

Common Stress Factors Encountered By the Geriatric Population in the Malwa Region

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Abstract

Background: Earlier research has shown that geriatric population have encountered multiple socio-psychological issues such as stress, absence of family regard, social isolation, discrepancy of view with relatives. In order to study this, we carried out a research in the Malwa region from June to August 2018. Objective: To identify prevalent stressors encountered by geriatric population in the Malwa region.

Methods: It was a Cross-sectional study of observation. Subjects were chosen by simple random sampling technique to include in the study.

Result: Selected subjects were more stressed from psychosocial issues rather than any other issue. They suffer mostly from restriction of routine physical activity (78%), backache (66%) and joint disorders(54%), insomnia (88%), reduced social enthusiasm (88%), difficulty in concentrating(76%) and financial needs(50%)

Conclusion: It is established that attempts on the part of the authorities and non-governmental organization are strongly needed to promote basic income, medical services, social care, relaxation and other needs of the

elderly, which can go a long way toward minimizing the issues of the elderly.

Keywords: stressors, geriatric population, socio-psychological problems

Introduction

Old age is usually the biological age, a widespread concept and a question for all those who attain it regardless of their employment, ability or learning[1]. The worldwide share of elderly individuals (aged 60 or older) went up from 9.2% in 1990 to 11.7% in 2016 and will keep expanding as a share of the world's demography to 21.1% by 2050. According to the United Nation Population Division, India's population ages 60 and older is expected to raise dramatically over the next four decades, from 8% in 2010 to 19% in 2050. The percentage of the aged to the complete population in 2000 was 5.8% and is anticipated to achieve 15.0% by 2050. Recent patterns in aging proposed fresh problems for administration, communities and the elderly themselves[2]. India has nearly 11.8 percent of the nation's senior citizens and has come to the gray nation group. The shifts in demographic composition in developing nations over the past few centuries have made the elderly a

segment that is socially more noticeable[3]. It is the ancient period that physical, mental and psychological assistance is needed. The elderly have gone through the moment of creativity and thriving, assessing and reviewing their lives. In fact, an effort to assist them is an admiration of their previous accomplishments and tasks. Effective strategies for promoting reform in provider policies highlights going over and above traditional methods of continuing medical education to provide learner with actively involving instructional methods as well as process-changing measures such as efficient care leadership, execution toolkits, integrated notifications, and decision-making assist technologies[4].

Material and Methods

The study was carried out in Malwa region of Indore district from June 2018 to August 2018. The objective of the study was to find out common stress factors faced by elderly. The inclusion criteria were patients of age more than 60 yrs and those who are willing to participate in the study. In terms of physical and psychosocial stress experienced by the elderly, stress factors were verified. The layout of the research was a cross-sectional observational study. Including the study unit in the study, sample was taken by a simple random sampling technique and the study unit was chosen using lottery methods from the older population in the Malwa region. The research instrument consisted of a timetable prepared by the PSM Department. Initially, the timetable was evaluated on 10% of the population size; the lacune was addressed and fixed according to guide suggestions. The research was conducted over a period of two months in a single phase in the malwa region. Statistical analysis was carried out with Microsoft excel and descriptive statistics.

Results

Table-1: socio-demographic analysis of geriatric populatin.

Characteristics	Variables	No. Of elderly (%)
Sex	Male	70(35)
	Female	130(65)
Age	60-65	108(54)
	66-69	20(10)
	70-75	52(26)
	76-80	12(6)
	>80	8(4)
Marital status	Married	140(70)
	Unmarried	0
	Widow / Widower	60(30)
Religion	Hindu	128(64)
	Muslim	16(8)
	Buddhist	48(24)
	Others	8(4)
Education	Illiterate	80(40)
	Primary	42(21)
	Secondary	38(19)
	Higher secondary	26(13)
	Graduate	14(7)
Occupation	Unemployed	114(57)
	Labourer	56(28)
	Govt Pensioner	20(10)
	Others	10(5)

Table 1 shows that many of the study participants were women, 60-65 years old, married, religious Hindu, illiterate and unemployed.

Table-2: Detection of frequent stressors encountered by the elderly.

Sr. No.	Stressors	Rarely	Mostly
1	Physical stressors	128(64%)	72 (36%)
2	Psychosocial stressors	84(42%)	116 (58%)

Table 2 shows the proportion of people suffered from physical and psychosocial stress. The research shows that older people (58%) undergo psychological stress and 64% occasionally encounter physical stress.

Sr. No.	Physical stressors	Rarely	Mostly
1	Backache	68(34%)	132(66%)
2	Difficulty in chewing	112(56%)	88(44%)
3	Difficulty in breathing	184(92%)	16(8%)
4	Joint pain	92(46%)	108(54%)
5	Limitation of physical activity	44(22%)	156(78%)

Table-3: Evaluation of different components of geriatric physical stress variables.

Table 3 shows that most elderly people experience limited physical activity, backache and joint disorders in physical stress variables & they also suffer from chewing difficulties and breathing difficulties.

Table-4: Evaluation of different psychological and social stress factors elements.

