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Health and Well-Being Among Elderly

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ABSTRACT

The world's population is aging rapidly; by 2025, the elderly, or anyone over 60, are expected to account for 22% of the total population. Even though older adults participate in fewer regenerative activities, the rise in age-related illnesses and impairments puts them at greater risk. This has a number of detrimental social and economic effects on individuals as well as society at large. Methods: A review of the literature was done in the light of these potential problems to locate empirical studies assessing the health and well-being of senior citizens. Results: Empirical data retrieved from multiple studies indicates that seniors who live outside of institutions have higher levels of emotional well-being than those who live in them. This is because the former has access to better medical care, social connections, family care, and financial independence. Older adults without substantial financial resources experience abuse, are left behind, and are no longer included in family decision-making or selection procedures. For this subset of the population, spiritual care is recommended. It follows that seniors should continue exercising and participating in physical activity at the recommended level.

Keywords : Well-being, Elderly, Senior Citizens, Older Adults, Physical Activity

I. INTRODUCTION

A set of processes known as aging start at birth and go on throughout an individual's life. It stands for the latter stage of life, when a person reflects on their experiences, considers their prior successes, and starts to wrap up their existence. It takes flexibility and the acquisition of new coping mechanisms for an individual to adjust to the usual changes that come with developing older age.

The world's population is aging quickly; by 2025, it is predicted that the elderly—those 60 years of age and older—will make up 22% of the global population.

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While older adults engage in less regenerative activities, they are more vulnerable to the rise in agerelated illnesses and impairments, which has a number of negative social and economic effects on both the individual and society as a whole. Moreover, one important component of health challenges in older persons is mental health. Globally, it is estimated that about 20% of older persons who are 60 years of age or older suffer from mental and neurological diseases. The overall disability (DALYs) for this age group is 6.6% due to mental and neurological illnesses. Older persons are disproportionately more likely to have mental health issues for a variety of reasons, including a lack of independence, frailty, disease, separation, loneliness, and just being older. All age groups, but older folks in particular, should take heed of the fact that physical and mental health are correlated, just as physical and mental health are correlated. Therefore, it's important to comprehend the methods for maintaining older individuals' good mental health and wellness in addition to the ongoing concentrate on prolonging their life expectancy. Any movement of the body made possible by skeletal muscles that requires energy as an input is referred to as physical activity. It encompasses all routine activities such as playing, doing housework, traveling, and engaging in business and leisure activities. Engaging in mild to moderate physical exercise has been demonstrated to be beneficial in postponing the functional decline of older persons, thereby fostering their healthy aging process. Numerous investigations have evaluated the connection between senior health and engaging in sports and physical activity. Numerous of those investigations discovered a favorable relationship between older people's increased exercise frequency, wellbeing, and improved bodily function. Because of this, people are aware that engaging in regular exercise practices increases their sense of wellbeing and their body's functionality. Additional advantages reported by some researches include enhanced flexibility and physical coordination, improved sleep

quality, reduced rates of anxiety and sadness, and psychological wellness overall. enhanced An increasing amount of data points to the importance of physical, psychological and social aspects in determining how well people age. Studies on the aging process have shown that a person's capacity to age more effectively is positively correlated with a variety of factors, including their religious convictions, social networks, perceived health, self-efficacy, socioeconomic level, and coping mechanisms. In addition to illnesses like cancer, diabetes mellitus, heart disease, hypertension, and/or mental illness, aging is a chronic condition of the human life cycle. The accumulation of many types of molecular and cellular damage over time leads to ageing. This phase of life is characterized by a slow deterioration of mental and physical abilities, a higher chance of illness, and ultimately, death. In addition to its biological component, aging also includes a social component that is symbolized by retirement, moving to a new residence, and losing friends, family, and lovers.

According to reports, mental health services in Southeast Asian nations are insufficient and plagued by problems such as inadequate financing, a shortage of healthcare professionals and advocacy organizations, a concentration of low-quality service providers in cities, and the high cost of these treatments. As a result, it is known that these nations offer very little mental health care. It is difficult to anticipate a specialized service emphasis on the mental health of the senior population given the severe deficiencies in mental health services provided to the general public. The globe is experiencing a demographic revolution as a result of significant population growth and a more than two-decade increase in life expectancy since 1950. The World Health Organization reports that the number of adults over 60 is rising more quickly than that of any other age group in practically every nation. This is a result of several factors coming together, such as aging



populations and decreased fertility. In order to help the expanding older population, live longer, healthier lives, but also better and happier lives, mental health practitioners face a problem as a result of these improvements in longevity and the quality of life of older persons. A lot of people are concerned about how to embrace well-being and age gracefully.

