

Research Paper

Enhancing Well-Being: The Crucial Role of Social Support and Health in Institutionalised Elderly Care

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ABSTRACT

This study delves into the critical nexus between social support, health, and the overall well-being of elderly individuals residing in institutional care settings. With an ageing global population, understanding and improving the quality of life for elderly residents has become paramount. This research employs a multidisciplinary approach, drawing on insights from gerontology, psychology, and healthcare management. It investigates the multifaceted impacts of social support structures, encompassing emotional, informational, and instrumental dimensions, on the physical and mental health outcomes of institutionalized elderly individuals. Additionally, this study scrutinizes the role of healthcare services, encompassing medical interventions, preventative care, and therapeutic activities, in bolstering overall well-being.

Keywords: *Old Age, Well-Being, Social Support, Health*

Old age, the final chapter in the human journey, is a phase of life characterized by a myriad of physical, psychological, and social changes. It is a time when the accumulated experiences of a lifetime converge to shape one's perception of self, relationships, and the world. This stage, often accompanied by both challenges and opportunities, holds a unique place in the tapestry of human existence. Old age is a period of introspection and reflection. Individuals often contemplate the achievements and regrets of their past, pondering the meaning and purpose of their lives. Psychologically, this stage can be both enriching and challenging. Wisdom, gained through a lifetime of experiences, often flourishes during old age. This wisdom can lead to a sense of contentment and a broader perspective on life's ups and downs. However, the loss of independence, cognitive changes, and the inevitability of mortality can trigger feelings of anxiety, depression, or even existential crisis (Cavan et al 1949). In this decade, over a billion people will surpass the age of 60, with estimates predicting 1.2 billion by 2025 and a staggering 2.5 billion by 2050, mainly in developing countries. Notably, those aged 80 and above are the fastest-growing demographic. This period offers opportunities, tapping into their wisdom and engagement, but also challenges, such as healthcare strain and the need for inclusive policies.

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To address this, collaborative efforts in healthcare, pensions, and urban planning are vital, ensuring a fulfilling and inclusive future for our ageing population (Ashiq, U., & Asad, A. Z. (2017). With this all ups and downs it becomes difficult for them to maintain physical health and well-being. Well-being in old age, also known as elderly well-being, refers to the overall quality of life and satisfaction experienced by older individuals as they age. It encompasses various physical, mental, emotional, and social aspects of life. Promoting well-being in old age is an important goal for individuals, families, communities, and societies as a whole. Institutionalisation of elderly individuals, often in long-term care facilities or nursing homes, poses unique challenges to their overall well-being. However, research has provided valuable insights into strategies that can be employed to promote the well-being of this vulnerable population. Research consistently emphasizes the importance of social engagement and emotional support for the well-being of institutionalized elderly individuals. A study by Holt-Lunstad et al. (2010) highlighted the significant impact of social relationships on mortality and well-being.

Encouraging regular interaction with staff, fellow residents, and visitors can mitigate feelings of isolation and loneliness. Group activities, support groups, and opportunities for meaningful interactions can foster a sense of belonging and emotional well-being. Person-centred care, which prioritizes the individual's preferences, needs, and autonomy, has been shown to positively affect the well-being of institutionalized elderly. Edvardsson et al. (2014) underscored the benefits of tailoring care to residents' preferences and empowering them to make decisions about their daily routines. Providing choices in activities, meals, and daily schedules can enhance a sense of control and dignity, thereby improving overall well-being.

Maintaining physical health and engagement in appropriate activities are crucial for the well-being of institutionalized elderly individuals. Landi et al. (2003) demonstrated the positive impact of exercise programs on physical function and quality of life among nursing home residents. Regular physical activity, recreational activities, and access to outdoor spaces can contribute to better physical and mental well-being. Cognitive stimulation and opportunities for mental engagement are essential components of well-being in institutionalized elderly individuals. Spector et al. (2016) highlighted the benefits of cognitive stimulation interventions for residents with dementia. Group discussions, memory-enhancing activities, and creative outlets can promote cognitive function and emotional health.

