

**Original Article**

# A STUDY TO ASSESS THE AVAILABILITY OF BASIC FACILITIES FOR INMATES IN GERIATRIC HOME, AHMEDABAD, GUJARAT, INDIA

Banker Kavita <sup>1</sup>, Prajapati Bipin <sup>2</sup>, Kedia Geeta <sup>3</sup>

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**Author's Affiliation:**

<sup>1</sup>Tutor, Community medicine department, B. J. Medical College, Ahmedabad, <sup>2</sup>Assistant Professor, Community medicine department, Gujarat Adani Institute of Medical Sciences, Bhuj, <sup>3</sup>Professor & Head, Community medicine department, B. J. Medical College, Ahmedabad

**Correspondence:**

Dr. Bipin Prajapati  
9, Radhe Bunglows, Opp. Amrut Party Plot, Modhera road, Mahesana-2, Pin-384002, Gujarat, E-mail - prajapatibipinj@gmail.com

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## ABSTRACT

**Background:** Ageing is a normal physiological process for human being, but modernization and globalization have disintegrated the Indian family system and elders are focused to stay in geriatric homes. The care for the aged is slowly shifting from the family to geriatric homes.

**Objective:** To study the function of geriatric homes, background information and reasons for shifting to geriatric home.

**Material and Methods:** A cross sectional study was carried out in geriatric homes of urban and periurban areas of Ahmedabad during January 2008 to January 2009.

**Result:** All the geriatric homes were nongovernment organization. Out of total (13) geriatric homes, majority (76.9%) of them have the criteria for enrolment was the cut off age as 60 years or above. Out of total 530 inmates, 380(71.7%) inmates having children, out of them, maximum number of inmates had either two (28.9%) or three (23.9 %) children. According to education of inmates 29.6% were secondary and 25.5% were primary education. Among marital status of inmates, 78.8% were widow/widower. Familial conflict (53.6%) was major reason for shifting at geriatric home. Overcrowding was present in 38.5 % geriatric homes according to person per floor area. Majority of geriatric homes were having TV, library, garden, kitchen, availability of newspaper and adequate lighting, ventilation, water supply. Only 7.7% of geriatric homes had full time doctor while 61.5% had part time doctor. 84.6% of old age homes had paid staff of institute for sweeping and mopping and for cleaning utensils.

**Key words:** Cross sectional study, Basic facilities, and Geriatric homes.

## INTRODUCTION

The geriatric population is defined as population aged 60 years and above.<sup>1</sup> The phenomenon of population ageing (defined as

increases in median age of the population)<sup>2</sup> is already a major social and health problem in the developed countries. India is in a phase of demographic transition. There has been sharp increase in the number of elderly persons

between 1991 and 2001. It has been projected that by the year 2050, the number of elderly people would rise to about 324 million. India has thus acquired the label of "an ageing nation".<sup>3</sup> The general characteristics of old age group have physical and psychological changes. It is common associate with old age with disability. Older people are heterogeneous i.e., extreme losses of physical, mental and social functions are often seen in old people, yet many people continue to maintain high level of function. However, as "young-old" move in to the "old-old" category, they tend to have more health complaints and diagnosed illness.<sup>4</sup> The western countries have a fairly well organised network of institutions for the care of the elderly, the growth and development of these facilities in India, which began as early as 1901, still remains inadequate. As per recent statistical data, there are 1018 old age homes in India today. Out of these, 427 homes are free of cost while 153 old age homes are on pay and stay basis, 146 homes have both free as well as pay and stay facilities and detailed information is not available for 292 homes. All over the country, 371 old age homes are available for the sick and 118 homes are exclusive for women. A majority of the old age homes are concentrated in the developed states including Gujarat.<sup>5</sup>

The study highlights the need to support the "Maintenance and welfare of parents and senior citizens Bill, 2007" in the parliament, which mandates children and relatives to maintain senior citizens or pay monthly maintenance in cases of neglect and obliges the government to establish and support old age homes; improve their health care provisions and introduce reverse mortgages and pension schemes.<sup>6</sup> However, few studies have been undertaken to document the condition of the elderly in the country and those living in old age homes. Realizing the need for the care of elderly, present study was undertaken to study the function of the geriatric homes for senior citizen and understand the background information and life style pattern of institutionalised elders and the reasons for shifting to geriatric home.

