

Can Life in Senior Care Homes Affects Psychological Well-Being of Older Widows

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ABSTRACT

In the era of modernization, with the transmission of values and morality, widows face several societal challenges. Illiteracy and economic dependency intensify the situation of these widows as they grow older. Widows their psychological, emotional and physical health has been affected due to chronic psychological distress. The objective of this present study is to examine the life experiences of older widows living in senior care homes and its impact on psychological wellbeing. The study was carried out on 160 older widows who are residing in pay and stay homes in the age group of 65-75 years, who are cognitively intact and communicative were enrolled in the study. The findings revealed that age, no education, lower income and joint family are the sources of psychological distress in older widows. Poor health appears to be an important factor among the institutionalized aged to effectively determine whether the individual can cope with major stresses.

Keywords: *Psychological health, Older Widows, Senior care homes.*

Aging is a series of process that begins with life and continue throughout the life cycle, ending with death. (Singh, Misra 2009). Population aging has become a universal phenomenon and is the result of a process known as “demographic transition” in which there is a shift from high mortality and fertility to low, leading to an increase in the proportion of elderly people in the total population. India, the second largest country in the world, is presently undergoing such a demographic transition (Seby, et al., 2011) with 72 million elderly persons above 60 years of age, which is expected to increase to 179 million in 2031 and further to 301 million in 2051 (Pracheth, 2013). Widowhood may be a tense life transition that a huge part of the overall population eventually ought to face. In this connection, the social relationships can account for variation in reaction and adaptation to the current vital event. Social links are possible to change after the loss of a spouse; these social links stored before may be distinguished from those after widowhood (Lundorff et al. 2019). The idea of well-being has been utilized moderately in the form of various terms like quality of life, life fulfillment, financial safety, individual satisfaction, social well-being, and mental well-being. More specifically, mental well-being is related to depression, anxiety, and stress, while social

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wellbeing is related to social participation, social support, home attachment, and so on (Sharifian and Gruhn 2019). Trends are changing in modern urbanized societies in developing countries such as Pakistan which affected the mental and social well-being negatively among the older adults due to the changing trends of life. Education is always considered a good quality of foundation for widows' well-being. Older adult widows required proper knowledge to prevent sickness for their productive and healthy lives. Widowhood ratio is evident statistically over the globe especially among the older adults who crossed 65 years of age. The data showed that around 65% of women are widowed, and this number is higher than the men's counterpart which shows the life expectancy is higher among the women as compared with that of men (Ayuso, 2019).

Few studies carried out in 1980's on older widows. Ramamurti, (1989) assessed the contemporary psychosocial status of elderly widows belonging to forward and backward communities. The findings supported most of the common observations pertaining to the problems of widows in India. The widows had more problems of adjustment than non-widows in almost all the age groups. A variety of demographic, social, economic and personal factors influence the nutritional status of the elderly. Marital status, caste, locality, age and physiological needs were the most important predictors of mental health. Various intervention strategies were suggested to remove the negative self-attitudes and improve the psychological well - being of the elderly widows. Psychological health includes freedom from some qualities such as feelings of helplessness, worthlessness, feelings of depression, etc. To that extent, they contribute a positive evaluation of oneself which in turn may influence memory performance favorably, just as the case concerning good self-esteem (Ramamurti, 1997).

Health and physical status is probably an important concern and has a significant impact on intellectual functioning. Physical health is predictive of the maintenance of cognitive function (Schaie & Hertzog, 1986).

Maintenance of good mental health is one of the key indicators of successful aging. In psychosomatic medicine, theorists argue that certain patterns of psychological responding are damaging to or promoting physical health. It is often assumed that people who are sociable, upbeat, undemanding and easygoing are proved to be health related and to longevity (Friedman 1997).

Most of the studies of Successful Aging established the physiological and psychological benefits of education on cognition in older adults (Kubzansky et al., 1998). Empirical evidence for the effectiveness of cognitive-behavioral interventions with older adults has grown over the past 3 decades. Research apart from the age and memory performance the role of other variables also plays a critical role on memory performance which includes education, health, and individual differences are source variation in the memory performance (Zelinski et al, 2001). It was also noticed that the effect of socioeconomic status and prior life experiences on cognitive performance in older adults (Kramer et al., 2004).

