DETERMINATION OF THE EFFECTS OF DAILY LIFE ACTIVITIES AND SELF-CARE CAPACITY ON DEPRESSION OF THE ELDERLY IN NORTHERN TURKEY

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SUMMARY – This study aimed to determine the effects of daily living activities and self-care capacity on depression of the elderly in northern Turkey. The study was conducted with participation of 451 voluntary elderly individuals. Data were collected *via* a questionnaire, Geriatric Depression Scale, Exercise of Self-care Agency Scale, Daily Activities Index, and Instrumental Activities of Daily Living Index. The mean Exercise of Self-care Agency Scale score and Geriatric Depression Scale score was 91.44±16.32 and 11.87±5.01, respectively. Negative and highly statistically significant correlations (p=0.000) were found between depression scores and self-care capacity scores (r=-0.470), daily activities scores (r=-0.351), and Instrumental Activity of Daily Life scores (r=-0.270). Study results showed that depression scores of the elderly increased as their daily life activities and self-care capacity scores decreased.

Key words: Activities of daily living; Depression; Aged; Nursing; Self care; Turkey

Introduction

In 2000, 600 million people were aged 60 and over, and by 2050, there will be 2 billion¹. As in the world², in Turkey, the aged population is gradually increasing. According to Turkish State Institute of Statistics census findings, the proportion of the population aged 65 and above was 4.3% in 1990, 4.7% in 1997, and 5.6% in 2000. This curve is anticipated to reach 7.7% in 2020³. Based on the State Institute of Statistics data, it is clear that Turkey will soon be one of the old countries in the world.

Elderly people need to possess sufficient self-care capacity. Self-care capacity involves the activities conducted by individuals to maintain their independence, lifestyle, and state of health and wellness. Changes in age, health, physical and psychological factors, envi-

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ronmental conditions, and socio-economic factors can influence the self-care capacity of individuals^{4,5}. The literature suggests that physical health, functional limitations and disability are affected by many factors, one of which is depression⁶⁻⁸.

Depression has been documented as one of the most prevalent mental health problems in the elderly^{9,10}. The literature also indicates that depression increases disability^{11,12}, morbidity, mortality, and healthcare utilization¹¹. Studies have determined that the following factors are related with the development of depression: being female; being single, divorced, or separated10; having a low income or socio-economic level¹⁰; and having many chronic diseases, insufficient social support, and unexpected negative life events¹³. It has also been reported that depression is an important risk factor for dependency in the elderly¹⁴⁻¹⁷. In spite of the availability of studies on the factors affecting daily life activities and self-care capacity of the elderly^{5,18-21}, no comprehensive study determining the effect of daily life activities and self-care capacity levels on depression in the elderly was found.

Aims

This descriptive study aimed to determine the effect of daily life activities and self-care capacity levels on depression in the elderly. The questions posed in the study were the following:

- 1. What is the mean level of depression among elderly individuals?
- 2. In terms of activities of daily living, are elderly dependent on others?
- 3. Do daily life activities and self-care capacity levels of the elderly affect depression levels?

Subjects and Methods

Study design

This study was conducted between July 1, 2013 and December 31, 2013. The authors aimed to recruit the entire population of those presenting to internal medicine and surgical outpatient clinics at Ondokuz Mayıs University due to various health problems. A total of 608 elderly individuals were admitted to outpatient clinics during the study period. However, elderly people who were not willing to participate in the study and who did not complete the questionnaire were excluded from the research (n=157). The study was carried out with voluntary participation of 451 elderly individuals. The response rate was 74.2%.

Instruments

Study data were collected *via* a questionnaire, Geriatric Depression Scale, Exercise of Self-Care Agency Scale, Daily Activities Index, and Instrumental Activities of Daily Living Index. Both depression and dementia affect activities of daily living (ADLs) and self-care agency in the elderly. For these reasons, distinction between dementia and depression symptoms was made by questioning the year, season, month, day, country, and city orientations among the elderly.

The Geriatric Depression Scale is an assessment tool introduced by Yesavage *et al.*²². Its validity and reliability for Turkish population has been verified by Ertan and Eker²³. The scale consists of 30 self-report questions aimed at enabling the elderly to respond easily with 'yes' or 'no'. The minimal and maximal number of points that can be obtained on the scale is 1 and 30, respectively. The Geriatric Depression Scale Cronbach Alpha reliability coefficient was determined to be 0.77.

