

Health Status of the Elderly Living in the Old age Homes of Janaseva Foundation, Pune

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Abstract

There are various studies carried out throughout the world in the field of geriatrics and elderly. There are various governmental and non-governmental institutes that work on elderly health in India, Janaseva foundation is one of them. It is based in Pune Maharashtra which provides services to the needy elderly, street children etc. The purpose of the study is to assess the living condition and health status of the elderly residing at the old age home of Janaseva foundation. Different indicators such as the occupation of the elderly, their medical history, current health status, mental health was addressed. The study provides a broader understanding about the functioning of the old age homes and the quality of various services provided at the old age home.

Keywords: Health status, Elderly, Old Age Home, Janaseva Foundation, Mental Health, Chronic illness

Date of submission: 16-05-2024

Date of acceptance: 26-05-2024

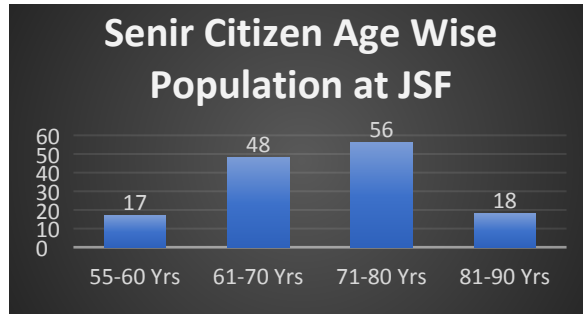
Introduction:

Foundation as a service NGO founded on 15th January 1988 under Public Charitable Trust, registered under Bombay Public Trust Act 1950 having Reg. No E/1193, Pune Dated 23/5/1988. It is also registered under Section 80 G, and has an FCRA certificate. Foundation is managed by a board of trustees and is accredited by the UN. The philosophy of the foundation is " **Service to Man is Service to God**" Foundation has been serving the poor and downtrodden, sick, elderly, disabled, destitute, poor girls and women, poor boys and girls from rural areas through its various projects.

The foundation is accredited by the United Nations and has been granted a special consultative status. The Foundation's main focus areas of activities are the Rehabilitation of Street Children, Welfare and care of Senior Citizens, Rural Development, and Doorstep Health Services and various welfare activities. The foundation is also working closely in collaboration with WHO, International Federation of aging, Common Age and various international organizations. Since the foundation's main focus remain a senior citizen care so my object to undertake "A Study of the Health Status of the Elderly Person Living in Old-age Homes of Janaseva Foundation, Pune" to assess the socioeconomic and health issue of senior citizens in rural context and also to suggest relevant intervention.

The study is based on personal interview to get the relevant information through the set of question I personally interact with the 152 senior citizens from diverse background and family history. During this study it was realized the prevalent disease are Diabetes mellitus, Hypertension, Anemia, COPD, Thyroid and Lipid Disorders, UTI, Prostatitis, BPH, Ureteric calculi, Urinary incontinence, Osteoarthritis, Rheumatoid arthritis, Osteoporosis of the spine, Cardiology: IHD, Neurology: Stroke, Polio, Alzheimer's Disease, Dementia, Psychiatric conditions like Schizophrenia, Mania, Kleptomania, Hypersexual disorder, Substance abuse: Smoking and Tobacco chewing etc.

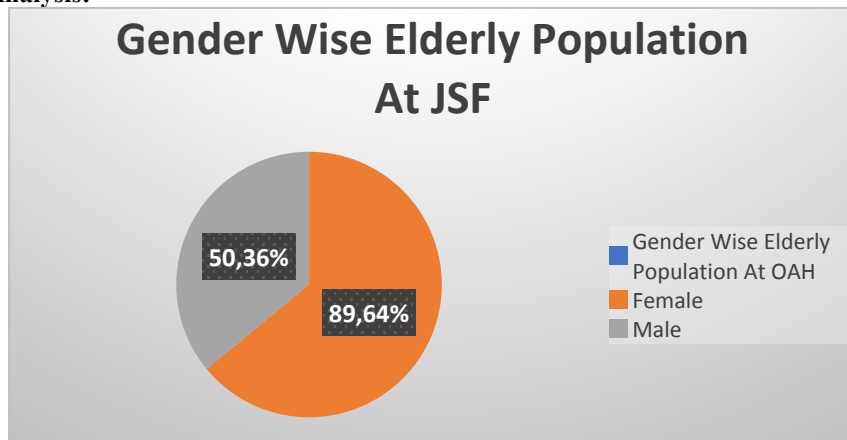
Age wise distribution of the participants



The data consists of counts of individuals within specific age ranges. Here is a breakdown of the age groups and their respective counts:

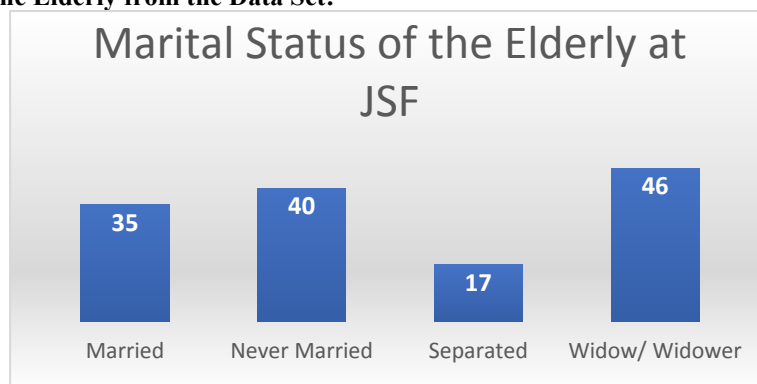
1. The majority of individuals fall within the age range of 71-80 years, constituting 63 out of 126 individuals, or approximately 40% of the total population.
2. Following closely, the age group of 61-70 years comprises 48 individuals, accounting for around 35% of the total population.
3. Age groups below 81-90 years old have relatively lower representation, with only 18 individuals (13%)
4. The oldest age group (55-60 years) constitutes 17 individuals, approximately 12% of the total population.

Gender Wise Analysis:



1. **Female Population:** The female population comprises the majority of individuals in the dataset of senior citizens, with 89 individuals, representing approximately 64% of the total population. This suggests a higher proportion of females within the studied population
2. **Male Population:** The male population consists of 50 individuals, accounting for around 36% of the total elderly population. While outnumbered by females, males still constitute a significant portion of the population

Marital Status of the Elderly from the Data Set:

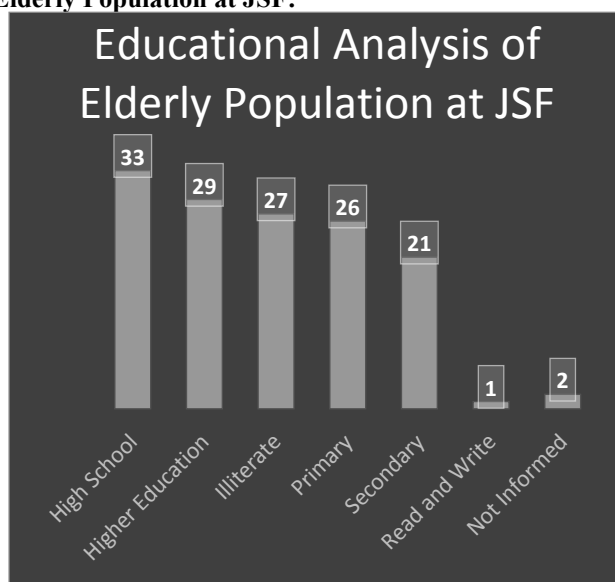


The Widow/Widower population consists of 46 individuals, accounting 33%, while Never Married, Married and Separated consists 40, 35 and 17 individuals respectively, accounting 29%, 26% and 12% of the total elderly population.

Religion & Category of the Elderly population at JSF Old Age Home:

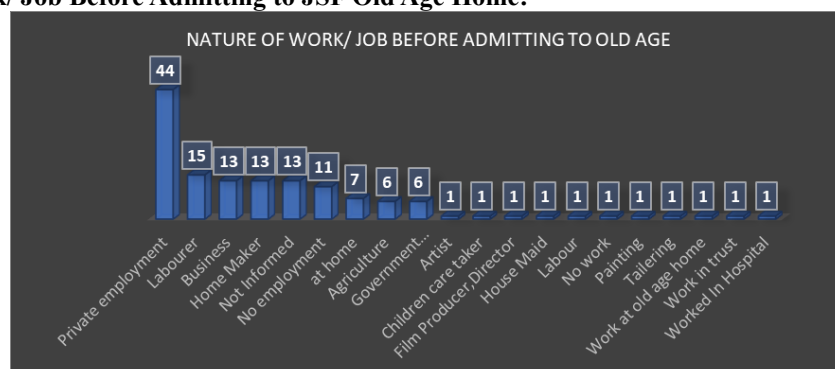
Religion & Category Analysis						
Caste/ Category	O.B.C.	Open Category	S.C.	S.T.	Blank	Total
Buddhist		1	2			3
Christian		4			1	5
Hindu	16	90	9	3	2	120
Jain		6				6
Muslim	2					2
Sikh		1			1	2
Not Informed					1	1

Educational Analysis of Elderly Population at JSF:



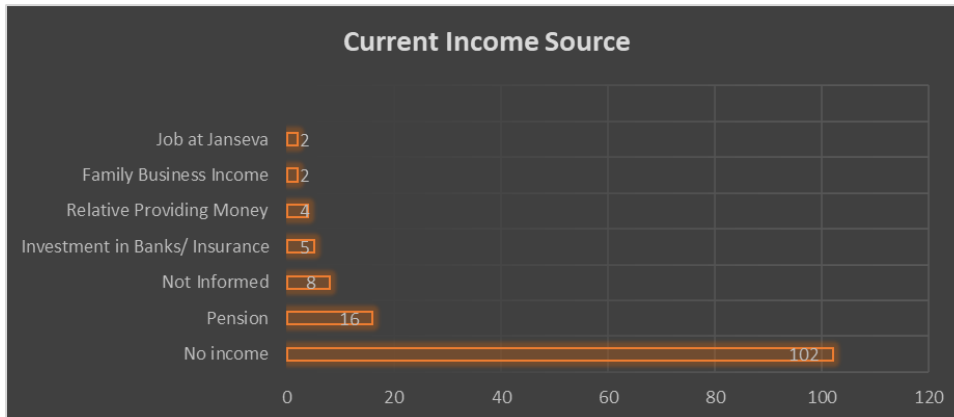
To get the understanding about the educational status of the elderly few questions were asked about the level of schools attended by the participants and it was observed that among all the participants 33 of them attended school up to high school, followed by 29 obtaining higher education, 27 of them reported to be illiterate while 26 received education till primary. There was one participant who could read and write without any formal education

Nature of Work/ Job Before Admitting to JSF Old Age Home:



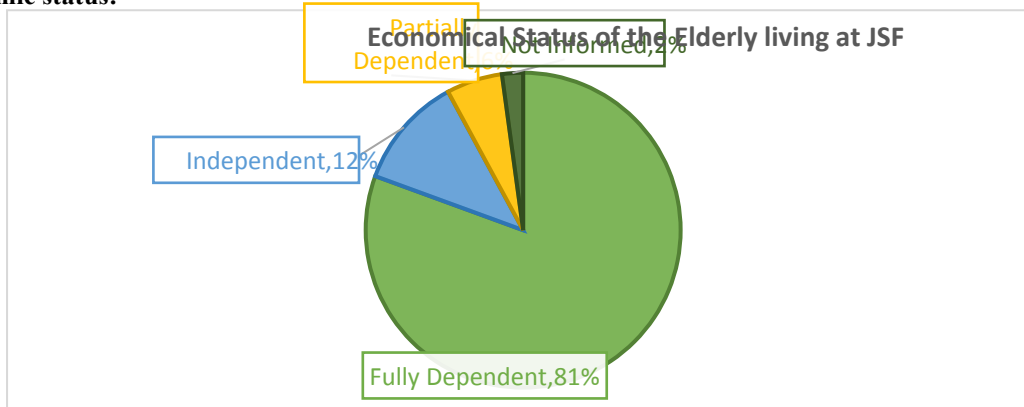
Few questions were asked about the job profession of the elderly before joining the Janaseva foundation. It was observed 44 participants were private employees, the proportion of the elderly into business, home makers, labour was nearly same. The other professions reported were artist, tailor, painter, medical staff and house help.

Current Source of Income of the Elderly living at JSF Old Age Home:



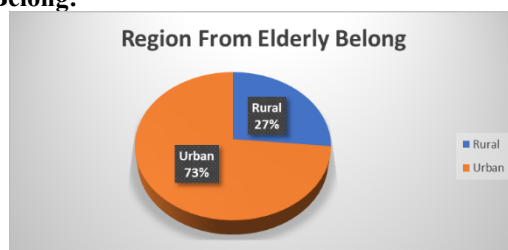
The majority of individuals (102 out of the total) have no active income source. This could indicate a variety of situations, such as unemployment, retirement without pension, or dependency on others which contributed 73.38%. 16 individuals rely on pensions as their primary income source, contributing 11.51. This suggests that they are retired and receiving regular payments from a pension fund, typically after years of service in a particular job or career. 8 individuals have not provided information about their income source. 5 individuals derive their income from investments in banks or insurance products. 4 individuals receive financial support from relatives. This could be in the form of allowances, gifts, or regular financial assistance from family members. 2 individuals are earning income from a family business. This suggests they are involved in the operations or management of a business owned by their family, and they receive income from its profits or activities. 2 individuals are employed at Janseva, presumably an organization or company. They earn income through their employment, indicating they are actively working in some capacity.

