

# Social Factors Influencing Utilization of Old Age Homes by Elderly in Urban Area of South Chennai, Tamil Nadu

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## Abstract

**Background:** Currently, most old age homes in India are completely occupied. Nowadays, nuclear families are more than joint families, and due to various factors such as urbanization, the elderly are deprived of essential care at home and are moved from their own homes to old-age homes. With the increasing geriatric population, this study explored the various social factors influencing the elderly to reside in old age homes. **Material and Methods:** The study was conducted among 330 elderly in old age homes using simple random sampling. The study population included elderly above the age of 60 years and residing in old age homes, who were willing to participate. A pretested structured questionnaire with data on sociodemographic characteristics, family, financial support, and various other social factors was collected. Data were analyzed using SPSS. **Results:** Among the respondents, 20.6% were supported by children financially and 18.5% had a pension. Almost 70% of the elderly were left unattended by friends and family. Care and support through means of calls, letters, and visits when analyzed showed that 27.3% were provided care and support through children and 33.6% were left unattended. **Conclusion:** Family members, friends, and relatives should be encouraged to give regular visits and spend time with the elderly so that the bonding will have a positive effect on their mental health. Aging and geriatric health should be considered sensitively and should be made mandatory for schools and colleges to arrange visits to old age homes, thereby keeping the younger generation aware of the issues.

**Keywords:** Geriatric, medical sociology, old age home

## INTRODUCTION

Currently, India's proportion of senior citizens has shown a drastic increase from 5.6% in 1961 to 7.5% as of the 2011 Census.<sup>[1]</sup> The elderly population living in rural areas of India are maximum enrolled in unorganized agriculture work. With the changing economic and social norms, geriatric health is facing weak care and support.<sup>[2]</sup> In India, the National Program for Health Care of Elderly (NPHCE), which was initiated recently aims to develop infrastructure and build the capacity of healthcare providers for elderly healthcare around the world.<sup>[3]</sup> With industrialization and modernization, new lifestyles have set in, resulting in transitional changes.

A single joint family is broken into many nuclear families. Such changes in the family structure have put the elderly into a situation of shifting from their own homes to some institutions or old age homes (Doty, 1992, Hegde *et al*, 2012, Kumar *et al*, 2012, 2013, Mishra, 2008 & Mudey *et al*, 2011).<sup>[4-8]</sup> The concept of old age residence is developing and in existence as a newer occupancy for the elderly and is

now becoming the need of present Indian society. From recent data, we can see that multiple old age homes are coming up and currently, there are more than 1000 old age homes in South India.<sup>[9]</sup>

Non-governmental organizations, private institutions, as well as government, are contributing to the establishment of old age homes. They are either free of cost or paid. The former ones are generally for the abandoned and destitute who are devoid of familial support, finance, and healthcare. In such types, shelter, food, and healthcare are provided free of cost. In the latter type, all services are provided for a price.<sup>[10,11]</sup>

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**How to cite this article:** Pandian S, Naik S, Ramachandran U, Grace GA, Gopalakrishnan S. Social factors influencing utilization of old age homes by elderly in urban area of South Chennai, Tamil Nadu. *Indian J Community Med* 2024;49:41-5.

**Received:** 05-04-22, **Accepted:** 31-10-23, **Published:** 12-01-24

### Access this article online

Quick Response Code:



Website:  
[www.ijcm.org.in](http://www.ijcm.org.in)

DOI:  
10.4103/ijcm.ijcm\_295\_22

Therefore, an attempt was made to explore various social factors responsible for influencing the elderly to utilize old age homes. With this background, this study was planned to assess the social factors influencing the utilization of old age homes by the elderly in an urban area of South Chennai, Tamil Nadu.

## METHODOLOGY

The cross-sectional study was carried out in old age homes located in an urban area of South Chennai, Tamil Nadu. The total land area was around 62.5 sq.km with 91,201 households. The study population included elderly living in old age homes.