The validity and reliability of the Exercise of Self-Care Agency Scale developed by Kearner and Fleischer²⁴ were tested in Turkey by Nahçivan²⁵. The scale employs self-evaluations of self-care activities. Each statement is rated from 0 to 4, and the ratings are based on a five-point Likert-type scale. A higher score obtained using the scale indicates greater self-care potential²⁵. The Exercise of Self-Care Agency Scale Cronbach Alpha reliability coefficient was determined to be 0.81.

The Daily Activities Index was used to detect problems in performing ADLs. Clients receive a score of yes/no for independence in bathing, dressing, toileting, transferring, continence, and feeding^{26,27}. The Daily Activities Index Cronbach Alpha reliability coefficient was determined to be 0.89.

The Instrumental Activities of Daily Living Index includes preparing meals, shopping, taking medicine, traveling out of walking distance, doing housework, performing repairs in the house, managing money, and using telephone. The activities of the participants are evaluated as independent, semi-independent or dependent. The Instrumental Activities of Daily Living Index Cronbach Alpha reliability coefficient was determined to be 0.91.

Data collection

Data were collected from the elderly over a period of six months by the researcher during face-to-face interviews. This study was conducted in accordance with the principles of the Helsinki Declaration (WMA Declaration of Helsinki, 2008)²⁸. The questionnaire was tested on a group of 10 elderly individuals in a pilot study. The response time was 20-25 min.

Data analysis

Data were analyzed using SPSS for Windows (v. 15.0). Descriptive statistics and Student's t-tests were used to summarize data. Multiple regression analysis was used to determine whether there was a difference between depression scores of the elderly regarding self-care capacity, daily life activity, and instrumental activities of daily living. The values of p<0.05 were considered statistically significant.

Results

In this study, 35.9% of all participants were between 60 and 66 years of age, 44.8% were females and

55.2% were males (Table 1). According to the distribution of clinical characteristics, 65.0% of all participants suffered from chronic diseases. Moreover, daily life activities were affected by chronic diseases in 94.2% of the participants, 21.3% exercised, 10.4% smoked, and 28.4% attended social activities (Table 2). The mean participants' Exercise of Self-Care Agency Scale score and Geriatric Depression Scale score was 91.44±16.32 and 11.87±5.01, respectively. Additionally, 25.5% of the participants were dependent in terms of Daily Life Activities and 8.0% in terms of Instrumental Activities of Daily Living.

The current study revealed that the mean self-care capacity scores were relatively higher in married (t=2.881, p=0.004), regular health check-up receiving (t=4.174, p=0.000) and exercising (t=6.088, p=0.000)elderly individuals. The mean depression scores were also higher in women (t=4.915, p=0.000), singles (t=5.123, p=0.000), chronic disease sufferers (t=4.849,p=0.000) and those that did not attend social activities (t=4.857, p=0.000). There was a significant negative relationship between the depression scale score and educational status (r=-0.176), perception of health (r=-0.423) and satisfaction with medical treatment received (r=-0.286), and a significant positive relationship between the state of having a chronic disease (r=0.095) and the depression scale score (p<0.000) for the elderly. In other words, the mean score of depression decreased with increase in the level of education, level of health perception and level of satisfaction with medical treatment. Nevertheless, having a chronic disease increased the depression score.

The present study also revealed a statistically significant correlation (p<0.000) between the participants' mean scores on the Daily Life Activities and Instrumental Activities of Daily Living Indexes and certain socio-demographic and clinical characteristics. The Daily Life Activities Index scores were higher in men (t=7.777, p=0.000), married individuals (t=3.425, p=0.001), individuals receiving regular health checkups (t=3.488, p=0.001), individuals attending social activities (t=3.179, p=0.002) and individuals who exercised (t=5.857, p=0.000). Moreover, the Instrumental Activities of Daily Living Index scores were higher in men (t=7.374, p=0.000), married individuals (t=2.432, p=0.015), individuals without a chronic disease (t=2.344, p=0.020), individuals attending social activi-

Table 1. Distribution of elderly subjects according to socio-demographic characteristics (N=451)

