

Journal Homepage: - www.journalijar.com

# INTERNATIONAL JOURNAL OF ADVANCED RESEARCH (IJAR)

INTERNATIONAL ARCENAL OF ABHANCES RESEASCH SLAR STANDARD CONTRACTOR OF THE ABHANCE RESEASCH SLAR STANDARD CONTRACTOR OF THE ABHANCE STANDARD CONTR

**Article DOI:** 10.21474/IJAR01/18123 **DOI URL:** http://dx.doi.org/10.21474/IJAR01/18123

#### RESEARCH ARTICLE

# A COMPARATIVE STUDY TO ASSESS THE LEVEL OF DEPRESSION AMONG THE ELDERLY LIVING IN OLD AGE HOMES AND COMMUNITY, PUDUCHERRY

.....

Mrs. R. Kowsalya<sup>1</sup> and Mrs. K. Nithiya<sup>2</sup>

- 1. M.Sc., Nursing.
- 2. Assistant Professor, Sri Manakula Vinayagar Nursing College, Puducherry-605107.

# Manuscript Info

Manuscript History

Received: 06 November 2023 Final Accepted: 10 December 2023

Published: January 2024

# Abstract

Depression is a state of mental illness. It is characterized by deep, long lasting feelings of sadness or despair. Depression can change an individual's thinking/feelings and also affects his/her social behaviour and sense of physical well-being. It can affect people of any age group, including young children and teens. It can run in families and usually starts between the ages of 15 and 30 years. Women and elderly people are more commonly affected than men. There are several types of depression such as major depression it is a change in mood that lasts for weeks or months. It is one of the most severe types of depression. Dysthymia is a less severe form of depression but usually lasts for several years. Psychotic depression a severe form of depression associated with hallucinations and delusions .Seasonal depression, occurring only at certain time of the year usually winter, also known as winter blues'. Some of the common factors that may cause depression are genetics, trauma and high levels of stress, mental illnesses such as schizophrenia and substance abuse, postpartum depression (women may develop depression after the birth of the baby), serious medical conditions such as heart disease, cancer and HIV, use of certain medications, alcohol and drug abuse, individuals with low self-esteem, trauma and high levels of stress due to financial problems, breakup of a relationship or loss of a loved one. The signs and symptoms of depression include feeling of sadness and loneliness, loss of interest in activities once found enjoyable, feeling of hopelessness, worthlessness or excessive guilt, fatigue or loss of energy, sleeping too little or too much, loss of appetite, restlessness and being easily annoyed. Diagnose the depression based on the detailed history and sign and symptoms of the individual. Laboratory tests such as blood tests to screen for alcohol/drugs in blood. Psychological evaluation of the individual' s thoughts, feelings and behaviour patterns. The most common treatments of depression are Counselling & Psychotherapy, Medication, Electro convulsive therapy. Medications such as anti-depressants are given to help balance chemicals in the brain known as ' neuro transmitters'. Electroconvulsive therapy (ECT) is carried out in case the treatment with other therapies such as medications has failed. Preventive measures include regular exercise, healthy diet and stable relationships.

.....

**Statement Of The Problem:** A comparative study to assess the level of depression among the elderly living in old age homes and community, Puducherry' '.

**Objectives:** To assess the level of depression among the elderly. • To compare the level of depression among elderly residing in old age home and those living in community. • To associate the level of depression among elderly with their selected demographic variables.

Materials and Methods: The investigator obtained formal permission from Hospital authority and Institutional Ethical Committee of Sri Manakula Vinayagar Medical College and Hospital. The study was conducted at help age India old age home and thirubhuvanai community area, Puducherry. The period of data collection was four weeks .The study was conducted quantitative research approach ,descriptive research design and convenient sampling technique was used to select the sample .The sample size was 60 elderly depression patient, 30 were inmates of old age home and 30 were living in community. The investigator explained the procedure to the clients and assessed level of depression among elderly people's. After obtaining oral consent primarily the demographic data was obtained from the samples. Standardized Hamilton depression rating scale prepared by the investigator was used to assess the level of depression among the elderly living in old age homes and community. This scale consists of 17 items. The data variables were collected from the elderly residing at help age India and thirubhuvanai community area .This was continued for 15-20 minutes in a day. Sample is reassessed to analyze the intervention on depression. Data analysis was done using descriptive and statistical analysis.