## MATERIALS AND METHODS

The cross sectional study was carried out in geriatric homes of urban and peri-urban areas of Ahmedabad during January 2008 to January 2009. The author had done study in geriatric homes which had residential facilities only. No

day care services were available. So there was no question of asking or interviewing geriatric people who were not residing there. A list of geriatric homes of Ahmedabad was obtained. Prior permission was taken from trusty/manager of geriatric home. Trusty/manager was interviewed to get the information regarding admission criteria in geriatric home, intake capacity of inmates, number of couples at geriatric home, monthly charges, financial assistance for geriatric home etc. Detail information regarding infrastructure of geriatric home, type of building, type of rooms, bathroom/toilet, ventilation in room, air conditioner, furniture available in room, per capita available space, lighting, water supply, laundry facility, sweeping and mopping facility, kitchen, dining room, cleaning utensils, entertainment facility (TV, library, garden, swings etc), medical facility and procedure of managing death of inmates were also recorded. All inmates more than 60 years of age were included in study and oral consent taken before interviewed. People that cannot read and write and not understand, interviewed by asking oral question by investigator in language understand by them. Mentally unstable inmates who were not able to give answers were excluded from study. Information regarding education, marital status, loss of spouse, present source of income, duration and reason for shifting to the geriatric homes and information regarding their children was collected. Total 530 inmates were interviewed. Data entry and data analysis was done in Epi-info software version 3.5. Percentage, chi-square test and z-test was applied for statistical significance.

## RESULT AND DISCUSSION

There was a criteria regarding admitting an elderly person in the institute. Out of total (13) geriatric homes, in majority 10(76.9%) of them, the criteria for enrolment were the cut off age as 60 years or more. Most of the geriatric homes were admitting/enrolling those who were able to take care of themselves (84.6%) and were free from disease (76.9%). Free from disease means not suffering from any disease including psychiatric problems. 69.2% of geriatric homes were admitting those who were able to pay institutional charges. In 61.5% of geriatric homes the criteria for enrolment were based on religion. (Table-1) These confirmatory finding were compared with study done by N.P.Das.<sup>7</sup>

Information on the capacity of the selected old age homes for accommodating the inmates indicates majority (38.5%) of geriatric homes had intake capacity of 50 to 75 inmates while 23.1% were having intake capacity ranging from 25-50 inmates. Whereas only two (15.4%) old age homes may be considered small as their intake capacity does not exceed 25 and only one home was large as they can provide accommodation to 200 inmates. Study done by N.P.Das<sup>7</sup> indicates that 6 old age homes may be considered small as their intake capacity does not exceed 25, two homes are large as they can provide accommodation to more than 100 elderly.

**Table 1: Criteria for admitting elderly person in geriatric homes (n=13)**

Criteria for enrolment	Frequency (%)
<b>Minimum age</b>	
≥ 55 years old	2(15.4)
≥ 60 years old	10(76.9)
≥ 65 years old	1(7.7)
<b>Able to take self care</b>	
Yes	11(84.6)
No	2(15.4)
<b>Good Health*</b>	
Yes	10(76.9)
No	3(23.1)
<b>Financially Capable#</b>	
Yes	9(69.2)
No	4(30.8)
<b>Religious affiliation</b>	
Yes	5(61.5)
No	8(38.5)

\* Free from disease/No infectious disease/good physical and mental health

#Able to pay institutional charges/able to support self economically

Majority (53.8 %) of geriatric homes had number of couples among inmates ranging from 1 to 3. Out of total 13 geriatric homes, in one geriatric home (Shreemati maniben Tribhovandas, Paladi) no charges were taken from the inmates. In two geriatric home monthly charges were Rs.200/-, whereas in four old age homes monthly charges were Rs.1000/-. Only in 7.7% of geriatric homes no monthly charges were taken from the inmates by the institute. 53.8% of geriatric homes were taking monthly charges from Rs. 900 to 1500. Mean monthly charges were Rs.750.

