www.ThePharmaJournal.com

# The Pharma Innovation



ISSN (E): 2277-7695 ISSN (P): 2349-8242 NAAS Rating: 5.23 TPI 2023; 12(11): 416-420 © 2023 TPI

www.thepharmajournal.com Received: 18-09-2023 Accepted: 22-10-2023

#### Dr. Priyanka Beniwal Department of HDFS, I.C. College of Home Science, CCS

HAU, Hisar, Haryana, India

#### Dr. CK Singh

Professor, Department of HDFS, I.C. College of Home Science, CCS HAU, Hisar, Haryana,

## Psychological well-being and depression among senior citizens: A co-relational study

### Dr. Priyanka Beniwal and Dr. CK Singh

The psychological well-being of senior citizens is an intricate construct encompassing various facets such as life satisfaction, positive affect, self-esteem, and a sense of purpose in life. As the global population continues to age, understanding the intricate relationship between psychological well-being and depression among senior citizens has become a matter of paramount importance. The present study was conducted with the aim to investigate the relationship between psychological well-being and depression of senior citizens. The study was carried out on 400 elderly individuals from Hisar and Sirsa city comprising of 200 males and 200 females. A self-created questioner was utilised to gather data on personal and socioeconomic characteristics. Senior citizens' psychological well-being was examined using the Psychological Well Being Scale, while depression was assessed using the Geriatric Depression Scale (1986). Results regarding the relationship of psychological well-being and depression of senior citizens emphasized that all the sub aspects of psychological well-being were negatively and significantly correlated with depression, suggesting that higher levels of psychological well-being are associated with a reduced risk of depression in the elderly.

**Keywords:** Psychological well-being, depression, life satisfaction

#### Introduction

Old age is typically mentioned in relation to the many sorts of challenges experienced by the elderly and the welfare measures involved with providing them with a higher quality of life. Physical disorders, psychological illnesses, and adjustment issues have all been documented to be extremely frequent throughout this stage of life. People in general are approachable and open about the problems they confront as they near the end of their life. Wrinkling of the skin, slowed posture, flabbiness of muscles, impaired eyesight and hearing, and a decline in the efficiency of the cardiovascular system are all signs of ageing. The theme of this age period is loss, which may be recognised as loss of physical capacities, loss of intellectual processes, loss of job role and occupational identification (retirement), loss of intimate links, such as the death of a spouse, friends, or other acquaintances, and loss of social status. (Dhara and Jogsan, 2013)

Psychological well-being of senior citizens refers to the state of their mental and emotional health and encompasses various aspects of their psychological state. It is characterized by positive feelings, a sense of purpose and fulfilment, and the ability to cope with life's challenges effectively. It's important to recognize that psychological well-being is a multidimensional concept, and its definition can vary from one individual to another. Additionally, it can be influenced by various factors, including personal resilience, social support, and access to healthcare and mental health services.

Ageing is a natural developmental process that brings about a variety of changes in the physical, psychological, hormonal, and social situations. To some extent, old age has been considered as a troublesome era of one's life. According to Edward, ageing is defined as "the elements of time living." "Ageing is a part of living," he says. Ageing starts with conception and ends with death. Ageing is best characterised as the survival of an increasing proportion of people who have finished the typical adult tasks of working and bearing children. Ageing is characterised physiologically by a decline in body functioning. With so many losses and disappointments in life, depression is one of the most frequent psychological diseases. Depression refers to a diverse group of phenomena ranging from a simple mood swing to a severe emotional condition. Psychological well-being has been extensively researched since there is a need to better the mental circumstances of those who are impacted by mental health disorders.

**Corresponding Author:** Dr. Priyanka Beniwal Department of HDFS, I.C. College of Home Science, CCS HAU, Hisar, Haryana, India

According to research, the elderly have a higher prevalence of depression, lower life satisfaction, and more adjustment challenges. A healthy balance of mind, body, and spirit that results in a broad sense of well-being is generally characterised as wellness. (Tandon, 2017) <sup>[7]</sup>.

Tejal, 2010 <sup>[6]</sup> conducted research on psychological wellbeing of elderly people in India. It was found that institutionalised elderly people, particularly ladies, have higher psychological well-being than younger people. The current study aims to discover the condition of depression and psychological well-being in old age.

