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RESEARCH ARTICLE

A COMPARATIVE STUDY TO ASSESS THE LONELINESS AMONG ELDERLY MEN AND WOMEN IN SELECTED RESIDENTIAL AREAS OF DELHI WITH A VIEW TO DEVELOP AND DISSEMINATE AN INFORMATION BOOKLET ON COPING WITH LONELINESS.

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Abstract

Loneliness has long been identified as problem associated with old age and denotes a lack of quantity and quality of social contacts. It is a state in which one experiences a powerful feeling of emptiness and isolation. A comparative study to assess the loneliness was conducted on the elderly men and women of selected residential areas of Delhi. The objectives of the study were to (1) To assess loneliness among elderly men and women. (2) To compare loneliness between elderly men and women. (3) To assess the factors responsible for loneliness among elderly men and women. (4) To find out the relationship between loneliness and working status. (5) To develop and disseminate an information booklet on coping with loneliness among elderly. The conceptual framework of the present study is based on Discrepancy Model of Loneliness, a quantitative research approach was used for the study. A structured interview schedule and a recording sheet were prepared. The Reliability of tool was worked out by using Cronbach's alpha and was found to be 0.86. The study was conducted on 100 elderly subjects (50 men and 50 women) aged 60 years purposely selected from residential areas of Delhi. Purposive non probability sampling technique was adopted to select the elderly men and women from selected residential areas of Uttam Nagar, New Delhi from 7th October to 17th October 2014. The patients who met the study inclusion criteria were selected using convenient sampling techniques. Data gathered were analyzed and interpreted using both descriptive and inferential statistics. The study Results revealed that elderly men and women experienced loneliness in equal measure and most of them suffered from moderate loneliness. The most common factor responsible for loneliness among elderly men and women was children too busy in their jobs and loss of power and status in the family respectively. Also, the least common factor for loneliness among elderly men and women was personal choice to stay away / independently from children and grandchildren. Further, working status had a significant relationship with loneliness experienced by elderly men and women.

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Introduction:-

Loneliness is the unpleasant feeling of emptiness or desolation that can creep in and cause suffering to people at any age. But it can be especially debilitating to older adults and may predict serious health problems and sometimes even death [1,2]. It is important that one must not underestimate the serious consequences of loneliness among elderly. We can cure physical diseases with medicine, but the only cure for loneliness, despair, and hopelessness is love.

According to World Health Organization (WHO) statistics, older people are the fastest-growing age group worldwide. By 2050, two billion people – or nearly one out of every four people – will be older than 60 years. As people age, they are more likely to have mobility difficulties and chronic conditions such as cancer, stroke and dementia. They are also vulnerable to depression, as many face loneliness and poverty. Mental illness, low morale, poor rehabilitation and admission to residential care have all been found to be correlated with either social isolation or loneliness or both [3-6].

Loneliness may lead to serious health-related consequences. It is one of the 3 main factors leading to depression and an important cause of suicide and suicide attempts [7-9]. Depression is a problem that often accompanies loneliness. In many cases, depressive symptoms such as withdrawal, anxiety, lack of motivation and sadness mimic and mask the symptoms of loneliness. BBC news pronounced loneliness as a "hidden killer" of elderly. Till date loneliness is being treated as a symptom of mental health problems; however, for elderly (aged 60 years and above), loneliness has become a disease in itself [10].

National Sample Survey Organization (NSSO) of India on the condition of aged in 2004 indicated that 1.23 million men and 3.68 million women were living alone and faced loneliness [11,12]. Another Indian statistics revealed that about 2-3% of elderly men lived alone while another 3% lived with other relations and non-relations and among elderly females, 7-8% lived alone and another 6-7% reported to live with other relations or non-relation. This number is increasing day by day. [13].

The statistic revealed that women are more likely than men to feel lonely sometimes (38%, compared with 30%). A greater number of women (47%) than men (36%) have felt depressed because they feel alone and have sought help feeling lonely (13% women, compared to 10% men) [14]. One study found that loneliness, or subjective feeling of unhappiness, were not related to how many individuals one has in his or her network, but rather to the quality of the relationships one has with others [15].