**Table 2: Basic amenities in geriatric homes (n=13)**

Services and Facility	Frequency (%)
<b>Kitchen</b>	13(100)
<b>Dining room</b>	11(84.6)
<b>Type of meals</b>	
Breakfast, lunch, dinner, tea twice	10(76.9)
Lunch, dinner, tea without snacks	03(23.1)
<b>Cleaning of utensils</b>	
Full time paid staff of institute	11(84.6)
Self	02(15.4)
<b>Laundry facility</b>	
Self /Washer man individually paid	10(76.9)
Paid staff of institute	02(15.4)
Washing machine	01(7.7)
<b>Sweeping and mopping</b>	
Paid staff of institute	11(84.6)
Self/washer man individually paid	01(7.7)
Self	01(7.7)
<b>Availability of things for daily use</b>	05(38.5)
<b>Television</b>	12(92.3)
<b>Library</b>	08(61.5)
<b>Garden outside</b>	12(92.3)
<b>Swings outside</b>	11(84.6)
<b>Newspaper/ Magazine</b>	11(84.6)
<b>Katha/ Bhajans and other religious activity</b>	10(76.9)
<b>Trips to religious place/ Movie/ Picnics</b>	09(69.2)
<b>Temple in the premises</b>	05(38.5)
<b>Pooja room</b>	09(69.2)
<b>Doctor's room</b>	09(69.2)
<b>Physiotherapy centre</b>	04(30.8)
<b>Medical facility</b>	
Full time doctors	01(07.7)
Part time doctors	08(61.5)
No regular visit of doctor	01(07.7)
No facility	03(23.1)
<b>Ambulance</b>	05(41.7)

All the geriatric homes were governed by trust and had their own building and in all of them rooms were allotted on sharing basis. But the separate rooms were given if double amount was paid. Most of them had couple room facility (84.6%) and had single storied building (62.23%). All the geriatric homes had adequate ventilation, lighting, and water supply. Only in one (7.7%) geriatric home air conditioner facility was present. All geriatric homes provided facility of bed with mattress, pillow and chair. Majority (92.3%) had locker facility while one

third (38.5%) of the geriatric homes provided the rack to the inmates. The floor area of room should be at least 70 to 90 sq ft per person.<sup>8</sup> 61.5% of geriatric homes had adequate per capita space while overcrowding was present in 38.5% geriatric homes.

All geriatric homes had their own kitchen but separate dining room was present in 84.6% of geriatric homes. 76.9% of them provided breakfast, lunch, dinner and tea twice a day. Majority (84.6%) of them had paid staff of institute for cleaning utensils. In most (76.9%) of the geriatric homes the inmates used to wash their clothes or hire washer man for washing clothes. All of them had telephone facility. Things of daily use like comb, soap, brush, clothes, and towel were provided by the institute in 38.5% of the geriatric homes. Majority (84.6%) of them had paid staff of institute for sweeping and mopping. Majority of geriatric homes were having indoor facilities for entertainment like TV (92.3%), library (61.5%), availability of newspaper/magazines (84.6%). Outdoor facilities of refreshment like swings and garden was also available in 84.6% and 92.3% of geriatric homes respectively. Old age people spend most of their time in religious activity. One third of geriatric homes were having their own temple within the premises while 69.2% were having separate pooja room. In three fourth of the geriatric homes regular religious activities were being carried out. Majority (69.2%) of geriatric homes had separate

room for physical examination of inmates. Only 7.7% of geriatric homes had full time while 61.5% had part time doctor and regular health check-up was done by the doctor. 30.8% of them had physiotherapy centre. Ambulance facility was available in 41.7% of geriatric homes for emergency transfer of inmates to the hospital. (Table-2) The relatives of the inmate were informed about condition of inmate and the cost of the treatment and if they were not ready to bear the cost then it was paid by the respective trust.

Majority (92.3%) of institutes were informing relatives /references mentioned on application form in case of death of an inmate. If the inmate's relative does not turn up even after informing, last rites were performed by institute according to person's religion. 7.7% of institute had no experience of death of an inmate. Children are supposed to be caregivers to their parents in old age. The rationale of high fertility or the widespread preference for at least one male child arises basically out of security in old age. Out of total 530 inmates, 380(71.7%) inmates had children, of them maximum number of inmates had two (28.9%), three (23.9 %) children and 9.5% of inmates had five children. The results clearly indicate that even those who have children are left alone to fend for themselves. 28.3% of inmates had no children. Jasmeet Sandhu et al<sup>9</sup> found 71.11% of inmates had children.

