An explorative study to identify the factors influencing quality of life among elderly persons residing at selected settings of Puducherry

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ABSTRACT

Background: The population incidence of elder people has been growing worldwide. Quality of life among elder people is a significant public health concern. Hence, this study was conducted to determine the factors influencing the quality of life of the elderly persons residing at the selected settings of Puducherry. **Objectives:** The objective of this study is to identify the factors influencing quality of life among elderly persons at residing area at Puducherry. **Materials and Methods:** A cross-sectional study was conducted in October-December 2017 in the residing area of Puducherry. This study investigates the factors affecting the quality of life of the elderly persons. The population used in this study was aged 65 years and over. More than 60 persons were sampled using a convenient sampling technique. A tool comprising 35 questionnaires, which were used to assess the quality of life, was used. Data were analyzed by descriptive and inferential statistics. **Results:** In our present study, the factors significantly associated with quality of life including age, gender, level of education, economic status, residence, occupation, marital status, religion, type of family, monthly income, and dietary pattern were significantly associated with quality of life. The result showed that the elderly person's monthly income and dietary pattern have the high impact on the quality of life, but age, occupation, and marital status (P < 0.05 significant; "P" age < 0.0009, occupation = 0.0492, marital status = 0.0094) have influenced the quality of life of elderly persons. Conclusion: This study confirms that multiple factors are associated with quality of life among elder person. The mostly economic factors influencing quality of life among elderly persons.

KEY WORDS: Quality of Life; Influencing Factors; Elderly Persons; Descriptive Analysis

INTRODUCTION

Quality of life is a subjective component of the health defined by the World Health Organization (WHO). Due to increase in life expectancy and advances in medical technology, the population prevalence of older people has been growing worldwide.^[1] The living conditions are the result of a combination of the effects of these factors on health and

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well-being, including the comfort of the environment, physical, social, and desirable intelligence. Advanced health technology improves life expectancy. Increased progression in life expectancy has increased in the prevalence of chronic disease in the elderly. It is the result of structural changes and certain functions that occur in different parts of the body as the years of life increase. [2] Although the United Nations does not use the benchmark for age determination, it generally takes 60 years or more to refer to older people. As time goes by, the sum of age, social change, and disease tends to cause decay in their health and quality of life. [3] It is the time the combined effects of aging, social changes, and diseases are likely to cause a break down in health and their well-being. [4]

People worldwide are living longer. Life expectancy has increased dramatically over the past century. Today, for the first

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time in history, most people can expect to live into their sixties and beyond. By 2050, the world's population aged 60 years and older is expected to reach 2 billion, up from 900 million in 2015. [5] Elderly people are highly likely to suffer from multiple health disorders due to reduced physical and mental functioning. Loneliness, sexual dysfunction, and chronic metabolic disorders cause emotional problems. [6] These problems can reduce the quality of life of the elderly. Gerontologists have attempted to deal with these age-related differences among the elderly by dividing later adulthood into two groups: The young-old from age 65 to 74 years and the old-old from 75 years and above. [7]

According to the WHO, quality of life refers to the individual's perception of a position in life in the context of the culture and values they live in and the goals, expectations, standards, and concerns. [8] In addition, quality of life is described as being caused by a combination of physical, emotional, and social factors. [9] Literature shows that good self-esteem, well-being, and social support are the components of the strength of the elderly, while depression, loneliness, and anxiety are the main components of their weaknesses. Quality of life is a multi-dimensional rather than a multi-directional concept and the factors that affect the lifestyle.

India is facing all the problems endemic to a developing country with population aging, in the absence of parallel developments in socioeconomic, quality of life, and health spheres. Every culture has different factors that affect the quality of life, such as trust. Interpersonal relationships are related to quality of life. [10] Quality of life is a measure of health, so it involves the presence of disease or impairment that can limit the ability of a person to achieve a normal role. The objective of this study was to determine the influences of social factors to the quality of life of the elderly persons in residing area at Puducherry.

