

## A Study to Assess the Subjective Well-Being of Community Dwelling Elderly Living in west Bengal And its Relation to Their Perceived Physical Health And Depression.

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### **Abstract:**

**Introduction:** With rise in proportion of elderly people, there keen interest in understanding the factors influencing their well being.

### **Objectives.**

i) To find out the perceived physical health problems of elderly people, ii) Assess prevalence of depression of elderly people. iii) To predict the relationship of subjective well being of community dwelling elderly people with geriatric depression.

**Material and methods:** A non-experimental approach as well as descriptive survey was conducted to collect the data after taking written consent from the participants. The data was collected from 109 elderly people (>65yrs) who were selected with help of random sampling from community settings.

**Results:** The age of the subjects ranged from 65-75 with mean age of 71.66 yrs. Majority (62.4%) subjects who have participated in the study were female, (45.9%) majority of the subjects having problem in kneeling (69.7%), visual (56%), lifting (50.5%) and money management (50.5%). Depression present: 26.6%. Using CRT analysis to predict SUB, depression was the strongest predictor. Amongst depressed subjects, SUBI is negative influenced by age (>88 yrs), widow and divorced as marital status.

**Conclusion:** In the absence of more objective measures, perceived health status may be a suitable measure of health status in epidemiological studies.

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### **I. Introduction**

The aged are regarded as symbol of the divine and given utmost respect in our culture, as they are the repositories of wisdom, carriers of traditions and transmitters of experiences. They can take up the advisory role admirably and be of immense help in guiding the young with regard to economic, social political and religious matters. India is considered as a graying country as a result of demographic transition and rapid rise in the number of old age people. Therefore, there is a need of active aging and urgency to identify ways of maintaining elderly persons' health and well-being. The health of such persons should not only be viewed in terms of disease prevalence or absence of illness but rather understood as two sides of the same coin. Older people's health is often associated with functional impairment, as physical functioning and psychosocial well-being are closely related.

Depression is common among the elderly, with prevalence rates among this group (defined in most studies as persons over age 65) ranging from 86% to 9.4% for major and 3.1% to 12.9% for minor depression. Some of the reasons for depression are death of the spouse and feelings of loneliness, increase in health problems, functional disabilities etc Depression decreases quality of life in older adults. Depressive symptoms in late life are a major concern as they increase disability and aggravate existing medical conditions. Anxiety and depression were significantly correlated with female sex and self-reported perceived health, pain, and disability in a primary care clinic. Therefore assessment of the aging person's perception of his or her health is required as type of perception has an effect on wellbeing. Thus the study was undertaken with the following objectives. i) To find out the perceived physical health problems of elderly people, ii) Assess prevalence of depression of elderly people. iii) To predict the relationship of subjective well being of community dwelling elderly people with geriatric depression.

### **II. Material and methods:**

A non-experimental approach as well as descriptive survey was conducted to collect the data after taking written consent from the participants. The data were collected

from 109 elderly people (>65yrs) who were selected with help of random sampling from W.B in community settings. A structured questionnaire was used to obtain information about demographic data. Perceived physical health problems were assessed by a self developed 19 itemed perceived physical health problem tool, reliability of the tool was established by Cronbach alpha ( $r= 0.772$ ). To screen depression among elderly geriatric depression scale (GDS-30) used, and Subjective well- being (SWB) of elderly people was assessed by SWBI standard three point rating scale which had 40 items with the maximum score of 120. Statistical analysis frequency of various problem areas, mean and standard deviation to summarise SUB scores.

In order to predict depression and SUB from various problem areas CRT analysis was used. Classification regression trees are generally used when one attempts to predict values of a categorical dependent variable (class, group membership, etc.) from one or more continuous and/or categorical predictor variables. A classification tree is an empirical rule for predicting the class of an object from the values of predictor variables.

### III. Results

#### Socio Demographic Characteristics:

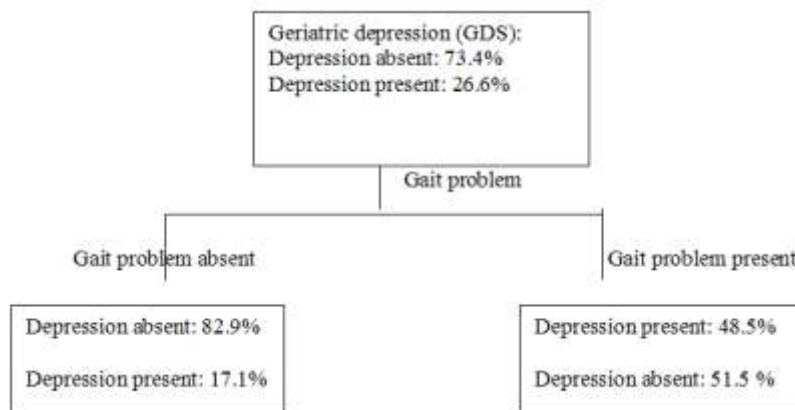
The age of the subjects ranged from 65-75 with mean age of 71.66 yrs. Majority (62.4%) subjects who have participated in the study were female,( 45.9%) of the elderly were married, 51.4% of the subjects were illiterate. Majority (89%) of the subjects reported that they are having their children. Mean value of geriatric depression is 10.85(SD-6.5) and mean value of SUB is 83.92(SD-11.88).

