

Social and Behavioural Sciences

- **Wellbeing of residents in care homes for seniors**

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Life in senior care homes is often pictured as negative in many researches. In view of recent socio-technological advances, care homes are becoming an alternative living arrangement for many elderly. In an ICSSR funded study on mental health problems of residents in Free and Pay & Stay senior care homes of Andhra Pradesh (United), data pertaining to life experiences of 600 elderly men and women (60-70 years) were examined. Life experiences in terms of health status, perception of social supports, flexibility of behavior, self-rated health, functional competence, attitudes towards personal aging, physical and psychological distress. Standardized tools suitable to Indian Elderly were used to collect Data. Findings suggest that those with positive self-rated health, moderate to high functional competence, flexibility of behavior, positive attitude towards personal aging, reported better physical and psychological wellbeing. Implications of findings to improve life conditions of care home residents are discussed.

- **Intergenerational perceptions on care and welfare of senior citizens – inputs from a follow up study**

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Dual career families, market economy, increasing unemployment have contributed to changes in living arrangements and a degradation of a value of filial care. The potent availability of informal support by the family member is decreasing and eventually decline in the parent – support ratio. As a follow up of a study on Intergenerational perceptions on aging, elder care and services for the elderly, an attempt has been

made to reexamine elder care issues in 2014 and 2016 as a follow up study carried out in 2010-12. In addition to the earlier panel of subjects a fresh sample of 400 in different generations (35-44, 45-45, 46-50, 60-65) were interviewed in 2014 – 2015. Trends on Intergenerational perceptions suggest that there is a transition in the value of filial care, alternative care services, ageist attitudes and awareness on policy provisions, services and programmes for senior citizens. Need for strategic plans are to be drawn to catch the problem by its fore lock by considering the new revised policy for senior citizens.

- **Psychological wellbeing of young – old, old-old and oldest – old men and women**

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This study is an attempt to assess the psychological wellbeing in a sample of young-old, old-old and oldest-old older men and women (N = 280). The inputs were drawn from the data sets of UGC and ICSSR projects on longevous individuals. Results indicate cohort differences in the psychological wellbeing. The socio-demographic sub-group differences in the wellbeing are analyzed and the need for policy interventions to ensure psychological well-being in the longevous persons are discussed.

- **Awareness and utilization of Social Security schemes among the elderly patients visiting the Geriatric Medicine Department, AIIMS**

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Introduction: India like other part of the world is facing the phenomenon of population ageing. This increase in the elderly population will require the government to be prepared with

adequate socio-economic measures. As a welfare state, India has carved out initiatives for its elderly and has mechanisms in place for the policy and program implementation. The Ministry of Social Justice and Empowerment is the nodal ministry in the country for the welfare of the senior citizen.

AIIMS Geriatric Department began in 2012 and provides comprehensive patient care, imparts under-graduate and post graduate education, carries out in-service training and conducts basic and clinical research in the field of Geriatrics and Gerontology. The outpatient and inpatient department caters to patients from various geographical and socio-economic backgrounds.

Purpose: The paper aims at gauging the awareness and utilization of social security schemes among the elderly visiting the geriatric department.

Method: Through random sampling method the survey was conducted over a span of two months with the 500 patients and appropriate statistical method used for data analysis.

Conclusion: The paper highlights the most common social security schemes availed by the patients, the challenges in availing these and the respondent suggestions for better services.

- **Elder abuse: impact of social work interventions**

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Elder abuse in India has received noteworthy attention in the last two decades abundantly. The Global Response to Elderly Abuse and Neglect, WHO, 2008 report apprehends that the elderly abuse has serious consequences on health and well-being of older people. The patterns of elder abuse include mainly psychological abuse in terms of verbal assaults, threats and fear of isolation, physical violence and financial exploitation. A study has been carried out in Nellore District to know the prevalence of elder abuse and identify the relevance of social work interventions so. Pre-test – post-test research design was adopted for this study. The universe of the study consists of 7349 elderly in Nellore district. A sample of 735 elderly were selected from the universe by the method of simple random sampling with proportionate allocation. The Elder Abuse Suspicion Index (Yaffe MJ et al 2008) and Actual Abuse Test (Bass, D. M., et al 2001) were adopted to obtain information on incidence of elder abuse and types of abuse they experience. The results revealed that more than

three fifths i.e. 66.2 percent of the respondents had abusive experiences, 37.8 percent 'neglect in providing food, clothing, shelter, denying recreation etc' by the family members, 35 percent experienced 'use of harsh words, criticism, threatening, humiliation by the family members. The incidence of abuse in the elderly is predominantly influenced by a select demographic variables, chronicity of health of problems and level of social support received by them. The study revealed that there is a significant difference between pre and post interventions in the prevalence and incidence of abuse and improvement in the social supports. Findings show that social work interventions which were tailored according to the needs of elderly had an impact on elderly.