**Result:** The findings shows that, the mean score of the level of depression among the elderly living in the old age homes was  $16.47 \pm 4.637$  and the community was  $12.73 \pm 6.341$ . The calculated independent 't' test value of t = -2.603 shows statistically significant difference between Comparison between the level of depression among the elderly living in old age homes and community respectively.

**Conclusion:** Out of 60 samples in Frequency and percentage wise distribution of level of depression among the elderly living in old age homes and community .In old age homes, Majority of the elderly10 (33.3%) had moderate level of depression, 9 (30%) had severe level of depression, 8 (26.7%) had mild level of depression, 2 (6.7%) had extremely severe level of depression and 1 (3.3%) had normal level.

Copy Right, IJAR, 2024,. All rights reserved.

# Introduction:-

"Nobledeedsandhotbathsarethebestcuresfordepression"

#### Dodiesmith.

Depression is a state of mental illness. It is characterized by deep, longlasting feelings of sadness or despair. individual's thinking/feelings Depression also can change an affectshis/hersocialbehaviourandsenseofphysicalwell-being. It can affect people of any age group, including young children agesof15and30years. It can run in families and usually starts between the Womenandelderlypeoplearemorecommonlyaffected thanmen.

There are several types of depression such as major depression it is a change in mood that lasts for weeks or months. It is one of the most severe types of depression. Dysthymia is a less severe form of depression but usually lasts for several years. Psychotic depression a

severeformofdepressionassociated with hallucinations and delusions. Seasonal depression, occurring only at certain time of the year usually winter, also known as 'winter blues'. Depression is amound disorder that involves a persistent feeling of sadness and loss of interest. It is different from the mood fluctuations that people regularly experience as a part of life.

Some of the common factors that may cause depression are genetics, trauma and high levelsof stress, mental illnesses such as schizophrenia and substance abuse, postpartum depression(women may develop depression after the birth of baby), serious medical conditions suchasheartdisease, cancerand HIV, use of certain medications, alcoholand drugabuse, individuals with low self-esteem, trauma and high levels of stress due to financial problems, breakupofarelationshiporlossofalovedone. The signs and symptoms of depression include feeling of sadness and loneliness, loss of interest in activities once found enjoyable, feeling ofhopelessness, worthlessness or excessive guilt, fatigue or loss of energy, sleeping too little ortoo much, loss of appetite, restlessness and being easily annoyed. Diagnose the depressionbased on the detailed history and sign and symptoms of the individual. Many a times theindividualisaskedaseriesofquestionstohelpscreen/checkfordepressionsymptoms. Specificexaminations include physic alexamination of the individual such as height and weight measurement. Examination of the vital signs such as blood pressure, he artrateandtemperature.

Laboratorytests suchas blood tests to screen foralcohol/drugs inblood.Psychologicalevaluationoftheindividual's thoughts, feelings and behaviour patterns.

The most common treatments of depression are Counselling & Psychotherapy, Medication, Electroconvulsive therapy. Counselling allows individuals to understand and accept the initialcause of depression. It can help address low selfesteem or relationship issues or persistentnegative thinking. Psychotherapy - For mild to moderate depression, psychotherapy may be the best treatment option. There are two main types of psychotherapy commonly used to treatdepression. Cognitive-behavioural therapy (CBT) helps change negative ways of thinking andbehaving. Interpersonal therapy (IPT) helps people understand and work through troubledpersonalrelationshipsthatmay causedepression.

Medications such as anti-depressants are given to help balance chemicals in the brain knownas 'neurotransmitters'. Electroconvulsive therapy (ECT) carried out in case treatmentwithothertherapiessuchasmedicationshasfailed.ECTisaprocedureduringwhichcontrolledamount of electricity is introduced into the brain in conjunction with anesthesia and musclerelaxant medications. It helps restore the balance of neurotransmitters causing to produce a mild generalized seizure (lasting for about 30 seconds). Depression can lead to some severe complications such a semination of the contraction of theotional, behavioural, healthandevenlegal/financial problems, relationship difficulties, socialisolation and even suicide. Preve ntivemeasuresincluderegular exercise, healthy diet and stable relationships. They are helpful in keeping stress low andtherebyreducethechancesof feelingdepressed again.