Studies on elder care in Indian community settings and studies on old age homes indicate that more than 85% of the elderly stay in families (either with spouse or with adult children). It involves care giving interactions between family caregiver and the elderly care receiver. Jamuna, and Babu Rao, (2015) examined the factors that mediate care needs and care adequacy of men and women over the age of 60 years. The psychological care needs were examined in relation to socio familial, demographic and psychological variables viz., physical and psychological health status, social supports and cognitive status. The findings highlight

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the implications in national policy on care and to evolve culturally suitable care models. The outcome of study would become important inputs to the existing care concerns of elderly in NPOP.

Li. et al., (2013) examined the relationship between transitions in volunteering activity and physical and psychological health outcomes among older adults in Taiwan. Approximately, 3% of older volunteers kept volunteering and 7% stopped or started their volunteering over time. Engaging in any volunteering, including continuous volunteering, discrete volunteering, active-to-inactive volunteering, and inactive-to-active volunteering, was significantly associated with better self-rated health and higher life satisfaction when compared with the non-volunteering group.

Social participation stages decline with the death of a partner, mostly owing to the bad spousal conditions which consequently raise the chances of loneliness among older adult widows (Jones et al. 2019). Despite the Article-25 of the Universal Declaration of Human Right which focuses on the quality of living standard, health, and well-being of oneself and of his family, as well as foodstuff, outfit, accommodation and treatment, vital societal facilities, and security for widows, the older adults have the variant level of social well-being due to diverse cultural values of the different societies (Ashiq and Asad 2017; Cardenas et al. 2019).

In view of these lacunae, the current study is contemplated with the following objectives.

- To examine the life experiences of older widows living in the senior care homes and its impact on psychological wellbeing.
- To assess the salient determinants of psychological wellbeing among older widow residents of senior care homes.

MATERIALS & METHODS

The present study included 160 older widows who stays in pay & stay senior care home and were aged 65 to 75 years (Mean age=70years). The study group included people who were willing to participate, had normal cognitive ability with the capacity to comprehend the instructions. The study excluded older widows who had trouble communicating and had been diagnosed with serious health issues, depression or anxiety problems (clinical cases). The widow participants were told about the nature, purpose, and voluntariness of their involvement, and was obtained signed informed consent following the Declaration of Helsinki principles (2003) and later amendments. All the participants in this study were residents of senior care homes. The personal data form used to know the socio-demographic categories of the older widows. The psychological health status was assessed through the Indian version of Cornell Medical Index (CMI) Health Questionnaire which was adopted and standardized for an ICSSR project on older widows. (Ramamurti et. al (1989). The older widows from senior care homes were divided into small groups with 10 in each and they were encouraged to open for focused group discussion on broad themes (provided by the researcher) on sources of anxiety. Inputs of each group discussion were shared by the group leader and the same data has been used in identifying the psychosocial issues in older widows.

RESULTS AND DISCUSSION

Table – 1 shows the sample characteristics of the older widows in senior care homes. 55% of the women are educated and 45% were uneducated. 58% of the sample are belongs to 65-70 years age group. 53.1% of the older widows coming from nuclear families and 46.9% were from joint families. Most of the older widows (54.4%) related to rural areas and 45.6% were from urban areas. 72.5% of older widows source of income is pension and 48.1% of women

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are belongs to below middle-class group and 35.6% of women are from middle class economic status.

Table 1: Sample Characteristics of Older Widows of Senior Care Homes (N=160)

S.No.	Sub-groups	N	Percentage (%)
1.	Age		
	65-70	93	58.1
	71-75	67	41.9
2.	Education		
	No Education	72	45.0
	Education	88	55.0
3.	Type of Family		
	Nuclear	85	53.1
	Joint	75	46.9
4.	Locality		
	Rural	87	54.4
	Urban	73	45.6
5.	Source of Income		
	Pension	116	72.5
	Property	34	21.3
	Others	10	6.3
6.	Economic Status		
	Below Middle class	77	48.1
	Middle Class	57	35.6
	Upper Middle Class	26	16.3

Table-2: Psychological Health in Different Socio-Demographic Subgroups among Older Widows of Senior Care Homes