Ageing population require a wide range of preventive, promotive, curative and rehabilitative care. The care of old requires just as much skill, tact, ingenuity and patience as the care of children and perhaps more because one must keep in mind that old people cannot be treated like children. A significant role of nurse in geriatric nursing care areas is genuine affection, gentleness, sympathy, providing support to utilize potentialities and maximising quality of life in the elderly along with her generalist role in community setting [16-18].

Need of the Study:-

The problems of the aged have not been analysed and understood properly, which is absolutely necessary for developing coping strategies and policies for the welfare of the aged. Senior citizens invariably have several health related problems and their cumulative effect often aggravates their emotional and mental problems. Today most health practitioners have acknowledged that the arbitrary grouping of loneliness with other psychosocial phenomena is not conceptually correct. Loneliness is one outstanding human condition which health care providers need to be trained to think of as a precursor of mental illness [19- 24]. The foregoing review of literature depicts a clear picture of psychosocial problems of elderly and their inability to cope with those problems without assistance. It was seen that more attention was given to their physical health and most of the times their psychosocial health was ignored. Also there are very few nursing researches done on the loneliness among elderly, even though many researches have been conducted on the psychosocial aspect of health of the elderly. Hence, this study will assess loneliness among elderly men and women and its association with their working status.

Statement of the Problem:-

“A comparative study to assess the loneliness among elderly men and women in selected residential areas of Delhi with a view to develop and disseminate an information booklet on coping with loneliness”.

Objectives of the Study:-

1. To assess loneliness among elderly men and women.
2. To compare loneliness between elderly men and women.
3. To assess the factors responsible for loneliness among elderly men and women.
4. To find out the relationship between loneliness and selected variable.
5. To develop and disseminate an information booklet on coping with loneliness among elderly.

Research Methodology:-

Research approach: Quantitative (non- experimental) research approach

Research design: Descriptive comparative survey design

Setting of the study: Residential areas of Uttam Nagar Constituency, New Delhi- 110059.

Sampling technique: Purposive non probability sampling technique

Sampling size: 100 elderly subjects (50 elderly men and 50 elderly women)

Inclusion Criteria:-

The study sample included elderly men and women who-

- were in the age group of 60 years and above residing in selected residential areas of Delhi.
- were willing to participate in the study and were available at the time of data collection.
- were living with their spouse and/or family.
- were mentally and physically in a condition to answer the questions of structured questionnaire used for data collection.

Description of Tool:-

The study aimed at identifying the loneliness among elderly men and women as reported by them. A structured interview schedule and recording sheet were used for data collection in the study. The tool developed for this purpose had following sections:

Section I: Demographic Profile It consisted of 8 questions related to demographic data of the subjects, that is, age, gender, educational status, religion, type of family, socio-economic status, working status and number of friends.

Section II: Factors Responsible for Loneliness It consisted of 15 items related to factors responsible for loneliness.

Section III: Rating Scale to Assess Loneliness among Elderly Men and Women There were 54 statements in all, of which 23 statements were positive and 31 statements were negative. The responses to these items were marked on a 5-point Likert scale, that is "never", "rarely", "sometimes", "most of the times" and "always".

Out of 54 items, 31 were negative statements and were scored as given above. 23 items were positive statements for which reverse scoring was done. The possible range of scores was from 54-270 and a higher score on the scale indicated loneliness [25-28].

Procedure of Data Collection:-

Formal administrative approval was obtained from the concerned authority to conduct final study. The final study was conducted at Uttam Nagar area, Delhi, from 7th October to 17th October 2014. The elderly (50 men and 50 women) who met the inclusion criteria were selected using purposive sampling technique. The purpose of the study was explained to the participants. After obtaining their willingness to participate in the study the data were collected from the sample subjects using structured questionnaire. The average time taken to administer the tool was 15 to 20 minutes. An information booklet based on coping with loneliness was developed in order to educate the elderly about different ways and means to cope with loneliness [29-33].

Data Analysis:-

Descriptive and inferential statistics for data analysis are as follows:

- Frequency and percentage to describe the demographic characteristics of the elderly men and women.
- Mean, median and standard deviation of the loneliness scores of the elderly men and women.
- Frequency and percentage of elderly men and women by severity of loneliness felt by them. Unpaired t- test values to compare the loneliness scores of elderly men and women.
- Frequency and percentage distribution to describe the factors responsible for loneliness among elderly men and women.
- Chi-square values to determine the relationship between the loneliness and selected variable (working status).

