Abstract

The study analyses the prevalence of depression among geriatric. They are recent phenomenon like increasing the rate of old age homes. That play a major role in depression among those people. Mainly Old age is a time period of decline and also institutionalised care get the chance of depression syndromes. This study conducted among the Old age people in Sayeesam Old age home, Changankulangara. The study mainly focuses different factors that are affected with the state of depression among those people. Descriptive research method is adopted for the study and the main goal of this type of research is to describe the data and characteristics about what is studied. The findings of the study helps to understand the major factors that the inmates are forcefully admitted in the Old age homes or at present condition nobody with them. Fifty respondents from the old age home, after collecting the data using an interview schedule.

I. INTRODUCTION

Old age is the part of life; is time period of life after youth and middle age. It is the closing period in the life span. Age sixty considered the dividing line between middle and old age. Ageing process done in all living species, and make some physical and biological changes. At the time of old age they have some adjustment problems and usually the like small children. The period during old age, makes difficulty in all status
of health functioning. The elderly are considered to be the emotional and mental problems. Old age is a period of Decline. Ageing is inevitable process. The major problems found in old age people affected with anxiety disorders, dementia, and depression. Decline comes partly from physical and partly from psychological factors. Depression is the common mental health problem among elderly. It not the part of the aging and also it may leads to problems in the physical, cognitive, functional, social impairment and also decrease the quality of life. It is a common mental disorder considered by sadness, disturbed sleep, loss interest, disturbed appetite or sleep and poor concentration etc. Depressive disorders are common problems in old age. Usually the chances of their increased rate of incidences like; physical illness, functional disability, and cognitive problems.

Geriatric depression is a mental and emotional disorder affecting senior citizens. The factors like biological, social and psychological all are play a vital role in depression among geriatric. Depression is mainly due to the result of adverse life events; like death of spouse, relationship, object, or health etc. It may leads to poor health. Because of health is considered as completely free from all diseases and maintain physical, mental and social well-being of the individual. Major problems faced by elderly like, isolation, insecurity due to 1generation and communication gap. These leads major problems to them, the mental status of elderly which leads to depression. Usually most of the elderly people with depression but do not diagnosed and untreated due to lack of adequate knowledge of the disorder and its consequences. Various mental health issues, and physical health problems may leads to the depression. It is a major burden among elderly. Because of depression decrease an individual’s quality of life and also increases dependence on others.

Old age is considered as different types of diseases with chronic medical conditions like diabetes, lung diseases, hyper tension etc. are leads to the depression. Age is another important determinant of mental health. Disability arising due to various illness, loneliness, lack of family support are the major reasons for the depression. The causes of geriatric depression like; low levels of key neurotransmitter chemicals in the brain (serotonin, norepinephrine), a family history of depression, traumatic life events etc. Another complication associated with aging that contribute to the depression in elderly due to the limited mobility, isolation, chronic medical conditions, substance abuse, facing mortality. Elderly people more prone to different psychological problems and depression. Depression is common problematic nature among elderly. The depression in elderly don’t considered as natural consequences of ageing. It is a most common mental health problem in the old age. Depression rate increased in the old age homes. Social support is the another determinants of health ,but in the level of old age home there is no social support that leads to some psychological problems. All people have the problem of sad feelings but these feelings changed in few days. While people with depression they have the difficulty in daily work, stress etc. because it is a serious mental illness. The absence of caregiver that leads to the stage of
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Depression decreases the individual’s quality of life and also increases the level dependences on others. Physical illness, loneliness, financial dependency, lack of family support are the factors about the prevalence of behavioral and mental disorders. At the time of elderly, there are many problems leads to the burden among old age people. The various psychosocial factors associated with depression. Another factors are dieting and lifestyle that are linked with depression.