MATRIALS AND METHODS

The cross-sectional study was conducted among elder peoples in the residing area in Puducherry. This study investigates the factors affecting the quality of life of the elderly persons. The population used in this study was aged 65 years and over. More than 60 persons were sampled using a convenient sampling technique. A tool comprising 35 questionnaires, which were used to assess the quality of life, was used. The factors significantly associated with quality of life including age, gender, level of education, economic status, residence, occupation, marital status, religion, type of family, monthly income, and dietary pattern were significantly associated with quality of life.

Statistics

Statistical analysis was performed using SPSS software program, version 11.5. Chi-square test and ANOVA were used to determine the statistical significance of the observed

differences. The results were expressed as mean and standard deviation. A probability level P < 0.001 was considered statistically significant at 99% confidence interval. The probability values representing the statistical significance were designated as P < 005 at 95% confidence interval. The research methodology identifies the general pattern of organizing the procedure for gathering valid and reliable data for investigation. It includes the research approach, research design, population, sample, sample size, sample technique, and inclusion and exclusion criteria.

RESULTS

The study was conducted on 60 elderly (≥60 years) persons at the residing area in Puducherry. The majority of the respondents, age of the study participants ranged from 60 to 75 years. Of 60 participants, 19 (32%) were males and 41 (68%) were females. Frequency- and percentage-wise description of demographic characteristics. Assessment of the factors influencing the quality of life among elderly persons. An association of quality of life which selected demographic variables. Frequency and percentage wise distribution of factors influencing the quality of life among elderly persons according to their demographic data.

The factors significantly associated with quality of life including age, gender, level of education, economic status, residence, occupation, marital status, religion, type of family, monthly income, and dietary pattern were significantly associated with quality of life [Table 1]. An association of quality of life which selected demographic variables.

DISCUSSION

This study investigates the factors affecting the quality of life of the elderly. The population used in the study was the quality of life of 60 elderly people using a convenient sampling method; 35 questionnaires were used to assess the quality of life using Chi-square value. In the participants, 68.33% of the elderly were between 60 and 65 years old. 28.33% of the elderly were 66–70 years old, and only 3.33% were 71–75 years old.[11] The majority of the respondents (68%) are female and $<\frac{1}{2}$ of the respondents are male (32%). These results are similar to the findings of the study by Jacob, wherein females formed 58.8% and males 42.2% of the study subjects.^[12] Regarding educational qualification, 15% of the respondents have studied, 7% have not studied up to primary school level, 14% have and 7% have not studied up to higher secondary school level, whereas 9% moderate level of them have studied both preliminary and secondary level. Regarding residence of the respondents' (100%) under rural area category only and not responds in urban area. As a result, regarding occupation, 2% of the respondents' are government employees, whereas 72% of them have been working in self-employees, 20% of them have been working

