Chapter VI

Suggestions, Recommendations and Scope for Future Study
CHAPTER - VI

SUGGESTIONS AND RECOMMENDATIONS

The revealing outcome of the study is that among the five independent variables, three intervening variables namely Geriatric Depression, Social Behaviour and Self-Esteem are found to be important factors that influence Life-Satisfaction of the elderly women. Further, the linkage between various socio-demographic conditions with the intervening variables and the enumerated predictor variables were discussed in detail in the previous chapter. Based on the emerging findings, the researcher put-forth the following suggestions to enhance the life-satisfaction of the elders in the old age homes, under different headings.

The researcher also offers suggestions and recommendations to different interest groups associating with the elders, particularly the role of State in promoting the Life-Satisfaction of the women elders. As many studies establish the findings that the elder people in families and community have better satisfaction than the elders in old age homes, suggestions are also made to improve preventive services to promote healthy ageing process.

SUGGESTIONS TO PREVENT ILLNESS AND PROMOTE PHYSICAL WELL-BEING

- Health problem is the major issue of the aged. Cardiac problem, diabetes, respiratory, arthritis are the major physical ailments experienced by the aged in homes. The home should organize periodical medical camps to diagnose such illness at an early stage and curative and preventive services should be ensured. Health education should be given to the inmates.

- Health promotional activities such as therapeutic diet, recreational activities, use of humor, yoga, outing, meditation, participation in community activities etc need to be encouraged.
In addition to organizing general health changes and eye camps for the beneficiary of the old age homes, they should organize dental camps to maintain oral hygiene and tooth care.

Basic hygiene is essential for the happy living for the aged. Hence it is imperative that cleanliness is maintained in the home with care.

The care-takers of elders of the old age home should be capacitated on the theme such as geriatric counseling and psychological, geriatric illness, geriatric diet, geriatric leisure time activities, importance of social networking etc.

Degenerative diseases such as Dementia, Alzheimer, Parkinson paralysis etc. can be diagnosed at an early stage and can be prevented by timely intervention.

Integrated care, linking and coordinating the various aspects of care delivered by different care systems, such as general health practitioners, primary and specialty care, preventive and curative services, and acute and long-term care, as well as physical and mental health services and social care, to meet the multiple needs and problems of individuals should be delivered.

SUGGESTIONS TO PROMOTE EMOTIONAL WELL-BEING

Old age homes, in addition to providing general physical health care, should focus more on enhancing their emotional and psychical well being.

Geriatric depression is identified as an important variable that influences Life-Satisfaction. The elders are longing for recognition, affection and attention. Counseling and psychotherapy works just as well as medication in relieving mild and moderate depression. The elders should have access to counseling services whenever they need. The underlying causes of the depression should be identified and addressed.
Therapeutic programmes should be organised periodically to stimulate the memory of the elders by means of old films, pictures, objects, music etc., to allow them to remember their positive achievements, contribution in life and thereby enhance their self-esteem.

Supportive counseling including religious and peer counseling should be extended to the elders. It can help to ease loneliness and hopelessness, which are main for the causes for depression.

Cognitive Behavioural Therapy help people to change negative thinking patterns, deal with problems in healthy ways, and develop better coping skills.

Potential individuals can be indentified from the inmates of the old age home and can be trained on counseling skills to provide peer counseling for those in need.

Permission should be given to the elders to possess certain personal belongings of their choices.

Secretarial assistance needs to be provided in order to maintain correspondence with family members, relatives and friends. Family interactions programme should be organized periodically.

Old ages homes should explore the possibility of interaction of elderly with other social groups in the community and with the school children to satisfy the social and emotional needs of the elder.

It is important to evaluate the effectiveness of counselling services for strengthening self esteem and improving social behaviour of the elderly by mental health professionals. Such studies could be undertaken at the old age home to understand the impact of geriatric counselling programme.
SUGGESTIONS TO PROMOTE SOCIAL BEHAVIOUR AND ADJUSTMENT

- Family interaction programmes should be organized periodically to strengthen the network with family and friends.
- Suitable recreational and leisure time activities should be organized by the management to old age homes, to combat loneliness, which is a main cause for depression. To enhance their physical activities, different categories of work should be allotted to the old people like young old, educated, illiterate, depending upon the mobility.
- To make the aged feel at home, and to enable the inmates to adopt themselves to the entirely new and strange atmosphere. The homes may organize groups activities as often as possible to promote social interaction, to overcome the fatigue of loneliness, to develop the virtue of mutual help, mutual understanding, tolerance and mutual adjustment. Such activities will create opportunities to share their past experiences, both sweet and bitter, which will in turn strengthen the ties between them.

PROGRAMMES TO ENHANCE THE SPIRITUAL WELL-BEING:

The results of this study indicate that the respondents have high religious attitude. Yet, their depression level is high and self-esteem is negative. Ensuring such a trend one can infer their spiritual well-being is low. To enhance the spiritual well-being of the elders, the homes should focus on the following:

- Frequent visits to religious places and of religious personnel, and religious discourse should be organised to broaden the perspectives of the elders on spiritual health and instill a value that spirituality is a framework for leading a satisfactory and peaceful life. Values such as self-care, kindness to others, supporting friendship and forgiveness should be promoted. They should be encouraged to
listen to music and enjoy nature. Nature walk should be organised. They should be encouraged to participate in diverse spiritual activities and spiritual readings.