S.No.	Psychosocial Stressors	Rarely	Mostly
1	Sleep disturbance	24(12%)	176(88%)
2	Poor concentration	48(24%)	152(76%)
3	Decrease in social life	24(12%)	176(88%)
4	Dependency on others	108(54%)	92(46%)
5	Financial dependency	100(50%)	100(50%)
6	Respect from children and grand children	144(72%)	56(28%)
7	Dependency of other family members on them	194(97%)	6(3%)

Table 4 shows that most elderly people suffer from psychosocial stress variables, decreased sleep, and disturbance in social life, bad concentration, and economic dependence. They also have issues such as dependence of any other family members on them, respect from kids and grand kids, and dependence on others.

Discussion

Nothing in this globe can remain static. This also applies to the human body. The aging process begins the moment we arrive into this world, biologically speaking. Regulatory activity begins to slow down with era and leads to enhanced disease vulnerability and decreased adaptability to ecological stresses and pressures. India is graying and around 80 million Indians will be over the age of 60 by the turn of the millennium. The span of life has grown from 32 years in 1947 to 54 years in 1980 and 62 years now. In the brief term, stress hormones provide energy and concentration, but excessive stress over too many years can disrupt the harmony of person's system. There have been several medical issues associated with surges of stress hormones, including cardiovascular diseases, hypertension, diabetes and an altered immune response. Geriatric age group individuals are already at greater risk for these medical conditions, hence managing stress becomes a vital step. Throughout three successive sessions, forty-one specialists from different types of housing, behavioral, healthcare, and protective service providers were analyzed. The agreement reached through

the Delphi method was used to define the discrepancies in the psychiatric services presently accessible to elderly citizens of Harris County and to define the service requirements of this population. Into the future, thereby providing direction for future service development [5]. The nervous system may gradually lose its ability to regulate hormone concentrations over time. As a consequence, elderly individuals who are concerned or distressed tend to generate greater quantities of stress hormones, and the alarm does not shut down as rapidly as possible. Overall, the rhythm of stress hormones could be particularly difficult on aging brains. As per the latest report from San Francisco University of California, additional cortisol may affect the hippocampus over the decades, a region of the brain that is critical to memory storage and recovery. Numerous researches have discovered that elevated cortisol falls in line with bad memory, so some "senior situations" can be ascribed to stress. Research conducted by N. Mehrotra et al on determination of issues in Geriatric population of Ludhiana City shows that individuals have faced various psychosocial troubles such as stress, decreased social enthusiasm, disrespect by relatives, social isolation, ideological differences [6]. Amongst the issues, stress and strain was faced by maximum (85.0%) no. of individuals, while absence of involvement in social gatherings was encountered by minimum i.e. 25 percent of the respondents. The other problems reported were lack of social enthusiasm (77.50%), disrespect by relatives (75.0%), aloneness (72.0%), ignorance (65.0%), agitation on tiny issues (61.25%) and ideological differences among relatives (47.50%). Bakshi et al. (2007) also indicated that older people feel mentally volatile, mainly women residing with families [7]. Our research also promotes the results that revealed that older people seem to be more stressed by psychosocial issues in comparison to physical

issues. They suffer mostly from restriction of physical activity (78%), backache (66%) and joint pain (54%), insomnia (88%), decline in personal life (88%), bad concentration (76%) and economic dependence (50%). Another research discovered a curvilinear connection among age and depression, which showed that more depressive symptoms were recorded by the youngest age groups and the older age group than by other age groups. A research by Trollor, et al discovered greater rates of affective illnesses and widespread anxiety disorder among females and reduced rates of addiction compared to males. Growing age was correlated with less probability of getting signs of any psychological disorder after exempting cognitive disorder. Older age with unmarried status were correlated with less likely affective illness signs. Those who have cognitive deficiency were more probable to have affective disorder-consistent symptoms [8]. Women are particularly prone to the effects of overloading stress hormones as they age, according to a research published in the journal *Psychoneuroendocrinology*. The research discovered that the effect of age on women's concentrations of cortisol is almost three times greater than that of men[9].

Conclusion

Having regard to the above observations, it can be stated that there is an immediate need for government measures to ensure basic income, health services, welfare services, stress relief and other needs of the senior citizens, which will go a fair way toward reducing the difficulties of the geriatric population.

In addition to this, NGOs can also come forward for the benefits of the old people. Unmanaged or misdiagnosed pain, emotional dysregulation about disease advancement, fear of dependency and burdening the relatives contribute to suicidal ideation with medical illness in geriatric population. The expected population development of

elderly people with psychiatric illnesses underlines the need for a policy to promote the comprehensive and efficient application of evidence-based psychiatric health service & practices.

Values and beliefs should be inculcated among young people so that they know older people's issues and feel responsible for their adequate care. In addition, anxiety about old age can influence many individuals who aren't yet old. Promoting and assisting the senior citizens can actually help individuals who aren't yet old. There is evidence that cognitive, behavioral, and psychoanalytic treatments are considerably better than placebo[10].

Establishing a positive attitude is one key — a Yale University study found that individuals who feel better for themselves as they grow older stay around seven and a half years longer. Many authors have stated that people with more positive attitudes can also better deal with stress and have a firmer willingness to live.

Exercise workout yoga, remains a known method for relaxation for individuals of all ages. Daily walks, bicycle rides or fitness classes can do more than maintaining a individual strong and autonomous; physical activity can also assist in blocking the impacts of ageing process on concentrations of cortisol.

To conclude, all that decreases undue stress will ultimately make the subsequent years more pleasant. Some individuals just need to quit attempting to do several stuff at once. Those around might want to attempt breathing exercises or other methods of stress relief.

Permission from Ethical Committee: Yes

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