

Mental Health and Social Support Among Retired Persons of Thirunagar, Madurai Municipal Corporation.

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Abstract: *Nowadays older people are neglected by family members and society. They are suffering from lot of physical, psychological, social and economic problem. People are thinking that the retired people are free from all their work and taking rest after their retirement but actually they are facing problems after their retirement because they feel in-secured, lonely, anxious and experience lack of social support, stress and depression. This research study is about the mental health and social support which is faced by the retired people and it is important to analyze the present status of the retired people Descriptive research design was adopted by the researcher to conduct the study. This study population consists of retired people. The Researcher has selected 53 respondents for the purpose of the study by adopting non-probability sampling method that is snowball sampling technique. The study revealed that more than half of the respondents receive low Level of Support from Significant Others, Support from Family and receive low Level of Support from Friends and receiving low Level of Overall Support. It is also understood that more than half of them are having low Level of Anxiety, More than half (58.5%) of the respondents are having low Level of Depression, having low level of Behavioral/Emotional Control, low Level of General Positive Affect, low Level of Emotional Ties and are having low level of Life Satisfaction. Other findings of the study and suggestions pertaining to the study are discussed in the full paper.*

Keywords: *Retired Older Persons, Mental Health, Social Support and Life Satisfaction.*

I. Introduction

Old age also called senescence in human beings, the final stage of the normal life span. The social aspects of old age are influenced by the relationship of the physiological effects of aging and the collective experiences and shared values of that generation to the particular organization of the society in which it exists. The psychological problems and social support of aging differ widely among individual. Social status of an old age in agrarian societies is respectability regarded as valuable, experience knowledge. But in the institutionalized society the status of the old age is altered as the socioeconomic conditions have changed, tending to reduce the status old age as a society becomes more technological. Old age people are being forced into retirement before their productive years are over and having psychological adaptation to old age, financial preparation for retirement is increasing, medical care. The roles of older people have changed considerably by the time it reaches old age. There is no respect among the older person, every people having a tendency to avoid, reject, neglect them always, because they think that people are free after their retirement and they don't have money much which is needed to live independently, inability to do work without others helps, lack of responsibility, so they are prone to weaker section. Every people looking for money and becoming money minded so the children are looking for money and sending them to old age homes without any care of their parents. So they are vulnerable to the psychological problems and not having any social support.

This research study is about the mental health and social support which is faced by the retired people. This study is important to analyze the present status of the retired people because now a days older people are neglected by family members and society. They are suffering lot of physical, psychological, social and economic problem. People are thinking that the retired people are free from all their work and taking rest after their retirement but actually they are facing problems after their retirement because they feel in secured, lonely, anxiety, lack in social support, stress and depression. This study will be useful to know and identify the problems of retired people.

Review of Earlier Studies

Mallya (2001) state there appears to be a relationship between the socioeconomic status and health of an individual. The socio-economic parameters include economic, educational, cultural, age, sex, and occupational status. However, despite medical services being available at government health centers and hospitals, they are not easily accessible to the poor due to long distances, costs of treatment and time constraints. Many a times, they have to be contented with the services by unscrupulous doctors and comprise on the quality

and cost of treatment. Thus it is observed that health is not only biological or medical concern, but also a significant personal and social concern. Though the fact that majority of the aged are more susceptible to sickness, it is not denied or disputed that society generally considers old age unproductive.

Raju (2002) explores older widows are the most vulnerable groups needing special attention. Other vulnerable groups are the aged men and women who are disabled, frail, destitute and orphan, those who still try and work in the unorganized sector like landless agricultural workers, small and marginal farmers, artisans in the informal sector, unskilled laborers, on daily casual or contract basis, migrant laborers, informally self-employed or wage workers in urban sector, and domestic workers. The aged who are destitute and orphan, naturally face myriad of problems due to poor socio-economic conditions that ultimately results in mental stress and depression. Thus there is a need to study the socio-psychological and economic conditions of the old age pensioners.

Psychaiat (2003) also states that anxiety disorder i.e. usually associated with depression and hopelessness and insecurity about the future especially related to the death. The age wise comparison reveals that, the frequency of responses reflecting insecurity is in descending order i.e. 70-75 years age group reflecting high frequency of insecurity followed by 65-70 years age group and 60-65 years are being the lowest frequency of insecurity. This section reveals that the financial insecurity followed by health insecurity and socio-emotional insecurity being the lowest insecurity-Overall insecurity increases as the age advances.

