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GERONTOLOGY-A STUDY OF SENIOR CITIZEN

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Abstract

Human aging is a very complex process that occurs in an intricate biological and physiological setting. Many changes occur with aging and among the most important are changes in immune reactivity associated with cell differentiation stages and the phenomenon of inflammation, understood as subclinical inflammatory readiness, manifested by elevated levels of proinflammatory factors. It was stated for a long time that this tandem occurs in parallel or eventually sequentially. However, recent evidence points to the fact that, as both originate from chronic antigen stimulation, they mutually drive each other. In this context, inflammation is considered the basis of most age-related diseases (ARD). In this review concerning human inflammaging, we argue that inflammatory diseases develop during whole life as a diverted (excessive) normal immune reaction to specific stressors. Thus, inflammaging may not be the cause of these diseases; however, it can be the trigger of clinical manifestation of ARD. In this research I have drawn various aspect of this stage, through this researches I am going to meet people in old age home and making case studies.

Introduction

The present work is only concerned about old age people so we need to know the all aspect of a old people so the study is Gerontology is the study of aging and older adults. The science of gerontology has evolved as longevity has improved. Researchers in this field are diverse and are trained in areas such as physiology, social science, psychology, public health, and policy. A more complete definition of gerontology includes all of the following that Scientific studies of processes associated with the bodily changes from middle age through later life Multidisciplinary investigation of societal changes resulting from an aging population and ranging from the humanities (e.g., history, philosophy, literature) to economics and Applications of this knowledge to policies and programs. Geriatrics, is a field of medicine. Physicians with a focus on geriatrics work to help older patients with the physical changes their bodies experience as they age. While doctors in this field spend time studying how aging affects the body, the focus here is more on how they can better care for and assist older patients than on the study of aging as an academic area of interest. It is a specialty that focuses on health care of elderly people. It aims to promote health by preventing and treating diseases and disabilities in older adults. There is no set age at which patients may be under the care of a geriatrician or geriatric physician, a physician who specializes in the care of elderly people. Rather, this decision is determined by the individual patient's needs, and the availability of a specialist. It is important to note the difference between geriatrics, the care of aged people, and gerontology, which is the study of the aging process itself. The term geriatrics comes from the Greekgeron meaning "old man", and iatros meaning "healer". However, geriatrics is sometimes called medical gerontology.

When should an old age home be considered?

Family and seniors should consider hiring home care under any of the following circumstances:

Having difficulty coping with the tasks of daily living, detailed further below.

- Feeling isolated at home.
- Personal care needs taking up too much time
- Becoming reclusive because it is such a struggle to get out of the house
- Shopping, banking and other errands becoming challenging or insurmountable
- Housekeeping and home maintenance deteriorating
- Family and other caregivers feeling overburdened
- Ending up in a hospital emergency room over chronic health issues that are not being addressed daily
- Home care services include government supported health care services and other community-funded home care services. These can also be augmented with professional, privately funded home care support and services.
- Privately run programs are more likely to be professionally staffed, to adhere to the highest standards and offer features and care excellence that may not be available in government-run services. The old adage, that you get what you pay for, likely applies when it comes to finding proper home care for the elderly.

How should an Old Age Home be designed?

Old Age Homes could be the dormitory type, independent rooms or cottages depending on the social and economic status of those who are going to live in the homes. The rooms should be well-ventilated. As much as possible all facilities in the home should be at the ground floor level. If upper floors have to be built then a sloping ramp has to be provided which would also facilitate easy passage of wheel chair when needed. The toilets and bathrooms should have rough flooring so that the elders do not slip. Suitable railings should be provided for support. A room should be set apart where sick people needing short-term treatment could be housed. Recreation rooms and rooms for medical care should be built.

Basics for personal finance management for elderly:

Most of the financial planning is done when young or below 40 years of age. Ideally, post that age, major chunk of expenses begin, like child's higher education, marriage or buying a house. Among these high valued expenses, one may forget that his age for retirement is also nearing and the need to plan finances for post-retirement life cannot be ignored. Generally, people retire at the age of 58-60 years which means that is the end of their earning period. So, it is important for them to build retirement corpus before that. Few options where a senior citizen can invest and continue enjoying a secured post-retirement life:

- 1. Senior Citizen Saving Scheme (SCSS)-
 - Designated for individuals above the age of 60 years, the saving scheme for senior citizens in India are affecting long-term saving options and offer unmatched security and features that are usually associated with any government sponsored saving programme. These are available through certified banks as well as post office across India. The typical SCSS account extends up to 5 years and upon maturity can be extended for 3 years. Depositor is allowed to make one deposit in this account, an amount that is a multiple of 1000/- not extending beyond 15 lacs. Presently the rate of interest is 8.3%, which is quite high.
- 2. National Pension Scheme (NPS)-
 - NPS is a contribution scheme launched by government of India, which offers a large variety of investment options to employees. The scheme helps individuals make decisions about how to invest pension well. Unique Permanent Retirement Account Numbers (PRAN) is allocated to each subscriber at the time of their joining. Subscribers are also allocated two accounts which they can access any time. NPS schemes can earn a subscriber anywhere between 12-14% interest.
- 3. Post-Office Term Deposit (POTD Scheme)-
 - Investors are rewarded with assured returns every month on their deposit. This is one of the most beneficial investment options that can be procured as it offers returns ensures that the capital invested is intact and also provides a fixed income every month. This scheme is provided by Indian postal service and is administered by the finance ministry of India, thus making it the most secured option to invest. As of 1st April, 2016, the revised rate of interest applicable on the Post-Office Monthly Income Scheme is 7.80% interest per year and is payable monthly.
- 4. Systematic Withdrawal Plan and Mutual Fund-

A Mutual Fund is a pool of savings contributed by multiple investors. The common fund created is invested in one or many asset like equity, debt and liquid assets. It provides facility that allows an investor to withdraw money at pre-determined intervals. This

investment will pay specific sum of money at times decided by the investor. To earn higher interest, one must start investing in Mutual Funds at early age.

- Fixed Deposits-
 - Fixed Deposits are considered to be safest and reliable investment instrument. Money can be invested in FD for as less as 7 days to as high as 10 years. The rate of interest can vary for one year to another decided by RBI, and interest earned is fully taxable.
- Pradhan MantriVayaVandhanaYogana (PMVVY)-
 - The scheme was launched on 4th may, 2017 and can be availed till 3rd may, 2018. The government had announced the pension scheme exclusively for senior citizens, aged 60 years and above. The scheme will provide assured return of 8% per annum payable monthly for 10 years as per the frequency of monthly, quarterly, half-yearly or yearly as chosen by the pensioner at the time of purchase. This scheme can be purchased offline as well as online through LIC of India who has been given the sole privilege to operate the scheme.
- 7. National Saving Certificate (NSC)-

NSC is an investment scheme floated by government of India. It is a saving bond that allows subscriber to save income tax. There is no maximum limit on purchase of NSCs, but investment up to Rs. 1.5 lacs in the scheme can earn a tax break under section 80 (C) of Income Tax Act. The certificate earns a fixed interest. Currently, the rate is 8.1 per annum. The interest is added back to the investment and compounded annually. This certificate can also be used as collaterals while taking loans from banks.

Analysis

REPORT ON SEBA OLDAGE HOME

Address: P-9, Panchasayar, (Near E. M Bypass Peerless Hospital) Kolkata - 700 094, West Bengal, India

Email: sebaoldage cal@yahoo.co.in

I had our visits in Seba old age home, which is in Kolkata. We reached there around 10.30 am with our entire group. A peaceful old age home for senior citizens, situated in the Panchasayar, (Near E. M Bypass - Peerless Hospital), of Kolkata. The home flirts with the abundant greenery around it, is quiet, and breathes pollution free air, yet, all the amenities of the city are available at a drive of half an hour. Seba Old age Home, where we believe in providing an atmosphere of companionship, an environment that cares, that celebrates old age and that environment where there is always that person to talk to, who will listen, answer and respond, with compassion.

Seba Old age Home, is a multi-residence housing facility intended for senior citizens. Typically each person or couple in the home has an apartment -style room rooms. Additional facilities are provided within the building. This can include facilities for meals, gatherings, recreation activities, and some form of health or hospice care. A place in a retirement home can be paid for on a rental basis, like an apartment.

Services:

1) CHARGES:

- SINGLE BED: Rs.8,000/- per head per month
- DOUBLE BED: Rs.7,000/- & Rs.8,000/- per head per month
- TRIPLE BED: Rs.7,000/- per head per month
- DORMITORY: Rs. 5,000/- & 6000/- per head per month
- FOR HANDICAPPED OLD PEOPLE: along with the attendant, the charges are negotiable.

2) MEDICAL FACILITY:

- Routine medical check-up once in a month (Free). Beside this emergency medical assistance, hospitalization, nursing etc. may be arranged if necessary.
- Tea, Breakfast, Lunch, Evening Tea, Dinner, Veg Non Veg both are available.

The old age home like to follow their own rules and regulations. They take admission above 60 ages of male or female. For the patients they provide medical facilities and follow the food services for them in that way. They provide food in time to time. They actually maintain their time and caretakers are also there to care for old age people in every time.