S.No.	Sub-groups	N	Mean (SD)	t value
1.	Age			
	65-70	93	32.10(5.86)	2.606**
	71-75	67	34.28(4.20)	
2.	Education			
	No Education	72	35.33(4.90)	5.405**
	Education	88	31.11(4.91)	
3.	Type of Family			
	Nuclear	85	34.14(5.91)	1.971*
	Joint	75	32.44(4.86)	
4.	Economic Status			
	Below Middle class	77	35.56(4.88)	2.624**
	Middle Class	57	33.00(6.40)	
5.	Locality			
	Rural	87	33.92(5.86)	1.973*
	Urban	73	35.48(3.65)	

****P<0.01; * P<0.05; @ Not Significant**

A cursory glance of results on psychological health status (Table-2) indicate that the mean differences are statistically significant in term of their age, education, economic status. Older widows in 65-70 years, with basic education from middle class, from rural background and from joint family reported poor psychological well – being compared to their counterparts.

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A few studies that look specifically at widows 'psychological wellbeing over duration of widowhood. Wilcox et al (2003) using data from the Women's Health Initiative compare married and widowed women, with the later distinguished by time since widowhood. They find that widowed women report more mental health problems than married women. This may reflect the effects on mental health of spousal care both for recent widows and comparable married women. An indication of the immediate mental health consequences of widowhood is the elevated risk of suicide reported by Luoma and Pearson (2002) among young widows and widowers.

There is little literature that relates the psychological well-being for widows and widowers to their economic resources. While Carr et al. (2000) argue that the emotional consequences of widowhood are affected by the quality of the marriage and dependence – financial and emotional – on the deceased partner, they do not examine how financial dependence separately contributes to emotional dependence. Earlier studies of widowhood noted the additional stress on bereaved widows who were financially dependent on deceased husbands (Morgan, 1981, Lopata, 1973). This pre- widowhood dependence may have been what Lee and DeMaris (2007) were attempting to capture by including pre-widowhood resources in their study of post-widowhood depression. That they found no effect may be because it is post-widowhood resources (or those resources relative to pre- widowhood resources) that are the appropriate explanatory variable.

