



A STUDY TO ASSESS THE LEVEL OF STRESS AND COPING AMONG THE ELDERLY



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Abstract: Background: In general life is characterized by a multiplicity of stresses. People react to these stresses with their own clusters of defense mechanism or coping skills, as a result the protective mechanisms determine the amount of strain an individual experiences and the subsequent likelihood of its expression as psycho-pathology. In particular, old age is marked by the presence of a wide range of stressors and subject to biological deterioration, social extrusion and economic deprivation. The aim of the present study was to assess the stress and coping among the elderly population at selected village, Chennai. **Methods:** A non-experimental correlational research design was adopted and study was conducted at Ayanambakkam village, Chennai. A sample of 100 elderly members with stress was selected using purposive sampling technique. The data was collected using demographic variable, clinical variable and structured tool on stress and coping strategies. **Results:** The data was analyzed using descriptive and inferential statistics. Only (7%) had mild stress, (13%) had severe stress whereas majority of them had moderate stress (80%) and only (2%) had inadequate Coping, (10%) had adequate coping whereas majority of them had moderate coping (88%). The mean scores of stress and stressful life events among the elderly ($M=36.76$, $SD=4.97$) and ($M=109.48$, $SD=18.35$). There is a significant correlation between stress and confrontive coping ($r=0.277$) and Selfcontrolling ($r=0.294$). **Keywords:** Assess stress, coping, elderly.

Introduction:

In general life is characterized by a multiplicity of stresses. People react to these stresses with their own clusters of defense mechanism or coping skills. As a result the protective mechanisms determine the amount of strain an individual experiences and the subsequent likelihood of its expression as psycho-pathology.

In particular, old age is marked by the presence of a wide range of stressors. The older person is often subject to biological deterioration, social extrusion

and economic deprivation. The course of events at this period of life span is such that these traumas may occur in rapid succession without allowing the person time to regain his balance before confronting the next stressors will separately dictate an array of coping mechanisms for successful outcomes.

Stress has become a part of life in the 21st century. Nearly 17% of the diseases have their roots in stress. Nervous breakdown, high blood pressure, depression, heart disease and ulcers are on to rise. None the less, even when elderly people might cope



between with loss of spouse or close relatives and friends than do younger counterparts, they undoubtedly exhibit greater vulnerability when confronted with certain life events. Notable among these is residential relocation. This has local relevance when we realize there is a booming industry of old age home (Cheng, 1993).

Need for the study:

The effects of stress are directly linked to coping. The study of coping has evolved to encompass large variety of disciplines beginning with all areas of psychology such as health psychology, neuropsychology and developmental psychology and spreading into the areas of anthropology and sociology. Dissecting coping strategies into three broad components, (biological, physiological, cognitive and learned) will provide a better understanding of what the seemingly immense in this area and how care they come across that stressful situation.

Over the last twenty years or so, most research on stress and coping has focused on younger adults, partly because of the widespread belief that older adults experience fewer life stresses and partly because of the assumption that coping strategies are similar across the life span. Therefore, there is need to study to assess the level of stress among elderly population. Thus the investigators have conducted this study to know the tremendous stress burden of elderly people will have different problem, so it is important to know the tremendous burden of elderly people and how she/he overcome those burden or cope with stressful situations.

Objectives of the study:

1. To assess the level of stress among elderly people in selected village.
2. To determine the various coping strategies among elderly people.
3. To correlate the relationship between the stress and various coping strategies among elderly population.
4. To associate the socio-demographic variables with level of stress and coping strategies among elderly population.

Operational definition:

Assessment:

It is a process of measuring the level of stress and coping among elderly population.

Stress:

Any emotional, physical, intellectual, social and spiritual form that disturbs the equilibrium.

Coping strategies:

The techniques adopted to overcome stress by elderly people.

Elderly people:

It refers to the elderly people aged 60 years and above residing at selected old age homes.

Materials and methods:

A non-experimental correlation research design was selected by the researcher. Survey approach was used for this study.

Research setting:

The study was conducted at Ayanambakkam village, Chennai.

Sample size:

A sample of 100 elderly members (60 years and above) with stress who were residing in the



Ayanambakkam village, Chennai and those who fulfilled the inclusion criteria was selected for the main study.

Sampling technique:

Purposive sampling technique was used. Elderly members who fulfilled eligibility criteria, and those who were available in the Ayanambakkam village, Chennai during the time of data collection, were included in the study.

Sampling criteria:

Inclusion criteria

- Elderly who were 60 years of age and above.
- Elderly who were residing in Kizh Ayanambakkam and Mel Ayanambakkam.
- Elderly who could understand English or Tamil.
- Elderly who were willing to participate in the study.

Exclusion criteria

- Elderly who were disoriented or confused.
- Elderly who had severe sensory deficits like complete blindness, total hearing loss, severe cognitive impairment, dementia and those who are very sick.

Description of tool:

The proposed tools were used to collect data:

1. Demographic variable profoma.
2. The clinical variable profoma.
3. Presumptive Stressful Life Events Scale.
4. Perceived Stress Scale.
5. Lazarus and Folkman's ways of coping scale.

Demographic variable profoma:

This proforma was used to measure the demographic variables such as age, religion, marital status, educational status, occupational status, family income, financial status, type of family, number of

children, nature of work and food habits. It is designed to assess the social and family details of the client.

Clinical variable profoma:

This proforma was used to measure the clinical variable such as height, weight, body mass index, chronic illnesses, duration of illness.