### Sample size and sampling technique

The sample size for this study was calculated based on the prevalence of a previous study conducted by Rakesh M Patel *et al.*, in 2012, in Gujarat, which showed a prevalence of 25% of elderly living in old age homes.<sup>[12]</sup> Taking this as a reference value and using the formula  $N = Z\alpha^2pq/[L]^2$ , the sample size was calculated as follows.

Using the formula,

$$N = Z\alpha^2pq/[L]^2$$

Where, Z = 1.96 at a 95% confidence interval

p = prevalence of disease/event (referred value)

$$q = 100 - P$$

L = allowable error 5%

Substituting it in the formula,

$$[Z = 1.96, P = 25\%, q = 75 (100-25), L = 5]$$

$$N = \frac{1.96 \times 1.96 \times 25 \times 75}{5 \times 5} = 300$$

Accounting for 10% non-response, the final sample size was calculated as 330 [N = 330].

### Inclusion and exclusion criteria

Elderly individuals who were not chronically ill or not on any psychiatric medications were included in the study. Those not willing to give informed consent and not willing to participate in the study were excluded.

### Sampling method

From the 31 old age homes in urban South Chennai, 10 homes from which permission was obtained were chosen. From this sampling frame, 330 participants were selected using the simple random sampling method.

### Ethical approval

The proposal for this study was presented before the Institutional Ethics Committee and approval was obtained before beginning the study.

IEC number: 002/SBMC/IHEC/2018/1178

## Data collection method

Data were collected using a pretested, structured questionnaire. Information regarding sociodemographic characteristics and various social factors and reasons that influenced them to choose old age homes was collected.

## Statistical analysis

Data collected were entered into Microsoft Excel and analyzed using the SPSS software, version 22.

## RESULTS

The results of this descriptive cross-sectional study are presented as tables and graphs below:

The sociodemographic characteristics of study respondents are presented in Table 1. Nearly 40.3% of the study participants belong to the age group between 71 and 80 years. Among the 330 study participants, nearly half of them were female (50.9%). More than half (66.6%) of them had an education qualification of middle school and above.

### Financial status of study participants

Various sources of income for study subjects are presented in Table 1. Among the study population, 31% had insurance coverage, 27.6% had personal savings, 20.6% were supported by children financially, 18.5% had pension, 1.5% had assets in their name, and the remaining 5.8% were getting rent.

### Care and support of the elderly

Determinants of care and support of the elderly are presented in Table 1. In aspects of frequency of visits from relatives, around 70% of them elderly, were left unattended by friends and family. Around 3.9% of the elderly were visited by friends or family rarely. Nearly 13.3% had their relatives meet them once in 3 months, 5.3% monthly, 4.5% half-yearly, and 2.7% once a year. Care and support through means of calls, letters, and visits, when analyzed, showed that 27.3% were provided care and support through children, 22.2% by relatives, and 16.9% by friends. The remaining majority (33.6%) were still left unattended.

The decision taker for admitting the elderly in old age home is presented in Figure 1. From the figure, we can see that for 30.3% of the older persons, the decision to stay in old age homes was chosen by their relatives, whereas 27% of the elderly made a self-decision to live in old age homes. For 26.7% of residents, their children took the decision of staying at old age homes.

### Psychological status

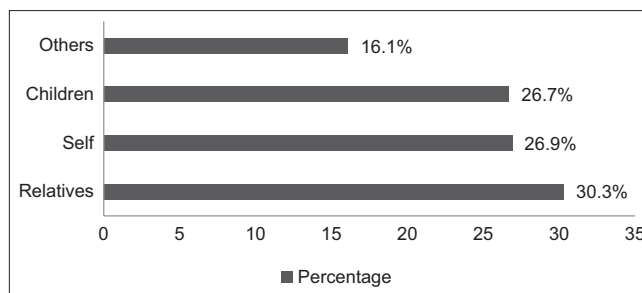
#### *Satisfaction of residents regarding stay at old age homes*