**Table 3: Reason for shifting to the geriatric home according to gender**

Circumstances that influenced the decision for staying at geriatric home	Males (%) (n=243)	Females (%) (n=287)	Total (%) (n=530)
Financial constraint	18(7.4)	16(5.6)	34(6.4)
Due to familial conflict	127(52.3)	157(54.7)	284(53.6)
Own/Spouse ill health or disability/have no one to take care of self	75(30.9)	100(34.8)	175(33.0)
By their own choice	23(9.4)	14(4.9)	37(7.0)

In almost half (53.6%) of the inmates the reason for staying at geriatric home was familial conflict. Ill health/disability/or have no one is present to take care (33%), financial constraint (6.4%) were found compelling forces for inmates coming to geriatric homes. The elderly who were living alone selected geriatric home on their own (7%). Dr.A.M.Khan et al<sup>10</sup> found 33.33% and N.Prabhavathy Devi et al<sup>11</sup> found more than 50% of the inmates at home did not have any one to take care of their minimal needs

since their children were found to be working partners.

Most (32.1%) of inmates were living in geriatric home since 13-24 months. 16.7% of the inmates were staying in geriatric home since last 25-36months and 14.5% since last 37-48 months. Duration of stay more than 60 months was 23.2% of inmates.

According to marital status of inmates nearly 90% inmates were married, among them

maximum number were widow/widower (373-78.8%). 2.9% and 10.8% of the inmates were divorced and unmarried (**Table-4**).

S. Irudaya Rajan<sup>12</sup> found 8% belongs to divorced and separated categories and 38% of elderly were widows or widowers. Whereas study done by Archintya N Dey<sup>13</sup> found 5.5% were divorced and/or separated and 66% were widowed.

**Table 4: Marital status, Education and Source of income of inmates according to Gender**

Variable	Males (n=243)	Females (n=287)	Total (n=530)
<b>Marital status</b>			
Unmarried	42(17.3)	15(05.2)	57(10.8)
Married	201(82.7)	272(94.8)	473(89.2)
Spouse alive	43(21.4)	43(15.8)	86(18.2)
Widow/widower	149(74.2)	224(82.4)	373(78.8)
Divorced	09(04.4)	05(01.8)	14(2.9)
<b>Education<sup>#</sup></b>			
Illiterate	8(3.3)	49(17.1)	57(10.8)
Just literate	3(1.2)	8(2.8)	11(2.17)
Primary	56(23.0)	79(27.5)	135(25.5)
Secondary	68(28.0)	89(31.0)	157(29.6)
Senior secondary	50(20.6)	37(12.9)	87(16.4)
Graduate	58(23.9)	25(8.7)	83(15.7)
<b>Source of income</b>			
Son	35(14.4)	71(24.7)	106(20.0)
Daughter	29(11.9)	39(13.6)	68(12.8)
Pension	44(18.1)	48(16.7)	92(17.4)
Bank balance	41(16.9)	25(8.7)	66(12.4)
Property	26(10.7)	22(7.7)	48(9.1)
Other*	50(20.6)	52(18.1)	102(19.2)
No source	18(7.4)	30(10.5)	48(9.1)

Other\*= by caste people, friend, relatives

# Chi square=50.25, p<0.01

According to education, only 10.8% of the inmates were illiterate (more females 17.1% as compared to males 0.3%). Majority of inmates were either secondary (29.6%) or primary (25.5%) pass. Only 15.7% of the inmates were graduate (more males 23.9% as compared to females 8.7% were graduate). Significant difference was observed in literacy status among males and females (Chi square=50.25, p<0.01) (**Table-4**). R B Gurav et al<sup>14</sup> found that 32.18% of respondents were studied up to primary level and 15.24% were studied up to secondary level.

38.9% of the inmates were having their own (either pension, bank balance, property) financial support while in 32.8% of inmates

children (either son or daughter) were their financial support.19.2% of the inmates were supported by either relatives, friends or people of their own caste (**Table-4**).

## CONCLUSION & RECOMMENDATION

The present study was undertaken with overall goal of understanding the existing institutional facility available for care of the elderly in Ahmedabad district and to obtain a perspective of the elderly on various aspects associated with institutional living.

All the geriatric homes in the study are residential in nature they are expected to have all the facilities and services that are necessary for daily living including religious and refreshment facility (TV, library, garden, and newspaper). In one third of geriatric home had intake capacity 50 to 75 of inmate and overcrowding was present. The reason for shifting geriatric home was familial conflict present in half of them. Nearly 80% of them were either widow/widower. Majority of inmates were educated.

Children are the main support for parents in old age, the result suggest that while the physical ties of the elderly men and women with their adult children have weaken. The results therefore suggest that the state should be prepared to meet the need for good institutional living arrangements for the elderly as the demand for such care is likely to rise in the future. This should include counselling services, screening facility and medical services for them. Government should have policy formulation and implementation towards the specific goal for the geriatric home development and successful running.

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