CHAPTER VI

IMPLICATIONS OF THE STUDY
IMPLICATIONS AND LIMITATIONS OF THE STUDY

A search of the literature on the aged in India revealed that there were hardly any studies on memory functioning in the community living elderly. This observation among others prompted the investigator to take up the present study. The findings of this study including those pertaining to the pilot study on intervention, have implications both with regard to the functioning of the elderly in their daily activities (i.e., in improving the functional competence) and psychological health of the elderly as well as in training an appropriate Social and National policy.

Carrying out a field study on memory functions has by itself several drawbacks. Moreover testing elderly subjects in their sixties, seventies and eighties living in the community is fraught with a host of problems which are less easily understood than experienced when one gets into the actual execution of the research task.

Keeping the aforesaid in mind it was considered necessary and useful to state a few important implications and limitations in a succinct manner here below so they could be used in interpreting and understanding the findings in a proper context and perspective.

6.1. IMPLICATIONS OF THE STUDY:

The following are some of the significant implications of the study:

1. This is perhaps the first study in India on different facets of memory and their associated factors in a community living elderly sample. Limitations of the study apart, the findings of the study are of significant import for Gerontology in India.
2 The study of the three age groups viz., 60-69, 70-79 and 80-89, while showing a general decremental difference with the higher age group, compared to the young-old, the quantity of difference and the facets showing difference have varied to some extent.

3 The study has brought out clearly the role of certain demographic variables such as gender, education, locality, economic status and marital status on performance in different facets of memory.

4 Apart from these demographic variables, there were a set of psychological variables that have significantly contributed to the variance in performance in different facets of memory. In view of the fact that studies on the role of such psychological variables on different facets of memory are by themselves not many, and at any rate none in India, the findings assume significance.

5 The aforementioned observations have important policy implications, in that policy directives would need to focus on these aspects.

6 The small intervention experiment carried out as part of this study has clearly demonstrated that successful interventions in improving performance of even community living elderly are possible.

7 Memory, of all types, plays a significant role in one's lives. Its decline in the elderly who are already handicapped in several ways has special negative implications for them in going about their normal daily activities and compound their dependency. Therefore, the application of large scale interventions to improve the memory function in these elderly would go a long way in reducing their dependency. Thus, it has both practical as well as policy implications.
6.2. SOME LIMITATIONS OF THE STUDY:

1. This study being the first of its kind in India, the investigator had certain disadvantages both with regard to ground logistics, as well as some unforeseen problems in the field. Several initial trials in the field gave the much needed 'feel' of the problem and how they need to be encountered. Still there were certain drawbacks.

2. Being a community study, testing had to be done in different locations. It was practically impossible to move the elderly to a common 'laboratory' for the study, which would have been the ideal way of conducting it. Yet sincere efforts were made to provide comparable (not ideal) conditions for testing in different locations.

3. The fact that we were dealing with rural, not well educated men and women who were least sophisticated in many respects provided another dimension of problems where we had to familiarise the persons with regard to the tasks, the like of which many would not have experienced in their lives.

4. Some testing procedures had to be adapted, to suit local conditions and language and culture. Yet the essential features of the original tests as well as compatibility of testing conditions including instructions were maintained to the extent possible. Care was also taken to reassess (temporal) reliability of the tests.

5. The study could not be a developmental one and it had to be cross sectional in view of time constraints for a doctoral dissertation. The observations can not be generalised as changes with increasing age in the same individuals, the cross sectional observations may be later confirmed when prospective studies are made.