



## LEVEL OF INDEPENDENCE AMONG ELDERLY WOMEN –SCOPE OF SOCIAL WORK INTERVENTION FOR BETTER QUALITY OF LIFE

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### **Abstract**

*Despite of considerable growth in proportion of both male and female elderly around the globe, a strong prevalence of women has been established with increased vulnerability. Among the Indian states, in Kerala, institutional care is the most widespread form of formal care for older people and reviews clearly states that researches and intervention initiative are need to be encouraged among them for a better quality of life. The research design used is Quasi-Experimental, as it is an intervention study. The main focus of the study is to know whether the social work intervention is effective among the targeted group in improving their level of independence. The present study in a constrained sense has contributed to the professional social work by reviewing the importance given to the elderly women in social work education and practice.*

**Key Words:** *Elderly Women, Level of Independence, Mobility, Residential Care Home, Social Work Intervention.*

### **INTRODUCTION**

The most ignored of all development issues is the population ageing. This process has been taking place in most of the developed and developing world for quite a few decades. Ageing is primarily the effect of a two dimensional demographic change: on the one hand overall mortality declines, resulting in longer life expectancy; on the other, declines in fertility result in decreasing the proportion of children and young adults in the population and, consequently, in increasing that of older adults. The conventional living patterns among older people have changed drastically following the reduction in fertility and the increase in life expectancy at older ages (Rajan 2003). These trends elicit concerns about a gap in housing, care, and support of older people. The gap is being bridged, to some extent, by institutional care. Huge numbers of older people than before are seeking institutional care in the absence of home-based care.

### **RATIONALE OF THE STUDY**

Despite the rapid growth of residential care homes across India, there is a disgrace associated with entering and living in a residential care home, especially in Kerala. Old age care homes are seen as a symbol of social degeneration, where aged relatives are abandoned, and love and service as an inherent feature of family care is now commercialised because of justifiable varied reasons. Residents of care homes are thus viewed as abandoned by their families and very often referred to as ‘inmates’ by staff and management, where only the basic need of the residents were being considered, not the overall quality of life. In addition, they also exposed an absence of standards or guidelines for care homes in India. In the study by Devi and Murugesan (2006) on care homes in India, it was highlighted that the older people had their basic needs satisfied but experienced a huge void in meeting their psychological and social needs as a result of regimentation, social inactivity, helplessness, lack of interest, boredom, and loneliness.

These factors result in increased vulnerability of women groups of elderly especially to those who are in residential care homes, without having their dear ones. Hence it is proposed that, programmes for senior citizens should evolve in response to these social, psychological, environmental factors and most importantly should be gender sensitive owing to increased proportion of elderly women and acknowledging their vulnerability and special needs. The study thus focuses on the level of independence among elderly women so as to enrich themselves and others for a better future.



## **METHODOLOGY**

The main aim of the study can be phrased as to enhance the level of independence among the elderly in the residential care homes in Kerala. The objectives of the study were (a) to measure the level of independence of the elderly in the residential care home. (b) To analyze different facets in the broad term of level of independence in the old age (c) To develop an intervention package to enhance the level of independence among elderly women. The hypothesis of the study is there will be significant change in the level of independence among the elderly women in the residential care home after the social work intervention.

## **RESEARCH DESIGN**

The research design used is Quasi-Experimental, as it is an intervention study. A 'before-after' 'single group design' is adopted for the study. Still the major elements of the single subject design for the intervention model is being incorporated to have an accurate result both quantitatively and qualitatively. Intervention research designs or single subject designs are basically quasi – experimental research designs which use time series analysis technique of social research, to the evaluation of the impact of intervention on individual cases, groups, family and community. Such designs involve repeated measures of the dependent variable before and after a particular intervention, to see if a sustained pattern of change in the dependent variable commences after the onset of intervention (Lal Das, 2004). In the present study, there are three stages of assessment on level of independence among elderly women as Pre assessment, Post assessment and Post-Post assessment.

### **Sampling Design**

Multi stage random sampling is being adopted for the study and the main focus of the study is to know whether the intervention is effective among the targeted group in improving their level of independence. The sample size is kept as thirty as it is an accommodating figure for the researcher in collecting and analysing immediate feedback regarding changes of the respondents' behaviour, and to have a focus on group dynamics and thus to arrive strong conclusions regarding the effect of one variable on another.

### **Process of Data Collection**

The first part of the interview schedule mainly reviewed the socio demographic profile of the respondents. The self-developed interview schedule was used to gather information like age, education, occupation, religion and economic background of the elderly. The socio demographic information schedule was filled by the researcher by asking the questions directly to the elderly women. The level of independence schedule briefed from WHO-QOL was used for the assessment among elderly women under the residential care home.

