or undergoing a drastic change. The aim of health for all is one of ensuring economic and social equality. Morbidity patterns of old age, their epidemiological characteristics in various cultural setting and meeting, the health care demands of old age with reliance on family base and human based care is stressed and pressurized. These are core part of the health for all concepts.

In a research of old age women, those who were in their eighties and nineties expressed with greater certainty than those who were in their sixties that they
accept the differences brought about by life long aging (Brown & Lowis, 2003).

Elderly people require medical attention because they are admitted to the hospital frequently and for lengthy period of time than any other age group. They face multiple pathology and chronic illnesses. Age related changes and advancements in organ function particularly in the renal, pulmonary and immune systems might lead an older persons physiological and psychological response in a worst way to acute illness.

Increasing age in older period brings many vital socially induced changes, few of which have the ability for negative effect on both the physical and mental aspects of older adults health. Elderly person of all cultures gives some basic needs and interests. There is little doubt that the most individuals choose to live the most satisfying life possible until their death.

Currently in the Lok Sabha ruling party put forward a bill, which targeted to protect the aged female and a fine and imprisonment or both will punish males, and those who reject their own father and mother above 60 years of age. This is to give proper care and protection to the elderly population against all ill treatments by their own wards and also provides them a speedy inexpensive legal framework for redressed. The government realized that the care of the old, especially the specialized care in each disease can no longer be ignored. The legislation also introduce a new rule in the rural areas that is to reverse property to the parent in case of assault and payment of maintenance depending on their wards’ earning strength.(Gomez L,2009)

Giving safe and proper care to older people in the society requires coordinated and competent care by a trained work force of health care team, for efficient work. In late adulthood, community support continues to reduce tensions, which promotes physical mental, spiritual and psychological well being and raising the odds of living longer in a better way.
Older people bring great value to religious beliefs and behaviors. In a current national survey, 72 percent of Americans aged 65 and older express that religion is very pivot in their lives, which is the largest of any age group (Gallup News Center, 2006). Majority of United States. Elders participate religious activities or other services weekends, nearly two-thirds watch religious TV events, and about one-fourth offer pray at least thrice a day.

Religious participation is related with diverse advantage, including good physical and psychological health, more time is spending for exercising and leisure activities leads to greater sense of attachment and closeness to family, relatives and friends, and greater care for rest (Boswell, 2007).

A research reflects that negative outcomes to care proving can lead in persisting depression. But whether help from others undermines well being depends on many issues, including the quality and way of help, the caregiver–older relationship, and the social and spiritual context in which helping takes place. In Western nations, which highly emphasis independence, many elders have the fear of relinquishing control and becoming dependent and burden on others. (Newsom, 1998)

Early and middle adult life get mostly high grade marks, on the other hand childhood and adolescence rated as less satisfying. The physical, mental, spiritual and social dimentions in which old age live affect their social experiences and, consequently, their advancement and adjustment. Societies, neighbors, and housing arrangements differ in the extent to which they enable aging residents to satisfy their holistic needs. (Field, 1997)

As per disengagement theory, mutual among old age and community takes place in anticipation of death. Elder people when faces down falls in their activity levels and association decreases which results in becoming more engaged with their self. On the other hand, community set free older from job and family responsibilities and issues. This result is analysed as beneficial for
both parties. Older are permitted a life of tranquility. And once they are not in touch, their demise is less disruptive to community. (Cumming, 1961)

Activity theory explains that social hurdles to engagement, not as per the wish of elders, cause declining levels of interaction with the society. Mostly older people when lose key roles, they try to mingle themselves and finally leads to be active and busy as they were in their early adulthood. It shows that, older’s life integrity depends on the situations that lisenced them to be interacted in roles and relationships which they were having (Maddox, 1963)

As per continuity theory, instead of maintaining a defined activity grade, aging adults desire to maintain a personal system ie. Their own identity and a cluster of personality traits, desires, roles, and caliber-that leads to life integrity by ensuring continuity and consistency between their past predicted future. This desire for continuity does not indicate that older’s lives are stagnant. On a different aspect, aging delivers unavoidable change, but elder adults try to reduce stress and disruptiveness by integrating those changes into a coherent, regular life path. (Gusain, 2008)

