CHAPTER VI

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This study is an attempt to understand the institutionalization of the elderly in Mangalore city. The study is titled as 'Institutionalization of the Aged: A Sociological Study.' The objective of the study is to assess the life of the elderly in the institutions in Mangalore city and the impact of institutionalization on the elderly in relation to subjective indicators such as activity of daily living, social support, loneliness, anxiety, perceived stress and to assess the health and socio economic conditions as objective indicators. The objective indicators include demographic profile, socio economic conditions, social support and health. In demographic profile of the respondents the variables studied are sex, age, religion, education, income, marital status, type of family and the previous occupation of the elderly.

The study is a descriptive design that investigated the life of the elderly in the institutions, the impact of institutionalization on the elderly, the anxiety, stress and loneliness attached to that, with a theoretical framework of Activity Daily Living and type of informal social support. Face-to-face interview survey method using a structured questionnaire was adopted for this study. Demographic data was collected from all participants.
who met the inclusion criteria. The data included age, gender, time of administering questionnaires, institution where the elderly lived, and length of stay in the home.

Depending upon their abilities, each resident completed the questionnaire by themselves or had the questions read aloud, with the researcher recording the response. The five tests administered were ADL (Assessment of Daily Activity) together with Physical Self-Maintenance Scale by Lawton and Broody (1969) to evaluate the elderly's ability to perform the more complex activities that are necessary for optimal independent functioning. Geriatric Anxiety Inventory (GAI) which is a 20 items self-report measure of anxiety symptoms and anxiety disorders are highly prevalent among older people and are associated with considerable disability burden. The UCLA Loneliness Scale by Russel Peplau and Ferguson developed in 1978, consisted of 20 statements that reflected how lonely individuals described their experience, and MOS Social Support Measurement developed by Cathy Donald Sherbourne and Anita L. Stewart in 1991 has focused on the structure of interpersonal relationships. The importance of interpersonal relationships to our lives and especially to the elderly has become increasingly clear. Both seeking and receiving help from other people is a major form of coping activity. Social support Inventory is
a 20 item questionnaire which helps to see the coping ability of the elderly. The Perceived Stress Scale developed by Cohen, Kamarck and Mermelstein in 1983, (PSS) is the most widely used psychological instrument for measuring the perception of stress. It is a brief and easy to administer measure, the degree to which situations in one’s life are appraised as stressful. Items were designed to tap how unpredictable, uncontrollable, and overloaded respondents find their lives.

All the respondents were interviewed by the researcher and were asked the questions, to be answered. The tests were administered in the same order to make it consistent, and the time of the day when the tests were given was noted. Each interview lasted about 30-45 minutes depending on the level of functioning of the participants. Observation method also was used to get the desired report.

The Statistical Package for Social Sciences (version 13.0) (SPSS) was used for the analysis and modeling of the data. The two tailed P value of < 0.05 was considered to be significant for multivariate level of analysis. Univariate analysis began with a descriptive analysis of demographic, independent, and dependent variables. Mean, median and standard deviation were utilized for continuous variables, while frequencies and percentages were applied to categorical variables.
SUGGESTIONS:

The Home for the Aged in Mangalore city have been a rendering a herculean service to the aged. Most of the Homes are providing the aged with spiritual, social, psychological and physical assistance. After a period of study the Researcher would like to make some suggestions that would help in executing better service to the aged.

1. Most of the Homes for the Aged are unable to provide better care due to lack of finance. Though there are number of schemes by the Government, the Homes for the aged are unable to have those benefits. The Management feels that it is difficult to run behind the government officials and its time consuming. Instead of wasting time, they prefer not to tap those government resources. So the Government should be more flexible so that the Homes for the aged are able to approach the officials and tap the resources for the benefit of the aged.

2. The family should take care of the elderly in their own homes and be more concerned about the fragile generation. They should try to avoid institutionalizing them. Only in case of grave reasons they should think of the alternative ways of taking care of the aged.
3. The Homes for the Aged should be more flexible as some of the rigid rules of the Institution keep away the aged from social contacts. Number of respondents who are lonely expressed that they need more freedom and flexibility. The Institutions should work towards the happiness of the inmates more rather than just providing what is basic to the aged.

4. Lot many Organizations should come forward to help these institutions not only financially but also in providing them emotional and psychological support which helps them to cope with any type of stress in their old age.

5. Provide awareness to the younger generation to take care of the aged and not just disown them in their old age. Educational institutions should take initiative to make them children to visit these Homes for the Aged and provide them support that boosts their energy and take away the boredom.

The presentation of the study consists of six chapters. Chapter one deals with the Introduction and methodology of study. The preliminary part of the introduction deals with defining ageing as a problem with focus on concept of ageing, ageing as a social problem, population ageing, demographic transition showing world scenario and Indian scenario, challenges of ageing due to family and social change, globalization and
ageing, societal response to ageing, institutionalization of the aged and the impact of institutionalization on the elderly and on their physical, emotional, psychological and social life. Methodological issues that are included in this study are justification of the study, operational Definition, theoretical framework, objectives of the study, universe, sampling design, data collection, tools and techniques and limitations.