Depression is a mild mental illness. It is not just the usual sadness that everyone may feel. Depression is related to situations that include sadness, gloomy, despair, low selfconfidence and excessive self-blame. Depression is caused by ones' their negative self-perceptions and their verbalism (Martin et al. 2018) [3]. With so many losses and disappointments, depression is one of the most frequent psychiatric illnesses in the regular course of life. Depression in old age is widespread and complicated. Depression in old age causes various difficulties in carrying out regular duties. Many elderly people are unable to enjoy life since they are alone. The aged population is growing in India and Asia, implying that there is a need to expand the field of Geriatric Psychiatry. Loneliness, poor social and family support, isolation, dependency, lack of family care and affection, insufficient time spent with children, stressful life events, perceived poor health, lower level of spirituality, and increased use of emotion-based coping, according to data from India, increase the risk of depression among the elderly. Traditional joint family arrangements are disappearing in India, and nuclear families are taking their place in urban areas. (Jena et al. 2018) [2].

#### Objectives

- 1. To assess the level of psychological well-being among senior citizens.
- 2. To assess the level of depression among senior citizens.
- 3. To determine the relationship between psychological well-being and depression of senior citizens.

#### Methodology

The state of Haryana was purposefully chosen as the location for the current inquiry. A district list was created. At random, the districts of Hisar and Sirsa were chosen. The cities of Hisar and Sirsa were also considered for the sample. To obtain the requisite sample, different locations in each city were sought. A list of elderly persons aged 65 to 70 years old was compiled. A total of 400 elderly individuals were chosen at random. A sample of 200 elderly persons was picked at random from each district. The sample included an equal number of men and women. There were two categories of factors studied: independent (personal and socioeconomic characteristics) and dependent (psychological well-being and

its dimensions). A self-created questioner was utilised to gather data on personal and socioeconomic characteristics. Senior citizens' psychological well-being was examined using the Psychological Well Being Scale (Sisodia and Choudhary, 2005) <sup>[5]</sup>, while depression was assessed using the Geriatric Depression Scale (1986). For administration of selected measures, the head of the selected families were approached and purpose of the study was explained. The respondents of both the cities were contacted individually and time and dates were finalized for collection of data. All the senior citizens were told about the purpose of data collection. After that personal interview was taken for collecting information of each scale i.e. personal, socio-personal, psychological well-being and depression scale.

The qualitative data received from the measures were quantified and analysed using the social science statistical tool (SPSS for Windows). Prior to analysis, quantitative data were reviewed for accuracy of data input and missing values, and appropriate tables were created based on the kind of information required. An alpha level of .05 was utilised as the threshold of significance in all statistical tests.

The acquired data were sorted and tabulated in line with the criteria established in order to reach meaningful and relevant conclusions in accordance with the objectives. Data analysis included classification, coding, tabulation, and statistical analysis. Various statistical methods used to interpret findings are listed below.

- a) Frequency and percentage: Frequency and percentages were calculated for preparing personal and socio-personal profile, psychological well-being and depression of senior citizens.
- b) Coefficient of correlation: Pearson correlation coefficients were computed to examine relationship between psychological well-being and depression of senior citizens.

#### **Results and Discussion**

#### Assessment of psychological well-being of senior citizens

The selected 400 respondents were assessed to know the level of psychological well-being among them. Different dimensions of psychological well-being are life satisfaction, efficiency, mental health, sociability, interpersonal relations and overall psychological well-being. In this section frequency distribution of senior citizens on the basis of different categories of psychological well-being are presented. The normal functioning of the psychological system can be used to define psychological well-being. Psychological well-being is how people assess their life. These assessments might take the shape of cognitions or emotions. Psychological well-being is created by two dimensions: the absence of despair and emotional loneliness, as well as the existence of happiness, life satisfaction, a sense of security, and future ambitions (Savikko, 2008) [4].

Table 1: Psychological well-being of senior citizens as per residential area

Psychological well-being	Hisar (n <sub>1</sub> =200)	Sirsa (n <sub>2</sub> =200)	Total N=400			
	Life satisfaction					
Low (17-27)	67 (33.50)	35 (17.50)	102 (25.50)			
Moderate (28-38)	83 (41.50)	115 (57.50)	198 (49.50)			
High (39-48)	50 (25.00)	50 (25.00)	100 (25.00)			
Efficiency						
Low (16-26)	59 (29.50)	26 (13.00)	85 (21.25)			
Moderate (27-37)	94 (47.00)	110 (55.00)	204 (51.00)			
High (38-48)	47 (23.50)	64 (32.00)	111 (27.75)			
Mental health						
Low (22-30)	76 (38.00)	62 (31.00)	138 (34.50)			
Moderate (31-39)	78 (39.00)	96 (48.00)	174 (43.50)			
High (40-48)	46 (23.00)	42 (21.00)	88 (22.00)			
Sociability						
Low (20-28)	55 (27.50)	60 (30.00)	115 (28.75)			
Moderate (29-37)	85 (42.50)	113 (56.50)	198 (49.50)			
High (38-46)	60 (30.00)	27 (13.50)	87 (21.75)			
Interpersonal relations						
Low (20-28)	38 (19.00)	40 (20.00)	78 (19.50)			
Moderate (29-37)	93 (46.50)	91 (45.50)	184 (46.00)			
High (38-46)	69 (34.50)	69 (34.50)	138 (34.50)			
Ov	erall psychological wel	l-being				
Low (95-138)	38 (19.00)	36 (18.00)	74 (18.50)			
Moderate (139-182)	99 (49.50)	106 (53.00)	205 (51.25)			
High (183-226)	63 (31.50)	58 (29.00)	121 (30.25)			

