

# **A COMPARATIVE STUDY OF LONELINESS AMONG AGED RESIDING IN OLD AGE HOMES AND WITH THEIR FAMILIES IN TERMS OF THEIR SPOUSE SURVIVAL STATUS AND GENDER.**

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## **ABSTRACT**

Present study is intended to inquire the commonness of Loneliness among the Aged over the age of 60 years, in relation to their Residing Status, Spouse Survival Status and Gender. Considering the nature of the objectives, convenient sample of 240 Old Aged individuals equally from both Old Age Homes as well as living with their respective Families was taken. Psychological measure administered was the UCLA Loneliness Scale by Russell. D., et al (1978), revised in 1980 and further in 1996. t- test and ANOVA were run for the analysis of data through SPSS. Results obtained indicates that females irrespective of residing status and the spouse survival status displayed greater loneliness in comparison to males. In terms of residing status, aged residing in the old age homes displayed greater level of loneliness in comparison to the ones who were residing with family members in their respective family environment. The comparison in context of spouse survival status showed that the aged who were living alone had greater loneliness in comparison to their counterparts of the ones living with their spouse.

Keywords: Loneliness, residing status, spouse survival status, old age homes.

## **1. INTRODUCTION**

Everybody feels lonely in some or the other phases of life from time to time, but over the last few decades, this feeling that once used to be an occasional one has become chronic for millions. We are living in the most connected times of the human histories, and yes, a 'not happened ever' number of us

still feels lonely. Feeling alone and feeling lonely is not the same thing. You could be full of bliss and content just by yourself and hate every second in which you are surrounded by people and friends. Loneliness thus is a purely subjective individual experience. Loneliness can happen to and affect anybody. Money, beauty, fame, social skills or even a great personality, nothing can protect us against loneliness as it's the part of human biology.

**G.H Sheldon (1948)** in his book titled "Social Medicine of Old Age" introduced the concept of loneliness. Sheldon very well asserted that loneliness can't just simply be addressed as a direct result of the social circumstances. He further suggested that it's completely an individual's response to any of the external situations, to which other elderly individuals may react quite distinctively.

A study by the "**Age well Foundation**" suggests that, in India, a country of over a billion people, one in every two elderly individuals is found to be agonized in loneliness. India's aging population is intensively and increasingly distressing with tormenting loneliness. In addition, every fifth senior citizen in the country is deprived of some of or the other possible kind of psychological counseling. This Delhi based non-profit Non-Governmental Organizationsurveyed 15,000 elderly individuals. 47.49 percent of these sample size was found to be anguishingover loneliness. The numbers from urban areas were even worse, i.e. 3,205 of the aged out of 5,000, felt lonely (**Help Age India, 2014**).

In a study done by **Hansson et al. (1987)**, it was observed that loneliness was associated with poor psychological adjustments, dissatisfactions, as well as resentment with family& wards. Mismanaged social relationships were also found to be acrucial influencing factor. Among the aging adults, this feeling of loneliness has serious impacts on the physical and mental health and wellbeing and so contributes to anxiety and despairs. Further, it can eventually lead to incidences of incremental emergency hospitalization and slower recoveries from various problems among the elderly. It can cause stress and depression too.

### **1. (i)Transposes in the fashionof the Indian Family System**

In the context of the urban section of India, there has been an astounding and staggering growth in the number of the older population and concomitantly there has been reduction in the size of the family structure. For years long durations, the system of having joint and larger families have been Ubiquitous in India and thus children took care of and safeguarded their parents. But today the changes in the situations and time this concept of joint families is approaching towards greater declines and this structure of having joint families is deteriorating (**Help Age India, 2013**).

With the growth in fanciness of having nuclear families, the customary and long established trends of aging that are- caring of the aged, and supporting them within families and homes is moving towards great declines. As family system is facing huge changes, the coming to light and unfolding of old age homes and such aided institutions has increased as a result of declines in the physical and psychological health of the aged individuals (**Lamb, 2007**).