Economic status:



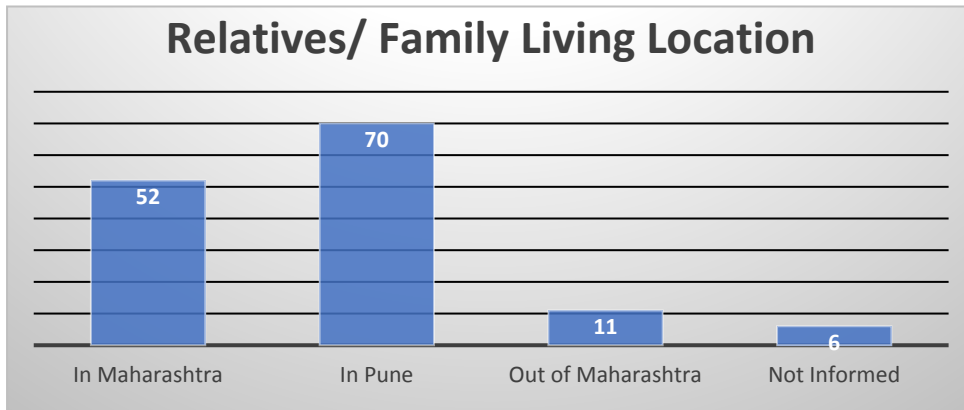
The Fully Dependant population consists of 112 individuals, accounting for around 81% of the total elderly population. While Independent & Partially Dependant consists 16 & 8 individuals respectively. Accounting for around 11% & 6% respectively. There are 2% of population who are not willing to share the information during the survey.

Region From Where Elderly Belong:



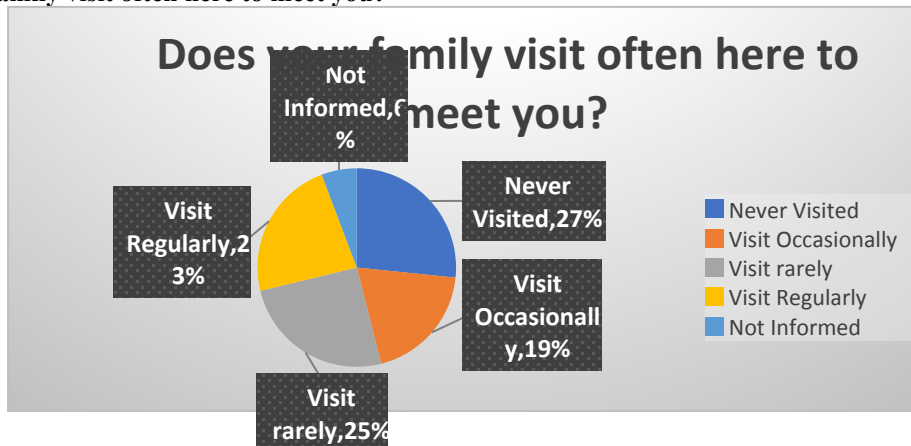
While the elderly were asked about the locality, they belonged it was observed that among the total population 73% belonged to the urban area while 27% belonged to the rural area.

Relative/ Family Members Location:



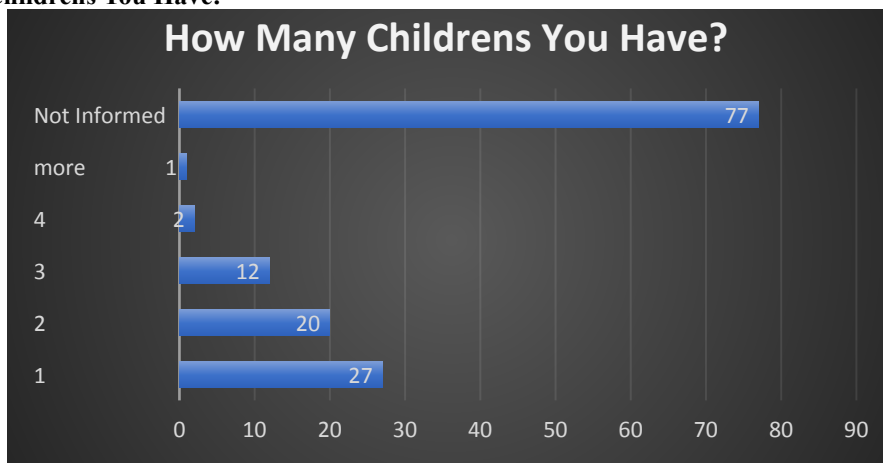
The participants were asked about the residence of the family members for which 52 reported to have relatives in Maharashtra, 70 reported to have family members in Pune, 11 reported to have relatives out of Maharashtra while 6 participants did not wish to answer

Does your family visit often here to meet you?



