



Original Research

Mental health problems with aging: Across Sectional Study

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Abstract:

Background: Mental health problems are a relatively common problem among older adults, especially the (old elderly). The aim of the study is to assess Mental health problems with aging.

Material and method: The non-experimental approach and descriptive type are used in this study. The study is applied on three hospitals (Ibn-Sena Teaching Hospital, Al-Zahrawee Teaching Hospital and Al Salm Teaching Hospital), some primary health care centers, and public clinics in Mosul City.

Results: The finding shows that there is a significant statistical interrelationship in Mental health problems with aging.

Conclusions: The study concluded that the Mental health problems with aging were affected by their demographic characteristic (age, sex, marital status, level of education, and type of disease).

Keywords: Mental Health Problems, Aging

Introduction:

Mental health problems is a relatively common problem among older adults, especially the (old elderly). Isolation may stem from a variety of circumstances mentioned earlier, including sensory deficits, communication difficulties and loss of mobility. Loss of family and friends is a significant contributor to social isolation in the elderly. As spouses and other family members or friends die, the social support system for the older person is reduced. In this instance, nurses can help older clients establish new social support systems by helping them get involved with other groups. Loss of family and friends also leads to the problem of grief. Grief may also be engendered by anticipation of the client's own death, particularly when the client has a terminal illness. The nurse can assist clients to deal with

grief by exploring with them their feelings about death⁽¹⁾. Loss of social contacts limits the available social support believed to be necessary for physiological and psychological well-being. Limited social support is associated with early cardiovascular death, higher 5-year mortality, early hospital admissions, restricted stroke recovery, cognitive decline, depression, and other psychiatric disorders⁽²⁾. The aim of the study is to assess psycho-social aspects among Elderly in Nineveh Governorate.

Methods and Materials:

non-experimental approach and descriptive type are used in this study. The study is applied on three hospitals (Ibn-Sena Teaching Hospital, Al-Zahrawee Teaching Hospital and Al Salm Teaching Hospital), some primary health care centers, and public clinics in Mosul City.

Purposive sample consists of (833) clients,(490) Male and (343) Femal who visited or admitted to the teaching hospitals, some primary health care centers, and public clinics in Mosul City. In older to collect the data of the study, a questionnaire was constructed depending on the previous studies and related literature review. The questionnaire consists of two Parts: Part one includes (7) items which focus on the elderly demographic characteristics such as (age, sex, marital status, occupation , level of education, duration and type of disease).Part two includes (4) main items that contain: (independency , daily physical activities ,

psycho-social aspects and life of adaptation). In this study, the total questions include (73) items, in which three-scale options are used in the rating scale were: (2) for (Always), (1) for (Sometimes), and (0)for (Never) . Content validity was determined by presenting the questionnaire to a panel of (12) experts. Internal consistency of the questionnaire is assessed by calculating Cronbach's Coefficient alpha. Analyzed data using SPSS,Version23 using both descriptive statistics, inferential statistics (Means, and SD, Number and percentage)and chi-square ⁽³⁻⁹⁴⁾.

Results:

Table (1) Demographic characteristics of the study subjects (N=833)

Variables	No.	%
(A) Sex		
Male	490	58.82
Female	343	41.18
Total	833	100%
(B) Age		
65- 74 years	657	78.87
75-84 years	137	16.45
85 years or more	39	4.68
Total	833	100%
(C) Marital status		
Single	20	2.4
Married	593	71.19
Widowed	213	25.57
Divorced	7	0.84
Total	833	100%

The table shows that the majority of study participants were males and constituted of (58.82%), and most of them aged (65-74) years. In relation to their marital status, most of the whole sample were married and constituted (71.19%).