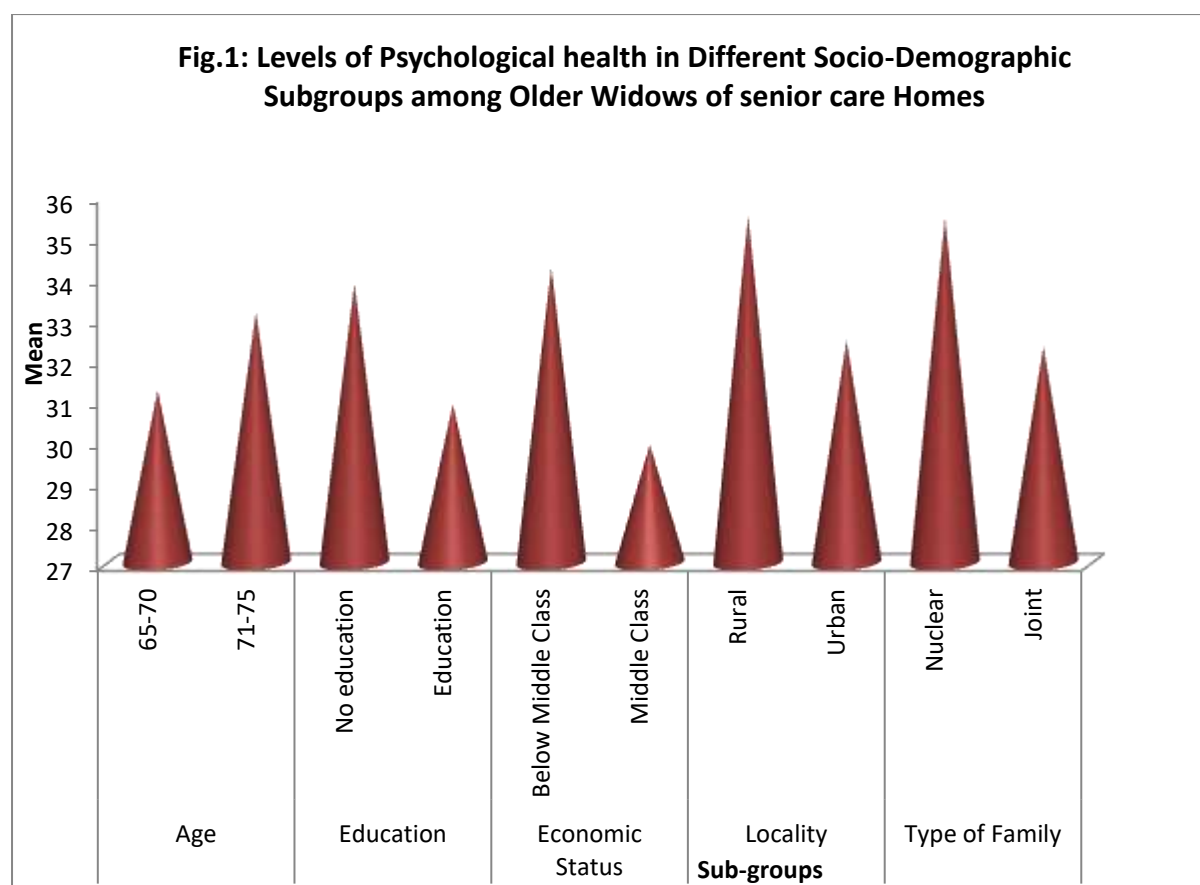
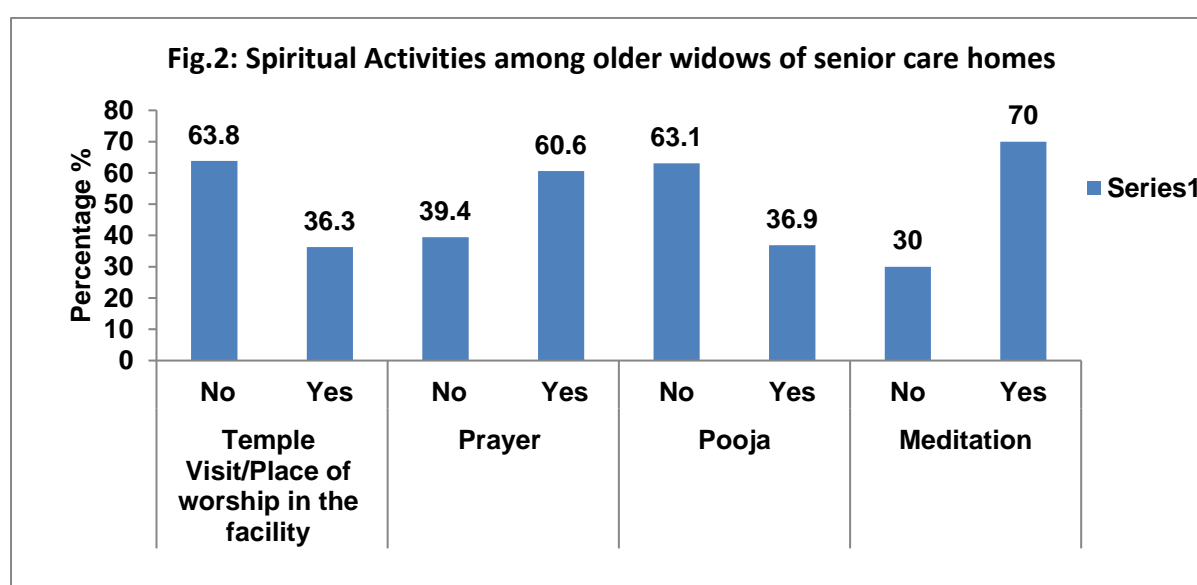


Table 3: Spiritual Activities Among Older Widows of Senior Care Homes

S.No.	Spiritual Activities	N	Percentage (%)
1.	Temple Visit/Place of worship in the facility		
	a) No	102	63.8
	b) Yes	58	36.3
2.	Prayer		
	No	63	39.4
	Yes	97	60.6
3.	Pooja		
	a)No	101	63.1
	b)Yes	59	36.9
4.	Meditation		
	a)No	48	30.0
	b)Yes	112	70.0



Further the details on spiritual activities of older widows in Table -3 shows that only 36.3% were visiting temples, 60.6% regularly involve in daily prayers; 36.9% perform pooja either in their rooms or in the common place in care home. As part of their daily activity schedule, majority about 70% of older widows practice meditation in mornings and evenings.

CONCLUSION

The present study reveals that the widowed women in old age who have been staying in senior care homes away from family and kids have more psychological health issues and their life experiences help them to improve their psychological well-being.

REFERENCES

Agarwal G, Arokiasamy P. (2010, Apr; 29). Morbidity prevalence and health care utilization among older adults in India. *Journal of Applied Gerontology*. 155-79.