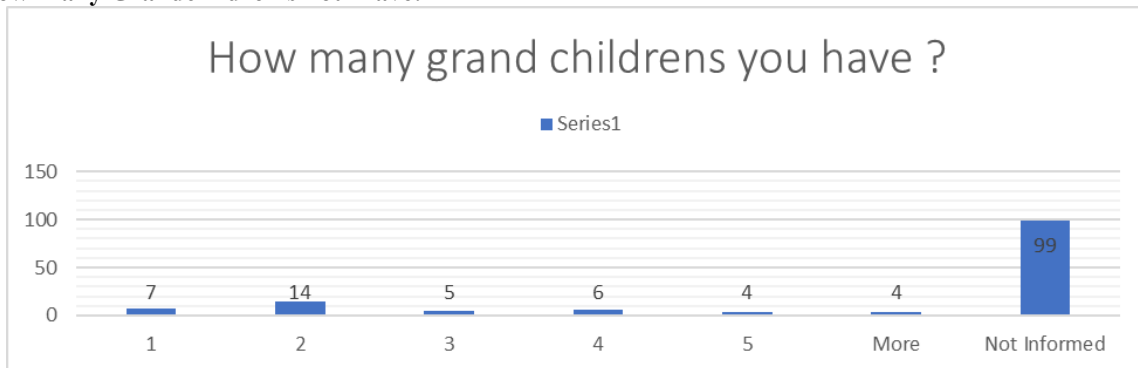
The majority of Elderly of 27% has informed that their relatives never visited them in the OAH. Following with the 25% population has informed their relatives visit the OAH rarely. 23% of the population informed that their relative visit the OAH on regular basis. 19% of Elderlies informed that their relatives are coming to meet them occasionally at OAH. 6% of the population were not willing to share the information.

How Many Childrens You Have:



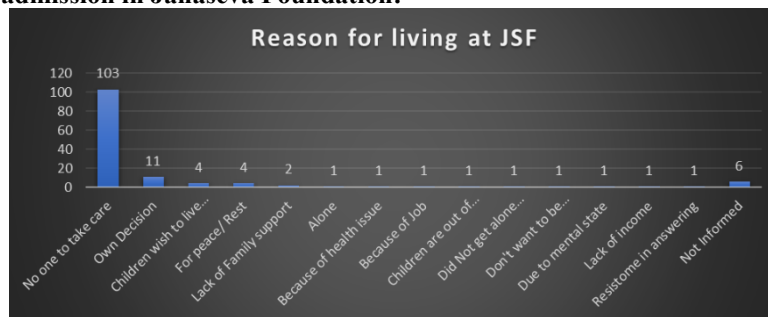
For getting a better understanding about the participants family members another question asked was about the number of children the elderly have for which over 77 participants did not respond to this question, total 27 participants reported to have 1 child. 20 reported to have 2 children, 12 participants reported to have 3 children while only 1 participants had more than 4 children.

How Many Grandchildren's You Have:



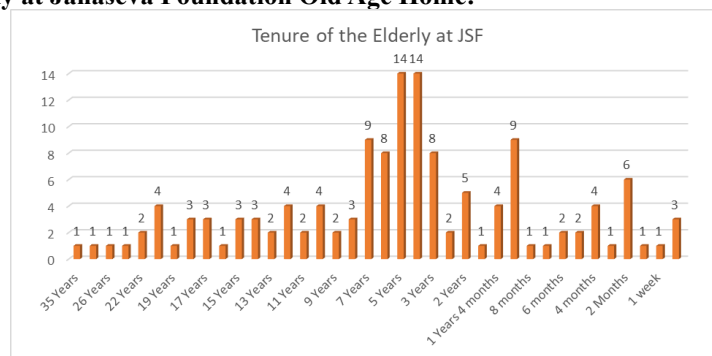
From the entire group total 14 participants reported to have 1 grandchild, 4 individuals mentioned about having 6 grandchildren, 3 elderly mentioned about having 5 children, individuals mentioned about having 4 grandchildren whereas only 1 elderly mentioned about having 7 grandchildren.

Reason for taking admission in Janaseva Foundation:



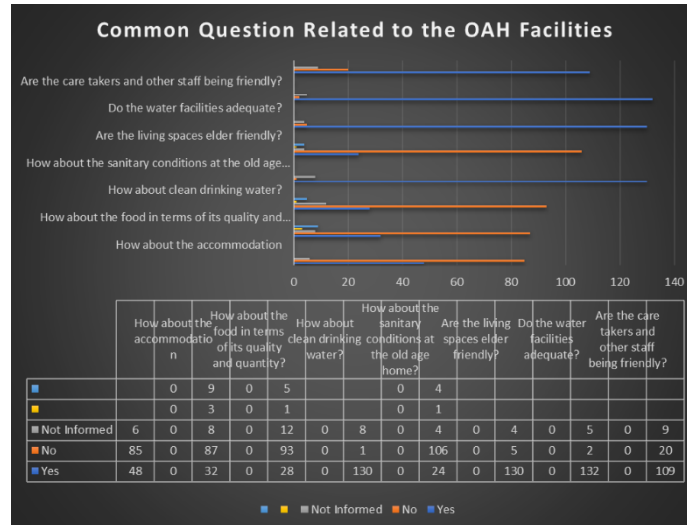
Total 103 members mentioned that there was nobody to take care of hence that was the reason for getting enrolled in the old age home, 4 members reported that their children wished to stay separately and 4 members mentioned about getting enrolled for peace while none of the participants mentioned that children could not bear the expenses of supporting their living. The few other reasons mentioned were due to health issues, no income source, lack of support due to medical condition, did not want to become a burden on the family and better services provided an Janaseva foundation.