♦ The institutions should periodically assess the spiritually needs of their residents and manage the same at a high priority level to promote life-satisfaction of their inmates.

PROGRAMMES TO IMPROVE THE SELF-ESTEEM AND LIFE-SATISFACTION OF THE WOMEN ELDERS

♦ Group activities such as games and discussions involving the participation of many members that would promote healthy interaction should be organised in the old age homes.

♦ Elders should be encouraged to critically analyse and review the latest news and current social issues.

♦ The traditional knowledge and expertise of the aged should be documented and recognised, and efforts should be taken to make use of the same available to the public. Such initiatives will help them to develop positive self-concept and self-worth among the elders.

♦ Healthy competitions and talent exhibiting events can be organised periodically in the old age homes. It is suggested to organize events such as cooking, rangoli, hand-work, folk arts, dancing, singing, solving the riddles etc., which will provide a platform for them to exhibit their skills and talents, instill competitive spirit and thereby enhance better interaction and boost their self-esteem. They may be encouraged to participate in public competitions taking place in the city.

♦ Income generating programmes like pickle making can be organised, making the able-bodied elders, to engage themselves in productive and meaningful way.
• 'Laughter Club' may be organised in each home for lightening the mood of the elders. Performers may also be invited from the community.

• Events like ‘talk show’ can be organised on topics of general interest to the aged, by involving the inmates as participants.

• The elders should be provided with the facility to re-train themselves in the areas of their interest, and thus continue to contribute to their well being.

GENERAL RECOMMENDATIONS TO THE INSTITUTIONS

• Infrastructure facilities to be planned to suit the needs of the elderly to ensure independent living in the homes.

• To customize the living environment to suit their developmental needs, infrastructure like commode, supportive bars in the bathroom, walking stick, wheel chair, torch, spittoons, working bar, woolen coat, mosquito net, socks, two way switch near the bed, preset reminders etc. to be provided.

• All old age homes should take an effort to ensure that the beneficiaries of their respective homes avail the old age pension scheme of the government.

• The institution should provide free legal aid and support for the needy inmates.

• Extra care has to be taken by the homes that offer both types of vegetarian and non vegetarian food to the inmates. If separate kitchen for the preparation of non-vegetarian food is not available, at least separate utensils should be arranged.
GENERAL RECOMMENDATIONS FOR DIFFERENT INTEREST GROUPS

♦ Community based old age homes are preferred by the rural and urban senior citizens, which can promote better social interaction and involvement among its members. Day care centre, recreational and holiday homes, “home away home” are welcome assets to the welfare of the aged.

♦ Awareness about preventive health care of the elders should be organized either by the State or through NGO’s to different interest groups such as family members, paramedical, NGO, community workers, primary health doctors, social workers, members of social defence, police and private doctors under the guidance of psychiatrists.

RECOMMENDATIONS TO STATE

♦ Rights of the senior citizens should be included in the school curriculum to insist positive value in the minds of the adolescent towards elder.

♦ Awareness about the THE MAINTENANCE AND WELFARE OF PARENTS AND SENIOR CITIZENS ACT, 2007 should be broadly published by the government and the senior citizen should be educated about their legal rights and constitutional rights.

♦ In the same way, budgeting allocation for the benefits of senior citizens should be widely published through print and visual media and state should ascertain that the allocated funds properly reach the beneficiaries.

♦ The government should bring every year, detailing the budget allocation for different beneficiaries under each scheme.
Factors influencing Life-Satisfaction of the Institutionalized Aged Women

• Pre-menopause counseling should be given to the women and the family members to strengthen the family ties, to educate about the diet and nutrition requirement.

• While sanctioning to open new old age homes, the following points could be considered by the State.
  1. Children’s home and home for the aged should be located together.
  2. Ages of both sexes should be housed in the same compound to promote healthy social Behaviour. This home should be in the community and not away from them, so that the aged can keep in contact with their family members, relatives and friends.

• The government needs to crystallize the concept of institutionalized care and set standards and appropriate guidelines to safeguard the social, economical, medical and psychological well being of the elderly and make it mandatory for the old age homes.

• Curriculum for geriatrics and gerontology for medical/ paramedical/ community workers/and support service faculties, should be developed, considering the health and nutrition concern of older women. Medical fraternity should be educated to address the specific health concerns of older women.

• Women in the age group of 60 -70, who are willing to work, should be encouraged to form a co-operative and earn for their living. NGO’s can assist such women to develop those skills and get credit from micro-credit schemes. Those who are incapacitated, more than 70 years must be consideed for outright help and are given pension so that the family does not treat them as a burden.

• A nutrition education programme should be organized to raise awareness among the families and care givers about the importance of a good varied diet for elder people.
Counseling for both the young and the old to adjust to each other's needs should be imparted and new methods of conflict management and better interpersonal relationship should be taught to the people.