II. Methods

Aim:

The aim of the study is to assess the Mental Health and social support of the Retired people.

Objectives:

- To study the Socio-Demographic characteristics of the Retired People.
- To identify the Mental Health of the respondents.
- To assess the social support of the respondents.
- To study the relationship between various social demographic variable and Mental Health and social support.

Research Hypotheses:

- There is a significant difference between male and female respondents with regard to their Mental Health.
- There is a significant difference between respondents retired from Government and Private sector with regard to their Mental Health.
- There is a significant difference between respondents from Joint and Nuclear Family with regard to their social support.
- There is a significant relationship between respondent's age and their Mental Health.
- There is a significant relationship between respondent's income with regard to their social support and Mental Health.
- As the respondent's social support increases overall mental health increases.

Research Design:

Descriptive research design was adopted by the researcher to conduct the study. This research design is all about describing the characteristic of people who take part in this study.

Field of Study:

The field of study is at Thirunagar, Madurai Municipal Corporation.

Study Population:

This study population consists of retired people.

Sample Size:

The Researcher has selected 53 respondents for the purpose of the study.

Sampling:

The researcher adopted the non-probability sampling method, and the technique which is snowball technique. The snowball techniques begin from the core of known elements and are then increased by adding new elements given by members of the original.

Inclusion and Exclusion:

Inclusion:

- Retired Men and Women were included in the study.
- Voluntary retired people and full service retired people were also included.

Exclusion:

- People who are not retired and working were not included.

Method of Data Collection:

The researcher used self-prepared interview schedule to collect detail regarding socio-demographic profile of the respondents and a standard questionnaire to collect details about mental health and social support. The secondary data was collected from literature and journals.

Tools of Data Collection:

Mental Health Inventory-38 Items by Ware.J.E& RAND Cooperation was used to assess the Mental Health. It is a 38 item scale and contains subscale as Anxiety, Depression, Loss of Behavioral/ Emotional Control, General Positive Affect, Emotional Ties and Life Satisfaction.

Multidimensional Scale of Perceived Social Support Zimet, G.D., Powell, S.S., Farley, G.K., Werkman, S. & Berkoff was used to assess the Social Support. It is a 12 item scale and contains subscales as Significant Other Subscale, Family Subscale, and Friends Subscale.

III. Data Analysis

The collected data were entered in the SPSS (statistical package for social sciences) and analyses have been done. The various statistical tests used in this study were:

- T-test
- Karl Pearson's coefficient of correlation
- Inter Correlation Matrix

Major Findings Related To Socio-Demographic Details:

- Nearly one-third (30.0%) of the respondents' Age is less than 65 years.
- More than half (60.5%) of the respondents are Males.
- A high majority (83.0%) of the respondents are Married.
- Nearly half (49.1%) of the respondents have completed their Undergraduate.
- Majority (62.3%) of the respondents are living in a Nuclear Family.
- Majority (58.5%) of the respondents are getting pension up to Rs.15000.
- A high majority (81.1%) of the respondents are belongs to Hindus Religion.
- A high majority (86.8%) of the respondents have reported Tamil as their Mother Tongue.
- Less than half (45.3%) of the respondents are having more than Two Children.
- More than half (52.8%) of the respondents are into Consanguineous Marriage.
- A high majority (81.1%) of the respondents had worked in Government Sector.
- Majority (64.2%) of the respondents were retired at the age of 58.
- Less than one third (34.0%) of the respondents are up to 5 years of Retirement.
- More than three fourth (77.4%) of the respondents got retired after completing their Full Service.
- Vast Majority (88.7%) of the respondents are living in Own house.
- Less than half (41.5%) of the respondents are living with their Wife.
- An absolute majority (90.6%) of the respondents are not Currently Employed.
- More than three fourth (77.4%) of the respondents are having the habit of Saving Money.

Major Findings Related To Social Support Subscales:

- The slightly more than half (50.9%) of the respondents receive low Level of Support from Significant Others.
- More than half (54.7%) of the respondents receive low Level of Support from Family.
- More than half (52.8%) of the respondents reported that they receive low Level of Support from Friends.
- Slightly half (50.9%) of the respondents are receiving low Level of Overall Support.

Major Findings Related To Mental Health Subscales:

- More than half (54.7%) of the respondents are having low Level of Anxiety.
- More than half (58.5%) of the respondents are having low Level of Depression.
- Majority (66.0%) of the respondents are having low level of Behavioral/Emotional Control.
- More than half (58.5%) of the respondents are having low Level of General Positive Affect.
- More than half (54.7%) of the respondents are having low Level of Emotional Ties.
- Three fourth (73.6%) of the respondents are having low level of Life Satisfaction.

