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Prevalence and Correlates of Geriatric Depression in Urban Family Cohorts: A Cross-Sectional Survey of Elderly Populations in Shimla, Himachal Pradesh

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Abstract: <u>Background</u>: Aging is a life spanning process of growth and development from birth to old age. Getting older can bring many health challenges to the elderly. Depression is the most common disturbance of mood experienced by elderly. The aim of the present study was to evaluate the level of depression among elderly people living with families in a selected urban community. <u>Objective</u>: To assess the various factors associated with depression and level of depression among elderly people and to find out the association between level of depression and various factors associated with depression among elderly people living with families. <u>Methodology</u>: a descriptive study was conducted in a selected urban community in Shimla, Himachal Pradesh over a sample of 200 elderly living with families using Non- Probability Convenient sampling technique through a dichotomous Questionnaire and Modified Geriatric Depression Scale. <u>Results</u>: The findings of the study revealed that the level of depression among elderly included Severe Depression (11%), Mild Depression (38%) and No Depression (51%) The study showed that Age, Gender, Marital Status and level of dependency showed significant association with the level of factors scores while others factors showed non-significant association with the level of scores. Also, the study showed that Age, Marital status, occupational status and Level of depression score.

Keywords: Assess, Depression, Elderly People

1. Introduction

Ageing is a normal process which is associated with physical, social, and psychological changes various life events experienced by the elderly population can greatly impact their psychological status, making them more prone to depression. Depression may sometimes be hidden behind an array of vague symptoms and it becomes necessary to carefully assess the elderly to identify marked depression to treat the person holistically. Mild levels of depression can be identified and treated in time to prevent it before it becomes severe.

Objectives

- 1) To assess the various factors associated with depression among elderly people living with families in a selected urban community in Shimla, Himachal Pradesh.
- 2) To assess the level of depression among elderly people living with families in a selected urban community in Shimla, Himachal Pradesh.
- 3) To find out the association between level of depression and various factors associated with depression among elderly people living with families with their sociodemographic variables.

2. Methodology

A Descriptive research design was used and the data was collected from 200 elderly people living with families, who were available at the time of study and were willing to participate. The study was conducted in Sanjauli, a urban community in Shimla, Himachal Pradesh.

Non-probability convenient sampling technique was used and a dichotomous Questionnaire and Modified Geriatric Depression Scale were used to assess the various factors associated with depression and the level of depression among elderly people living with families.

Tool was comprised of three main sections. Section A consists of socio demographic variables like, age, gender, marital status, type of family, occupational status and level of dependency. Section B consists of dichotomous questions to assess the factors associated with depression and Section C consists of Modified form of Standardized Geriatric Depression Scale (3-Point Likert Scale) for the assessment of level of Depression of 30 questions to assess the level of depression

Content validity determined by experts opinion in the field of nursing and medicine. The tool was validated by 10 experts and found to be valid. Reliability of the tool was assessed by using split half method. After pilot study it was assessed using interrater method. Calculated Correlation coefficient r value is 0.74. Formal permission was approved by the ethical and research committee of the institute. Permission for the study was obtained from the concerned authority of Sanjauli, Municipal Cooperation, Shimla. Written and informed consent was obtained from the subjects before data collection and assurance was given and maintained regarding confidentiality of results.

3. Results

The mean score of level of depression in the study was 49.05, S.D was 14.15.The maximum score was 83 and the

minimum score was 31.

The range was 52 and the mean % was 54.5. Severe.

The level of depression among elderly included Severe Depression (11%), Mild Depression (38%) and No Depression (51%)

On average depression is about 45.51% and 54.49% did not suffer from any kind of depression

The study showed that Age, Gender, Marital Status and level of dependency showed significant association with the level of factors scores while others factors showed non-significant association with the level of scores

The study showed that Age, Marital status, occupational status and Level of dependency showed significant

association with the level of depression score while others factors showed non-significant association with the level of depression score

| Table 1: Table Showing Level of Scores | |
|--|--|
|--|--|

| Criteria Measure of Factors Score | | | |
|-----------------------------------|------------|-----------|--|
| Category Score | Percentage | Frequency | |
| High Factors (15-20) | 18% | 36 | |
| Average Factors (8-14) | 77% | 153 | |
| Low Factors (0-7) | 6% | 11 | |

Maximum Score=20

Minimum Score=0

Interpretation

Table 2 revealed that 18% of elderly have high factors, 77% of elderly have average factors and 6% of elderly have low factors.