Chapter two consists of Review of literature. This chapter contains various published research studies and has been summarized in an organized pattern. The review of literature comprises of both Indian and studies done abroad. This chapter reviews various literature on various issues like impact of changes in family pattern on the elderly, reasons for institutionalization of elderly, life of the elderly in the institutions and the degree of respect, security and belongingness experienced by the elderly, impact of institutionalization on the elderly and ability of the elderly to cope with the problems and stresses in the institutions.

Chapter Three deals with the description of the Institutions and Socio-economic condition of the Respondents in the Homes for the Aged in Mangalore city. The chapter is divided into two sections. The first section gives us the description of the Institutions and their history with the aims and objectives of the Institutions. The second section describes the
demographic profile of the elderly in point of sex, age, education, religion, caste, mother tongue, marital status, previous occupation, source of income and the type of family. Description of the state of Karnataka and the area of study that is Mangalore city is clearly explained. Demographic profile gives the number of respondents that were selected for the study is mentioned. The study shows that 300 respondents were selected out of which 117 men comprising of 39 per cent and 183 women that is 61.0 per cent from nine Homes in Mangalore city. Another variable that is studied is the Age of the respondents. Age 60 above and 90 below is considered for the study. Of the 300 respondents, 99 (33.0%) belonged to 60 – 69 age group, 110 (36.7%) to 70 - 79 age group and 91 (30.3%) belong to 80 and above age group. Educational status of the elderly shows that 86 (28.7%) belong to illiterate group, 112 (37.3%) had primary level education, 70 (223.3%) studied up to secondary level, 28 (9.3%) had graduation and 2 (.7%) had technical training. With regard to religion, majority of the respondents 276 (92.0%) belonged to Christians and only 24 (8.05%) belonged to Hindu religion. These 24 (8.0%) who belong to Hindu religion, were also from different castes. 1 (4.2%) belonged to Bunts, 3 (12.5%) were of Billavas, 1 (4.2%) was Mogaveera and 19 (79.2%) were of other castes like Konkani's and Devadigas having different Mother Tongue. Of the total 24 respondents, 10 (3.3%) spoke Kannda, 9 (3.0%) spoke Tulu, 1 (.3%) spoke Malayalam, 1
(3%) spoke Konkani and 3 (1.0%) spoke other language like Byari and the rest of the respondents, Christians as majority spoke Konkani. Most of the respondents in the institution 203 (67.7%) were widowed, 72 (24.0%) were unmarried, 14 (4.7%) were married and were living together in the institution and the rest 11 (3.6%) were separated. The occupation of the respondents is another variable that is discussed in the study. Majority (196 (65.3%) worked in unorganized sector which never brought them any income so that they could use it in their old age, 57 (19.0%) worked in organized sector which was in fact a boon for them to live their twilight years with dignity and happiness and the rest of the respondents who were housewives 47 (15.7%) were the victims of abuse and neglect. The study on occupation is the indication of low income of the respondents. Majority of the respondents 226 (75.3%) had no income at all and that is why they had to be the victims of abuse and neglect, 31 (10.3%) were the pensioners and had no problem with living, 29 (9.7%) were getting the income from the produce of the property, 12 (4.0%) had past business profit and the rest comprising of 1 (.3%) each had income from rent and one was still happy with the salary that was paid for the work done in the institution. Most of the respondents 253 (84.3%) belong to the nuclear family, 36 (12.0%) belong to extended family and the rest that is 11 (3.7%) belong to the joint family.
Chapter four deals with the Life of the elderly within Institutions. The various variables that are included in this chapter are, Type of Institutions for elderly in Karnataka and Mangalore City Corporation. Various institutions in Mangalore city are according to the statistics given by Help age India are free, pay and stay homes, some are free and some other institutions cater to the inmates who pay and stay. All the Institutions for the aged are run by the private management. Study on reasons for Institutionalization shows that majority of the female respondents 149 (81.4%) and 97(82.9%) male respondents were in the institution as they did not have anyone to take care in the family as most of their family members were either migrated or did not want to take the burden of taking care of the elderly. Majority that is 80 (43.7%) female and 38 (32.5%) male comprising of total 118 (39.3%) of them said that the family members placed them in the institution. The chapter also shows the duration of the stay of the respondents in the Institution. More than the majority of the respondents 130 (71.0%) female and 97 (82.9%) male comprising of total 227 (75.7%) were in the institution from 1 – 10 years. In spite of being in the institution some of them 30 (10.0%) having 15 each in both the category were involved in the decision making though the majority were not involved in decision making in the family from the institution. Hundred fifty (82.0%) female and 112 (95.7%) male comprising have better satisfaction with the
persons who take care of them is being studied in this chapter. Data female respondents 148 (80.9%) and 112 (95.7%) shows that the respondents experience the security in the Institution and feel belonging. This increases their ability to adjust with co-inmates in the Institution. The total 170 (92.9%) female and 113 (96.6%) male respondents felt that they are able to adjust with their co-inmates in the institution. The interaction with other inmates in the Institution, dependency of the respondents on other inmates in need of help, their participation in social gatherings in the institution helps them to have good health and wholeness. Data that is analyzed in Chapter IV proves that the Institutions enhance the quality of life in old age. This provides the respondents' preference of stay. A large majority, 263 (87.7%), 152 (83.1%) female and 111 (94.9%) male respondents were fully satisfied with the conditions in the Institution.