- **Memory research on Indian elderly: current scenario**

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One of the common concerns of older people is the complaint that their memory was not as good as it was. Empirical studies on memory have highlighted that memory losses are not uncommon in any age. According to statistics, 70% of older adults report that they have memory problems, but objective tests are needed to determine if they have mild cognitive impairment, which is also known as benign senescent forgetfulness (AAMD) and early dementia. Mild cognitive impairment is basically a transitional stage between normal aging and Alzheimer's disease. Studies show that 17% to 34% of elderly people have mild cognitive impairment. One of the significant areas of contemporary gerontological researches is planning of systematic interventions in improving memory. Indian researches carried out in the area of memory and cognition are not many (Ramamurti & Jamuna, 1984, 1993; 1995). The memory researches in India indicate that the few studies carried out on different facets of memory, psycho-social correlates of memory and few on memory interventions. Though there are no contributions on theoretical perspectives on memory in the Indian aged yet the empirical studies are a good beginning and it is hoped that the theory based researches will ensure in due course. The present study focuses on the research carried out on memory and ageing in India and discusses the need for further research.

- **Memory self efficacy and its relationship with health status in community dwelling elderly**

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Research on memory self-efficacy in adulthood has primarily focused on age differences. Strong evidence indicates that older adults have decreased memory self-efficacy when compared to younger adults. Bandura describes four behavioral steps that humans engage in during their daily transactions: analyze a situation, consider alternate courses of action, judge one's ability to carry out this action successfully (self-efficacy), and finally, estimate the results such actions are likely to produce. In the present study, the memory self-efficacy related to everyday performance was assessed for 600 men and women in the Rayalaseema region. An adapted version of memory self-efficacy related to every day memory (Berry et al., 1989) and health status was assessed by using Cornell Medical Index in order to meet the objective of the study. The multi-stage random sampling technique was used to collect the data. The results reveal that The data with regard to memory self efficacy shows that the sub groups namely gender, education, and family differed significantly in their memory self efficacy related to everyday memory. The association between memory self efficacy with other socio demographic variables indicate that the sub groups like district, age, gender, education and self reported health status are significantly associated compared to other subgroups. The data on memory self efficacy shows that they are significant association between memory self efficacy and self reported physical health, psychological health. The results are discussed in the light of memory interventions to improve quality of life of elderly.

- **Anxieties in residents of pay & stay senior care homes**

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It is commonly observed that decline in physical health, changes in memory functions and impaired functioning in late adulthood diminish resilience and adaptive capacity which makes the elderly more prone to anxiety and adjustmental problems. Sources of anxieties in a sample of 160

residents of pay and stay senior care homes located in United Andhra Pradesh were examined. The sample was divided into small groups (N = 10 x 16 = 160) and focused group discussions were organized on certain identified themes to examine sources of anxiety. Results show that health, disease/disability and resultant dependency, health care costs, declining family care supports and impending death were found to be the significant sources of anxiety among residents. Psychological aid in the prevention of problems of mental health are discussed.

- **Effect of individual vs. group counseling in older adults with Diabetes Mellitus**

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It is a common assumption that the knowledge of diabetes will often motivate the to keep levels of diabetes under control. From a total sample of 180 diabetic male and female subjects a select sample of 60 (Mean age 63.4 yrs) were subjected to Individual (n=30) and Group counseling (n=30) sessions in a Pre-Post. Based on the background information of individuals, psycho educational programmes at individual and Group levels were extended. Results revealed that majority of subjects with diabetes mellitus were benefited by intensive group counseling sessions (over 4 weeks with 3 days in a week) along with regular dietary measures, physical exercises, relaxation and pranayama compared to individual counseling with relaxation, pranayama, dietary and physical exercises.