II. REVIEW OF LITERATURE

Authors	Purpose of research	Research design	Targeted population	Result
Cho et.al. (2011)	The purpose of this study was to evaluate the relationship between physical health and psychological well- being among oldest old adults.	self-rating scale of health and objective health, as measured by physical health impairment (i.e., health problems, past and present diseases, hospitalization) and biomarkers (i.e., hemoglobin and albumin).	306 older adults	There were significant direct effects of subjective health on affect and significant indirect effects of objective health through subjective health on positive affect and negative affect. These results highlight the status and perceptions of health as a critical indicator for well-being in extreme old age.
Homan (2016)	Study investigated the relationships between self-compassion and theoretically based indicators of psychological adjustment, as well as the moderating effect of self-compassion on self-rated health.	Self-Compassion Scale-Short Form (Raes et al. 2011), Psychological Well-Being (PWB; Ryff and Keyes 1995), The Depression Anxiety and Stress Scale-Short Form (DASS; Lovibund and Lovibund 1995).	121 older adults	Results indicated that self- compassion is positively correlated with age, self- compassion is positively and uniquely related to psychological well-being, and self-compassion moderates the association between self- rated health and depression.
Bae et.al. (2017)	investigated interconnectedness of different intensity levels of physical activity and psychological (life satisfaction and positive affect) and physical (physical health) well-being.	Systematic reviews	non- institutionalized adults who are aged 25–74 living in the United States	The results showed that light physical activities were positively associated with physical health and life satisfaction in summer, whereas light physical activities and all dependent variables were positively



				correlated in winter.
Cachioni et.al. (2017)	The study aimed to analyze the distribution of measures of subjective and psychological well- being according to demographic criteria and length of participation in the	A cross sectional study using the following instruments was carried out: a sociodemographic an Overall Life Satisfaction Scale, a Positive/ Negative Affect	307 students, and 265 elderly people.	Age and gender were the main factors that were significantly associated with overall life satisfaction, life satisfaction in specific domains, and morale. Higher education was associated with psychological adjustment.
Tandon (2017)	program. The main purpose of this research was to assess the psychological well-	Scale; and a Personal Development Scale. Psychological well-being scale developed by Sisodia and	120 elderly	Significant difference in psychological level was found among the elderly living in the families and old age
Jafaripoor et.al. (2018)	being among the elderly. The present study aimed to determine the relationship between Spiritual Well-Being and Quality of Life among the elderly people residing in Arak City, Iran	Choudhary cross-sectional and correlational design study, Spiritual Well- Being scale (SWB), Older People's Quality of Life Questionnaire	400 elderly people	home. The of life quality among the elderlies was associated with their marital status and education level. The Spiritual Well-Being mostly ranged from moderate to high. significant relationship between Spiritual Well-Being and the Quality of Life.
Yadav and Chanana (2018)	to assess the relationship between perceived well-being and regulation of emotions, and to study the gender differences on the domains of emotional regulation.	(OPQOL-35). Psychological General Well- being Index (PGWBI) and Emotional Regulation Questionnaire (ERQ).	200 participants, age group of 65-80 years	The results point out that the relationship between perceived wellbeing and emotional regulation is comprehended to be bidirectional. Emotional regulation may also have protective role in wellbeing since regulation of emotions is essential for adaptive functioning, whereas suboptimal or dysfunctional.



