



Case Studies on Elderly and Institutionalization in the Southern region of Kerala

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ABSTRACT: Aging is a period of decline and social attitude towards old age affects the aged population. The practice of institutionalizing the elderly is a broad spreading concept in the modern world, and the old age homes and hospices are growing day by day. The current study aims at exploring the life experiences of the elderly on account of the transition happening due to institutionalization. The current study followed the multiple case study design. The objectives of the study are 1) to understand the social conditions that propel the elderly to choose institutional care, 2) to assess changing the attitude of the elderly towards the society and 3) to determine the coping mechanisms by the elderly in institutions, towards effective adjustment. Samples were selected from the old age homes who were above the age of 65 and institutionalized for at least ten years. Four case studies focused on the current objectives, and semi-structured interview guide was used. The study found that there was some level of psychosocial issues among the elderly and need psychosocial interventions and specialized care for the elderly in the primary, secondary and tertiary levels.

Keywords: Aging, Institutionalization, Psychosocial Issues, Kerala



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1. INTRODUCTION

According to population census 2011, there are nearly 104 million elderly persons in India; 53 million females & 51 million males and 13% people are above 60 years old in the state of Kerala. Traditionally, the age of 60 was generally seen as the beginning of old age. Most developed countries of the world have accepted the chronological age of 65 years as a definition of 'elderly' or senior citizen 'or older person'. Signs of new dilemmas are evident in the State of Kerala, having one of the lowest population growth rates in India, that is, the fertility and mortality rates have fallen to very low level, and an average Keralite would live beyond 70 years. All this is leading to a situation making Kerala a State with a speedily aging population that is, to a grey state concept. The break-up of the joint family into a nuclear family made it incapable to accommodate the old due to the pressures created by the demands of a modern urban and industrialized lifestyle. Studies reported that elderly also undergone marginalization, alienation, social insecurity, limited social interaction, limited earning possibilities, multiple medical complications, emotional isolation, limited awareness regarding their legal rights, and natural reluctance to seek justice are their other issues (Rajasi et al., 2016). The current study aims at exploring the life experiences of the elderly on account of the transition happening due to institutionalization.

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2. Methodology

The current study adopted a multiple case study design. The elderly population who were above the age of 65 and institutionalized for more than ten years were included in the study. Data were collected through in-depth interviews from the institutionalized elderly from old age homes at Kollam & Pathanamthitta districts of Kerala. Socio-demographic details including gender, age, education, religion, previous occupation, critical issues among the participants were collected, and in-depth interview focused on social conditions of elderly, changing attitudes towards old age population, coping mechanism among elderly were interpreted in the results. Four different cases have been listed out based on the objectives in the results. Permission was obtained to carry out the study from the institutions, and those who accepted the consents were recruited for the study.

3. Results

Table 1: Socio demographic details of participants

Case no	Gender	Age	Education	Religion	Earlier Occupation
Case 1	Male	71	8 th Standard	Christianity	Construction Labourer
Case 2	Male	75	3 rd Standard	Hinduism	Agricultural laborer
Case 3	Female	76	10 th Standard	Christianity	Homemaker
Case 4	Female	72	5 th Standard	Hinduism	Tailoring

Table 2: The key issues identified in the cases

Case 1	<ul style="list-style-type: none"> Physically and verbally abused by the family. He spends most of his earning on liquor. Joined voluntarily in the institution with the support of a religious priest.
Case 2	<ul style="list-style-type: none"> Physical and verbal abuse after his disease from the family. He had a paralytic stroke and needed physical care and support for day-to-day functions. Friend guided him to the institution.
Case 3	<ul style="list-style-type: none"> Physical and verbal abuse from daughter in law. Family members brought her to the old age home.
Case 4	<ul style="list-style-type: none"> Abuse from the daughter in law. Forced to move into an old age home.