The mind and thoughts of an aged person is like a thin string which when pulled once, takes a long hour to regain to its prior position. The older person may become greedy especially for sweets and best items as he enjoyed in his early and late adult life. He will also have an unforgiving attitude and virtual, which will not give him self-realization for him as well as for others. The grey aspects of old age had to be managed by the family members and friends and also the care providers. The enormous knowledge of life and the immeasurable treasure of experience the elder people can do a lot to society and they have to start doing it now.
NEED FOR THE STUDY

As the age increases and person reaches to older period get involved with different challenging phases of life. An older person can cope up with these stressful situations will help him to have a happy and fruitful life. Human beings behaviour is quiet vary from one situation to another. It is also based on both social norms and expectations of each situation.

Personality characteristics is opposite in female and males. We believe about ourselves as full of hope or hopeless, independent or dependent, emotional or emotionless, aggressive or submassive. Majority of these are inbuilt characteristics, but other behaviours, such as emotions either superior or inferior pretend to be mature, based on challenges, experiences and support we receive in our advancing age.

Life is an organizational setting or group living usually involves some liabilities to personal demands and liberty. Immobility, disabled and dependency further reduces the control of people have over their own lives and their daily style of living. Depression is common among older people and this leads to further deterioration in social interactions prone to illness and finally moving as causality to hospital.

Briefing the concepts of Erikson’s, Kimmell et al concluded that there are two possibilities of emotional positioning of the elder facing the old age: 'if the elderly individual cope up to have a safe and secure sense of the ego and a perception of his/her legacy, be it through the family or the work, he/she maintain an ego integrity, on the other hand the inability to attain for a solution for this conflict leads simultaneously in dissatisfaction with his/her own self (with the subject proper) and, therefore, despair’.(Flavio M.F,2003)

Individuals who attain integrity can display on their lives as being pivot and rich and are not fearful of demise. On the other hand, people who are not successful in their past feel despire and are unable to view their past as
meaningful. They entangled with many unresolved issues, which leads to their pains like depression, fear of demise, suicide etc. (Barnes. E, 1968)

The concept of ego integrity is complicated, and the attempts to conceptualise this wide term into a measurable construct can be difficult. Due to certain defined identities among integrity success and psychological and social well being, few investigators have tried to measure ego integrity by using various scales of emotional approach Other researchers have utilized existing measures of death anxiety or life satisfaction in an attempt to check the levels of ego integrity. (Wagner 1983).

Investigator viewed that various socio demographic variables are affecting ego integrity/ satisfaction level among male and female geriatric population. The physical and social dimensions in which elders live affect their personal and social experiences and, side-by-side, their development and adjustment is also affected.

Articles on the life style of older adults assure a great level of continuity in everyday pursuits and relationships. Although after a change (such as immobility, completion of job period), elders preferably make choices that extend the prior direction of their life style, engaging in new activities but often within familiar domains (Park J, 2011)

It can be very well said that there is still a great amount of contradiction in all the above research findings regarding the ego-integrity level among geriatric persons and apart from that one question is still unexplained and that is, whether there is a varying level of ego-integrity in both the genders in different socio-demographic variables

Exploring the links between integrity, hope among male and female geriatric population, which has been studied extremely in western nations and, the great number of variables indicates that it is a complex problem for society. This problem is to be explored in order to help the geriatric people to have
better quality of life, which will promote them to alleviate their sufferings and gain self-confidence (Balachandran N, 2012).

Last stage of adulthood give an impression to their life that they feel fully satisfied. They can look back on their memories and be happy with the way they have lived their life. Now a day too many elderly people are not satisfied and look depressed. Most fear of death of either loved one or for themselves

It is the crucial time for elderly people to get through one of the best, yet the toughest part of their mortal life.

