

A descriptive study to assess stress among older adults residing at selected oldage homes, Coimbatore.

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Abstract:

A descriptive study was conducted to assess stress among older adults residing at oldage homes. In simple random technique, by using lottery method, totally 60 samples were selected for the study. Stress level was assessed by Cohen et al perceived stress scale (1983). Data were collected using the structured interview and Cohen et al perceived stress scale (1983). Results: The study findings revealed that majority 36 (60%) of the participants had sever level of stress and 24(40%) of the participants had moderate level of stress. Recommendation: Stress is the normal reaction to everyday activities, it becomes unhealthy when it effects the day to day activities it may involve changes in every system of the body and behaviour of one aging which is accompanied by a decrease in activities and deficiencies in autonomy, health, social status which entail elevated stress. Care takers should give special training on measures of reducing stress among people during their old age period.

Key words: stress, older adults, old age homes and Cohen et al perceived stress scale (1983).

Objectives

1. To assess the level of stress among older adults residing at old age homes.
2. To find out association between level of stress among older adults with their selected demographic variables.

Introduction

The world's population is ageing fast. In 2023, 1.1 billion people in the world were aged 60 years or over. That figure is projected to nearly double to 2.1 billion by 2050, representing around one in five people globally. By the late 2060s, the number of persons aged 60 years and over will reach 2.5 billion and surpass the number of under-18-year-olds in the world. The number of people aged 80 years or older is expected to more than triple between 2023 and 2060 to reach 545 million .

India's elderly population are growing rapidly, stress among older people, particularly those in institutional settings, is emerging as a major public health concern. Older adults residing at old age homes often experience stress due to health deterioration, social isolation, loss of autonomy, and inadequate support systems. Chronic stress can lead to physical and psychological ailments, reducing the overall quality of life.

Stress is highly prevalent among the older adults worldwide, with studies showing rates from 10% to over 50%, often intertwined with anxiety and depression, impacting physical health significantly, especially in older populations facing loneliness, financial dependence, and health issues, with higher burdens seen in regions like Africa and within institutional settings like nursing homes. Globally, roughly 14% of older adults experience anxiety or depression, contributing significantly to disability, with stress levels often exacerbated by factors like the pandemic and specific life events.

Older adults contribute to society as family and community members, and many are volunteers and workers. While most have good health, many are at risk of developing mental health conditions such as depression and anxiety disorders. Many may also experience reduced mobility, chronic pain, frailty, dementia or other health problems, for which they require some form of long-term care. As people age, they are more likely to experience several conditions at the same time.

Need for the study

Around 14.1% of adults aged 70 and over live with a mental disorder. According to the Global health estimates 2021, these conditions account for 6.8% of the total years lived with disability among older adults aged 70 years or more. The most common mental health conditions for older adults are depression and anxiety. GHE 2021 shows that globally, around a sixth of deaths from suicide (16.6%) are among people aged 70 or over.

At older ages, mental health is shaped not only by physical and social environments but also by the cumulative impacts of earlier life experiences and specific stressors related to ageing. Exposure to adversity, significant loss in intrinsic capacity and a decline in functional ability can all result in psychological distress.

Older adults are more likely to experience adverse events such as bereavement, or a drop in income or reduced sense of purpose with retirement. Despite their many contributions to society, many older adults are subject to ageism, which can seriously affect people's mental health.

Social isolation and loneliness, which affect about a quarter of older people, are key risk factors for mental health conditions in later life. So too is abuse of older people, which includes any kind of physical, verbal, psychological, sexual or financial abuse, as well as neglect. One in six older adults experience abuse, often by their own carers. Abuse of older adults has serious consequences and can lead to depression and anxiety.

Many older people are carers of spouses with chronic health conditions, such as dementia. The responsibilities of such care can be overwhelming and can affect the carer's mental health. Mental health conditions among older people are often under recognized and undertreated, and the stigma surrounding these conditions can make people reluctant to seek help.

Assumption

1. Many of the older adults residing at old age homes are suffering with some level of stress.
2. The psychiatric nurse or the care takers have vital role in reducing the level of stress of older adults.

Hypothesis

H1: There is a significant association between the level of stress among older adults and their selected demographic variables.

Delimitation

The study Delimited to

1. Older adults aged 60 and above.
2. Sample size is 60
3. Assessment of stress is by Cohen et al perceived stress scale (1983).

Projected outcome

1. The study will expose the level of stress among older adults residing at old age homes.
2. It will highlight those areas of older adults health which require genuine care and support.
3. It will help in promoting attentive care in order to meet effectively the needs of ill and thus promote more positive health outcome.

Materials and methods

Descriptive research design was adopted to conduct the study. By using random sampling technique 60 older adults residing at oldage homes were selected as a sample size. The inclusion criteria were; older adults residing at selected oldage homes and willing to participate in the study. The exclusion criteria were: older adults who are having hearing loss, cognitive decline or suffering with any other mental disorders. Structure interview technique was used to collect the demographic data of the samples and Cohen et al perceived stress scale (1983) was used to assess the level of stress among the samples. The tool was also validated by four Experts from the field of Mental Health Nursing, one Psychiatrist.

Table :1 Frequency and percentage distribution of the samples according to their demographic variables.**n = 60**

S.NO	DEMOGRAPHIC VARIABLES	f	%
1	Age 60- 65 years 66-70 years 71-75 years >75 years	11 13 19 17	18.3 21.6 31.6 28.3
2	Gender Male Female	30 30	50 50
3	Marital status Married Unmarried Widowed Separated/ Divorced	10 10 39 01	16.6 16.6 65 1.6
4	Level of education illiterate Primary education Secondary education Graduate	32 12 12 04	53.3 20 20 6.6
5	Previous occupation Farmer Retired Unemployed Other	30 13 04 13	50 21.6 6.6 21.6
6	Duration of stay 2 years 3 years > 3years	19 13 28	31.6 21.6 46.6
7	Level of communication Satisfied Unsatisfied	26 34	43.3 56.6
8	No. of children One Two More than two No children	08 12 24 16	13.3 20 40 26.6
9	Co- morbid diseases Yes No	33 27	55 45

Table 2: Frequency and percentage distribution of the samples according to their level of stress.

Level of Stress	frequency (n=60)	Percentage (%)
Low stress level	0	0
Moderate stress level	24	40
sever stress level	36	60
Total	60	100

The above table depicts that most 36(60%) of the samples had sever stress level whereas 24(40%) of the samples had moderate stress level and none of the samples had low levels of stress.

Table .3. Association between level of stress among samples and their selected Socio demographic variables.
n = 60

S.No	Socio demographic variable	Chi- square value	'p' value	Result
1	Age	6.404	0.094	NS
2	Gender	0.268	0.605	NS
3	Marital status	0.686	0.710	NS
4	Level of education	2.098	0.552	NS
5	Previous occupation	3.086	0.379	NS
6	Duration of stay	2.825	0.419	NS
7	Level of communication	1.071	0.301	NS
8	No. of children	2.036	0.565	NS
9	Co- morbid diseases	0.625	0.429	NS

Chi-square analysis between the demographic variable and perceived stress scale showed that there was no association between them.

Conclusion

The study concluded that stress is an important consideration among older adults. During diagnosis, we need to take a valid measure on stress among older adults and an understanding of the factors that cause or contribute to stress and related disorders. Further the above findings gave a clear direction to health care professionals that everyone must be paid equal attention to stress irrespective of their demographic characteristics.

Recommendations

1. A similar study can be conducted with large number of samples to generalize the findings.
2. A similar study can be conducted in various settings to identify the level of stress.
3. A similar study can be conducted among other population.

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