Major Findings:-**The Findings related to the Demographic Profile of the Sample Subjects**

- 23 (46%) elderly men and 25 (50%) elderly female were within the age group of 60-64 year, 12 (24%) men and 15(30%) women elderly were from 65-69 year old; 10 (20%) elderly men and 7 (14%) elderly women were from 70-74 year old group and 5 (10%) elderly men and 3 (6%) elderly women belonged to 75years and above age group.
- Out of 100 subjects, 50 (50%) samples were elderly men and an equal number, that is, 50 (50%) were elderly women.
- The educational status of the samples revealed that 2 (4%) elderly men and 4 (8%) elderly women had primary education, 12 (24%) elderly men and 14 (28%) elderly women had middle school education status, 16 (32%) elderly men and 12 (24%) elderly women had secondary education, 10 (20%) elderly men and 4 (8%) elderly women had completed senior secondary education and 8 (16%) elderly men and 11 (22%) elderly women were graduates and above. 2 (4%)elderly men and 5 (10%) elderly women had professional educational background.
- The data revealed that 80% elderly men and 78% elderly women were from Hindu religion, followed by 7(14%) men and 5(10%) women who were Muslim, 1(2%) elderly man and 5(10%) elderly women were from Sikh religion and only 2(4%) elderly men and 1(2%) elderly woman were from Buddhist community.
- Regarding the family type of elderly, a little over half of the elderly men 26(52%) were from nuclear family, while 28(56%) elderly women belonged to joint family.
- The data also showed that 11(22%) elderly men and 9(18%) elderly women had no friends, 12(24%) elderly men and 16(32 %) elderly women had only one friend. 20(40%) elderly men had few friends while 15(30%) elderly women had few friends and 7(14%) elderly men and 6(12%) elderly women had many friends.
- Further analysis of the demographic data revealed that 21(42%) elderly men and 20(40%) elderly women were working, while 29(58%) elderly men and 30(60%) elderly women were not working.

The Findings Related to Factors Responsible for Loneliness among Elderly Men and Women**Table 1:-**Frequency and Percentage Distribution of the Study Subjects by the Factors Responsible for Loneliness Among Elderly Men and Women.

$n_1+n_2=100$			
S. NO	FACTORS RESPONSIBLE FOR LONELINESS AMONG ELDERLY MEN AND WOMEN	MEN FREQUENCY[n_1] (%)	WOMEN FREQUENCY[n_2] (%)
1	Children living in same house but indifferent (not giving time and attention).	34(68%)	30(60%)
2	Indifferent or callous or uncaring attitude of spouse.	11(22%)	17(34%)
3	Children too busy in their jobs.	47(94%)	41(82%)
4	Retirement from job.	14(28%)	05(10%)
5	Social restrictions as a result of illness and disability.	11(22%)	15(30%)
6	Illness of spouse.	08(16%)	08(16%)
7	Death of siblings/ friends/ close relatives.	13(26%)	11(22%)
8	Social disengagement after leaving familiar neighbourhood.	07(14%)	09(18%)
9	Dissatisfaction with family and social relationships.	18(36%)	15(30%)
10	Lack of close family ties.	24(48%)	21(42%)
11	Lack of close friends.	14(28%)	12(24)
12	Reduced connection with their culture of origin.	26(52%)	11(22%)
13	Dissatisfaction with available relationships.	23(46%)	31(62%)
14	Loss of power and status in family.	42(84%)	48(96%)
15	Personal choice to stay away / independently from children and grandchildren.	06(12%)	02(4%)

The Findings Related To Loneliness Faced by the Elderly Men and Women

- The data indicated that the mean scores of loneliness faced by elderly men and women were 154.1 and 161 respectively.
- The data also revealed that the calculated t- value to find the significance of difference between the two means, was calculated as 0.98 at 98 degree of freedom. On referring the calculated t- value to the tabulated t- value at 98 degree of freedom, at the 0.05 level of significance, it was found that tabulated t- value(1.98) was more than calculated t- value(0.98). This indicated that the elderly men and women experienced loneliness in equal measure and no statistically significant difference between the loneliness faced by elderly men and women was found.