The satisfaction of the study respondents regarding their stay at old age home is presented in Figure 2. Among our elderly study population, the majority of the respondents (76%) were satisfied with their stay at an old age home. The remaining minimum of 24% was not satisfied with staying at an old age home. Their options to stay are presented in Table 1. Of the

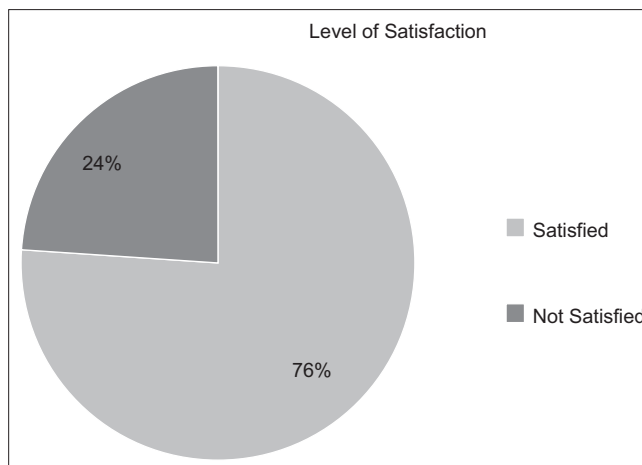
**Table 1: Frequency distribution of various characteristics of respondents**

Sociodemographic variable	Frequency (n=330)	Percentage
<b>Age</b>		
60-70	122	36.9
71-80	133	40.3
Above 80	75	22.7
<b>Sex</b>		
Female	168	50.9
Male	162	49.1
<b>Previous occupation</b>		
Skilled worker and semi-skilled worker	154	46.6
Unskilled and unemployed	176	53.4
<b>Education status</b>		
Middle school and above	220	66.6
Below middle school	110	33.4
<b>Marital status</b>		
Married	26	7.9
Not married/single/widowed	304	92.1
<b>Type of family</b>		
Nuclear	53	16.1
Joint	14	4.2
Destitute	145	43.9
Abandoned	118	35.8
<b>Religion</b>		
Hindu	300	90.9
Christian	20	6.06
Muslim	10	3.04
<b>Source of financial income</b>		
Insurance	102	31
Savings	91	27.6
Children support	68	20.6
Pension	61	18.5
Rents	19	5.8
Assets	5	1.5
<b>Determinants of care and support</b>		
<b>Visit</b>		
Once a month	17	5.3
Quarterly	44	13.3
Twice a year	15	4.5
Once a year	9	2.7
Rarely	13	3.9
None	232	70.3
<b>Care and support</b>		
None	111	33.6
Children	90	27.3
Friends	56	16.9
Relatives	73	22.2
<b>Preferred company to stay</b>		
Children	52	15.7
Relative	27	8.3
No	251	76

24% who were not satisfied with their stay at old age homes, 15.7% wished to stay with their children, and the remaining 8.3% desired to stay with their relatives.



**Figure 1:** Decision makers responsible for admitting elderly in old age home (n = 330)



**Figure 2:** Study participants satisfied with stay at old age home (n = 330)

## DISCUSSION

Our study assessed various social factors that have been influencing senior citizens to utilize old-age homes. With an increase in life expectancy, the proportion of elderly is increasing in our country. It has been reported that the elderly population is more than 100 million and is expected to rise to 300 million by 2050, thereby making India the leading country with elderly when compared to Japan.<sup>[13,14]</sup>

There are very little data on the total number of old age homes in India. It is reported that there are approximately 700 old age homes in India, of which nearly 46% (325) of old age homes are free of cost, whereas the remaining are on a pay-and-stay basis. There are 728 old-age homes in India today. Detailed information on 547 homes is available. Out of 28 states in India, Kerala has 124 old age homes, which is the maximum.<sup>[15]</sup>