#### **Review Of Literature:-**

ViktorVoroset (2020)was conductedastudyon Untreated depressive symptomssignificantlyworsenqualityoflife inoldage andmayleadto the misdiagnosisofdementia.

A cross-sectional study, self-administered questionnaires and clinical screeningtools were used to assess Quality of life, depressive symptoms and cognitive functions of 60 olderpersons over the age of 65. In this study, the results were Males found to be depressed (53.8vs 40.4%) and cognitively declined (53.8 vs 48.9%) more frequently; and had higher scoreson the depression (6.85 vs 5.32) and lower on the Quality of life (47.38 vs 50.19) scales.

Depressedolder persons had lower cognitive levels (24.39 vs. 21.52) and their Quality of life was significantly poorer (53.97 vs. 43.85) than that of the non-depressed subjects. Depressive symptoms were detected in almost half of the older adults (43.9%), and the majority (80.77%) did not receiveantidepressant medication. The studyconcludedthat depressive cognitive and

symptoms found to be common among older people, but were not recognized and treated in most cases.

# **Statementoftheproblem:**

"Acomparativestudytoassessthelevelofdepressionamongtheelderlylivinginoldagehomesand community. Puducherry".

# **Objectives Ofthestudy:-**

- 1. Toassessthelevelofdepressionamongtheelderly.
- 2. Tocomparethelevelofdepressionamongelderlyresidinginoldagehomeandthoselivingincommunity.
- 3. To associate the level of depression among elderly with their selected demographic variables.

#### **Assumption:**

Depression patient may have lack of concentration and stress because of decrease Cognitive function.

#### **Materials and Methods:-**

This chapter describes the research methodology followed a comparative study to assess the level of depression among the elderly living in old age homes and community, Puducherry. It deals with methodology adopted for the study and include the research approach, research design, sampling techniques, sampling criteria, study variables, data collection procedure, selection of the tool, tools for data collection.

# **Section -A:**

This section consists of demographic variables such as age, sex, religion ,occupation, educationstatus, marital status, type of family , family income, duration of staying In old agehome, family history of medicalillness, Historyofmedicalillness.

#### **Section-B:**

ThissectionconsistsofstandardizedHamiltondepressionratingscale prepared by the investigator was used to assess the level of depressionamongtheelderlylivinginoldagehomesand community. This scale consists of 17 items. The data variables were collected from the elderly residing at help age India and Thirubhuvanaicommunity area. This was continued for 15-20 minutes in a day. Sample is reassessed to analyze the intervention on depression.

#### Hamiltondepressionscale[HDRS]:

TotalScore	Levelsofdepression	Levelsofdepression		
0-7	Normal			
8-13	Mild Depression			
14-18	Moderate depression			
19-22	SeveredepressionVery			
> 23	Severedepression			

#### Researchapproach:

Aquantitativeapproach was adoptedforthepresentstudy.

# Researchdesign:

Acrosssectionaldescriptiveresearchdesign was chosenforthispresentstudy.

### **Setting:**

The studywasconductedathelpageindiaoldagehome and Thirubhuvanaicommunityarea, Puducherry.

#### **Population:**

- 1. Population is the number of people who meet the criteria that theresearch wasestablishedtostudy.
- 2. Populationreferstoallelderly people's.

# Sample:

Sample of the study comprises of elderly depression patient at help age india old age home and Thirubhuvanai community area, Puducherry

# Samplesize:

The sample size consists of 60 elderly depression patient, 30 were in mates of help age india old age home and in Thirubhuvanai community area.

# Sampletechniques:

The convenients ampling techniques used for their present study.

#### **Criteria for sample selection:**

#### **Inclusioncriteria:**

- 1. Bothmaleand female.
- 2. Patientwhohavebeenlivinginoldagehome.
- 3. Patientwhoarewillingtoparticipateinthestudy.

#### **Exclusioncriteria:**

- 1. Patientwithdepressivebehaviour.
- 2. Elderlypeoplewhoareterminallyill.
- 3. Patientwhoarenotwilling to participatein thestudy.

# Result:-

The findings shows that, the mean score of the level of depression among the elderlyliving in the oldagehomes was  $16.47\pm4.637$  and the community was  $12.73\pm6.341$ .