The Findings Related to the Frequency and Percentage Distribution of the Elderly Men and Women by the Severity of Loneliness Faced by them

- The data indicated that 33 (66%) elderly men had moderate loneliness, 08 (16%) faced mild loneliness and 09 (18%) elderly men had severe loneliness. While, 33 (66%) elderly women had moderate loneliness, 09 (18%) faced mild loneliness and 08 (16%) elderly women had severe loneliness.

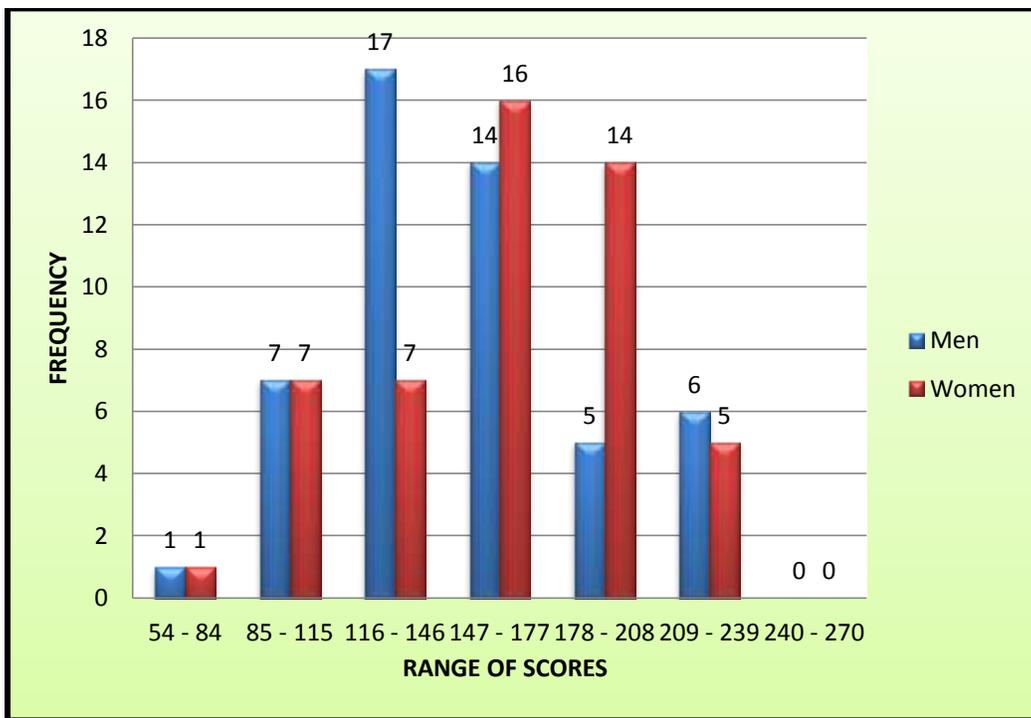


Figure 1:- A Bar diagram showing the frequency distribution of loneliness scores of elderly men and women