**Table 1:** Frequency and percentage of 19 item perceived physical health problem scale,N=109

SL.NO	Items of PHP(problem areas)	Frequency of people having problem	Percentage
1	Bathing	32	29.4
2	Shopping	52	47.7
3	Money management	55	50.5
4	Transfer	43	39.4
5	Light housework	30	27.5
6	<b>Kneeling,</b>	<b>76</b>	<b>69.7</b>
7	Housework	38	34.9
8	<b>Lifting</b>	<b>55</b>	<b>50.5</b>
9	Carrying	51	46.8
10	Walking	27	24.8
11	Writing	37	33.9
12	<b>Visual</b>	<b>61</b>	<b>56</b>
13	Urinary	35	32.1
14	Gait	33	30.3
15	High B.P	32	29.4
16	Respiratory	18	16.5
17	High blood sugar	14	12.8
18	Depression	32	29.4
19	Cognition	10	9.2

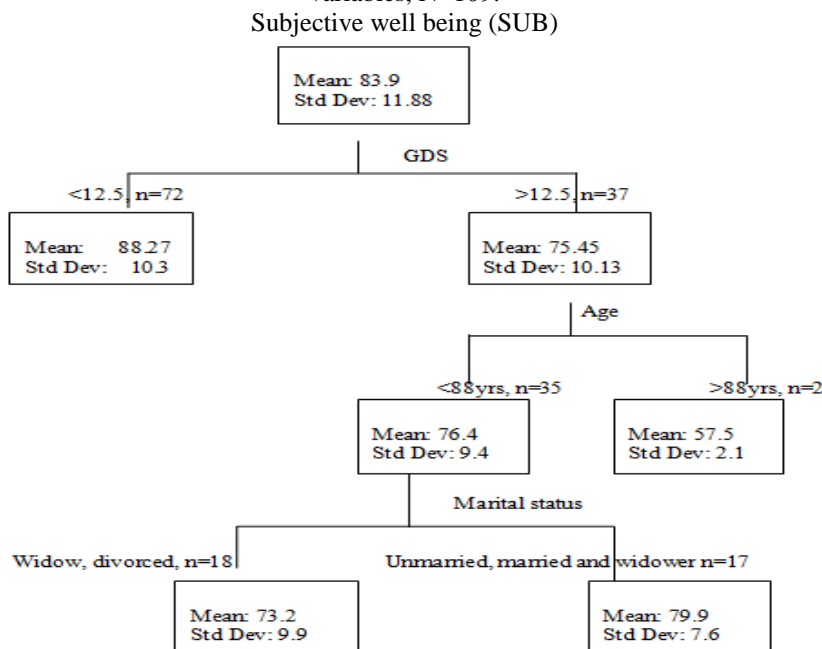
As shown in table 1, majority of the subjects having problem in kneeling (69.7%), visual (56%), lifting (50.5%) and money management (50.5%).

**Figure1:** Classification regression tree (CRT) modelling presence of depression with various study Variables, N=109



As shown in figure 1, depression is present in 26.6% of elderly people (Cut off point of GDS scoring is >14). 48.5% elderly who had gait problem had depression while only 17.1% of elderly without gait problem had depression.

**Figure 2:** Classification regression tree (CRT) shows the model attempting to predict SUB with other study variables, N=109.



In order to predict subjective well being from various study we used statistical technique Decision trees method, specific method being Classification Regression Tree (CRT). From the CRT analysis we find that depression is the strongest predictor of Subjective well-being of elderly. Amongst depressed subjects, SUB negatively influenced by age (>88 yrs), widow and divorced as marital status. Hence presence of depression reduces subjective well being of elderly people.

#### IV. Discussion

There is consensus among many gerontological studies that high subjective well-being among the elderly people is mainly a result of adaptation, emotional regulation, and accommodative strategies such as rescaling goals and adjusting aspirations to the given situation. Optimism also was found to be a predictor of both subjective and psychological well being<sup>vi</sup>. **Error! Bookmark not defined.** In the present study it is found that the subjective well being of elderly is negatively correlated with depressions. It is in concordance with the findings of one study which shows anxiety; depression, stress, and loneliness have more negative impact on quality of life.

In a study to predict successful aging concluded that life satisfaction, depression level and leisure time activities were all significant predictors of subjective well being. Moreover, in the present study it is seen that

only 26% of the elderly had less subjective wellbeing and associated depression and this finding is incongruent with studies from urban settings.

Need to use screener to screen for physical illness to improve gait, use of supportive equipment to prevent fall, all these are likely to reduce depression and improve SUB. In order to enhance the subjective well being of elderly, a multimodal intervention strategy that integrates many approaches to enhance self-efficacy in elderly people like cognitive restructuring, relaxation training, nutrition, exercise etc can be used. So health personnel should equip the family members to assist or participate actively in these multimodal intervention strategies. This study was limited in many ways.

Firstly no measures were taken to reduce depression and physical health problem during study period, but elderly people were advised to attend the outpatient department as per their needs. However in the absence of more objective measures, perceived health status may be a suitable measure of health status in epidemiological studies.

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