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American Journal of Psychiatric Rehabilitation Expert Opinion Article

A study to compare the level of Depression among elderly men and women in old age home.

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ABSTRACT

Introduction:

Depression in old age is an emerging public health issue, contributing significantly to morbidity and disability worldwide. This concern is particularly prominent in the geriatric population. With the growing trend of old age homes in India, the present study was conducted to evaluate and compare levels of depression among elderly men and women residing in old age homes, and to suggest preventive or remedial measures.

Objectives:

The objectives of this study were:

1. To assess the level of depression among elderly men and women residing in old age homes.
2. To compare depression levels between elderly men and women.
3. To determine the association between depression and selected sociodemographic variables among the elderly in old age homes.

Methods:

A non-experimental descriptive research design was adopted for this study titled *"A study to compare the level of depression among elderly men and women in old age homes."* A total of 50 elderly residents from selected old age homes were chosen using non-probability purposive sampling.

Results:

Among elderly women, 48% had moderate depression, 32% had mild depression, and 20% had severe depression. Among elderly men, 40% had moderate depression, 36% had mild depression, and 24% had severe depression. The mean depression scores were 8.16 for women and 7.64 for men. A paired t-test yielded a value of 8.74, which was statistically significant at the 0.05 level. There was a significant association between depression levels and sociodemographic variables such as age, religion, marital status, type of family, whether the individual had their own family, work profile before admission, reason for admission, and duration of stay in the old age home.

Conclusion:

The study concludes that a higher percentage of elderly women in old age homes experience moderate levels of depression compared to men. These findings emphasize the need for targeted mental health interventions and support systems tailored to the elderly, particularly women, in institutional settings.

Key words *: Assess, Depression , elderly people, Old age home*

Introduction

Depression, also known as major depressive disorder, is a mental health condition that negatively impacts a person's emotions, thoughts, and behavior. While experiencing sadness is a normal part of life, depression is a more serious, persistent condition—but it is also treatable. According to the Global Health Data Exchange, depression affects between 25 and 310 million people worldwide. Other studies estimate that approximately 3.4% of the global population suffers from depression, with some sources placing this figure between 2–6% after accounting for statistical variation—equating to approximately 264 million people globally. It is estimated that one in six individuals will experience depression at some point in their life, and about one in fifteen adults may experience it in any given year.[1] The World Health Organization (WHO) has identified the top ten countries with the highest prevalence of depression, highlighting the growing global mental health burden. Depression, particularly among the elderly, is a major public health concern due to its impact on morbidity and disability.[2]

Demographic Trends and Aging

Demographic change is a global phenomenon, and the world's aging population is growing rapidly. By 2025, the global population aged 60 years and older is expected to reach 1.2 billion. In India, according to the United Nations Population Fund (UNFPA), the elderly population was around 90 million in 2011 and is projected to increase to 173 million by 2026. By 2050, one in every six older persons in the world will reside in India. As the saying goes, *"Age is the acceptance of a term of years, but maturity is the glory of years."* However, growing older is also associated with increased vulnerability to mental health issues, particularly depression.[3]

Depression in Older Adults

Depression in the elderly is an emerging public health issue, contributing significantly to disability-adjusted life years (DALYs). The WHO estimates that mental and neurological disorders among adults aged 60 and above account for 6.6% of total DALYs for this age group. Furthermore, around 15% of adults aged 60 years and older suffer from a mental disorder, with depression being one of the most prevalent. With the increasing prevalence of old age homes in India, understanding the mental health status of elderly residents has become critical. Mental well-being is as essential in older age as in any other stage of life. The present study was thus undertaken to evaluate the level of depression among elderly individuals residing in old age homes and to recommend suggestive measures to prevent or alleviate depression in this vulnerable population.[4]

Need For Study :

The elderly population faces a significant burden from both chronic diseases and non-communicable diseases (NCDs). The necessities of people and metropolitan and country old should be tended to through fitting endeavors. Preventative measures for communicable diseases, as opposed to curative measures, will be more cost-effective and beneficial in a developing nation like India. Further, zeroing in on instructive mediation among more seasoned grown-ups could bring a few required changes.[5]

Research shows that the old populace faces a huge weight from both persistent infections and noncommunicable illnesses (NCDs). Proper efforts should be made to meet the needs of young and old people in cities and the country. In a developing nation like India, preventative measures for communicable diseases will be more cost-effective and beneficial than curative measures. Further, focusing in on enlightening interventions among more prepared adults could bring a couple of required changes.[6]

Methodology : Quantitative research approach with a descriptive design was adopted to assess and compare the level of depression among elderly men and women residing in selected old age homes. The study was conducted in a selected district, with data collected from 50 elderly participants (25 men and 25 women) aged 60 years and above, using a non-probability purposive sampling technique.[7]

Data were collected using a structured tool consisting of two sections:

- Section A: Demographic information (age, gender, education, occupation, religion, etc.)
- Section B: Depression levels assessed using a standardized Geriatric Depression Scale (GDS). The scoring categorized depression as mild (0–5), moderate (6–10), and severe (11–15).

The tool's content validity was established through expert review (n=20), and its reliability was confirmed with a test-retest method, yielding a coefficient of 0.86, indicating high reliability.[8]

A pilot study with six participants was conducted to ensure feasibility. Data were collected through face-to-face interviews in scheduled sessions over two weeks. Participants provided informed consent, and ethical clearance was obtained from the relevant authorities.