<sup>\*</sup>Figures in parentheses indicate percentage

Table 1 depicts the distribution of respondents' psychological well-being by residential location. According to the statistics relating to the overall psychological well-being of all respondents, 51.25 percent of senior persons reported a moderate degree of psychological well-being, followed by high (30.25%) and poor (18.5%). Trend of psychological well-being was same among senior citizens of both the residential areas though there were variations in percentages. The table also shows the distribution of respondents on subaspects of psychological well-being, and it was discovered that the majority of Hisar respondents had moderate level of life satisfaction (41.50%), followed by low (33.50%) and high (25.00%), whereas the majority of Sirsa respondents had moderate level of life satisfaction (57.50%), followed by high (25.00%) and low (17.50%). Both districts showed similar trends in terms of efficiency.

Table 1 further explains that majority of the respondents from both the residential areas had moderate level of mental health, sociability and interpersonal relations followed by low and high level.

#### Depression of senior citizens as per residential area

Table 2: Depression of senior citizens as per residential area

Depression	Hisar (n <sub>1</sub> =200)	Sirsa (n <sub>2</sub> =200)	Total N=400
Normal (0-9)	66 (33.00)	52 (26.00)	118 (29.50)
Mild (10-19)	102 (51.00)	107 (53.50)	209 (52.25)
Severe (20-30)	32 (16.00)	41 (20.50)	73 (18.25)

<sup>\*</sup>Figures in parentheses indicate percentage

Table 2 shows the frequency distribution of senior citizens regarding the depression levels as per residential area. Data related to total sample highlights that majority of the senior

citizens had mild level of depression (52.25%) followed by normal (29.50%) and severe depression (18.25%). Similar trends were observed in both the residential areas though the percentage may vary.

The results got support from the study of Mustaffa and Alkaff (2011) [12] who conducted a study to detect the level of depression among aged, effect of depression on their emotion and also to find out the type of emotional support needed by the aged in the institution using quantitative and qualitative approach. Examination revealed that all the 26 elderly tested were diagnosed with depression disorders consisting 19 elderly having a low level of depression, followed by 3 elderly having mild, 2 elderly moderate and 2 elderly severe. Furthermore, the results showed that emotional effects of elderly in the institution were critical. Symptoms such as regret, sadness, sleep complaints, feeling useless, and isolation of self, proved its criticality.

## Correlation between psychological well-being and depression of senior citizens

Correlation coefficient was computed to examine the relation between depression and psychological well-being of senior citizens. As presented in the table 3; there exists a negative correlation between sub aspects of psychological well-being and depression of senior citizens. All the sub aspects of psychological well-being were negatively and significantly correlated with depression viz. life satisfaction (r = -0.56\*), efficiency (r = -0.54\*), mental health (r = -0.60\*), sociability (r = -0.55\*), interpersonal relations (r = -0.53\*) and overall psychological well-being (r = -0.61\*).

It can be interpreted from the results that higher the level of psychological well-being lower was the level of depression. Increase in the psychological well-being of senior citizens leads in decrease in the level of depression.

**Table 3:** Correlation between psychological well-being and depression of senior citizens

Sub aspects of psychological well being	Depression
Life satisfaction	-0.56*
Efficiency	-0.54*
Mental health	-0.60*
Sociability	-0.55*
Interpersonal relations	-0.53*
Overall psychological well-being	-0.61*
	Life satisfaction Efficiency Mental health Sociability Interpersonal relations

Significant at \*5% level of significance

Mughal and Fatma (2015) [11] also advocated that correlation between depression and psychological wellbeing among elderly males and females reveals that there is positive correlation among elderly males and a negative correlation among elderly females. Results given by Dhara and Jogsan (2013) [11] revealed that negative correlation was found between depression and psychological well-being (r= -0.73). The results from the present study got support by the findings of Srisailamaiah *et al.* (2016) [13] conducted a study on 60 senior citizens out of which 30 from non-institutionalized and were 30 were residing in old age homes of Tirupati from Chittoor district, Andhra Pradesh. The results of the study indicated a negative and significant co-relation between depression and psychological well-being (-0.68).