The data collected during the different stages of assessment were coded and classified according to the classification of scale's four domains like mobility, activities of daily living, medication and work. There were three assessment stages which are now named as 'Pre assessment', 'Post assessment' and 'Post-Post assessment'. The pre assessment was given before the intervention. The post assessment was administered soon after the intervention and the post-post assessment was taken after a gap of three months.

Quality of life as an individual's perception is a broad ranging concept affected in a complex way by the person's physical health, psychological state, personal beliefs, social relationships and their relationship to salient features of their environment. The intervention package thus developed by the researcher aims at addressing the issues related with mobility, activities of daily living, work and level of medication among elderly women under residential care homes in Kerala which was the key facets for the level of independence among the elderly.

### **Methodology for the Intervention Programme**

The general methodology planned for the intervention sessions will be short time interactions with subject expert, story time, group discussion, question answer sessions, games, role plays, question box, charts and papers. The package is basically developed with social work philosophy and values for the intervention purpose. Social group



work principles laid the foundation for all the interactive session with the presence and active involvement of professional social workers in each intervention session. All the session was handled by the subject expert and interactions with him/her is made possible as per their convenience after every day.

### DATA PROCESSING AND ANALYSIS

Data analysis was done with the help of Statistical package for Social Sciences (Version 21). Statistical techniques such as descriptive analysis like Mean and SD, inferential statistics – Paired t test, ANOVA were also applied to reach the findings and conclusions. The Paired t-test was calculated between the scores to find out the statistical significance between the groups. ANOVA was administered for testing the efficiency of the intervention programme.

**Table No: 1, showing the comparison of pre and post I scores of different dimensions of Level of independence**

Dimensions	Mean ± SE		t-value	p-value
	Baseline result	Post - test I		
Mobility	34.58 ± 2.81	48.33 ± 2.18	5.763**	< 0.001
Activities of daily living	24.58 ± 1.8	44.79 ± 2.12	8.45**	< 0.001
Medication	83.5 ± 2.34	71.83 ± 1.86	4.772**	< 0.001
Work	25 ± 3.21	48.88 ± 2.73	7.332**	< 0.001
Overall	25.17 ± 1.69	42.54 ± 1.45	10.245**	< 0.001

\*\* significant at 0.01 level

For the comparison and making the interpretation, the researcher adopted Paired t - test for baseline result scores with post - test score. All the t-value was found to be significant which indicates that there is significant difference between baseline result and first post - test scores. In the case of mobility, mean score before the intervention was 34.58 which increased to 48.33. This shows the intervention is effective in increasing the mobility of the respondents in their daily living. The p-value is < 0.001 indicating that the null hypothesis is rejected holding the conclusion that baseline result score on the physical domain has been significantly increased in the post - test scores. The focus is on the respondent's general ability to go wherever she wants to go without the help of others regardless of the means used to do so. The data examines the respondent's view of her ability to get from one place to another, to move around the home, move around the work place before and after the intervention.

Analysing the facet of activities of the daily living, it explores a person's ability to perform usual daily living activities including self-care and caring appropriately for property. The mean value for the facet has increased from 24.58 to 44.79 and thus says the intervention is effective. The aim behind the particular domain was to assure the respondents in their ability to carry out activities, which she is likely to need to perform on a day-to-day basis.

Theoretical framework also supports the findings as the theory of gerotranscendence focuses on two important aspects: the old person and the ageing process itself, describing both the experience of growing old and the characteristics of a normal and positive old age. The aging phenomenon does not imply any state of withdrawal or disengagement, as sometimes erroneously believed. In this period of life, a redefinition of the self and of relationships to others happens, as well as a new understanding of fundamental existential questions, representing the final stage in a possible natural progression towards maturation and wisdom.



The mean score for the medication facet is decreased from 83.5 to 71.83, indicating low intake of medicines by the respondents. It means that, they develop a positive health habit of not taking high dose medicines for small ache and discomfort. Regular monitoring of the soft exercises helped the respondents to lessen the joint pain, dizziness, sleeplessness etc. The working capacity of the respondents has a positive intervention impact with a mean score of 48.88 from 25. This shows that respondents capacity and use her energy for work is increased. "Work" is defined as any major activity in which the respondents are engaged like cutting of vegetables, gardening, helping neighbouring resident when they are ill, cleaning their own room etc.

Report on "Older people – independence and well-being" states that Independence is subjective and relative, varying according to the person and situation. At the heart of older people's sense of independence and well-being lies their capacity to make choices and to exercise control over their lives. This is not the same as being able to do everything without help. Indeed, accepting help in some areas of their lives allows many older people to remain independent in others. Many older people point to the reality of interdependence with others – acting as valued members of supportive networks that are made up of friends, neighbours and family.

