



A DESCRIPTIVE CORRELATIONAL STUDY TO ASSESS THE HEALTH PROBLEMS OF ELDERLY IN SELECTED VILLAGES AT THIRUVALLUR DISTRICT.

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Abstract:

Introduction: Aging is inevitable, crucial period in life. Aged people undergo lots of physiologic, psychological changes and develop health related problems too.

Methodology: In order to identify health related problems of elderly, descriptive correlational study was conducted in selected villages of Ayanambakkam. Two hundred elderly populations were selected by using convenient sampling technique.

Results: Most common problems among elderly males and females were memory disturbances (56.4%, 43.6%) Cataract (58.9%, 41.4%), hearing problems (71.9% 28.1%), Joint pain (33.65%, 66.4%), Urinary incontinence (30.7%, 69.3%), Diabetes mellitus (64.7%, 35.3%) and Hypertension (58.6%, 41.4%) respectively. The memory disturbances, cataract, diabetes mellitus, hypertension and hearing problems in males were higher than females.

Conclusion: The disease risk pattern differs between males and females and the finding will be useful in designing appropriate strategies for the population.

Introduction:

India's population is likely to increase by 60 per cent between 2000 and 2050 but the number of elders, who have attained 60 years of age, will shoot up by 360 per cent. India has around 100 million elderly at present and the number is expected to increase to 323 million, constituting 20 per cent of the total population, by 2050(United Nations Population Fund). On the other hand, Old age is viewed both as a stage in the life span of an individual and also a segment of a population in the society , public consider people who are 50-75 years of age as old. Developmental psychologists consider age 60 as the demarking line between middle and old age where as social researcher set the boundary of old age as 65. There are currently 550 million elderly aged 60 and over in the world and of these 335 million live in the developing countries within the last 50 years. The rate of accelerated death in developing countries has visibly decreased and life expectancy at the birth has increased from 41 years in the early 1950's to 62 years in 1990. Life expectancy in 2010 increased to 66 years in men and in women it increased from 65 to 67 years, 2020 life expectancy is predicted to reach 70. In India about 7% of the elderly population over the age of 60 and it is expected to

Increase by 20% by the year of 2030. In a study conducted by Vijayamunni [1997] it was reported that according to the population projections for the next 20 years period, worked out by the expert commissioners of India the 60 plus population of India will grow from 56 million in 1991-1996. 82 million in 2011 and 113 million in 2016. The needs and demands of the elderly population have been increasing as they have not been given much attention by the family members and relatives to modernization, negligence, increase in nuclear family system and inadequate time to take care of them. Most of the problems in the elderly are undiagnosed, underdiagnosed or neglected due to various reasons such as economic problems, perceiving them as burden, loss of spouse, separation of elderly from children due to marriage, higher education etc. Nurses being a integral part of health, and have more opportunities to deal with elderly than any other professionals, it is essential to assess the magnitude of the problems of elderly. Hence this study was undertaken to assess the health status among elderly population, in order to assist elderly in early identification of their problem and help them to receive care based on their problems and needs.

Statement of the problem

A descriptive correlational study to assess the health problems of elderly in selected community at Thiruvallur district

Objectives of the study

- 1 To find out the health problems among elderly at selected community in Thiruvallur district.
- 2 To find out the association between the selected demographic variables and health problems of elderly population.

Research Methodology:

A survey approach and descriptive study design was adopted for this study. This was conducted at Ayanambakkam villages, Thiruvallur district, TamilNadu. The study population comprises of senior citizens who were aged between 60- 80 years in age of both sex. Sample size in this study was 200 senior citizens. The convenient sampling technique was used to select samples. The structured interview schedule was used to assess the health status of elderly. The tool consisted of demographic variables proforma, clinical variables proforma. It consists of 17 items of health status.

Results and discussions:

Majority of elderly populations were Hindus (74%). In this 100 (50%) were females and (50%) 100 were males. Among them 102(51%) were non Literate, 72(36%) of them have completed their primary education, only 7(3.5%) completed their higher

education and 141(70.5%) of them were married, 10 (5%) were separated, 42(21%) were widowed. Majority 94(47%) were from nuclear family and 45% (90) of them were from joint family. Mostly 90 (45%) of them were non pensioners and 78(39%) of them were non pensioners.

Table.1. Frequency and Percentage distribution of Health Problems of Elderly

Health Problems	Males(n=100)		Females(n=100)	
	f	%	F	%
Memory Disturbances	58	56.4	45	43.6
Cataract	66	58.9	46	41.1
Hearing Problem	82	71.9	32	28.1
Joint Pain	36	33.65	71	66.4
Urinary Incontinence	8	30.7	18	69.3
Diabetes Mellitus	46	64.7	25	35.3
Hypertension	54	58.6	38	41.4

The association between the selected demographic variables and health status of elderly population

Most common problems among elderly were as age increases the health problems were more common among elderly, which may differ according to their gender. The prevalence of Memory disturbances (56.4% in males and 43.6%in females), cataract (58.9% in males and 41.4% in females) , hearing problem (71.9% in males and 28.1% in females) ,joint pain (33.65% in males and 66.4% in females), urinary incontinence(30.7% in males and 69.3% in females), diabetes mellitus (64.7% in males and 35.3% in females) and hypertension (58.6% in males and 41.4%in females) differ between men and women.

Discussion

The findings of the study indicated that as the age advances, whether males or females are prone to have health problems. Males are affected with more problems like memory disturbances, cataract, diabetes mellitus and hypertension than females. While planning for health care interventions the findings of the study can be used to customize the interventions based on gender health problems.

Conclusion

The study can be conducted on large sample to generalize the results. The study can be conducted in different settings. A study can be conducted on quality of life among the elderly population.

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