This motivated the investigator to find out the ego integrity level among male and female geriatric population through comparative study, also the investigator is eager to find out the relationship of ego integrity/ life satisfaction among elderly male and female population with selected socio demographic variables.
A properly launched problem is half solved. Problem statements convey the difficulty in situation that needs investigation and develop a reason for a new investigation. A problem statement discusses the nature of the problem that is being labelled in the study and its context and significance.

A research problem is a declaration about a problem area, a chance for improvement, a difficulty to be eliminated, or a bothering question that exists in literature, in education or in clinical practice those points to the need for fruitful understanding and purposeful investigation. The research problem is mainly created in the form of a question. A research problem offers an indistinct or broad argument or presents a value question.

**PROBLEM STATEMENT**

A comparative study to assess the level of ego integrity among male and female geriatric population in a selected geographical areas at Indore city (M.P.)

**OBJECTIVES**

i. To assess the level of ego integrity towards life among male geriatric population.

ii. To assess the level of ego integrity towards life among female geriatric population.

iii. To compare the level of ego integrity towards life among male and female geriatric population.

iv. To associate the level of ego integrity towards life of female and male geriatric population with selected socio demographic variables.
OPERATIONAL DEFINITIONS

An operational definition identifies the performance that researchers must conduct to collect and measure the needed information. The definition of a concept in terms of the strategies by which it is to be measured.

1. Comparative: -

In this study comparison means the assessment of the difference between level of ego integrity towards life among male and female geriatric population.

2. Ego integrity: -

Ego integrity is the developmental task to be achieved at the age of 60 year and above in various area like quality of life, satisfaction towards their life achievement, self confidence; and attitude towards future, as evidenced by the score obtained in rating scale.

3. Geriatric population: -

People at the age of 60 years and above.

4. Geographical areas: -

It refers to a definite locality where the samples are residing.
HYPOTHESES

The composition of hypothesis as to the possible answers to the research questions is an important step in the process of composition of the research problem. The scientific method uses a hypothesis on a method of answering a problem. The result is then analysed by collecting data. A hypothesis can be put into some investigations and if the hypothesis borne out or found to be true then we can say that hypothesis is accepted.

Hypotheses of the present study are: -

- $H_{A1}$ - Significant difference in level of ego integrity towards life between male and female geriatric population.

- $H_{A2}$ - Significant association between level of ego integrity towards life of male geriatric population with selected socio demographic variables.

- $H_{A3}$ - Significant association between level of ego integrity towards the life of female geriatric population with selected socio demographic variables.
ASSUMPTIONS

A principle that is accepted as being true based on logic or reason, without proof. A primary assumption of investigator is that there is a real situation that can be deliberated and familiar. An assumption broaches to a basic principle that is accepted to be true without any evidence or confirmation.

The study assumes that:

- All geriatric people will be co-operative and willing to participate in the study.
- Ego integrity level of male and females may vary from each other

DELIMITATIONS

This study is delimited to:

- People who are above 60 years of age.
- People who are able to understand Hindi & English.
- Study duration is limited to 3 months.
- Subjects are selected from selected areas of Indore city.
THEORY

Theories and conceptual models have much in common including their origin general nature, purposes and role in research. Theories differ in their level of generality and abstraction. Many theories are more restricted in scope, focusing on a narrow range of experience. Conceptual models, frameworks or schemes denotes a less official attempt at organizing event than theories. Conceptual models, theories dispense with ideas that are gathered by goodness of their relevance to a usual theme. Theories allow investigators to unite all the observations and facts into an orderly manner.

The term model is often used in link with symbolic presentation of a conceptualization. The relation between theory and research is corresponding and mutually useful.

Systems theory investigates the structure and characteristics of an approach in terms of relations, from which new characteristics emerge. The concept of system seems to be intrinsic to human reasoning, has been copiously applied and developed over the last few years. Bertalanffy’s concepts were developed into a theory called General Systems Theory. He explained a general system as any theoretical system of interest to more than one person. It surpasses conventional disciplinary and abstractive borders.
CONCEPTUAL FRAMEWORK

Conceptual framework is interrelated ideas that are combined together in same reason by virtue of their relevance to a common theme.