The results also got support from the findings of Mohanth and Begum, (2011) [10] who found a positive correlation between depression and loneliness, and they had significant negative relationship with well-being. Implications were highlighted in terms of policy formulations, family as well as community-based care the aged. Talking to the elderly, keeping them involved through activities, and offering healthy meals with a touch of love and compassion will undoubtedly be a human way to making them feel good, positive, and help them create a zest for life. Coping with stress well in old age leads to greater mental health, fulfilment, happiness, and a higher quality of life (Sahoo, 2001) [9].

Senior folks' psychological well-being is a complex concept that includes factors such as life satisfaction, positive affect, self-esteem, and a feeling of purpose in life. The frequency and severity of depression in older individuals are directly related to this multidimensional well-being. Depression in elderly persons is a major public health problem because it is linked to higher morbidity and death, worse quality of life, and increased healthcare utilisation.

Numerous research have been conducted to study the relationship between psychological well-being and depression in older adults. There is a persistent negative association between these two notions, implying that higher levels of psychological well-being are connected with a lower incidence of depression in the elderly. Social support, physical health, and a sense of belonging have all been recognised as important contributors to psychological well-being, which in turn serves as a protective factor against depression.

Furthermore, therapies aimed at improving psychological well-being have showed promise in lowering depressed symptoms in the elderly. Psychosocial therapies, cognitive-behavioral therapy, and mindfulness-based programmes have been shown to improve psychological well-being and reduce depression in this group. Furthermore, community involvement and social participation have been recognised as effective interventions for increasing psychological well-

being and lowering the risk of depression in elderly persons.

#### Conclusion

The study's findings revealed that a large proportion of the elderly had a moderate degree of psychological well-being and its sub-aspects. Results regarding depression confirmed that 52.25 percent of the senior citizens from the total sample had mild level of depression. Further the results regarding the relationship of psychological well-being and depression of senior citizens emphasized that all the sub aspects of psychological well-being were negatively and significantly correlated with depression.

#### Recommendations

- Intervention to improve the psychological well-being, to reduce loneliness and depression in senior citizens needs to be planned by the organizations which are working for the welfare of the elderly.
- Different activities like, meditation and spiritual gatherings, yoga and regular exercise sessions should be organized by the NGOs time to time for improving the well-being of senior citizens.
- The concept of "time bank" should be incorporated by the Government in India also, so that they can manage retirement expenses other social problems of seniors.

#### References

- 1. Dhara DR, Jogsan YA. Depression and psychological well-being in old age, Journal of Psychology and Psychotherapy. 2013;3(3):1-4.
- 2. Jena N, Das S, Deo HK. Quality of Life, Psychological Well-being and Depression among Elderly: A Corelational Study. Global Journal of Intellectual Development. 2018;4(2):555635.

  DOI: 10.19080/GJIDD.2018.04.555635
- 3. Martin W, Yani A, Dayati R. Differences of Correlation Factors of Depression among the Senior Citizens who live with their Family and Those who Live in Nursing Home, ELEVATE. 2018;1(1):35-44.
- 4. Savikko N. Loneliness of older people and elements of an intervention for its alleviation. Ph.D. Thesis, Department of Nursing Science, Faculty of Medicine, University of Turku, Finland; c2008.
- 5. Sisodia DS, Choudhary P. Psychological Well-Being Scale. National Psychological Corporation, Agra; c2005.
- 6. Tejal N. Psychological well-being: A study of place of residence for gender and age among aged people. Indian Journal of Psychology and Mental Health. 2010;4:145-149
- 7. Tandon M. A study on Psychological well-being among Elderly. International Journal of Home Science. 2017;3(1):387-389.
- 8. Yesavage JA, Brink TL, Rose TL. Development and validation of a geriatric depression screening scale: a preliminary report. Journal of Psychiatry Resonance. 1983;17(1):37-49.
- 9. Sahoo FM. Loneliness in the elderly. A project report, centre of advanced study in psychology, Utkal University, Bhubaneswar, Orissa; c2001.
- 10. Mohanth N, Begum FA. Geriateric depression, loneliness and psychological well-being: Role of age and gender. Indian Journal of Psychology and Mental Health. 2011;5(2):53-61.

- 11. Mughal MW, Fatma N. Psychological well-being and depression among inhabitants of old age homes of Jaipur, Rajasthan. Indian Journal of Applied Research. 2015;5(6):271-273.
- 12. Mustaffa MS, Alkaff SOA. Depression among elderly. International Conference on Social Science and Humanity. 2011;5:420-423.
- 13. Srisailamaiah M, Suresh K, Reddy V. Depression and psychological well-being among living institutionalized and non-institutionalized elderly. The International Journal of Indian Psychology. 2016;3(4):131-139.