In the neoteric years, people of India and thus the family system have commenced seizing and encompassing the western cultures living structure and as an out-turn massive count of aged individuals are moving into the old age homes. Children's inclination towards nuclear family system, working generation, fantasising of private life without any interferences, all these factors have collectively led to the increments in the counts and needs of old age homes in our societies. Though no such palpable or existing figural count of old age homes in India are accurately available, but the estimations provided counts it to be around more than 1000. A great gap in terms of availability of literatures too have been found about the real time expression of older individuals about their living experiences in these old age home(**Stone, 2009**).

An essential approach to positively influence the tendency of loneliness in both men and women is to add gender as a principal division to one's social organization, as the process of socialization differs significantly among the genders (**Nicolaisen & Thirsen, 2014**). Most of the researches indicated that older women were more likely to experience loneliness as compared to older men (**Dong and Chen, 2017**). Studies done by **Aartsen & Jylhä (2011)** observed and stated that when other factors like marital status, health, age, and living tactics were controlled, there was no significant gender difference in experiencing loneliness. However, when loneliness was inspected indirectly, it clearly indicated that men were lonelier than women. **Beutel et al. (2017)** found that among the participants without a partner (spouse), loneliness was more conspicuous in women who resided alone and were without children.

Not just the people staying in or left out to live in the old age homes experiences the loneliness, rather, if an elderly individual is not feeling close enough to or is feeling unattended or neglected/ignored by his/her wards/children, may experience elevated loneliness. Apart from the spouse, adult children supply the most influential support and high social contiguity in old age. Much recurrent proximity, care, and affection to elderlies by their adult children may pacify the feelings of loneliness among older persons. (**Gierveld et al. 2009; Long M. V., Martin P. 2000**). We need to acknowledge and take this into our serious consideration, that residing in an old age home is imperative and full of fraught. In Indian society, the 'old age home' is no longer a western idea. Considering the present unfortunate condition of elderlies in our society, there are old age homes in India, that are making an effort to ratify ill formed practices and

acknowledgethe needs, proclivity, and values of elderlies alongwith it fabricating and fulfilling the new ones (**Lamb, 2007**).

## **2. REVIEW OF THE AVAILABLE LITERATURE**

**Green et al. (2001)** indicated that social and emotional loneliness are different aspects, this was achieved by evaluating social network correlates of emotional and social loneliness, further the possibility of age differences in the relationship between loneliness and social network attributes were examined. A loneliness scale constructed particularly for measuring emotional and social loneliness was completed by 110 older adults (mean age 71 yrs.) and 91 college going students (mean age 20 yrs) (P. Shover & K. Brehnan, 1991; M.T. Wittenberg, 1986) and the UCLA Loneliness scale (D. Russell et al., 1980). Furthermore, social and emotional loneliness were found to be correlated moderately with each other along with having a differential correlate in the results obtained for both the age groups involved in the study. Correspondingly, it was observed that emotional lonelinessis quite related to existence of significant other in the association, also in case of older adults, the relationship was observed to be significantly stronger. This study also revealed, varied correlates of social loneliness among young and older adults. Additionally, social loneliness in young adults was observed to be a manifestation of existence of a partner/ or close companion as well as size of the network whereas, in case of older adults, average closeness of the network was a governing factor.

**Rokach (2001)**determined the implication of age and gender over the coping capacity of loneliness. In this study, 711 random participants voluntarily involved for answering a questionnaire comprising of 86 items with yes/no options about effective coping strategies employed by the volunteers for dealing with loneliness. Comparative evaluation was done between age groups including youth (13-18 yrs. old), young adults (19-30 yrs old), adults (31-58 yrs. old) and seniors (60-80 yrs. old), also a gender comparison was done. The obtained results reported that much successful confrontation and management of loneliness was achieved by adult age group, while in case of gender comparison women were observed to stand out much efficient in dealing with loneliness irrespective of any of these age groups.