It is powdered of ideas, which are the intellectual or emotional images of the present situation. These concepts are linked together to convey the relation. A model is used to present the symbolic depiction of the ideas.

A framework is the whole imaginarily support of a study. Every study is not based on a conceptual model, while all study has a framework with a theoretical reason. Theoretical and conceptual frameworks engage various co-relational roles in the improvement of a study. Their entire motive is to make research findings meaningful and reasonable. They are having good system for embellish together with gathered data from separate and isolated researches. Theories and conceptual models used to activate research and the addition of knowledge by providing both way and drive.

Conceptual framework gives certain mount of reference for nursing practice, research and education. The use of the framework derives from the structure and it helps in scrutinizing and for determining what is to be observed.
General systems theory

General systems theory is the form of exchange theory. Von Bertalanffy put forward the system theory in 1930’s. General system theories are made up of both structural and functional elements that cooperate within a boundary that scrutinize the type and rate of exchange with the person’s environment.

Living systems are open because there is and ongoing transfer of problem, vitality and knowledge.

The following elements are common to systems.

1. Input
2. Throughput
3. Output
4. Feedback

Detail description

- Input - problem, vitality and knowledge received from the physical setting
- Throughput - problem, vitality and knowledge that are improved to modify within the system.
- Output - problem, vitality and knowledge that is emerged from the system into the physical setting
- Feedback - knowledge about the physical setting responses used by the person (May be +ve, -ve or neutral).

Basic perceptions of general system theory are:

1. A system is made up of subsystems, having its own purpose.
2. It contains vitality and problem
3. It may be open or closed (open systems exchange energy and closed systems have clearly defined partitions)
4. Open and closed system reaching to fixed place.
For survival, a system must attain a balance. Equilibrium depends on the systems ability to control input and output to attain an equilibrium relationship of the interactive parts. The system uses the several adjustment strategies to maintain equilibrium. Adaptation may occur through receiving or refusing the problem, vitality and knowledge or by amenable the input and improving the system responses.

Simpson (2000) used general system theory to describe the impact of information technology on nursing practice and Anderson and colleagues (2002) used system theory as one of the bases for development of a nursing model for community organization of change.

**Input:**

In this study the input refers to background characteristics and ego integrity of subjects. It is presumed that several factors such as age, gender, marital status, type of family, family structure etc. will affect the ego integrity of a person.

**Throughput:**

It is the process where the assessment of ego integrity takes place. Assessment of the ego integrity will be for both male and female subjects.

**Output:**

It is the process where we can assess the life satisfaction in both male and female elderly persons. It can be assessed with the structured interview with the subjects and rating scale for assessing life satisfaction. There can be four possibilities that they are unsatisfied, poorly satisfied, very satisfied and extremely satisfied. The result will be based on how the person is satisfied to his/her life.
Feedback:

The difference in the ego integrity of the geriatric people is evaluated from the rating scale. The level of ego integrity may change with the socio demographic characteristics. In the present study, the feedback is to maintaining the repose of subjects who are unsatisfied with their life.

Although each model gives divergent outlook on translation of research findings in clinical setting, various steps and procedures are similar to the models. Some models emphasize on the utilization of research from the outlook of individual practitioners, whereas some emphasize on organizational EBP policies.

Researchers are not fully attentive in a single idea or concept, excluding in descriptive studies. In order to benefit clinical practice, research results must be accessible to nurses in clinical practice.
Fig 1. Von Bertalanffy's General systems theory
SUMMARY

This chapter deals with the introduction, problem on hand, scope and need for the study.

The conclusion drawn from this chapter:

The statement of the problem will be explored through the following objectives

1. To assess the level of ego integrity towards life among male geriatric population.
2. To assess the level of ego integrity towards life among female geriatric population.
3. To compare the level of ego integrity towards life among male and female geriatric population.
4. To associate the level of ego integrity towards life of female and male geriatric population with selected socio demographic variables.

And using different statistical application to find out the results in the next chapter will reveal these objectives.