- **Stress and mental health status among community dwelling elderly**

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Ageing is a universal and inevitable developmental phenomenon accompanied by a number of changes in physical, psychological and social domains. The financial insecurities and the sudden loss of earning, makes it difficult for the elderly to accept the sudden change and they get into a mode of stress and Mental Health. Social and psychological stressors are part of daily life and may be a source of psychological problems. The way the people react to stress and Mental Health are

different. This study is an attempt to examine the stress and mental health status among community dwelling elderly of Tirupati, Chittoor district of Andhra Pradesh. Mental Health was assessed by using "Mental Health Inventory" Jagadish and Srivastava (1983). Stress was assessed by "Daily Stress Inventory" by Brantley, (1987). For purposes of the present study, a total sample of 60 was taken out of which 30 were (60+ years) male and 30 were (60+ years) female living in the community. Results reveals that there were significant differences in stress and mental health status of male and female community dwelling elderly people, while negatively correlated with mental health in male and in female elderly. The implications were drawn based on the findings.

- **Migration, diaspora and culture interpretation in elderly Care: Changing time, family and society**

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Introduction Ageing, most often has been studied in the light of the available secondary data and also by conducting primary research on various issues in India. This paper explores the micro culture concept in elderly care, participation in elderly care and management in elderly care in the two states of India, namely Punjab and Kerala where diaspora has drastically changed the economic and social setting of the affairs of the states. People belonging to different strata of society migrated with different objectives to their foreign destinations. With this objective the paper has tried to explore the historical cultural milieu of the elderly care and the impact of the migration, prosperity, education effect on the current situation of elderly care in the two states of India, reporting highest level of international migration.

Material & Methods: The data generated under this research project Building Knowledge Base on Population Ageing in India (BKPAI2011) has been used in this paper and taken some select variables important in the socio-cultural and economic analysis. The systematic literature review, primary survey has delineated the cultural aspects of elderly in these states and segregated the evidences of culture interpretation of elderly care in these select states care in the past.

Results and Conclusions: The result clearly shows the isolation, and worried picture of the elderly in Punjab and reversal of culture of elderly care in this state. Kerala however has comparatively done reasonably better than Punjab though

the culture variables such as family bond, elderly inclusion in decision making, and financial security of elderly, expense cover for health care in Kerala and Punjab.

- **Alerting deficit in Alzheimer's Disease patients**

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Introduction: Attentional deficit in Alzheimer's disease refers to decline in cognitive abilities of orienting to sensory stimuli, maintaining the alert state, and organizing the computations needed to perform the complex tasks of daily life. Deterioration in attentional capacity contributes to impairment in performance in other cognitive domains of Alzheimer's patient. Attention is required for intact memory, and thus impaired in attention would also affect in people with Alzheimer's disease. Besides deficits in selective aspects of attention, study revealed some deficit in achieving and maintaining an alert state towards the target. The deficits in phasic alerting (the faster performance in trials with both location cued compared to no cue) in Alzheimer's patient also influenced performance on spatial orienting (Firbank et al., 2016). However, intact phasic alerting was found in Alzheimer's patient and healthy ageing (Nebes & Brady, 1993). Studies further showed that sustained and focused attention are relatively preserved in Alzheimer's disease (Baddeley, Baddeley, Bucks, & Wilcock, 2001). Thus, the present study examined the alerting task performance differences on Alzheimer's patient and healthy ageing.

Material & Methods: Montreal Cognitive Assessment Scale (MoCA) was administered to categorize the level of cognitive impairment in patients and then alerting state of participant was examined, using a modified version of the attention network task (ANT). Reaction time and performance accuracy of the participants were recorded as performance measures.

Results: Results revealed a significant difference on alerting effect in Alzheimer's patient in comparison to normal ageing for both performance measures i.e. reaction time and response accuracy.

Conclusion: In sum, results suggest that alerting of attention decreases with the progression of Alzheimer's disease as compared to normal healthy ageing.

- **Living longer: for better or worse? Changes in mobile life expectancy among older persons in India between 1995-96 and 2004**

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Objectives: To test whether older persons in India have experienced compression or expansion of morbidity from 1995-96 to 2004 by estimating changes in life expectancy with and without mobility limitation.

Material and Methods: Age specific death rates and mobility limitation prevalence were obtained from Sample Registration System and two rounds (1995-1996/2004) of the National Sample Survey respectively. Sullivan's method was employed for life expectancy with and without mobility limitation by gender and by place of residence.

Results: From 1995-96 to 2004, at ages 60, 70 and 80, older men and older rural persons in India experienced a significant increase in life expectancy without mobility limitation and a significant reduction in the proportion of remaining life with mobility limitation, supportive of compression of morbidity. However, over this period, older women and older urban persons likely witnessed expansion of morbidity, with increase in life expectancy with mobility limitation and in the proportion of remaining life with mobility limitation.