Tenure Of the Elderly at Janaseva Foundation Old Age Home:



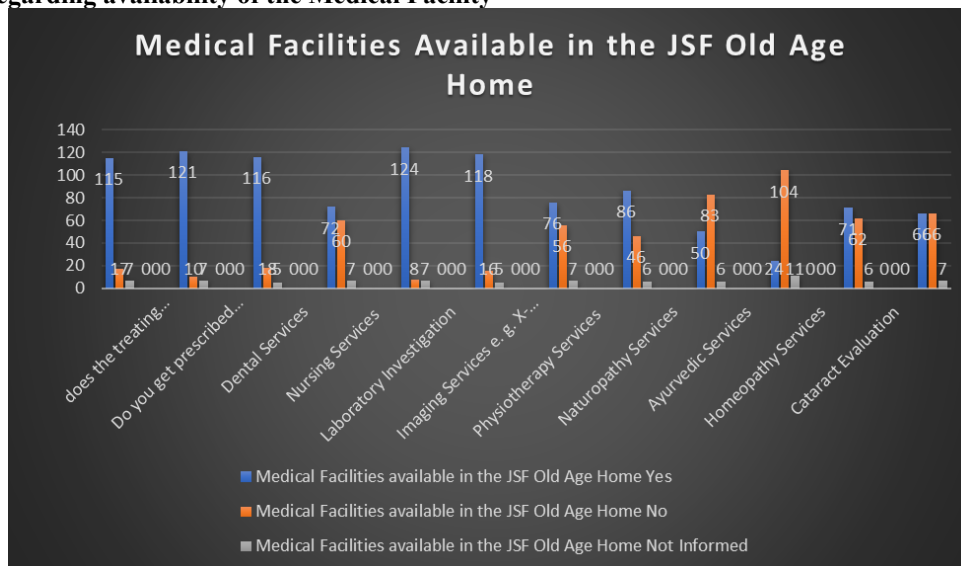
Information regarding the duration of enrolment was asked to the participants from which it is observed that 14 participants were enrolled in the old age home for around 5 years and 3 years each. Total 9 participants were enrolled for 7 years and 8 participants were enrolled for 5 years. Also, it was observed that 9 participants were enrolled before 8 months. These were the significant figures.

Participants response to the services provided at the Old Age Home



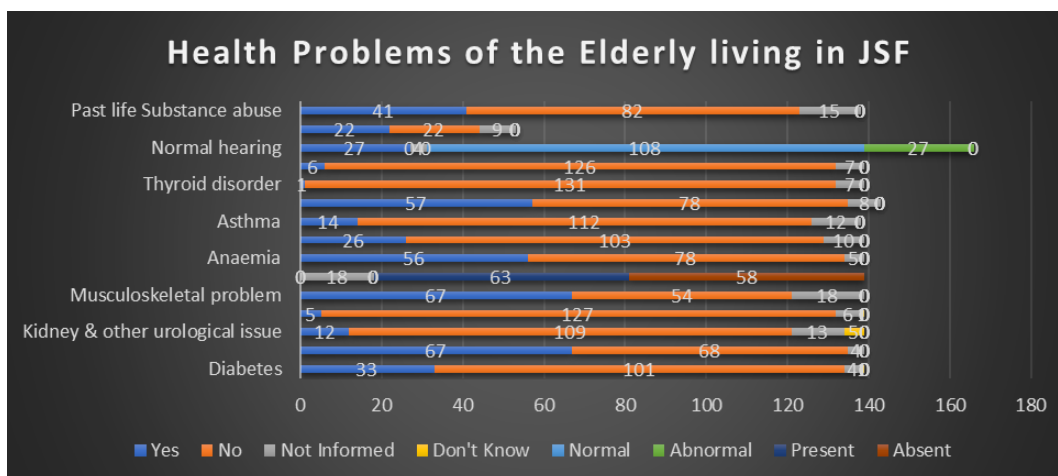
Information related to the participant’s opinion and views about the different services provided at the foundation was also captured. Varied responses were obtained. Maximum participants agreed that the services provided at Janseva foundation were good while only 4 members felt that the services provided were below average. All the participants agreed that the quality of the food provided is good and maximum members accepted they is a good water and sanitation service, elder friendly living space. The participants were asked about their opinion regarding the care taker staff for which 102 members said that the care takers are extremely friendly while 23 members said that the staff is friendly at some extent.

Survey Regarding availability of the Medical Facility



Various medical facilities are made available at the old age home. Maximum participants agreed that the services like medical prescription, dental services, nursing services, laboratory tests, physiotherapy service, cataract and naturopathy services are provided to them regularly. Availability of other services like Homeopathy and Ayurvedic services were reported by only few participants

Questionnaire Based Statistics of the Health Condition of Elderly living at Janaseva Foundation Old Age Home:



The physiological status of the participants was accessed to get a better understanding on the medical history and current health status of the participants. The table mentioned about is the representation of the type of health disorders assessed.