Ansari S, Kang TK (2019, Jan 1). Stress of aged elderly: A review. *Indian Journal of Health and Well-being*.162-5.

Brodman K, Erdmann AJ, Lorge I, Wolff HG, Broadbent TH. (1951 Jan20; 145(3)). The Cornell medical index-health questionnaire: II. As a diagnostic instrument. *Journal of the American Medical Association*.152-7.

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- Burns RA, Browning CJ, Kendig HL. (2015 Dec;27(12). Examining the 16-year trajectories of mental health and wellbeing through the transition into widowhood. *International psychogeriatrics*. 1979-86.
- Chen M, Dreze J. (1995 Sep 30). Recent research on widows in India: Workshop and conference report. *Economic and Political weekly*.2435-50.
- Dening T, Milne A. (2013, Sep 26). Care homes for older people. *Oxford Textbook of Old Age Psychiatry*. 343.
- Elwell F, Maltbie-Crannell AD. (1981, Mar 1;36(2). The impact of role loss upon coping resources and life satisfaction of the elderly. *Journal of Gerontology*.223-32.
- Eng PM, Rimm EB, Fitzmaurice G, Kawachi I. (2002Apr15;155(8). Social ties and change in social ties in relation to subsequent total and cause-specific mortality and coronary heart disease incidence in men. *American journal of epidemiology*.700-9.
- Greenberg LS, Johnson SM. (1988, Oct 7) Emotionally focused therapy for couples. Guilford Press; 297-18.
- Hooker K, Monahan D, Shifren K, Hutchinson C.(1992, Sep7). Mental and physical health of spouse caregivers: The role of personality. *Psychology* ;367.
- Hulme D, Shepherd A. (2003 Mar 1;31(3). Conceptualizing chronic poverty. *World development*. 403-23.
- Jamuna, D. & BabuRao, G. (2015). Psychological care needs of the elderly and adequacy of care giving – an Interventional study, UGC-MRP, New Delhi (2012-2015).
- Johnson NJ, Backlund E, Sorlie PD, Loveless CA. (2000, May1;10(4). Marital status and mortality: the national longitudinal mortality study. *Annals of epidemiology*. 224-38.
- Kaufman JE, Lee Y, Vaughn W, Unuigbe A, Gallo WT. (2019, Mar8). Depression associated with transitions into and out of spousal caregiving. *The International Journal of Aging and Human Development*.127-49.
- Kylén M, Ekström H, Haak M, Elmståhl S, Iwarsson S. (2014, Jul 11). Home and health in the third age—Methodological background and descriptive findings. *International journal of environmental research and public health*. s7060-80.
- Lopata HZ. (2017, Sep 29). *Widowhood in an American city*. Routledge; 240-45.
- Madhavan SP, Armugham I, Bhaumik A, Gundluru A, Kiran U, Thirunavukarasu SK, Dioso RI. Effects of Cognitive Behaviour Therapy on Anxiety and Depression Reduction among Women with Surgical Menopause: A randomized Controlled Trial.
- Mudege NN, Ezeh AC. (2009, Dec 1). Gender, aging, poverty and health: Survival strategies of older men and women in Nairobi slums. *Journal of Aging Studies*. 23(4):245-250.
- Mui AC. (2000, Sep 13). Stress, coping, and depression among elderly Korean immigrants. *Journal of Human Behavior in the Social Environment*, 281-99.
- Ramamurti, P.V. (1989). The status, psychological adjustment and mental health of middle aged and older widows - Project Report, Indian Council of Social Science Research, New Delhi.
- Rodin, J. (1980). Managing the stress of aging: The role of control and coping. In *Coping and health* (pp. 171-202). Springer, Boston.
- Shankardas. MK, Rajan SI, editors. (2018, March 14). *Abuse and Neglect of the Elderly in India*. Springer; 145-18.
- Tarver T.O. *Older Americans*. (2012, June): Key Indicators of Wellbeing: US Federal Interagency Forum on Aging Related Statistics (FIFARS) with the US National Center for Health Statistics (NCHS). Washington, DC: US Federal Interagency Forum on Aging Related Statistics, 176p. ISBN-13.
- Varma, P. (2016). Abuse against widowhood in India. *International Journal of Indian Psychology*:131-46

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Conflict of Interest

The author(s) declared no conflict of interest.

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