Conclusions: Promotion and maintenance of physical mobility among all older persons in India, with special attention to older women and older urban persons, is called for.

- **Effects of relocation among seniors living in destitute homes**

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An attempt has been made to examine psychological problems of 120 residents living in living in charity homes located in Andhra Pradesh. Older adult residents were personally contacted and data were collected through personal interviews and case studies were prepared. Results show that majority of residents were satisfied with their basic needs but expressed feelings of hopelessness, normlessness, lack of meaning in their lives and feelings of unworthy. Many stated

that life in old age home was a compulsion for them and had no choice. Most residents reported symptoms of physical and psychological distress. Nearly 86% of the residents felt that relocation effects were significant on their current life experiences. The person- contextual factors were examined through case study analysis to understand deeper insights on their life experiences.

- **Social gerontological studies in urban India: A review of its trend**

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Study in the field of ageing started taking pace in late 80s and early 90s. There have already been empirical studies and also concerns after Vienna action plan (1982) but major landmark took place when India as a country introduced its policy which favored and recognized ageing population in 1999. Whereas, empirical studies kept highlighting the issues of older persons at several forums such as academic journals, researches, lectures and seminars. However, civil society started running institutions and organizations for care and welfare of older persons. Society has witnessed socio-political and cultural changes; it has undoubtedly impacted the family as an association and institution and likewise care giving pattern. Understanding ageing in changing socio-cultural milieu in different times and their priorities of issues indicate towards bringing certain kinds of changes. Systematic review of literature will be done on the basis of timeline (1970 onwards) under which different themes will be made for understanding the issues in different socio-cultural and political areas. This study will be done through the accessible literature from the JNU library which will include books, journals, monographs and lectures series. Result will be discussed during presentation and full length paper will be provided before hand. This study will bring out major findings and impetus in diverse areas which will help in understanding concerns of older persons in India. Trend in development of the major challenges for older persons.

- **Impact of psycho-educational interventions on older adults with hypertension**

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Ageing, an inevitable developmental phenomenon accompanied by a number of changes in the

physical, psychological, economic and social conditions. Health problems tend to increase with advancing age and very often aggravate due to lack of awareness, motivation to keep healthy, inappropriate dietary intake and poor health practices. Among other health problems in older years, hypertension in the elderly remains to be an important health challenge. This paper in an attempt to study socio demographic profiles of 60 elderly men and women (60-65 years) with hyper-tension and to examine the efficacy of psycho-educational interventions along with pharmacological, dietary and Older adults in Experimental groups were exposed to different sets of intervention and no interventions to control groups older adults. The findings demonstrated the efficacy of dietary, exercises and in specific psycho-educational interventions in the reduction of levels of hypertension.

- **Health, functional decline and stress among spouse caregivers**

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Spouse, the primary care provider is often subjected to stress and burnout. Gerontological reviews indicate that there is a dearth of researches on how the health and functional decline of one's spouse might affect the wellbeing of care giving spouse. From a prospective study on Health and Aging (UGC 2011-2016) an attempt has been made to examine the care giving stress, physical and functional health of spouse caregivers. A sample of 78 care dyads (elderly couples) in 65-75 years were identified from the total sample and their data collected across Time-1 (2012-13) and Time-2 (2013-14) periods were analysed to understand the trends on care giving stress. Results indicate that stress levels in spouse caregivers were correlated to decline in physical and functional health, length of care giving, gender, age of care giving spouse, disease burden, economic costs of care and absence of social support (family). Findings highlight the need for special provisions for adult spouse caregivers and supportive respite care services to ensure wellbeing of caregivers.

- **Change vs stability in ADLS and PBADLS: findings of a prospective study**

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The role of physical exercises and psychological interventions in promoting active aging is one of the gray areas of gerontological research. A sample of 128 elderly in the age group of 50-59 and 60-69 years were identified from the a prospective study on Health and Aging with an objective to examine the change vs. stability in Activities of Daily living (ADLs) and Performance Based Activities of Daily living (PBADLs) across two testing periods over two year (Time 1 and Time 2). Based on the outcome at the baseline, a Pre and Post intervention design was used on a select sample of 60 (30 in 50-59; 30 in 60-69) to examine the effect of behavioral interventions which were administered in 4 months. Significant change in the performance of certain ADL and PBADL tasks were noticed in the post intervention phase (Time 2). Strategies for healthy aging are discussed.