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Salman and Lee (2019)	The purpose of this study was to describe the relationship between depression, spiritual wellbeing, and self-perceived health among Taiwanese elders.	This study used a cross-sectional descriptive design	150 elderly	The study revealed that spiritual well-being was positively correlated with self-perceived health, negatively associated with depression, and significantly mediated the relationship between depression and self- perceived health.
Papathanasiou et.al. (2020)	This study aims at investigating the relation between spirituality and mental health among older adults with hypertension and their sociodemographic characteristics.	A descriptive, cross-sectional design study. A questionnaire consisting of the sociodemographic characteristics, the FACIT-Sp-12 scale and the General Health Questionnaire-28 (GHQ-28)	134 hypertense elderly	The higher the total score of spirituality among older hypertensive adults the lower the rates of psychosomatic disorders and the total burden of mental health (and vice versa).
D <u>ehghanpouri</u> et.al. (2021)	The study was to compare emotional wellness and psychological health of active and inactive old adults in Shahrood city with an emphasis on physical activity during COVID-19 pandemic.	Questionnaire	60 years old elderly	The findings indicated that the level of emotional wellness and spiritual well- being of active old adults was more than that of inactive old adults, and inactive old adults had higher levels of unpleasant feelings than active old adults.
Kivi et.al. (2021)	To investigate early effects of the COVID- 19 pandemic related to (a) levels of worry, risk perception, and social distancing; (b) longitudinal effects on well-being; and (c) effects of worry, risk perception, and social distancing on well- being.	Longitudinal study	older adults	 (a) In relation to COVID-19: 44.9% worried about health, 69.5% about societal consequences, 25.1% about financial consequences; 86.4% perceived a high societal risk, 42.3% a high risk of infection, and 71.2% reported high levels of social distancing. (b) Well-being remained stable (life satisfaction and loneliness) or even increased Higher societal worry and more social distancing were related to higher well-being.



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McKinlay et.al.	this study was to	Semi-structured	20 adults aged	Participants described
(2021)	examine factors that	telephone or	over 70	potential threats to their
	threatened and	video interviews		wellbeing during the
	protected the			pandemic. Participants also
	wellbeing of older			described activities and
	adults living in the			behaviors that helped to
	UK during social			protect their mental health.
	distancing restrictions			Many participants drew on
	due to the COVID-19			their resilience and life
	pandemic.			experience to self-manage
				fear and uncertainty
				associated with the
				pandemic.
Yang et.al.	examines the	cross-sectional	903 older adults	The results of this study
(2022)	relationship between	design study, a		demonstrate that the outdoor
	different physical	questionnaire		exercise environment plays a
	activities, outdoor	survey, Physical		mediating role between
	exercise environment,	Activity Rating		different physical activities
	exercise form, and	Scale,		and the subjective well-being
	subjective well-being	Newfoundland		of older adults, and the form
	in a sample of	Subjective Well-		of exercise can also moderate
	Chinese older adults.	Being Scale,		the impact of different
		Exercise		physical activities on the
		Environment		subjective well-being of older
		Scale, and		adults.
		Exercise Form		
		Scale.		
S and PC	To find out the level	Well-being scale	400 elderly	Result showed that there was
(2023)	of emotional	was used to	people	a significant difference in
	wellbeing in the	measure the		emotional well-being of
	elderly living in	emotional well-		elderly living in Institutions
	institutionalized	being of elderly		and non-institutions settings.
	home and in families.	0 /		6
V et.al. (2023)	this study focuses on	Interview	75 elderly over	The results of the study
	analyzing the impact	schedule,	60 years of age	showed monthly income and
	of the saving habit	psychological		savings of the elderly
	and the expenditure	well-being scale		positively influence the
	of elderly in	0		psychological well-being.
	determining their			Whereas, monthly
	psychological well-			expenditure on the other
	being.			hand doesn't show any
	- O'			influence when kept as a
				predictor variable.
		1		Predictor variable.



III.CONCLUSION

On the basis of above literature reviewed future applied research should focus on therapies aimed at fostering self-compassion in older persons. Men in particular who were older and more elderly than women reported feeling happier and more satisfied with life. The elderly have the ability to evaluate their personal growth trajectory, their social own commitment, and their pursuit of a goal of personal greatness. It is advised to provide spiritual care for this segment of the population. When compared to the elderly living in institutions, it is evident that those living outside of them have greater levels of emotional well-being because they have access to superior medical treatment, social contacts and connections, family care, and financial independence. Studies indicate that the predictor variable, monthly income, had an impact on the psychological well-being of the elderly. Pension plans, systematic savings plans, monthly rent from their own homes or properties rented to others, or from close relatives, were some of the sources of monthly income for the elderly. Elderly people without strong financial standing suffer from maltreatment, are abandoned, and are no longer included in decision-making or selecting processes within their own families. The various predictor variable, month-to-month expenditure, no longer had a significant impact on the degree of mental wellbeing because older adults allocated their finances to basic necessities, primary fitness screening, clinical compliance, prescription medication purchases, illness prevention, and maintaining good health instead of spending their money on entertainment or leisure activities.

The results indicate that seniors must continue engaging in the appropriate level of physical activity and exercise. While it might be difficult for them to adhere to health regulations and enjoy parks and sports clubs, there are plenty of innovative activities that they might substitute to be active and healthy at home.

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