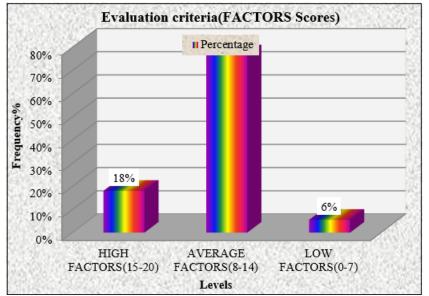


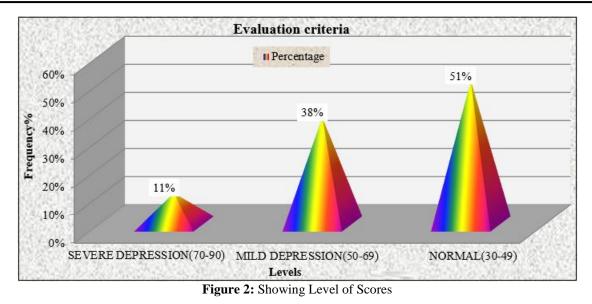
Figure 1: Showing Level of Scores

Findings related to various factors associated with depression

| Table 2: Table Showing Level of Score |
|--|
|--|

| Criteria Measure of Depression Score | | | |
|--------------------------------------|------------|-----------|--|
| Category Score | Percentage | Frequency | |
| Severe Depression (70-90) | 11% | 22 | |
| Mild Depression (50-69) | 38% | 76 | |
| Normal (30-49) | 51% | 102 | |

Maximum Score=90 Minimum Score=30 **Interpretation:** Table 2 depicts the level of depression under severe, mild and normal as per their percentage and frequency of occurrence in the total available sample.



Interpretation: figure 2 depicts the level of scores of the samples which fall into various groups of depression i.e. Severe Depression 11%, Mild Depression 38% and Normal 51%

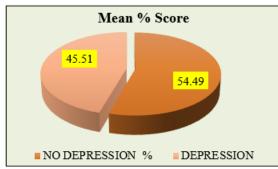


Figure 3: Showing Mean Percentage Scores

Interpretation: figure 3 depicts the Mean Percentage Scores of Depression i.e. 54.49% have depression and 45.51% are having no depression

4. Conclusion

On the basis of the findings of the under-mentioned study the following conclusions were drawn:

- The level of depression among elderly included Severe Depression (11%), Mild Depression (38%) and No Depression (51%)
- 2) The study showed that Age, Gender, Marital Status and level of dependency showed significant association with the level of factors scores while others factors showed non-significant association with the level of scores
- 3) The study showed that Age, Marital status, occupational status and Level of dependency showed significant association with the level of depression score while others factors showed non-significant association with the level of depression score

5. Future Scope

Nursing Practice:

Health care professionals should educate the elderly as well as their families regarding depression, its causes symptoms and prevention by means of role play and health education regularly as a part of their community services. The nurse in the community services should be equipped with the knowledge on depression and develop skill in explaining the aspects of depression to prevent any suicides and worsening of symptoms among elderly people.

Nursing Education:

Health education programme on depression may be planned to the nursing personnel at the various levels. The appropriate audio visual aids and pamphlets may be provided to the elderly and their families with appropriate picture and explanations to create awareness about depression and its problems. Nursing curriculum should collaborate the aspects of depression and its prevention.

Nursing Administration

The administration should initiate health education programmes in the community areas by utilizing the trained staff and encouraging them to involve in promoting the knowledge on prevention and early detection of depression. Regular follow-up services are to be planned in an effective way to widen the health approach.

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