Older people are often active in their communities and many are carers: one in six of all carers are older people themselves. Of these, around one-third support a spouse, one-fifth support a parent and just over one-fifth care for a friend or neighbour. The table value says that the intervention for the improvement of the level of independence among the respondents is effective with an increase in the overall score from 25.17 to 42.54. The assumption is made that wherever a person is dependent to a significant extent for her mobility on another person this is likely to affect quality of life adversely.

Another area of reflection was the degree to which people are dependent on others to help them in their daily activities is also likely to affect their level of independence and thus the overall quality of life. Through the intervention, the respondent found much easier methods to get things done by their own hands without disturbing the fellow neighbours in the home.

**Table No: 2, showing the comparison of post I and post II scores of different dimensions of level of independence**

Dimension	Mean ± SE		t-value	P-value
	Post - test I	Post - test II		
Mobility	48.33 ± 2.18	46.33 ± 2.16	41.71**	< 0.001
Activities of daily living	44.79 ± 2.12	42.82 ± 2.10	31.95**	< 0.001
Medication	71.83 ± 1.86	70.08 ± 1.89	7.00**	< 0.001
Work	48.88 ± 2.73	46.75 ± 2.72	17.00**	< 0.001
Overall	42.54 ± 1.45	40.45 ± 1.45	30.43**	< 0.001

\*\* significant at 0.01 level

In the above table, the assessment shows that all the t-test-values are significant at 0.01 level while comparing post - test I and Post - test II. This was done by using paired t-test and found that mean scores for the entire dimension decreased in the post - test II compared to Post - test I score. This shows that in the post – post test, there is significant reduction in value among all the dimensions of physical domain.



"Mauchly's Test of Sphericity was used for testing the sphericity assumptions. Mauchly's W calculated was 0.004 in the level of independence and the chi square approximation for testing this was 152.753 which was found to be significant ( $p < 0.001$ ). Significant chi square test indicates that the variances of the difference between all possible pairs of groups are not equal. This indicates that the assumption of sphericity is violated; hence correction in degrees of freedom with Greenhouse Geisser estimation was done.

Results shows that the perception was very low in the pre intervention (25.167) session, which was increased significantly to 42.542 in the first post - test and then reduced to 40.450 in post II test. Significant reduction was noted between post - test I and post - test II among the variables. However post - test II score was significantly higher than baseline result score, which shows that the intervention programme to increase the level of independence is effective.

### **FINDINGS AND SUGGESTIONS**

Effectiveness of intervention programme in the domain of level of independence can be found as, in the case of mobility, mean score before the intervention was 34.58 which increased to 48.33. This shows the intervention is effective in increasing the mobility of the respondents in their daily living and to 46.33 in the later part. The mean value for the aspect of activities of the daily living has increased from 24.58 to 44.79 and thus says the intervention is effective with the post – post score of 42.82. The mean score for the medication facet is decreased from 83.5 to 71.83 and 70.08 in the post – post test, indicating low intake of medicines by the respondents. The working capacity of the respondents has a positive intervention impact with a mean score of 48.88 from 25. The mean score in the post – post test is 46.75. The table value says that the intervention for the improvement of the level of independence among the respondents is effective with an increase in the overall score from 25.17 to 42.54 and 40.45 in the post – post test.

While checking the tenability of the hypothesis, there will be significant change in the level of independence among the elderly women in the residential care home after the social work intervention, the result shows a positive outcome. In the t-test to find out the significance in the difference between pre intervention scores of the domain of level of independence with respect to the post intervention score of the domain of level of independence, before and after the social work intervention, the t-value obtained is 10.245 and the p value is  $< 0.001$ . The null hypothesis is rejected leading the conclusion that baseline result score on the domain of level of independence has been significantly increased in the post test scores. Thus the social work intervention helped to increase the level of independence status of the respondents.

### **SUGGESTIONS**

Each centre shall frame policies for quality assurance for services and maintain an operational guideline for the effective programme delivery focusing the individuality of the residents in the care home. On the job trainings to the care givers in the residential care home will help to incorporate practical wisdom with scientific knowledge for better result. The management of the residential care home shall engage each person into a structured activity programme that enables her to have definite aim in everyday morning. The centre shall effectively make use of field practicum of the social work students with the support of competent supervisors in the centre for strengthening the residential care homes' activities. Professional service from skilled social workers can be availed by the management for the better functioning and improved level of independence among the residents. Multi-disciplinary team approach will showcase and treat different aspects of elderly group and ensure better daily functioning.

There are few more suggestions for future research like the high vulnerability of elderly females underlines the need to conduct studies on this growing segment of the population, the huge number of rural elderly with their diverse problems makes focusing on this segment of the population very important. Studies should identify feasible and appropriate community-based support programmes through bottom level intervention that would



minimize social isolation of the elderly. Case work intervention can be initiated as part of research work which will be a good strategy for individual based focused result.

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