Chapter five analyses indicated the Impact and Problems of the aged within Institution and the coping Mechanisms of the Elderly in the Institutions. Various variables that are discussed in this chapter are impact on physical, emotional and psychological, social health and the coping mechanisms that are used by the respondents. Physical health status of the institutionalized elderly was assessed in the present investigation. Prevalence of different health problems before coming to the institution and
after coming to the institution is presented. Major illnesses like Hypertension 33 (18.0%) female and 11(9.4%) male, diabetes mellitus 29 (15.8%) female and 9 (7.7%) male, aching joints 49 (26.8%) female and 25 (21.4%) male are found in the respondents. Majority comprising of 117 (39.0%) of them suffered from more than four illnesses in the institution. Emotional and psychological health is assessed through various scales. Geriatric Anxiety Inventory (GAI) by Gerard J. Byrne1 and Nancy A. Pachana (2007) was used to analyze the anxiety level of the respondents. Anxiety scale is a 16 item questionnaire used for the assessment and each component was done based on mean value. Overall anxiety scale showed the female level of anxiety was 34.60 and the male level of anxiety was 30.33. Test showed that the level of anxiety among the respondents was at moderate extent as the Mean score was 32.94. UCLA Loneliness Scale by Russel Peplau and Ferguson developed in 1978 was used to find out the level of loneliness among the elderly in the institutions in Mangalore. Overall Loneliness scale showed the female level of loneliness was 47.09 and the male level of loneliness was 48.34. Test showed that the level of loneliness scale among the respondents was at high extent as the Mean score was 47.58. Percentage of Mean score of female was 58.90% and male 60.40% and the total mean percentage was 59.50%. Of the total 183 female respondents 138 (75.4%) and of the total 117 male respondents 83(70.9%)
were having loneliness at a high extent. The Perceived Stress Scale developed by Cohen, Kamarck and Mermelstein in 1983 showed that the level of perceived stress scale among the respondents was significant as the Mean score is 20.40. Percentage of Mean score was 34.01. The total percentage of mean score for female was 32.78% and for male it was 35.93% and the total mean percentage was 34.01. Social health is another variable that was analyzed. With regard to the ability to adjust with your co-inmates, majority of the respondents 170 (92.9%) and 113 (96.6%) male are able to adjust with one another in the institution and with regard to the participation in any social gathering, the result showed that 116 (63.4%) female and 83 (70.9%) male respondents do not participate in social gatherings in the institution. Only 67 (36.6%) female and 34 (29.1%) male respondents participate in the social gatherings that too because sometimes the institution forces them or they want to forget their worries and be physically fit. Another variable that was studied was ability to cope with Stress and Problems. Instrumental Activities of Daily Living Scale by Lawton MP and Brody EM (1969) which was developed to evaluate the elderly ability to perform the more complex activities that are necessary for optimal independent functioning was used for the study to find out the ability of the elderly to cope with problems and stresses. Functional competence is the major concern for many during older age. Maintenance of
functional competence leads to overall well being of the person. Physical self Maintenance Scale is one of the scales that are used to investigate the older people’s ability to manage self. There are six items in the scale. The overall PSMS level shows that the level of physical self maintenance of female and male is very good as the data shows that 159 (86.9%) female and 108 (92.3%) male are capable of helping themselves in their daily chores. Good social support networks serve as a feature of social relationships that can be seen in many of the ordinary exchanges of daily social interactions which is becoming prominent in the time of adversaries. The MOS Social Support Survey developed by Cathy Donald Sherbourne and Anita L. Stewart is the final social support battery for evaluating the level of social support of the respondents. Over all social support scale showed the female level of social support was 42.92 and the male level of social support was 39.61. The total level of social support mean value was 41.63. Test showed that the level of social support among the respondents was at moderate extent. Percentage of Mean score in female was 45.18% and male 41.69% and the total mean percentage was 43.50 having social support at a moderate extent.

Chapter six contains the Summary and Conclusion. In the summary, the main purpose of the research has been clearly arranged, structured and
worded in a logical and chronological manner. The conclusion deals with the major findings of the thesis. Based on the information got through interviews, observation and the analysis got from the different scales used, the relationship between different variables studied the life of the elderly in the institution and the impact on physical, social, emotional and psychological health has been assembled together.