**Pinquart and Sorensen (2003)**examined various risk factors affecting loneliness in later stage of life. It was revealed that loneliness was weakly correlated with age, also this correlation observed higher in case of much older geriatrics.A negative association with loneliness was observed, whereas the influence of qualitative social contacts was much significant than the quantity of contacts. Furthermore, the study revealed that the feeling of loneliness may overcome with respect to having friendly bonds rather than contacts with adult children/close relatives, but this trend was not much significantly observed in older population studied under the study. Few factors were observed that may significantly influence likelihood of experiencing loneliness such as; improper physical health, remaining

unmarried, 71 socio-economic statuses, being a female gender and residing at nursing homes. Subsequently, correlation of marital status, lack of social and professional contacts, health issues, and female gender with loneliness were found to be much significant in older sample, but institutionalization prove to be less influential for predicting loneliness in older population.

### **3. METHODOLOGY**

Research is a methodical, precise, rigorous, and scientific examination that begins with a rational query of problem. It uses trustworthy and valid tools for collection of evidences, in addition to this after a thorough and unbiased examination of the data, the researcher develops inferences, findings, generalizations and finally proposes possible solutions to the problems. Any research is a systematic and intellectual application of the scientific methods towards the solution of any educational problem, which is considered in its fullest and finest senses available. A research study is made up of several processes that are must to be followed so as to perform any research effectively. It entails tasks including identifying the problem, review of literature, formulations of the hypotheses, testing those formulated hypotheses, data collections, analysis of the obtained data, interpreting the obtained outcomes, and concluding the outcomes obtained. The term “Methodology” means “the logic of methods”. The methodology refers to the procedure used by the researcher to achieve the objectives of any study. The methodology employed in any research should include the major specifics such as the tools and materials utilized in the study, development of those tools and validation, data sources, collection and analysis procedures.

### **SAMPLE**

The total sample of 240 subjects has been drawn from Uttarakhand and its adjoining districts of Uttar Pradesh. Desired sample from old age home has been selected with the consent of subjects and required number of subjects as a control group, possibly from the same age, education and number of their wards surviving, etc. were also taken from persons living with their families. Age range of both the groups were limited in between 60 yrs to 80 yrs.

### **DESCRIPTION OF VARIABLE**

#### **a) INDEPENDENT MEASURES -**

- Residing Status.

Old-Age Homes

Living with Family

- Survival status of spouse.

Single.

Both.

- Gender: For the present study, two gender categories have been taken into consideration.

Male.

Female.

#### **b) DEPENDENT MEASURE -**

- Loneliness.

### **PSYCHOLOGICAL TOOL**

UCLA Loneliness Scale by Russell. D., et al (1978), revised in 1980 and further in 1996.

### **OBJECTIVES**

- To study the loneliness of Aged living in old-age homes and/or with their families.
- To enumerate the effect of Gender of Aged on their loneliness.
- To find out the effect of Survival Status of Aged Spouse on loneliness of old age people.
- To study the mutual interaction among Residing and Survival status of spouse and Gender on loneliness of Aged.

### **HYPOTHESES**

- Aged residing with families will be better than aged residing in old age homes on Loneliness.
- Gender will determine Loneliness in aged positively.
- Aged Survival Status of Spouse will influence Loneliness positively.

- iv. Residing Status, Spouse Survival Status and Gender will interact mutually in determining Loneliness in Aged.