Most of the time elderly have the problem of death anxiety that leads to depression. Depressive conditions prevent a person from enjoying daily life. Also affect entire activity like physical health, appetite, sleep etc. Usually in older people have the mild depression that is the common depression? Elderly people suffer from sleep disturbance. Depressive disorders are frequently causes physical and emotional issues. It is the vulnerable situation among them. Common disturbance like mood swings. Their changing mood creates lots of problem among them. Mood disturbance characterised by feelings, helplessness, hopelessness towards life. The status of depression among elderly increases day by day. Most powerful problem is the loneliness may relate to the depression. Older adults are commonly subject to the problem of depression. There are different variations of depression. The symptoms shown as loss of interest, handling daily works etc. depending on the severe conditions classified into three; mild, moderate, severe. All physical health is directly or indirectly connected with depression. Most of the depression cases occur in females because of those who are at the level of risk.

Anxiety and depression are the two factors that are related to all old age homes. These two are the common mental health problems of old age. There are strong indications about depression increases the risk level of depression of the old age people. Social isolation is one of the major problems of the elderly. Loss of important relationships leads to the depression state of the mind. That create lots of issues among mental health of these people. Depression in older people is associated towards the increase the level of death and disability. Another risk factor is suicidal attitude but, in the level of severe case of the depression.

Old age is linked with lack of strength, loneliness, inability to feel pleasure, lack of pessimistic nature. The elderly are seen as a social burden and are placed in old age homes. Depression is a potential public health problem of the elderly. Prevalence of depression among elderly was significantly more with increased age. It is a common mental disorder with depressed mood, loss of interest, feeling guilt, loss of appetite and poor concentration. Moreover, depression often comes with symptoms of anxiety. While the global burden of depression poses public health challenge, both at the social and economic level.

Depressive disorders are the most common illness found in old ages and also mood disturbance characterised by certain feelings of sadness lacking family support, physical illness, loss of activities and pessimistic thoughts. It is a medical problem seen among geriatric people which is sometimes a unrecognised public
problem. An older adult may have lack of his/her emotional imbalance, hearing problems and other physical changes. These give rise to negative emotions among them that leads to depressive conditions of geriatric. It is often looked as normal response to ageing of life. But, proper medical therapies are required to cure this problem. Old people are often considered as a burden and are forced to leave their home which in turn affects their mental stability and leads to suicidal thoughts.

II. REVIEW OF LITERATURE

- Depression doesn’t make a successful life and also dropping many activities, feeling empty or bored, helplessness, hopelessness. Yesavage et al (1983)
- The positive affect of the religious coping, it make better stress relief on elderly. The study revealed stress and religious coping capacity make positive form. Pargament, smith and Koeing (1996)
- Elderly people are become depressive symptoms and they maintain stressfull life and that create major health issues among them. Heath (1999)
- Decreasing strength is the general physical change in the elderly. The sociologic issues of ageing are concerned with work, retirement, social security, health care and the response to getting old age is related to life long habits, diet and exercise patterns. Old aged often becomes anxious if they live alone, lacking family support, which may lead to depression. (Ann Z Swimmer, 2002)
- States that we can minimize depression in elderly by regular and periodic check up of physical health proper planning of retirement, low cost health insurance schemes, encouragement of traditional values and joint family system and advise to engage old people in religious activities and reading habits. S.Nambi (2002)
- States that depression is a common that it is some times difficult to identify risk factors. According to a study in 1993 the major risk factors include prior episode of depression, family history of depressive disorder lack of social support, stressful life event etc. Depression can be triggered or aggravated by personal and interpersonal events, hormonal changes and can even be triggered by lack of sunlight. M.A Boyd (2002)
- Karen Saucer (2003) Ageing is inevitable. The individual gradually becomes dependent physically, functionally, socially and economically. Elders usually exhibit multiple health problems with complex interactions. The most common chronic conditions affecting older adults are cancer, diabetics, cardio vascular disease and psychiatric disorders, most commonly depression and dementia.
- Conducted a survey of elders in the old age homes in Pondicherry to find out problem of the aged reveals that majority of the aged suffer from loss of memory and no sleep. Psychological maximum number of the aged feels isolated, frustrated.
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Depression is the most common disturbance of mood experienced by elderly. It is a pathological mood disturbance characterized by feelings, attitudes and beliefs the person has about self and his environment, such as pessimism, hopelessness and helplessness. (Bimala Kapoor, 2005)