Alcohol And Other Toxicants Consumption History:

While the participants were asked about consumption of toxic substances 26 members were involved in consuming and the major substances reported were mishri (tobacco product), Tobacco, alcohol and smoking cigarettes.

The questioned about the history of thyroid only 1 participant suffered from thyroid and the duration reported was 2 years. Similarly, for lipid disorder total 6 members mentioned about suffering from lipid disorder. The participants were asked about the problems faced while hearing in which 108 members reported to have normal hearing and 27 mentioned about abnormal hearing and 22 members reported about vision impairment.

Total 14 members suffered from Asthma/COPD. When asked history few reported to suffer from childhood, from past six months. Also, there were responses where the members mentioned that the Asthma/COPD is cured due to proper treatment and medication. In regards to the infectious diseases like diarrhea, flu and cough the participants were asked about their past 15 days health status which stated that among all the participants 26 suffered from these infections.

The other parameter observed was the hematological information. Hemoglobin tests were conducted from which 56 participants were observed to be anemic as the hemoglobin levels were below the normal ranges. Among the total participants 33 members reported to have diabetes and a major population (101) members did not suffer from diabetes. While addressing the prevalence of hypertension it is seen that 67 members from hypertension and 54 did not suffer from hypertension. Only 5 members reported to suffer from cancer which was related to breast and uterine cancer. Other health problem addressed was kidney related problem in which 20 members were reported to have kidney related issues. Some of the issues reported were increased urinary frequency, urinary incontinence associated with BPH, difficulty in micturition due to swollen micturition and poor bladder control. The other issues mentioned were recurrent UTI, right kidney nephrectomy.

Musculoskeletal problems: These problems are observed among 9/10 individuals due to increased age. From this study group total 67 individuals suffered from musculoskeletal problems and most reported parts were foot, shoulder, hand and legs. The neurological conditions issues like hemiparesis, lower limb weakness, bilateral lower limbs and left leg deformity (polio) was reported. Few suffered from the neuropathic pains, sciatica and numbness in both the feet. Some faced difficulty in standing and walking.

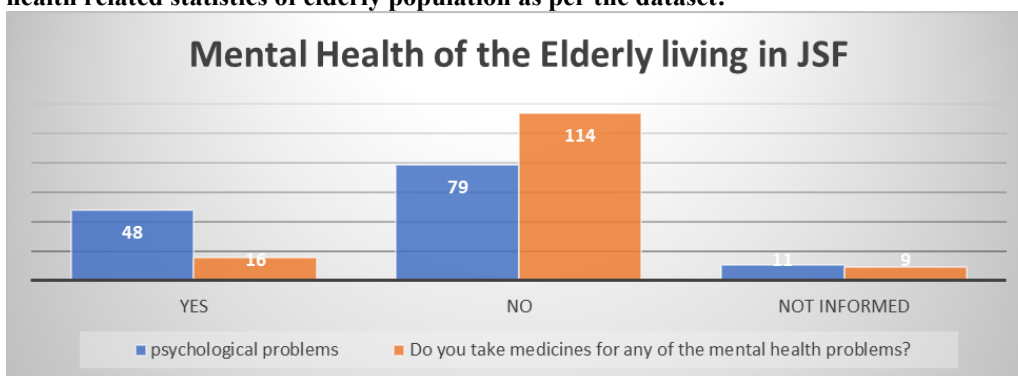
While collecting the information about the musculoskeletal problems another indicator included was addressing the pains using a pain rate scale. The score included in the scale ranged from minimal pain to adverse or intense pain. Total 63 mentioned about pains present while 58 did not experience any pain. The sites mentioned by the participants were lower lumbar region, back, shoulder, foot, hips and buttocks and thighs.

Sleeping Condition of the Elderly at JSF Old Age Home:

Now do you get normal sleep?	Yes	No	Not Informed
	88	40	11
Do you take sleeping pills for better sleep?	Yes	No	Not Informed
	20	111	8