Some of the statements from the participants (Case 1 to 4) while interviewing are given below:

- **Case - 1** described that *"I am asking pardon from God to forgive me for bringing up two sons who have turned this way. Rest of my life will be a prayer for my sons. I love them, even though they have abused me. I strongly resist giving them the share of money which is remaining with me. It's not because I do not love them, its due to my love for him. I do not want to spoil them again"*.
- **Case - 2** pointed out that *"There is no respect and love for the elderly from the children. We are used by our children and thrown out after extracting all the love and good health spent on them until this time. The younger generation has become arrogant, and they possess very poor value system. During our period we had strong respect, love, and care towards the elderly. Our young generation started decomposing"*.
- **Case - 3** mentioned that *"The old age home is a great blessing for people like me. I interact with all the inmates, and we try to help each other. We are also busy in prayer, watching TV, occasionally visiting churches. This keeps us going"*.
- **Case - 4** said that *"I do not like to live in the old age home, but I have no other alternative. I am unable to sleep at night; I often feel tearful when I think of the things happened in my life. I am taken care well by the people here, but it often pains when I think what my children have done. I pray hard when I am unable to control my feelings. I feel that my God is listening to my every word and so I feel relieved"*.

Objective 1: To understand the social conditions that propel the elderly to choose institutional care.

- The major reason given for being in an institution was destitution where an individual lacks all other support systems.
- Poverty is the common denominator for all the older persons who now occupy the same class position even if they used to be highly regarded during their prime years.
- Lack of education and unattractive employment such as farm working were deemed to be bad beginning points in life that predisposed one towards institutionalization. One respondent statement was – "lack of education is what made us really foolish."

Objective 2: To assess changing attitude of the elderly towards the society.

- The person's bad experience from his children made him feel sorry about the whole youth population.
- The elderly are less concerned by the younger generation. There is no respect and love for the elderly from the children.
- The past family system with the present one opined that the new generation has a very poor value system which has less concern about elderly.

Objective 3: To determine the coping mechanisms by the elderly in institutions, towards effective adjustment.

- Adaptive coping strategies used were observed to be acceptance, hope, change in perception, re-definition of self, avoidance attitude, dropping of responsibilities, prayer, less fear for life & death.

- Participant word - *I know that I have to die in this old age home." It's a way of coping through accepting the fact and managing with her situation."*
- Statement from one participant - *I know that I have to die in this old age home." It's a way of coping through accepting the fact and managing with her situation."*
- Participant statement - *"I am waiting to go near my Mother and rest on her lap when I leave this world full of cruelty."*

4. Discussion

The practice of institutionalizing the elderly is a broad spreading concept in the modern world, and the number of old age homes are growing day by day. The factors which propel elderly to choose or accept institutionalization needs to be studied in-depth, so that one may be able to provide effective psychosocial interventions. A study on abuse against elderly in India revealed that 11% of 60+-year-olds had experienced at least one type of elderly abuse (Physical 5.3%, Verbal 10.2%, Economic 5.4%, Disrespect 6%, Neglect 5.2%). The most common perpetrator was the son, who is reported to be responsible for the abuse among 41% of male victims and 43% of female victims (Skirbekk & James, 2014). This speaks about the need for addressing the psychosocial issues at the earliest in order to minimize the psychological distress.

The decline in different psychological and social functions is common in old age which makes them prone to vulnerabilities especially among the elderly living in institutionalized care. Institutionalization was often met with feelings ranging from bitterness, anger, betrayal, shame, uselessness, powerlessness to impotence. Results of the study of elderly living in old age home and within family set-up in Jammu revealed that elderly feel that younger generation has an attitude which is not supportive towards the old age population (Dubey, Bhasin, Gupta, & Sharma, 2011). Even though the elderly are able to get relieved from emotional issues by being more spiritual, that seems to favor the withdrawal of an older adult to him/herself than interacting with others. In the current study also concluded that the participants have some kind of psychological distress at institutions. It's because of the abuse from the loved one or from the family members.

5. Conclusion

Every human being passes through the different phases of life. Old age is said to be the final phase of life one has to reach. It is otherwise known as the second childhood. This indicates the care and affection that this population needs. The concept of nuclear family has made the dependent elderly population more vulnerable to illness. The concept has also increased the institutionalized homes in the country. This study on institutionalized elderly have brought out the factors which propel the elderly to choose institutional care, the changing attitude of elderly towards family, spirituality, modernity, the challenges faced by them under institutional care, coping mechanisms. Possible psychosocial measures can be adapted to bring out positive changes in the life and status of institutionalized elderly. Multi-disciplinary teamwork will help to reduce the bio-psychosocial issues of elderly and give proper awareness to the family to handle the issues.

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