Poor physical health was hardly related to lower life satisfaction, whereas poor mental health was strongly related to lower life satisfaction. This indicates that mental health has a greater impact on life satisfaction at old age than physical health, and that physical health is less relevant for a satisfactory old age (Puvill, T et, al. 2016). Social support, the network of relationships and interactions with family, friends, and community, plays a pivotal role in shaping an individual's well-being across the lifespan. Research consistently highlights the profound effects of social support on mental, emotional, and physical well-being. Numerous studies have established a strong link between social support and mental health. Taylor (2011) revealed that individuals with higher levels of social support experience lower rates of depression and anxiety. The emotional closeness, validation, and understanding provided by social relationships can act as a buffer against stress and promote emotional resilience.

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Social support has been found to have a significant impact on physical health outcomes. Holt-Lunstad et al. (2015) highlighted the association between social relationships and mortality risk, indicating that individuals with robust social connections tend to live longer. Social support contributes to better cardiovascular health, immune function, and overall physical well-being. During times of life transitions, crises, or challenges, social support becomes particularly crucial. A study by Cohen and Wills (1985) demonstrated that social support can buffer the negative effects of stress on health. Whether it's the loss of a loved one, a major life change, or a health crisis, having a supportive network can facilitate adaptive coping and facilitate a smoother transition. Coping with stress is also a way to gain well-being. Social support provides a sense of belonging and reinforces one's identity. Baumeister and Leary (1995) emphasized the fundamental human need for social connections to maintain self-esteem and a sense of purpose.

Engaging in meaningful relationships and feeling valued by others contributes to a positive self-concept and psychological well-being. Social engagement and support have also been linked to cognitive health and well-being. Fratiglioni et al. (2004) suggested that social activities and interactions may contribute to a reduced risk of cognitive decline and dementia in later life. Engaging in social interactions stimulates the brain, supports cognitive function, and promotes mental vitality.

Social support has physiological effects on the body's stress response. Uchino (2006) indicated that social support can lead to reduced cortisol levels, a hormone associated with stress. Strong social ties and interactions can help regulate stress responses, leading to improved overall well-being.

Primary goal of the present study is to assess the relationship among social support, health and well-being. The other is to investigate impact of health and social support on well-being among institutionalised elderly.

METHODS

Sample

Purposive sampling was used to choose study participants. The participants were 60 elderly persons from two different old age home in the eastern Indian (30 male and 30 females). Their ages were between 60 to 80 years.

Procedure

After taking the formal permission from the heads of the organisation consent was taken from all the participants. Before collecting the data participants were informed about the purpose and procedures of the research. They were also informed that they had the freedom to withdraw at any given point of time. The approach prioritized ethical consideration while gathering data for the research.

Measures

- *Psychosocial Support Scale (PSYCHOSS)* was developed by Padhy et, al. (2022) to assess the level of psychosocial support an individual perceives or receives from their social network. It includes 40 items using a 5-point Likert scale (1=strongly disagree ;5= strongly agree). Higher scores indicate better social support. The internal consistency of this scale was 0.87.

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- *General Health Questionnaire (GHQ)* was developed by - Lopez, M., & Dresch, V., 2014 for assessing general mental health status of an individual. It includes 12 items using a 4-point Likert-type scale (from 0 to 3). Higher scores indicate better the health. The internal consistency of this scale was 0.70.
- *WHO-5 Well-being Index* for assessing the well-being of an individual includes 5 items using a 6-point Likert-type scale (from 0 to 5). Higher scores indicate better the well-being. The internal consistency of this scale was 0.78.

Procedures

The study was initiated after obtaining permission from the Heads of the institutions. For participants informed consent was obtained directly. The participants were asked to fill out the self-report measures who ever could not the researchers fill the participant's response while they were saying. Participants were briefed about the procedure, voluntary nature, and confidentiality of the study.

Data analysis

The data were analysed by programs of SPSS 23.0 First, descriptive statistics (skewness, kurtosis, mean, and standard deviation) were examined. After examining the descriptive statistics, the Pearson Product Moment correlation between the investigated variables was conducted to find the relationships. The hierarchical regression was performed to examine the influence of variables on each other.