- **Psychological Concerns Of Rural Aged: Policy Implications**

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One of the special concern groups, in old age who needs attention in services, programmes and welfare are rural elderly. More than half of our elderly are living in rural areas with low literacy, poverty and lack of health care provisions. An explorative research study on elderly men and women (n =1200) living in rural areas of Andhra Pradesh was carried out with an objective to examine psychosocial concerns of rural elderly. Findings suggest that among the rural aged, majority were women with widowhood, no formal education, interrupted and insufficient income, mild to moderate health problems, limitations in certain ADL tasks, and were significant resource to their families. Major psychological concerns were found to be the feelings of loneliness, worry over future health problems and consequent care costs, apprehension of future disability and family supports, feelings of inadequacy and insecurity. Findings are discussed by considering the revised policy provisions for senior citizens.

- **Every Cloud Has A Silver Lining: Financial Facet of Elderly In Kerala**

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Introduction According to 2011 Census, more than 12 per cent of Kerala's population is

constituted by elderly people. In the wake of such a situation, it is very important to look at the real picture to understand whether aged people are really a burden. In this context, financial facet of elderly plays a key role.

Materials and methods To focus on the financial aspect of elderly in Kerala, Kerala Aging Survey 2013 conducted by the CDS, Kerala is used. This paper aims to look at the employment history of the elderly, their present asset-ownership status, and the nature of their economic dependency. Bivariate analysis and logistic regression are used here.

Results The study finds that almost 68 per cent of the elderly population in Kerala have participated in the labour market during their younger age. On looking at the ownership of asset, the study finds that people are becoming poorer and poorer with age. As per the study, factors like age, gender, property-ownership and own income are found to have significant impact on the contribution of 60+ population to their household income. Further, 14 per cent of the elderly are found to be fully financially independent even in their 80s.

Conclusions In a time when the world is trapped in the clutches of population aging and aged population is treated as a burden, it is very important to understand the real picture before drawing a conclusion.

- **Behavioural Problems and Memory Lapses in Residents of Free Senior Care Homes**

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Memory lapses are quite common with advancing age in many older adults. From the dataset of a prospective study on Health & Aging, a sample of 130 elderly residents living in free senior care homes United Andhra Pradesh were selected. Every Day Memory Lapses Inventory and Behavioural Problems Inventory were used to gather data on every day memory complaints and behavioural problems. Results show that the prevalence of behavioural problems is high among residents with memory complaints. The increase in the intensity of behaviour problems and memory complaints were correlated to health, self-rated health, functional capability and family supports. Results are discussed in relation to person environment fit and other psychological factors. The

need based cognitive interventions targeting this special concern group are highlighted.

- **Spiritual Connection: Away to Happier Living**

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Introduction- Spirituality involves the recognition of a feeling or sense or belief that there is something greater than oneself, and that the greater whole of which we are part is cosmic or divine in nature (Spencer, 2012). This paper is an attempt to explore how older people perceive spirituality and why they incorporate spirituality in their daily lives.

Material and method - Data has been collected from 20 respondents in Delhi/NCR area through semi-structured interviews and analyzed under the premise that context is involved in the production of action (structuration theory). The respondents are more than 60 years, living alone or with their spouse in the residential colonies.

Results- It has been seen that spirituality is considered as a coping mechanism and a tool to manage their daily lives in a happier and more peaceful way. It has been found that the elderly have formed a relationship with self that helps them to accept, cope and manage their situation of living without their children.

Conclusion- Our study also supports the notion of Bhagwadgita. The respondents believes in the notion that “they have come alone and they will go alone”. So, instead of feeling sad, frustrated for their absence of children, they have formed a happier relationship with themselves. The meaning and practices of spirituality varies from person to person. The inclination towards spirituality increases with the duration of stay in the house.

- **Does Economic Independence Improve the Health Status of Elderly in India?**

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Introduction: The elderly population in India is growing faster than the overall population. With falling income or no income, poor health and breaking of familial support, elderly are the most vulnerable population sub-group in the population. Though, studies suggest higher incidence of poverty among elderly and poor state of health, there is no

study that examine the association of economic wellbeing and elderly health.