Data were analyzed using descriptive statistics (frequency, percentage) for demographic variables and depression levels, and inferential statistics including the paired t-test (for comparison between men and women) and chi-square test (for association with demographic variables).[9]

Result :

Sociodemographic variable of elderly women : The majority of caretakers of mentally challenged children were aged 71–75 years (32%), followed by 66–70 years (28%), and 61–65 years (24%). The smallest group (16%) was aged above 75 years. All participants in the study were female (100%).In terms of religion, 64% were Hindus, 20% Christians, and 16% Muslims, indicating that the majority were Hindus. Regarding marital status, 72% were married, and 28% were unmarried. Most participants belonged to a nuclear family (44%), followed by joint families (40%) and extended families (16%). Additionally, 72% reported having their own family, while 28% did not. As for occupational background, 36% of participants were in private jobs, 24% were farmers, and 20% were either government employees or self-employed, showing a majority engaged in private sector employment.

Sociodemographic variable of elderly Men: he highest percentage of caretakers (32%) were aged 71–75 years, followed by 28% aged 66–70 years. About 24% were aged 61–65 years, and the lowest percentage (16%) were above 75 years. A majority of 64% were Hindus, 20% were Christians, and 16% were Muslims, indicating that most participants were Hindus. 72% of the participants were married, while 28% were unmarried, showing that most were married.44% belonged to nuclear families, 40% to joint families, and 16% to extended families. Thus, the majority were from nuclear families.72% of participants had their own family, while 28% did not, suggesting that most had family support. Majority of 36% were in private jobs, 24% were farmers, and 20% each were government employees or business owners. This indicates that private employment was the most common occupation among participants.

Table No.1 Assess the level Depression among elderly men:

SN	Level of Depression	Range of score	Frequency	Percentage
1	Mild Depression	0-5	9	36%
2	Moderate Depression	6-10	10	40%
3	Severe Depression	11-15	6	24%

The majority of elderly men (40%) were experiencing moderate depression, while a smaller percentage (24%) were dealing with severe depression. A notable portion (36%) had only mild symptoms, indicating varied levels of psychological well-being within the group.

Table No.2 Comparison between level Depression among elderly men and women

SN	Group	Mean	SD	Paired t test
1	Men	7.64	2.05	**8.66***
2	Women	8.16	2.41	

The mean depression score among elderly women (8.16) was slightly higher than that of elderly men (7.64). The paired *t*-test value of 8.66 indicates a statistically significant difference in depression levels between the two groups, suggesting that **elderly women experience higher levels of depression compared to men**

Table No.3 Association between level of depression among elderly women with demographic variables.

SN	Variables	X^2	Level of significance
1	Age	**15.11**	Significant
2	Gender	2.77	Not Significant
3	Religion	**15.43**	Significant
4	Marital status	**14.60**	Significant
5	Type of family	**14.03**	Significant
6	Client has own family	**14.57**	Significant
7	Work profile of client before admission to old age home	**14.22**	Significant
8	Any bad habits	2.44	Not Significant
9	Activity of daily practice	3.16	Not Significant
10	Reason for admitting in old age home	**14.12**	Significant
11	Duration of stay in old age home	**16.08**	Significant

Most demographic variables, including age, religion, marital status, type of family, and living conditions, had a significant impact on the level of depression among elderly women. However, gender, presence of bad habits, and daily activity level were not significantly associated with depression levels.

Table No.4 Association between level of depression among elderly men with demographic variables

SN	Variables	X^2	Level of significance
1	Age	**12.88**	Significant
2	Gender	1.76	Not Significant
3	Religion	2.13	Not-Significant
4	Marital status	**16.44**	Significant
5	Type of family	**11.65**	Significant
6	Client has own family	**14.90**	Significant
7	Work profile of client before admission to old age home	**8.88**	Significant
8	Any bad habits	1.99	Not-Significant
9	Activity of daily practice	**10.26**	Significant
10	Reason for admitting in old age home	2.33	Not-Significant
11	Duration of stay in old age home	**15.75**	Significant

The analysis reveals that factors such as age, marital status, type of family, whether the client has their own family, work profile before admission, daily activity practices, and the duration of stay in the old age home significantly contribute to depression levels among elderly men. In contrast, gender, religion, bad habits, and the reason for admission did not have a statistically significant association.

Discussion:

The findings of the study indicate that both elderly men and women predominantly belonged to the 71–75 age group, with most participants being Hindus and having no bad habits. A significant number of elderly women were married and from nuclear families, whereas a larger proportion of men were unmarried and worked as farmers before admission to the old age home. Depression was more prevalent among women, with 48% showing moderate depression compared to 40% in men. The mean depression scores were also higher in women (8.16) than in men (7.64), with a statistically significant difference. Furthermore, the study found a significant association between depression levels and various socio-demographic factors in both groups. These results suggest that personal and social conditions such as family structure, marital status, and previous occupation play a crucial role in the mental well-being of the elderly, especially women.

Conclusion:

The present study revealed that elderly women experienced a higher level of depression compared to elderly men. While both groups showed varying degrees of depression, a greater proportion of women had moderate to severe levels. Statistical analysis also indicated significant associations between depression levels and various socio-demographic variables in both groups. These findings highlight the need for gender-sensitive mental health interventions and support systems tailored to the unique needs of elderly individuals, particularly women.

Recommendations

Based on the study finding the following recommendations have made for the further study

1. Similar study may be replicated on large samples for wider generalization.
2. Similar study can be conducted in community.
3. Manuals, information booklets and self-instruction module may be developed in mental health area for general public

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