RESULTS

Descriptive Statistics, Correlation of study variables

The results of the Descriptive statistics and correlation are presented in Table 1.

Table 1

Variables	1	2	3	M	SD
Social Support	-			4.33	1.71
Health	.153**	-		5.23	1.95
Well-Being	.795**	.593**	-	4.83	1.02

*N = 60; M- mean; SD- standard deviation; r-correlation coefficient **p < .01*

The findings of Pearson correlations demonstrated that psychosocial support was positively correlated with health ($r = 0.15$, $p < .01$) and well-being ($r = 0.79$, $p < .01$). A positive relationship was also noted between health and well-being ($r = 0.59$, $p < .01$).

The squared multiple correlation (R^2) was 0.61 for well-being, explaining 61% of variance by psychosocial support and health. The path analysis conducted among these variables obtained from the SEM (with standardized beta weighting) is shown in Figure 1.

Table 2 The result of Path analysis examining the statistical significance of direct indirect effects of path model

Path	β	CR	p value
PSS->WB	.76	2.51	0.003
GH->WB	.09	7.41	0.000
R square WB	.61		

*Note. PSS = Psychosocial support; GH= General Health; WB= Well-Being; β = standardized coefficients; CR = critical ratio. **p<.01, ***p < .001.*

DISCUSSION

Social support encompasses various forms, including emotional, instrumental, informational, and appraisal support. Emotional support, in particular, plays a significant role in promoting well-being among older adults. Having someone to share their feelings with and receiving empathy and understanding can reduce feelings of loneliness and depression. According to a study published in the *Journal of Gerontology*, older adults who reported having strong emotional support networks exhibited lower levels of depression and reported higher levels of well-being (Charles ST & Carstensen LL 2014). Social connections can act as a buffer against stress. In old age, individuals may face various stressors like health issues, loss of loved ones, or financial concerns. Having a network of friends and family can provide emotional stability and resilience, contributing to overall well-being. Research conducted by Hostinar et al., (2015) in their seminal work on social support and stress found that social connections can act as a protective buffer against stress, particularly in older adults. As people age, they may experience a shrinking social circle due to retirement or the loss of peers. Maintaining social connections fosters a sense of belonging, which is crucial for well-being. Feeling connected to others can reduce feelings of isolation and increase life satisfaction.

A longitudinal study by Y.Luo (2012) demonstrated that maintaining social connections in old age contributes significantly to a sense of belonging and reduces the risk of loneliness. The relationship between physical health and well-being is well-established. Older adults with better physical health tend to report higher levels of life satisfaction. Good health allows them to engage in activities they enjoy, maintain independence, and experience fewer physical limitations. According to research published in the *Journal of Aging and Health* by Frisk A (2009), physical health in old age is closely linked to mental well-being, with better health being associated with reduced rates of depression and anxiety.

CONCLUSION

The positive relationship between social support and health condition in old age and their collective impact on well-being cannot be overstated. Older adults who have robust social networks and maintain good health tend to experience higher levels of life satisfaction, lower rates of mental health issues, and a better overall quality of life. As societies age, recognizing and promoting the significance of social support and health in old age becomes not only a matter of individual well-being but also a public health imperative. Supporting and fostering these factors can lead to healthier and happier aging populations.

Limitations

While research shows a strong correlation between social support, health condition, and well-being in old age, establishing causality is challenging. It's possible that other factors not considered in the discussion may also play a role.

Older adults constitute a diverse group with varying experiences, lifestyles, and health conditions. Factors like socioeconomic status, cultural background, and individual resilience can influence the strength of the relationship between social support, health, and well-being. The impact of social support and health on well-being may change over time. For instance, the loss of a close friend or spouse, or the onset of a serious health condition, can alter this dynamic significantly. This research can be implemented on targeted Interventions, Holistic Healthcare and Public Health Policies.

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Conflict of Interest

The author(s) declared no conflict of interest.

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