	1	
Characteristic	n	%
Age group (yrs, mean±SD)	69.1±6.7	
60-66	162	35.9
67-73	147	32.6
74-80	95	21.1
81-87	47	10.4
Gender	47	10.4
	202	44.0
Female	202	44.8
Male	249	55.2
Marital status		
Married	395	87.6
Single	56	12.4
Education level		
Literate	270	59.9
Elementary school	143	31.7
Intermediate school	19	4.2
High school	9	2.0
University	10	2.2
Socioeconomic status	10	2.2
	212	47.0
Income less than expenses	212	47.0
Income equal to expenses	229	50.8
Income greater than expenses	10	2.2
Social insurance		
Present	417	92.5
Absent	34	7.5
Occupation		
Homemaker	185	41.0
Worker	99	22.0
Officer	9	2.0
Retired	90	20.0
Self-employed	68	15.0
Place of residence	00	13.0
	100	24.2
City	109	24.2
Town	134	29.7
Village	208	46.1
Family type		
Large	186	41.2
Small, nuclear	265	58.8
Number of children		
1-3	162	35.9
4-6	221	49.0
7-9	64	14.2
None	4	0.9
Lives with	•	3.7
	166	36.8
Spouse Family mambar(a)	280	62.1
Family member(s)		
Alone	5	1.1

Table 2. Distribution of elderly subjects according to clinical characteristics and health behavior (N=451)

Characteristic	n	%
Perceived health		
Good	153	33.9
Fair	250	55.4
Poor	48	10.7
Satisfied with medical		
treatment		
Yes	393	87.1
No	58	12.9
Satisfaction level related to medical		
treatment (n=393)		
Low	8	2.0
Middle	281	71.5
High	104	26.5
Chronic disease condition		
Yes	293	65.0
No	158	35.0
^a Has chronic illness (n=293)		
Coronary arterial disease	148	50.5
Diabetes	116	39.6
Hypertension	169	57.7
Osteoporosis	14	4.8
Asthma	10	3.4
Renal failure	36	12.3
Rheumatism	8	2.7
Herniated disc	3	1.0
Hepatitis	3	1.0
Epilepsy	4	1.4
Goiter	8	2.7
Cataract	4	1.4

Characteristic	n	%
Daily activities affected by chronic		
illness (n=293)		
Yes	276	94.2
No	17	5.8
Previous hospitalization		
Yes	389	86.3
No	62	13.7
Frequency of hospitalization (n=389)		
At least once a month	68	17.5
Once in three months	51	13.1
Once in six months	50	12.9
Once a year	111	28.5
Other	109	28.0
Has an attendant while hospitalized		
(n=389)		
Yes	267	68.6
No	122	31.4
Has regular health check-ups		
Yes	288	63.9
No	163	36.1
Exercises		
Yes	96	21.3
No	355	78.7
Smoking		
Yes	47	10.4
No	404	89.6
Attending social activities		
Yes	128	28.4
No	323	71.6

^aMore than one answer was given.

ties (t=2.143, p=0.033) and individuals who exercised (t=6.991, p=0.000).

In the regression analysis concerning the effect of the Daily Life Activities and Self-Care Agency and Instrumental Activity of Daily Life on depression (Table 3), a statistically highly significant negative relationship was found between depression scores and self-care capacity of the elderly (r=-0.470), daily life activities (r=-0.351), and Instrumental Activity of Daily Life scores (r=-0.270). Study results showed that depression scores of the elderly increased as their daily life activities and self-care capacity scores decreased.

Discussion

While the extent of depression varies with the characteristics of the elderly group involved in the study, the location of the study, and the selected methods, it has been asserted in the literature that many different factors affect development of depression 10,11,29-33. This study revealed that the mean depression scores were higher in women, singles, chronic disease sufferers, and individuals who did not attend social activities. Additionally, according to some studies, it has been asserted that depression, in line with the

		Coefficients ^a			
	I I		Standardized coefficients	t	Sig.
	В	SE	Beta		
(Constant)	25.823	1.235		20.910	0.000
Self-care capacity	-0.128	0.013	-0.417	-10.154	0.000
Daily life activities	-0.708	0.143	-0.293	-4.943	0.000
Instrumental activities of daily living	0.039	0.055	0.042	0.701	0.484

Table 3. Multiple regression analysis of factors (self-care capacity, daily life activities and instrumental activities of daily living) affecting depression levels in the elderly

current research findings, is more common among women^{10,21,31,32}. However, according to other studies inconsistent with the current research findings, depression is more common among individuals with low education levels^{10,31,32} and those living in city centers, having serious illnesses or physical disabilities, physically inactive individuals and smokers^{31,32}.