- Stark Stein S.E. (2005) Stated that the construct of minor and major depression among seniors in long term residential care and found that twenty six percent of the patients had major depression, twenty six percent had mild depression and 48% were not depressed.
- Taha et al. (2005) States that depression create independent risk factor in male gender.
- Potter and Perry (2005) States that ageing is a life spanning process of growth and development from birth to death. The ageing process occurs in every living species, as also in human beings by graying of hair, wrinkling of skin, aches and pains in joints and also weakening of eye sight. The way that older adults adjust to the changes of ageing depends on the individual.
- Ponnuswami (2005) states that the elderly have no other option but to live in old age homes, often face loneliness, alienation and depression. In addition to losing most of their worldly possessions and social support, they also lose their privacy and their sense of self-worth. They need others to meet their emotional and recreational needs. This motivated the investigator to conduct study to assess the level of depression among the elderly who are admitted in the old age home.
- Tata et al. (2005) Factors of the anxiety and depression among elderly at their own homes or old age homes. This study revealed the connection between anxiety and depression.
- Stordal et al. (2006) Conducted study of recurrent unipolar major depression and executive functions, concluded that there is little evidence that unipolar major depression is uniquely associated with executive dysfunctions.
- Androletti et al. (2006) Conducted a study on age differences in the relationship between anxiety and recall. The results shows that a negative relationship between cognitive-specific anxiety and memory, such that greater anxiety and memory, such that greater anxiety was related to poor recall, but this was so only for middle aged and other results suggest that managing anxiety may be a promising avenue for minimizing episodic memory problems in later life.
- C. Kockrow (2006) Depressive disorders are the most common affective illness found in old age. Depression is a mood disturbance characterized by exaggerated feelings to sadness despair, lowered self-esteem, loss of interest in former activities and pessimistic thoughts. The incidence of increased depression among the elderly in influenced by the variables of physical illness, functional disability and cognitive impairment.
- Suen and Dhar, (2006) Stated that the prevalence of depression, which is common in residential homes, is not associated with the social support from outside the home,
and the feelings of belonging towards the institution and other residents are more important than non-institutional support functions.

- Sherina M.S et al (2006) the prevalence of depression among elderly have depressive symptoms age, sex, functional disabilities, were all found to be significantly associated with depression.

- Roustalo et al. (2006) Study conducted on social contacts and their relationship to loneliness among aged people results declares that more than one third of the respondents 39.4 suffered from loneliness. Feeling of loneliness was not associated with the frequency of contacts with children and friends but rather with expectations and satisfaction of these contacts. The most powerful predictors of loneliness were living alone, depression, experienced poor understanding by the nearest and unfulfilled expectations of contacts with friends.


- Chowdhary and Rasania (2008) The elderly people contributes a high risk group. That developed major mental illness and finally it leads to the psychiatric disorders.


III. RESEARCH OBJECTIVES
1. To understand the level of depression among geriatric

IV. THEORETICAL & OPERATIONAL DEFINITIONS

THEORETICAL DEFINITIONS

i.) Depression: A serious medical condition in which a person feels very sad, hopeless, & unimportant and often is unable to live in a normal way.

ii.) Geriatric: The branch of medicine dealing with the diseases, debilities, and care of aged persons

iii.) Operational Definition

iv.) Depression: Refers loss of interest in pleasurable activities feeling of worthlessness & excessive guilt of elderly residing in selected old age homes.

v.) Geriatric: is a speciality that focuses on health care of elderly people. It aims to promote health by preventing & treating diseases and disabilities.

V. RESEARCH PROCEDURE

i.) Descriptive research method: main goal of the type of research is to describe the data and characteristics about what is studied. Mainly it collected through direct observation. It describes different aspects of phenomenon.

ii.) Universe of study: Elderly people in Sayeesam old age home, Changankulangara.
iii.) **Population:** The old age people age above 60.

iv.) **Inclusion criteria**
- People who give consent and co-operative.

v.) **Exclusive criteria**
- People who didn’t have mental illness.
- Old age people age below 60.

vi.) **Sampling:** Purposive sampling: It is a non-probability sample method and based on the characteristics of the population and also objective of the study that are connected in it.