Table 1: Factors influencing quality of life

Variables	Mean (%)			Chi-square value
	Good	Average	Not good	•
Age (years)				
60–65	20.0571 (33.43)	11.42857 (19.048)	9.5142 (15.86)	15.54979
66–70	8.3142 (13.86)	4.714286 (7.857)	3.97142 (6.62)	<i>P</i> ≤0.0009 (S)
71–75	0.74285 (1.24)	1.02857 (1.714)	0.22857 (0.38)	(5)
Gender				
Male	9.62857 (16.05)	5.257143 (8.76)	4.114286 (6.86)	0.052929 P=0.97388 (NS)
Female	19.48571 (32.48)	11.91429 (19.86)	9.6 (16.00)	
Education status				
Illiterate	0 (0.00)	0 (0.00)	0 (0.00)	0.07517
Primary school	15.28571 (25.48)	9.628571 (16.05)	7.085714 (11.81)	P=0.9631 (NS)
High school	13.82857 (23.05)	7.542857 (12.57)	6.628571 (11.05)	()
Higher secondary School	0 (0.00)	0 (0.00)	0 (0.00)	
Residence				
Rural	29.11429 (48.52)	17.17143 (28.62)	13.71429 (22.86)	0.0536 P=0.99 (NS)
Urban	0 (0.00)	0 (0.00)	0 (0.00)	
Semi-urban	0 (0.00)	0 (0.00)	0 (0.00)	()
Occupation				
Government employee	0.4 (0.67)	0.371429 (0.62)	0.228571 (0.38)	12.634 P=0.0492 (S)
Self-employee	21.11429 (35.19)	12.02857 (20.05)	9.85714 (16.43)	
Private employee	5.4 (9.00)	3.57142 (5.95)	3.02857 (5.05)	
Unemployed	2.2 (3.67)	1.2 (2.00)	0.6 (1.00)	
Marital status				
Married	22.82857 (38.05)	13.05714 (21.76)	11.11429 (18.52)	11.2587 P=0.0094 (S)
Unmarried	0 (0.00)	0 (0.00)	0 (0.00)	
Widow	6.285714 (10.48)	4.114286 (6.86)	2.6 (4.33)	
Divorced	0 (0.00)	0 (0.00)	0 (0.00)	
Religion				
Hindu	29.11429 (48.52)	17.17143 (28.62)	13.71429 (22.86)	0.0308 P=0.9847
Muslim	0 (0.00)	0 (0.00)	0 (0.00)	(NS)
Christian	0 (0.00)	0 (0.00)	0 (0.00)	
Type of family				
Nuclear family	16.57143 (27.62)	9.6 (16.00)	7.828571 (13.05)	0.00575 P=0.9971
Joint family	12.54286 (20.90)	7.571429 (12.62)	5.885714 (9.81)	(NS)
Monthly income				
2000–3000	14.62857 (24.38)	8.428571 (14.05)	6.942857 (11.57)	0.0085 P=0.9957 (NS)
3001-4000	14.48571 (24.14)	8.742857 (14.57)	6.771429 (11.29)	
4001–5000	0 (0.00)	0 (0.00)	0 (0.00)	
Above 5000	0 (0.00)	0 (0.00)	0 (0.00)	
Dietary pattern				
Vegetarian	0 (0.00)	0 (0.00)	0 (0.00)	0.003
Non-vegetarian	29.11429 (48.52)	17.17143 (28.62)	13.71429 (22.86)	P=0.9984 (NS)

NS: Not significant, S: Significant

in private employees, and 7% of the elders are unemployed. ^[13] The majority of the respondents' (78%) are married and 22%% of the respondents' are in widowhood stage. Regarding

religion, in Hindu, 49% of the respondents are good, 29% have moderate respondents, whereas 22% moderate level of respondents. The little $<\frac{1}{2}$ of the respondents' (57%) are in

the nuclear family setup, whereas 43% of them are living in joint families. 50% of the respondents' income is between Rs. 2000 and 3000 and 50% of the respondents' family income is between Rs. 3000 and 4000 per month. Regarding dietary pattern, 48% of the respondents are good for non-vegetarian and 29% have moderate respondents, whereas 23% moderate level of respondents for non-vegetarian. The factor which can influencing quality of life among elderly persons such as religion, residential area, type of family, monthly income, and dietary pattern reveals no influence with the quality of life, but age, occupation, and marital status showed at P<0.05 (significant), "P" of age < 0.0009, occupation = 0.0492, and marital status = 0.0094. This finding is similar to another study conducted in an elder persons' home in Southern Taiwan, Myanmar, Britain, and Malaysia[14-18] and also showed generally higher quality of life among the elderly.[19] This is because quality of life is a subjective evaluation and is based on the elderly's perception regarding well-being.^[20] The elderly have the ability to adapt to changes and have a positive outlook to the changes involved in aging.^[21]

CONCLUSION

The objective of this study was to determine the influences of social factors to the quality of life of the elderly persons in residing area at Puducherry. This study has shown that the quality of life of the elderly is very much influenced by social factors, especially age, gender, level of education, economic status, residence, occupation, marital status, religion, type of family, monthly income, and dietary pattern, which were significantly associated with quality of life. These findings from the study are discussed in terms of objectives and assumptions. The majority of factors influence the quality of life of the elderly. Demographic variables such as marital status, education level, status, and income in quality of life.

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