The current study revealed that two-thirds of the elderly had chronic diseases and that depression scores of such individuals were higher. Consistent with the results obtained in this sample, findings of other studies^{34,35} conducted in Turkey on this issue have revealed that elderly individuals with chronic diseases have higher levels of depression. However, in other studies³⁶ that have yielded findings inconsistent with the present ones, it has been asserted that having a chronic disease does not have any effect on the level of depression.

The present study found that almost all daily activities in the elderly chronic-disease sufferers were affected by their conditions and one-third of the elderly were dependent on the others in terms of continuing their daily life activities. Relevant studies from other countries^{37,38} have shown that between 4.3% and 8.6% of the elderly depend on the others to maintain their activities of daily living. Performing activities of daily living and self-care as part of personal care without any assistance is quite important in the eyes of the elderly.

In this study, it was determined that Daily Life Activity Index scores were relatively lower (and, consequently, dependency levels were higher) in the following: women, singles, and individuals not receiving regular check-ups, not attending social activities, and not exercising. In some studies, it has been asserted that dependency in terms of activities of daily living, in

line with the current research findings, is more common among women^{20,21,39,40}. However, according to other studies presenting findings inconsistent with those of the current research, dependency in terms of activities of daily living is more common among the following: homemakers²⁰, advanced age groups¹⁹⁻²¹, individuals with low education levels19, individuals without any social security20, individuals with low socioeconomic status²⁰, chronic-disease sufferers^{20,21}, individuals who constantly use medicine²⁰, and individuals who perceive their health status as poor²¹. Jiang et al. report that some demographic subgroups appear to be at a higher risk of impaired ADLs41. Almedia and Rodrigues found that women and 75-84 age group were more dependent³⁷. Also, Konno et al. report that the prevalence of ADL disability increases with aging³⁸.

The present study demonstrated that the mean self-care capacity scores of the elderly were relatively higher in married individuals and among those who received regular health check-ups and exercise. On the other hand, other studies carried out on this issue have asserted that self-care capacity decreases as age and disease duration increase in the elderly²⁰, and that decreased self-care capacity has an important effect on the mood state of elderly individuals⁴².

We found negative correlation between Geriatric Depression Scale scores and self-care capacity and daily life activity scores. That is, as daily life activities and self-care capacity decreased, depression levels in the elderly increased. During the aging process, the elderly may find it difficult to carry out the daily activities they were able to perform previously, and they may become dependent on the others. This may affect the elderly at many levels and hence decrease their self-

^aDependent variable: depression total points; SE = standard error; Sig. = significance

care capacity. According to the findings of this study, a decrease in both daily life activities and self-care capacity levels of the elderly had a negative effect on depression. Therefore, reduction of depression prevalence in the elderly is of utmost importance.

Conclusion

In this study, depression scores of the elderly increased as their daily life activities and self-care capacity scores decreased. Therefore, the following is proposed: support to the elderly people's maintaining daily life activities and self-care capacity independently; carrying out routine depression screenings among the elderly; referring elderly people at risk to psychiatric services and monitor them; and strengthening psychological counseling and guidance services focused on the elderly.

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Sažetak

UČINAK AKTIVNOSTI SVAKODNEVNOG ŽIVOTA I SPOSOBNOSTI ZA BRIGU O SEBI NA DEPRESIJU KOD STARIJIH OSOBA NA SJEVERU TURSKE

Z. Koç i Z. Sağlam

Cilj ovoga istraživanja bio je utvrditi učinke aktivnosti svakodnevnog života i sposobnosti za brigu o sebi na depresiju kod starijih osoba na sjeveru Turske. Istraživanje je provedeno uz dobrovoljno sudjelovanje 451 starije osobe. Podaci su prikupljeni pomoću upitnika i sljedećih ljestvica: *Geriatric Depression Scale, Exercise of Self-care Agency Scale, Daily Activities Index* i *Instrumental Activities of Daily Living Index*. Srednji zbir na *Exercise of Self-care Agency Scale* bio je 91,44±16,32, a na *Geriatric Depression Scale* 11,87±5,01. Utvrđene su negativne i visoko statistički značajne korelacije (p=0,000) između zbira za depresiju sa zbirom sposobnosti za brigu o sebi (r=-0,470) i zbirom aktivnosti svakodnevnog života (r=-0,351). Rezultati istraživanja pokazali su da se zbir za depresiju kod starijih osoba povećava sa snižavanjem zbira svakodnevnih aktivnosti i zbira sposobnosti za brigu o sebi.

Ključne riječi: Dnevne aktivnosti; Depresija; Starija osoba; Sestrinstvo; Samozbrinjavanje; Turska