Findings Related To Hypotheses:

Research Hypotheses I

There is a significant difference between male and female respondents with regard to their Mental Health.

Null hypotheses:

There is no significant difference between male and female respondents with regard to their Mental Health.

Test:

T-test was applied and it is inferred that there is no significant difference between the male and female with regard to their Mental Health.

Inference:

Hence Null Hypotheses is accepted

Research Hypotheses Ii

There is a significant difference between the respondents who were retired from Government and private sector with regard to their Mental Health.

Null hypotheses:

There is no significant difference between the respondents retired from Government and private sector with regard to their Mental Health.

Test:

T-test was applied and it is inferred that there is no significant difference between the respondent's retired from government and private sector with regard to their Mental Health.

Inference:

Hence Null Hypotheses is accepted.

Research Hypotheses Iii

There is a significant difference between the respondents from joint and nuclear family with regard to their social support.

Null hypotheses:

There is no significant difference between the respondents from joint and nuclear family with regard to their social support.

Test:

T-test was applied and it is inferred that there is a significant difference between the respondent's from joint and nuclear family with regard to their social support.

Inference:

Hence Research Hypotheses is accepted.

Research Hypotheses Iv

There is a significant relationship between the respondent's age and their Mental Health.

Null hypotheses:

There is no significant relationship between the respondent's age and their Mental Health.

Test:

Karl Pearson's Coefficient of Correlation was applied and it is inferred that there is no significant relationship between respondents' age and their Mental Health except in anxiety dimension.

Inference:

Hence Null hypothesis is accepted for all subscales except anxiety dimension.

Research Hypotheses V

There is a significant relationship between respondent's Income with regard to their Mental Health.

Null hypotheses:

There is no significant relationship between the respondent's Income with regard to their Mental Health.

Test:

Karl Pearson's Coefficient of Correlation was applied and it is inferred that there is no significant relationship between the respondent's income and Mental Health.

Inference:

Hence Null hypothesis is accepted.

Research Hypotheses Vi

There is a significant relationship between respondent's Income with regard to their social support.

Null hypotheses:

There is no significant relationship between the respondent's Income with regard to their social support.

Test:

Karl Pearson's Coefficient of Correlation was applied and it is inferred that there is no significant relationship between the respondent's income and their social support.

Inference:

Hence Null hypothesis is accepted.

Research Hypotheses Vii

As the respondents Social Support increases overall Mental Health increases.

Null hypotheses:

There is no significant relationship between Social Support and Mental Health.

Test:

The above hypothesis was tested using Inter Correlation Matrix, it is found that the social support increase overall Mental Health is also increases but there is no significant.

Inference:

Hence, the null hypothesis is accepted (Table: 35).

IV. Suggestions

- Adults can be educated about the importance of joint family system which in a way will improve the social support and mental health of the retired people.
- Since many of the retired people live in nuclear family access to health service is difficult and so geriatric mobile care unit with the essential equipment is necessary to cater to their physical and mental health needs.
- Appointment of social workers is must in geriatric care, because many of the retired people do not have anybody to share their problems. So a qualified social worker will look into the mental health of the people.
- Many of the retired people live in apartments and so the formation of association's exclusive to retired people will cater to the social needs of them.
- Other family members need to be educated about the psychological problems faced by retired people so that they also join hands is helping them cope with their particular phase.
- Many welfare programme used to be organized so that retired people become financially well secured.
- To educate the life satisfaction of retired people, many counseling programmes can be offered and they can be involved in various spiritual activities according to the religious need.
- Educating the school children about older people and the harmony of living up with them is the need of the older people to enhance the social and mental health of the elderly.
- Awareness programme about geriatric care among students, children and geriatric care in hospital and old age homes has to develop quickly.

V. Conclusion

This study has helped to know about the mental health of retired people and their social support. The findings shows that majority of the retired people have various mental health issues. They become economically, socially, psychological and physical poor. So the Society and Government has to give importance for the old age. Many plans has to develop, programme has to implement, new schemes has to come which is useful and helpful to them. Old age people are more like second child so people has to consider them, with love care and affection. Future generation has to be change and should give special attention to them, and has to fulfill their needs. **“Aging is inevitable”** and it comes to every individual, so honor the old age people. A significant factor in the social aspect of old age concerns the values and education of the generation is important. As grow older the Mental Health and Social Support may affect Old Age People.

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