Materials & Methods: Using unit data of 71st round of National Sample Survey January to June 2014, the present study analyses the association of economic independence with self-rated health, morbidity and chronic morbidity among elderly. It tests the hypothesis that whether economic independence predicts better health of elderly in India. Descriptive and Multivariate analysis is used in the analyses.

Results: Results show the importance of the effect of economic independence on poor self-rated health, having chronic diseases and any other morbidity. The odds of reporting poor self-rated health among the partially dependent and the dependent elderly was 1.42 times and 2.71 times respectively higher than the reference category. Again, completely dependent persons are 12% more likely to have chronic diseases compared to those who are economically independent. Similarly, we see that economically dependent elderly are 12% more likely to have any morbidity.

Conclusion: Based on the findings we confirm that economic independence is a significant predictor of elderly health. Strengthening social security system and financial assistance can improve elderly health.

- **Impact of Biosocial Factors on Ageing**

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Introduction: The age of 55-65 years is very important span in life. One has accepted the typical physiological changes that are taking place. In the vocational field the adult is at the top of his career or has just retired. The major task is planning has to be done for the post retirement life, launching children and health problems. Leisure time activities that give opportunities for special contacts and provide satisfaction have to be developed. One has to learn to live with it and take measures to control it. Deterioration of health, financial problems, children not having come upto the expectations, dissatisfaction from what life has offered, strained relationship, increased dependency, fall in social contacts may lead to stress, anxiety and depression resulting in an adverse effect on health.

Material and methods: In order to study the old age adjustment of aged persons in different biosocial aspects, SJOAI, NPC Agra, was used as base. Than three points scale was prepared.

Results: According to the findings, majority of respondents (65.5% male and 66.8% female) fell into average category of overall adjustments. Only 11.5% males and 17.3% female's belonged good category while 23% male and 16% female fell into poor category of adjustments. One fifth of respondents had no worries while nearest to half respondents had major worries about their children's future. 20% males as well as females reported they had major worries about financial conditions.

Conclusions: The many physiological, economical emotional and interpersonal fact of ageing influences the social functioning and well-being of individuals in different ways.

- **Understanding the association of chronic morbidities and access to money among elderly in selected states of states of India**

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This paper tests the hypothesis that financial accessibility reduces chronic morbidities among elderly in India. Data from recently conducted BKPAI survey among 9852 individuals in the state of Himachal Pradesh, Punjab, West Bengal, Orissa, Maharashtra, Kerala, and Tamil Nadu is used in the analyses. The financial accessibility is measured using access to income while chronic morbidity includes any of the five morbidities arthritis, angina, diabetes, asthma, and hypertension. Result suggests that financial accessibility reduces the risk of ill health among elder. Controlling for socio-economic and demographic correlates, the predicted probability of any chronic morbidity was 51% among those with financially independent compared to 54% among those without financial access. Old with access to money were less at risk of such morbidities. Among those with financial access the predicted probability for diabetes was 17% compared to 12% among without financial access. The pattern was similar for arthritis, for this was 21%. Based on the results, we conclude that the risk of chronic morbidities increases with increase in age ($p < 0.001$).

- **Study of Awareness about Health Promotion in Community Dwelling Elderly, Jodhpur, Rajasthan, India**

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Introduction: Recent studies have shown that the elderly population constitutes an increasing proportion of the total population in the world. This increase is against a decreasing support potential ratio for the elderly. The study was conducted to determine the safety and social support in elderly person aged 60 years and above.

Material & Methods: We used EASY-Care Standard 2010 to evaluate safety and social support in community-dwelling elderly in Jodhpur, India in 2016. EASY-Care is a comprehensive and valid

needs assessment tool for the older persons used to provide population-level data.

Result: Total 319 elderly (age ≥ 60) who consented to participate were interviewed. Out of total (n=319) 160 (50.15%) were female and majority of 126 (78.7%) females were housewives. Nearly 50% were living with extended family and only 25.7% (n=319) were either employed or pensioner. 23% were unable to manage finances, 18% has no enough money to fulfill their basic needs and only 13% said to some have some extra money other than required for basic need. 11.6% felt discriminated, 16.6% consider themselves unsafe outside and 12% lacked support for emergency help.

Conclusions: This study was conducted with an objective to understand the safety and social support in elderly in Jodhpur. Most of elderly in the survey area were found to be economically inactive and has safety issues. Findings of this study suggest need of an intervention to address unmet social and safety needs of elderly. Policy makers and organization advocating for the elderly persons should come forward to formulate policies that will target on social and safety needs of the elderly.