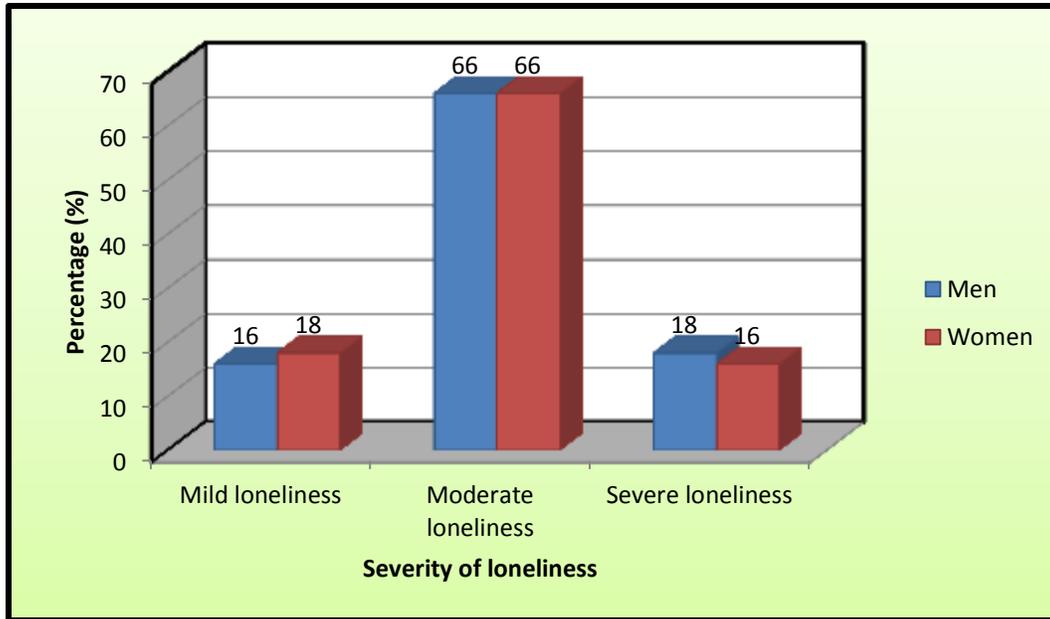


Figure 2:- Bar diagram depicting the frequency percentage distribution of the elderly men and women by the severity of loneliness faced by them.

The Findings Related to the Relationship between Loneliness Faced by Elderly and Selected Variable

The obtained chi-square values to establish the relationship between the loneliness faced by elderly men and women and their working status was found to be significant at 0.05 level of significance. It revealed that there was a significant relationship between the loneliness faced by elderly men and women and their working status.

Table 2:-Relationship between Loneliness Faced by the Elderly Men and their Working Status.

n₁=50

Category	Below mean loneliness scores	At or above mean loneliness scores	Chi – square value (χ ²)
Working elderly men	16	05	9.93*
Not working elderly men	09	20	

χ² (1)= 3.841, * Significant at 0.05 level of significance.

Table 3:-Relationship between Loneliness Faced by the Elderly Women and their Working status.

n₂=50

Category	Below mean loneliness scores	At or above mean loneliness scores	Chi – square value (χ ²)
Working elderly women	14	06	4.33*
Not working elderly women	12	18	

χ² (1) = 3.841, * Significant at 0.05 level.

Conclusions Drawn From The Study:-

The major conclusions drawn from the findings of the study have been presented below:

- 33 (66%) elderly men and an equal number, that is, 33 (66%) elderly women had experienced moderate loneliness. The elderly men and women experienced loneliness in equal measures as no statistically significant difference between the loneliness faced by elderly men and women was found [34-38].
- The commonest factors responsible for loneliness among elderly men and women were children too busy in their jobs, loss of power and status in the family and the least common factors responsible for loneliness among elderly men were social disengagement after leaving familiar neighbourhood and personal choice to stay away / independently from children and grandchildren were found among , while for elderly women the least common factors for loneliness were: illness of spouse and personal choice to stay away / independently from children

and grandchildren. The study revealed statistically significant relationship between the loneliness faced by elderly men and women and their working status [39-41].

Discussion:-

The prevalence of loneliness in the aged population (above 60 years) varies among different study results and is dependent on the definition and the intensity of the feeling. The present study highlighted that loneliness is common problem among older people, as all the participants felt lonely. Also, the study findings revealed that the severity 33 (66%) elderly men and an equal number, that is, 33 (66%) elderly women had moderate loneliness, 8 (16%) elderly men and 9 (18%) elderly women faced mild loneliness, and 9 (18%) elderly men and 8 (16%) elderly women had severe loneliness. Gender differences are important to understand because there are differences in the types of social activities men and women participate in and the barriers they experience to greater participation. The results in the present study revealed that gender wise there was no significant difference in the elderly persons with respect to loneliness i.e., both the elderly men and women experienced feelings of loneliness in equal measure.

The present study also looked at the factors responsible for loneliness among elderly men and women. The commonest factors responsible were children living in the same house but indifferent, children too busy in their jobs, and loss of power and status in the family. Study also indicated that there are some factors for loneliness in men and women differently. For male loneliness, factors were reduced connection with their culture of origin, lack of close family ties and dissatisfaction with available relationships, while other factor for female loneliness were lack of close family ties. The present study found a significant relationship between the demographic variable namely working status and loneliness faced by elderly men and women.

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