Table (2) client's responses on Mental health domains within 3- level scale by total frequencies, percentages and Chi-Square

Relations with family and friends	Never		Sometime		Always	
	F	%	F	%	F	%
Do you satisfied with support and aid of parents and friends	87	10.44	208	24.97	538	64.59
Do your family believe that your are sick or disabled	468	56.18	241	28.93	124	14.89
Do your aging affect you relation with parents	549	65.91	221	26.53	63	7.56
Do you get support or aid from other	185	22.21	458	54.98	190	22.81
Do your relation with your wife and parents is good	32	3.84	158	18.97	643	77.19
Do you participate in making decisions inside home	59	7.08	260	31.21	514	61.71
Do you need a help from your parent when you visit health caring centers	132	15.85	244	29.29	457	54.86
Obs.X ² = 2284.155 DF = 12 , P Value = 0.05 Crit. X² = 21.03 $\bar{X}=1.17$						
Mood	F	%	F	%	F	%
Do you feel annoyed when you visit health centers	187	22.45	215	25.81	431	51.74
Do you feel annoyed of noise	29	3.48	171	20.53	633	75.99
Do you prefer not to mix with other	266	31.93	413	49.58	154	18.49
Obs.X ² = 590.932 DF = 4 , P Value = 0.05 Crit. X² = 9.49 $\bar{X}=1.29$						
Emotion	F	%	F	%	F	%
Do you feel that you aging is behind the kindness of others	255	30.61	443	53.18	135	16.21
Does your passion increase with your aging	153	18.37	287	34.45	393	47.18
Do you feel loosing passion as aged	419	50.30	280	33.61	134	16.09
Obs.X ² = 382.992 DF = 4 , P Value = 0.05 Crit. X² = 9.49 $\bar{X}=0.92$						
Concentration & Perception	No	%	No	%	No	%
Do you have ability to read and concentrate	544	65.31	193	23.17	96	11.52
Do you feel that your memory is affected due to aging	48	5.76	297	35.66	488	58.58
Do you feel that your can remember things happened in the past	74	8.88	195	23.41	564	67.71

Obs.X ² = 1062.747 DF = 4 , P Value = 0.05 Crit. X² = 9.49 $\bar{X}=1.18$						
Self	F	%	F	%	F	%
Are you satisfied with your role in life	174	20.89	318	38.17	341	40.94
Are you satisfied with what you achieved in your life	110	13.20	353	42.38	370	44.42
Are you feel that you achieved what you want	96	11.52	223	26.77	514	61.71
Are you feel that your life is worthy	88	10.56	334	40.10	411	49.34
Obs.X ² = 113.780 DF = 6 , P Value = 0.05 Crit. X² = 12.59 $\bar{X}=1.34$						
Symptoms of anxiety and fear	F	%	F	%	F	%
Do you anxiety and fearful due to aging	148	17.77	305	36.61	380	45.62
Do you feel sadness and depression due to aging	79	9.48	297	35.66	457	54.86
Do you feel frightened	91	10.92	387	46.46	355	42.62
Do fear and anxiety domain your life	39	4.68	484	58.10	310	37.22
Obs.X ² = 160.451 DF = 6 , P Value = 0.05 Crit. X² =12.59 $\bar{X}=1.33$						

Total $\bar{X}=1.205$

The table shows significant difference at (P Value = 0.05) of psycho-social aspects domains .

Discussion:

Analysis of the results of health problem of elderly clients demographic characteristics had indicated that the majority of them were males and constituted (58.82%) of the total sample, this result could be connected with the tendency of women to stay at home more than men .Data analysis shows that there is a significant statistical difference between elderly clients quality of life domains and their sex .The present study is in disagreement with the study of (95-99) who found that (53.24 %) of elderly clients are females and (46.76 %) of them are males .The study finding revealed there is a significant statistical association of health related quality of life item which measure with psycho-social aspects assessment. This can be explained by elderly own home which can be described as a prison , in which they become de-conditioned and lose their

ability to do their usual activity of daily life, together with the lack of family support, social activity and emotional enforcement, also suffering from negative life events . On the other hand, the elderly who are going to the health agencies and share in social activity, they maybe feel that their lives have a meaning and an aim . The health problems of the elderly are complicated by social , economic and psychological interactions to a greater degree than younger people . Moreover, the health problems of the elderly are usually multiple and are often masked by sensory and cognitive impairments so that special skills are required to detect them (100,101). Both factors contribute to a worsening of morbidity and mortality.

Conclusion:

The study concluded that the Mental health problems with aging were affected by their demographic characteristic (age, sex, marital status, level of education, and type of disease).

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