Presumptive Stressful Life Events:

It is the standardized tool developed by Singh et al (1984). The nature of stressful events among elderly was assessed by using Presumptive Stressful Life Events Scale. The instrument had 51 items on stressful events. The scale items were further divided into desirable, undesirable and ambiguous and also into personal and impersonal categories. The scale as given is rated according to decrease in severity of perceived stress. It is recommended to administer the scale in reverse order that is starting from lowest stressful event to most stressful event. The total score is calculated according to the nature of occurrence of stressful events in their life in the individual's life and the given score for those particular events are summed up together.

The Perceived Stress Scale (PSS):

It is the standardized tool developed by Cohen et al (1983). The level of stress among post menopausal women was assessed by using perceived stress scale. The instrument had 14 items on stress. There are about 7 positive statements and there are about 7 negative statements. It was categorized into 5 aspects, the response categorized were in scale format with a score of 0, 1, 2, 3, 4 respectively. Each positive statement was scored as from 1-4 and each negative statement was scored as from 4-1. The total



score of perceived stress scale was 56. (Cohen et al 1983) Negative Statements items no: 1, 2, 3, 8, 11, 12 and 14 Positive Statements items no: 4, 5, 6, 7, 9, 10 and 13 Level of stress was interpreted by the researcher as follows for the sake of analysis.

Score	Percentage	Level of Stress
≤27	<50%	Mild
28-41	50 - 75%	Moderate
>41	>75%	Severe

Data collection procedure

The data was collected for a period of one week in Ayanambakkam village, Chennai. The samples for the research were selected by non-probability purposive sampling. Data was collected with a brief introduction about the research, the purpose and the tools used by the investigators. It took about 15 minutes to collect data from each subject. The data was obtained from 100 subjects. Data has been analyzed and tabulated according to the objectives of the study using descriptive and inferential statistics.

Plan for data analysis:

Data has been analyzed in terms of objectives of the study using descriptive and inferential statistics.

Results and discussion:

The data was organized, tabulated, analyzed and interpreted by using descriptive and inferential statistics based on the objectives of the study.

The findings are presented as follows:

Table-1: Frequency and percentage distribution of demographic variables of the elderly population

N=100

Demographic Variables	N	p
Age in years		

55 – 60	55	55
61 – 65	32	32
66 – 70	8	8
>70	5	5

Religion

Hindu	57	57
Christian	41	41
Muslim	2	2
Others(Specify)	0	0

Educational Status

Illiterate	73	73
Primary education	11	11
Secondary education	11	11
Higher secondary	5	5
College and above	0	0

Occupational status

Employed in some organization	17	17
Coolie	34	34
Not working	49	49

Family income

≤ 3000	31	31
3001 – 5000	29	29
5001 – 8000	11	11
>8000	29	29

Financial status

Independent	43	43
Dependent	57	57

Number of children

One	3	3
Two	35	35
Three	24	24
≥ three	38	38
Nil	0	0



Nature of work		
Sedentary work	54	54
Moderate work	46	46
Heavy work	0	0
Food habits		
Vegetarian	10	10
Non vegetarian	90	90

The data in table 1 revealed that more than half of them were between 55 to 65 years of age (55%). Majority of them were Hindus by religion (57%), were illiterates (77%), were married (59%), were sedentary workers (54%). Nearly half of them were unemployed (49%). A significant percentage of them had monthly income less than 3000 rupees (31%). Most of them were non-vegetarians (90%).

Fig.1 Percentage Distribution of BMI among Elderly



Table 2: Correlation between perceived stress and stressful life events among the elderly N=100

Variables	Mean	S.D	'r' value
Stress	36.76	4.97	0.317**
Life events	109.48	18.35	p = 0.001

**p<0.01

The data presented in table 2 depicted the mean scores of stress and stressful life events among the elderly (M=36.76, SD=4.97) and (M=109.48, SD=18.35) respectively, which is statistically significant (P<0.001).

Table 3: Correlation between perceived stress and coping strategies (N=100)

Variable	Mean	S.D	'r' value
Stress	36.79	4.97	-0.277**
Confrontive coping	9.57	2.11	p=0.005
Distancing	8.87	2.05	0.102
			p=0.311
Self-controlling	8.42	1.81	-0.294**
			p=0.003
Seeking social support	12.78	2.03	-0.140
			p=0.164
Accepting responsibility	5.38	1.002	-0.091
			p=0.368
Escape-Avoidance	8.72	2.29	0.093
			p=0.357
Planful problem solving	13.06	2.72	-0.128
			p=0.204
Positive reappraisal	12.81	1.38	0.220*
			p=0.028

**p<0.01, *p<0.05.

The data presented in table 3 depicted the mean scores of stress and confrontive coping, Self-controlling (coping strategies) among the elderly (M=36.76, SD=4.97) and (M= 9.57, S.D=2.11), (M= 8.42, S.D =1.81) respectively was statistically significant (P<0.001). The mean scores of stress and Positive reappraisal was (M=36.76, SD=4.97) and (M=12.81, SD=1.38) respectively was statistically



significant ($P < 0.05$), whereas there was no significance between stress and other coping strategies.

Discussion: The study depicts that few of them had mild stress (7%), had severe stress (13%) whereas majority of them had moderate stress (80%). Hsieh (2007) reported that elderly suffered from mild to moderate level of stress rather than severe stress. The study reveals that few of the elderly had inadequate Coping (2%) and a significant percentage of them had adequate coping (10%) whereas majority of them had moderate coping (88%). There is significant association between family income and the level of perceived stress among the elderly ($P < 0.01$). There is no significant association between the other selected demographic variables and the level of perceived stress.

Conclusion:

Overall findings indicate that majority of the elderly had moderate stress (80%) and the mean scores of stress and confrontive coping, stress and self-controlling was statistically significant ($P < 0.001$). The mean scores of stress and Positive reappraisal was statistically significant ($P < 0.05$), whereas there was no significance between stress and other coping strategies.

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