A study conducted by Samuel *et al.*<sup>[16]</sup> in Chennai compares the prevalence of the elderly population residing at home with those residing at old age homes. With recommendations of “National Policy on Older Persons” under the Maintenance and Welfare of Parents and Senior Citizens Act 2007,” The Ministry of Health and Family Welfare (MOHFW) launched the National Programme for Healthcare of the Elderly (NPHCE) in 2010-2011 targeting all elderly people above the age of 60 years. This program covers the entire county and its aims are to provide separate, specialized, and

comprehensive healthcare to senior citizens at various levels. These services are provided in an integrated manner aiming to provide promotional, preventive, curative, and rehabilitative services at various government health facilities.

It has been noted that the majority of the old age home residents were forced to leave to old age homes, but currently, they are satisfied with their stay. From our study, of the 24% who were not willing to stay in old age homes wished to stay either with their children or relatives. Maximum study respondents (31%) had financial support through insurance, whereas other sources of financial income were children support, savings, pension, etc.,. From a study conducted by Rajput M *et al.* it has been noticed that elderly require long-term care and follow-up for chronic conditions and even a small amount of user fees raises concern in them. In the absence of health insurance and poor home care in rural areas, other low-cost alternatives to hospital care such as mobile services, special camps, and ambulance services have been suggested.<sup>[17]</sup>

From a study conducted by Dhananjay *et al.*, lack of family care has been a main reason for the elderly to shift from their own homes to old age homes. Other studies conducted by Bharathi in 2006 and Mishra in 2008 discuss various reasons such as a change in family structure, insufficient housing, and economic hardship for the elderly to move to old age homes.<sup>[18,19]</sup>

A study conducted by Smith presents “misbehavior of children” (29.8%) as the most common factor for residing in old-age homes. Similarly, a study conducted by Lalan in 2014 reports that poverty and low socioeconomic status are major reasons. People living in their selected old age homes moved due to reasons of neither having money nor being able to earn money due to their weakness and inability to work. Even their children were enrolled in similar occupations as them and were unable to support the family and take care of their parents.

Studies conducted by Gupta *et al.*, (2014),<sup>[20]</sup> and Gurushekhran, (2008)<sup>[21]</sup> showed that poverty has been a reason for leaving the elderly behind as abandoned or destitute. “Having no sons” was yet another factor, mentioned by residents for coming to old age homes. “Adjustment problem” is supported by the study performed by Siddhu (2010). “Settlement of children at abroad” is again supported by the study by Gupta *et al.*, (2014). The residents, who belonged to the well-to-do section of the society, stated that they came to the old age home to lead an independent and peaceful life without any interference. This finding is supported by Panigrahi *et al.* (2012).<sup>[22]</sup>

Change in the family structure from joint families to nuclear families has been a major reason for leaving the elderly behind. The nuclear type of family is now thought to be well manageable and acceptable. This change has also affected the elderly emotionally. Many elderly decide to leave their homes by themselves as they are afraid of being under their children. Especially in the urban sectors, the elderly voluntarily join old age homes and plan their retainment period with the same group of people.

## CONCLUSION

From this study, various social factors are identified as reasons for choosing old age homes. With the increasing elderly population and urbanization, steps need to be taken to accept the changes. Residents should be encouraged to participate in domestic activities in the old age homes. Depending on their activity of daily living, they can be allotted some mild work. Some participants were found to get pensions. Authorities of the old age home should make arrangements for the pension to reach the elderly directly. Family members, friends, and relatives should be encouraged to give regular visits and spend time with the elderly so that the bonding will have a positive effect on their mental health. Aging and geriatric health should be considered sensitively and should be made mandatory for schools and colleges to arrange visits to old age homes, thereby keeping the younger generation aware of the issues. Through such visits, the residents get to spend quality time with children. Motivational talks among schoolchildren on their responsibility to respect, honor, and protect the elderly should be encouraged.

## Financial support and sponsorship

Nil.

## Conflicts of interest

There are no conflicts of interest.

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