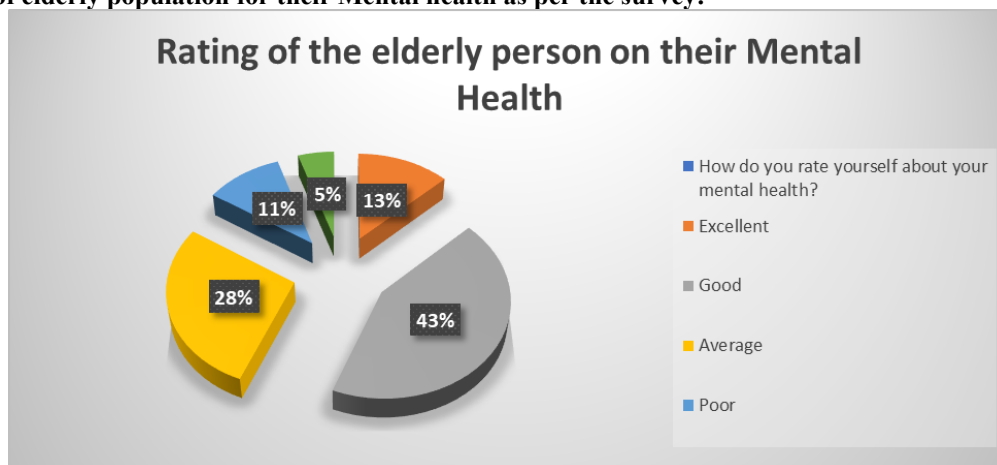
With ageing the elderly face many medical issues and sleeplessness is one of those. From the entire study group 88 participants reported to experience sleeping disorders while 40 participants reported to get normal sleep. Also, the participants were asked if they take any medication or pills to get sleep for which 20 participants agreed and 111 participants denied about it.

Mental health related statistics of elderly population as per the dataset:



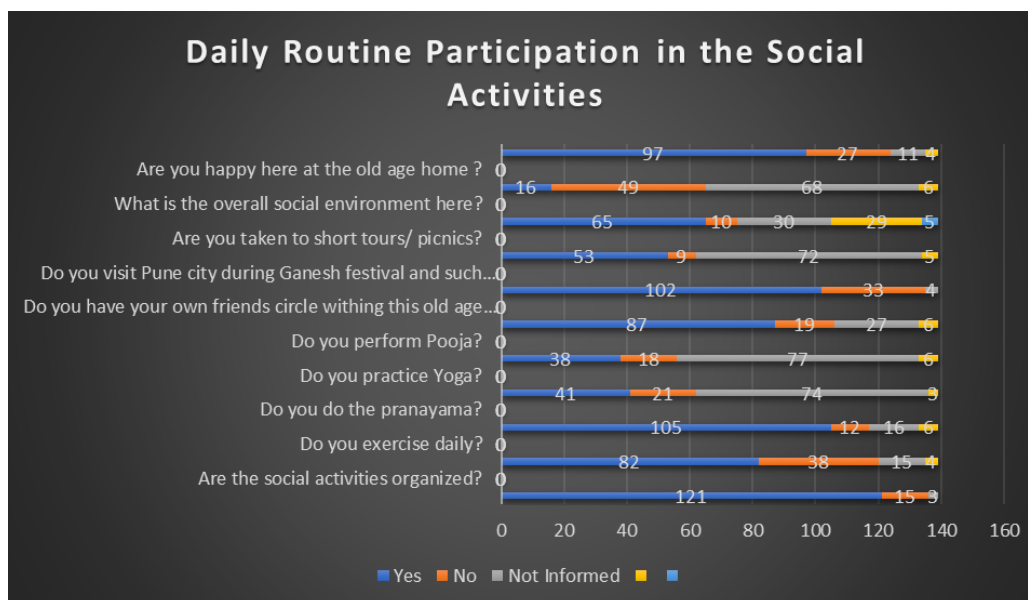
When the elderly were asked if they suffer from any mental health issue it was observed that total 114 participants reported about not suffering from any mental issue while 79 reported about having problems related to mental health. From the ones who suffered from mental health issues were asked if they are under any medications for which 48 participants agreed of being under medication.

Rating of elderly population for their Mental health as per the survey:



To study the mental health status of the elderly residing at the old age home, the participants were asked to rate their mental health from which it is observed that a group of 40% mentioned their mental health to be good, 28% mentioned it be average, 13% mentioned it to be excellent while 11% mentioned it be poor

Questions asked about the daily routine activities



Various social and recreational programmer and fitness sessions are conducted at the organization. Among all the participants 121 members participated in the recreational programs, 105 members reported to exercise regularly, 41were engaged in pranayama while 38 were engaged in doing Yoga. 87 members were into prayers and Pooja regularly. Few members (50) mentioned about visiting Pune city during occasions and 65 members mentioned about going on picnics or short tours. Physiological status of the individuals was also assessed using the following parameters. Psychological problems, mental health problems, intake of sleeping pills, psychiatric treatment, sleeping disorders, family mental history,

Conclusion:

One can age with grace and enjoy the old age with optimum health if a basic step is taken in its onset to improve the way of life of person. The concept of “old is gold” is true when elderly with good health share their experience and knowledge. They are subjected to good health and much joy and satisfaction in their achievement and achievements of those they love. Although the process of ageing, disorders and disabilities of elderly

cannot be totally prevented so suitable measures can be taken that would retard this progress there leading to a longer period of health and thus preserving their quality of life. Living arrangement, financial position and well-being would undergo change in old age.