vii.) **Tools for data collection:** Geriatric depression scale (Yesavage JA, Brink TL, Rose TL, et al. development and validation of a geriatric depression screening scale)

viii.) **Statistical method:** Statistical analysis of data is carried with the help of SPSS package

ix.) **Ethical consideration:** All information of the respondents will be confidential

### VI. DATA INTERPRETATION AND ANALYSIS

#### 6.1 Respondents Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
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</thead>
<tbody>
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<td>9</td>
<td>15.0</td>
<td>15.0</td>
<td>15.0</td>
</tr>
<tr>
<td>65-70</td>
<td>14</td>
<td>23.3</td>
<td>23.3</td>
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<td>70-75</td>
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<td>36.7</td>
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<tr>
<td>75-80</td>
<td>15</td>
<td>25.0</td>
<td>25.0</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100.0</td>
<td>100.0</td>
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</tr>
</tbody>
</table>

The age indicates that 36.7% of the respondents belong to the age of 70-75 and 25% belong to the age group of 75-80 and 23.3% belong to the age group of 65-70 and 15% belong to the age group of 60-65.

#### 6.2 Gender of the Respondents

![Figure 1: Respondents Gender](image)

Figure 1: Respondents Gender
The given chart shows that 61.7% of the respondents are females and 38.3% of the respondents are males.

6.3 Depression Level

![Levels of depression](image)

The levels of depression categories into three; mild, normal, and severe depression. The graph shows that large amount of respondents (90%) have mild depression. 8.3% have normal depression and severe depression stage identified in 1.7% among the respondents.

VII. FINDINGS & DISCUSSION

- Majority of the respondents are between the age group 60-80 and those people are lived under the old age homes.
- Depression is the most severe mental health problem in every age status.
- Physical health and mental health are directly involves with depression.
- The study reveals that one person has severe depression and 90% of respondents have the problem of mild depression.
- The major themes related to the causes of the depression were isolation, loneliness, feeling helplessness and hopelessness etc.
- Most of the inmates suffer from emotional imbalance, stress, lack of caring etc. At the time they have different types of physical health problems and they are cling to the supporting hands it’s a natural process.
- Certain mood changes related to physical disorders that are experienced by elderly people.
- The pathological mood disturbance generally by feelings, low self-esteem, hopelessness and helplessness, guilt feeling etc. are consider.
• Depression could be the result of higher burden of socio–economic conditions, stress like coping skills. The inequalities of socio–economic conditions leads to the depressive state. While low economic status increases the level of depression in elderly people.

• There will be more association between the levels of depression among elderly residing at old age homes.

• Majority of the respondent’s loss of interest in such institutions. There are losses their pleasurable activities, excessive guilt, feeling worthlessness those who are at old age homes.

• Respondents don’t have privacy settings in this condition.

• At the time of old age is like the attitude of a small child. That creates lot of family issues.

• Early time majority of the respondents are lives in a better living condition, and now days they suffer major problems in old age homes.

• Another problem is that adjustment issues lack of social interactions and communication between the inmates.

VIII. CONCLUSION

The study, “Prevalence of depression among geriatric” analysed the depression level of the old age people. This study shows that, Old age people may be at the risk for depression; majority of the respondents have mild depression and one have severe depression. The most common factors related to the depression, those who are living in the institutional setting. And also lacking of exercise and physical activities that leads to the problems of the depression among them. Mental health is an essential part of daily life. Most of the respondents suffer a lot of problems like isolation, lack of family support that leads to the problem of depression among them & maintaining good qualities of life that lead a healthy life style.

IX. SUGGESTION

• Maintaining exercise activities like yoga. Yoga promotes physical and mental fitness for the old age people. It creates great form of relaxation of physical and mental health.

• Promoting gardening in old age homes can help connect nature with those people. Vegetable gardening is also an ideal solution which is one of the healthiest activities for the elderly.

• Improve quality of their lives that’ll give them a feeling that they have a successful lifetime. This is essential at this age as it is the decline of time period; physically and mentally weak.

• Religious activities and leisure activities can make changes among them. Then promote these activities.
X. REFERENCES

- Ghosh A.B.- Psychiatry in India: Need to focus on geriatric psychiatry [presidential address]. Indian J Psychiatry. 48: 4-9, 2006.

TO CITE THIS PAPER