The calculated independent 't' test value of t = -2.603 shows statistically significant difference between Comparison between the level of depression among the elderly living in old age homes and community respectively.

 $\label{lem:comparison} \textbf{Table 4.3:-} Comparison between the level of depression among the elderly living inold age homes and community. \\ \textbf{(N=60(30+30).}$ 

GROUP	MEA N	STANDARDDEVIAT ON	MEANDIFFE RENCE	't'VALUE (independenttte st)	df	'p'VA LUE
OLDAGEHOM ES	16.47	4.637				
COMMUNITY	12.73	6.341	-3.733	-2.603	5 8	012*S

<sup>\*-</sup>p<0.05significant

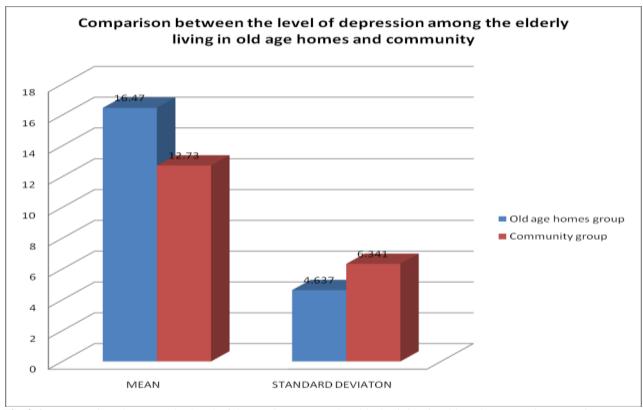


Fig 4.6:- Comparison between the level of depression among the elderly living in old agehomes and community.

#### **Conclusion:-**

Theaimofpresentstudywastoassessthelevelofdepressionamongtheelderlylivinginhelpage india old age home and Thirubhuvanai community area, Puducherry. The study wasconducted quantitativeresearchapproach, descriptiveresearch design and convenientsampling technique was used to select the sample .The sample size was 60 elderly depressionpatient, 30 were inmates of old age home and 30 were living incommunity. The investigatorexplained the procedure to the clients and assessed level of depression among elderly people's

The study was analyzed using descriptive statistics (frequency, mean, standard deviation)andstatistics(chisquaretest). The datawas analyzed based on the objectives of the study.

# Bibliography:-

#### Book:

- 1. **Basavanthappa BT**, "Psychiatry &Mental Health Nursing", 1st edition-2007, publishedbyJaypeepublishers.
- 2. **BasavanthappaBT**, "NursingResearch", 2ndedition, published by Jaypee
- 3. **Dr. Bimblakapoor**, "Text book of psychiatry Nursing, volume-II, 1st edition published byKumarpublishing House, NewDelhi
- 4. Kanan Yelikar, "Essentials of Researchmethods and Dissertation writing", 1 stedition, published by Jaypee
- Lalitha.K"MentalHealthandpsychiatricnursing(anIndianperspective), publishedbyVMGBook House, 1stedition-2007.
- 6. Lippincott, "Psychiatricnursingmadeincredible easy", 1 stedition, published by Wolters Kluwer Company.
- 7. Louise Rebracashives, "Basic concept of psychiatric Mental Health Nursing, 7th edition, published by wolterskluever.
- 8. **MarrinerTomey,** "NursingTheoristsandtheirworks",6thedition,publishedbyMosby
- 9. Mary C. Townsend, "Psychiatry Mental Health for Nursing," 6th edition, published by Jaypeepublication.
- 10. NamboodiriVMD"concisetextbookofpsychiatry",2ndedition,publishedbyElsevierpublication.
- 11. NormanL.Keltner, "PsychiatricNursing",5thedition,publishedbyMosbyElsevier.
- 12. Nirajahuja, "A short text book by of psychiatry Nursing" published by Jaypeepublication, NewDelhi.

- 13. Polit&Beck, "NursingResearchPrinciplesand Methods", 7thedition, published by Lippincot.
- 14. Rajeeragunath, "TextbookofNursingresearch", 1stedition, publishedbymastersbooksdistributors.
- 15. **Sreevanir**, "A guidetomentalhealthandpsychiatricnursing", 3rdedition, published by Jaypee publications-New Delhi.
- $16. \ \textbf{WatsonMckeena,} ``Nursing research, Designs and Methods", 1 stedition, published by Elsevier.$