**H<sub>1</sub> (F test):**

**EXPERIMENT: Loneliness as a function of Residing Status, Gender and Spouse Survival Status.**

1. Loneliness is a function of Residing Status = 1
2. Loneliness is a function of Gender = 1
3. Loneliness is a function of Spouse Survival Status = 1
4. Loneliness is a function of Residing Status  $\times$  Gender = 1
5. Loneliness is a function of Residing Status  $\times$  Spouse Survival Status = 1
6. Loneliness is a function of Gender  $\times$  Spouse Survival Status = 1
7. Loneliness is a function of Residing Status  $\times$  Gender  $\times$  Spouse Survival Status = 1

**TABLE 1: Research Paradigm for Loneliness: Residing Status, Gender and Spouse Survival Status.**

		Residing status				
		Withfamily		OldAgeHome		Σ
		SpouseSurvivalStatus		SpouseSurvivalStatus		
		Single	Both	Single	Both	
GENDER	Male	ΣX -1398	ΣX - 1358	ΣX -1496	ΣX -1489	5741
		M -46.60	M - 45.27	M -49.87	M -49.63	
		N -30	N - 30	N -30	N -30	
	Female	ΣX -1910	ΣX - 1380	ΣX -1928	ΣX -1915	7133
		M -63.67	M - 46.00	M -64.27	M -63.83	
		N -30	N - 30	N -30	N -30	
	Σ	3308	2738	3424	3404	12,874

*N= Number, M= Mean.*

**TABLE 2: ANOVA SUMMARY ( $P < 0.05$ ) Loneliness: Residing Status  $\times$  Gender  $\times$  Spouse Survival Status.**

Source	S.S	df	M.S	F	P
RESIDINGSTATUS	2548.02	1	2548.02	41.40	<0.01
GENDER	8073.60	1	8073.60	131.19	<0.01
SPOUSESURVIVALSTATUS	1450.42	1	1450.42	23.57	<0.01
RESIDINGSTATUS $\times$ GENDER	437.40	1	437.40	7.11	0.01
RESIDINGSTATUS $\times$ SPOUSESURVIVALSTATUS	1260.42	1	1260.42	20.48	<0.01
GENDER $\times$ SPOUSESURVIVALSTATUS	1025.07	1	1025.07	16.66	<0.01
RESIDINGSTATUS $\times$ GENDER $\times$ SPOUSESURVIVALSTATUS	976.05	1	976.05	15.86	<0.01
ERROR	14278.20	232	61.54		
TOTAL	30049.18	239			

*SS=Sum of square, MS=Mean of square, df=Degree of freedom, P=Probability, NS=Not Significant,*

*$F_{0.05}=3.89, F_{0.01}=6.76$ .*

### Details of Significant Results-

H<sub>1</sub> 1,2,3,4,5,6 and 7 are accepted as the corresponding results are significant, details are given below-

- a. H<sub>1</sub>1 significant at 0.01 ls. Residing in old age homes promotes greater loneliness in comparison to the residence in families.



- b. H<sub>1</sub> 2 significant at 0.01 ls. Gender variable too depicts variation in loneliness levels. Females have greater loneliness in comparison to males.
- c. H<sub>1</sub> 3 significant at 0.01 ls. Spouse survival status promotes loneliness. Living alone in comparison to living with spouse leads to higher loneliness.
- d. H<sub>1</sub> 4 significant at 0.01 ls. Females residing in old age homes have higher loneliness in comparison to males residing in old age homes as well as the females residing in old age homes have higher loneliness in comparison to females residing in families.
- e. H<sub>1</sub> 5 significant at 0.01 ls. And H<sub>1</sub> 6 too is significant at 0.01 ls. Depicting that aged residing in old age homes without spouse have higher loneliness than aged residing in family setups without spouse. The aged males without spouse have lesser loneliness than aged females without spouse.
- f. H<sub>1</sub> 7 significant at 0.01 ls. Residing status, Gender and Spouse survival status interacts with each other in determining the loneliness among old age individual.

## CONCLUSION

The process of aging is a crucial reality that works on biological grounds and is hugely beyond the human controls. It's however, also a subject of concern to the way in which society makes sense about the old age. As a society it's our responsibility to cherish and care for the aged individuals. Old age homes are today at a trend setter levels, no doubt they are providing with the basic necessities but the love and affection still lacks, this is making the older population more prone to loneliness and thus to many other psychological issues. We need to do a thorough processing over our duties and responsibilities towards growing ageds and be there for them.

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