Observation: Seba old age home is basically for senior citizens. I wasobserved the elderly people and their behaviour on us on that moment. My main motive was to know about the old age home, how the older adults treated there and difference between the family life and old age home. They were attached with me as like my own family. Some elderly shared their lifestyle and the story about their entire life and they asked about us also, they have very good bonding with each other. The lady was there who try to encourage them to talk with me about their lifestyle and what they done in their daily life in Seba old age home. The old age home cared each as every elderly people and tries to fulfil their needs in daily basis. The rooms where the elderly stayed, the rooms were good. Due to the interaction with elderly persons they said that they didn't get that much of food and the foods they liked to eat. There was some interactive secession with me through conducted some activities. At last there was a singing round when the elderly liked to sing song in Bengali or Hindi and they enjoyed very much during this.

Personal Opinion: The lady who guide me and who helped to know us about the lifestyle of old age people in seba old age home, she behave with us in a well manner. I had got to know lots of things like positive side or the negative side of an old age home. One thing I found that the elderly said old age home is good but not good more than family. They wanted to spend their life with their family. Otherwise they had good bonding with each other.

CONDUCTED ACTIVITIES: (SEBA)

1. Playing Card Activity

Implementation of the activity: A general playing card set was taken and a piece of paper was stuck on each card that had an activity written on it. Then players were allowed to choose any one card without seeing the activity written. It was kept in mind that the game was planned for elderly people, so the activities catered around to their likings or comfort zone for example, "Laugh out Loud", "Sing your favourite song", "Say a line of bollywood movie Sholay" and so on. Every player got the opportunity to perform their own activity.

Observation of the activity: All the players enjoyed the game as they got a moment to be child again. Women at the Old Age Home preferred dancing over all other activities. It was a moment of delight for them as well for us, to witness how they executed their activities.

2. Suroon Ki Jugalbandi – Name That Music

Aim: To help identify the old songs and thereby helping in cognition and recreation.

Importance of the Activity: This activity efforts to keep the cognitive functioning of seniors at a high level thus reducing reduce loss of memory, and even improve brain functioning and recall.

Materials required:

- 1. Audio clips
- 2. Laptop
- Speakers

Procedure: The instrumental audio clips of their times shall be downloaded and made to arrange in a sequence.

Execution: The arranged audio clips shall be played one at a time, and the participants shall be asked to identify the song. They may also sing and dance to the tunes.

Problems Faced: No problems arose, and the activity was a delightful one.

3. Name of the activity: Paper bowl activity.

Aim: To plan a recreational fun-filled activity for the elderly.

Importance of the activity: This recreational activity concentrates on making the elderly use their fine motor skills to prepare a product of their own.

Materials required:Balloon, diluted fevicol, colorful pieces of paper, bowl and paint brush.

Procedure:On a slightly inflated balloon, with the help of a bowl and paint brush, diluted fevicol is to be applied evenly in the shape of a semi-circle. Small pieces of colorful paper are stuck on the bowl-shaped area. After minimum of 4-5 layers of paper, it is left for drying. Later, the balloon is pricked and the hardened paper-bowl is taken out.

PERSONAL CASE STUDIES

CASE STUDY OF A SENIOR CITIZEN

He is very simple person. He has his beautiful wife & a son, daughter. His life is one of the dimensions of life that everyone enjoys. He lives in Kolkata now.

He was grown up in Burdwan. His childhood also spent in there. He lived in a joint family 7 he had 5 brothers & 4 sisters. Usually he had very interests in science subjects from childhood. In childhood he had lots of fun with his family members. He had studied in a government school till 10th. He had scored 86% & also got a first position from his school. Thereafter he continued to take science making his future brightful. He studied attentively in this time. In 11th class he went to Berhampur Kent College. Slowly Slowly mathematics got his passion. Then he decided that he studied in aboard college. But due to his financial condition he could not affoard. Then he admitted a reknowned college in Berhampur. After completing his B.Sche admitted in Calcutta University for his M.Sc in Mathematics. His aim was to be a good teacher & he reached his destination after crossing many stumbles. After M.Sc he admitted in B.T class for giving SSC exam. He continued there for 2 years. After trying so many times he got a job of teacher in a higher Secondary School. He was teacher of government High School in a reputed school. His deepness was only mathematics. Students called him The Guru of Mathematics.

His marriage was fixed with a beautiful lady. But he wanted to do research work on mathematics. But it was not done at that time. Lots of responsibility was on him in the workplace. His wife was Bengali graduate. The senior person taught students in school & also gave coachin for students who were economically backward. His wife took responsibility to take care of him & his family. His wife also beared up his two children one daughter & one son. Rekharanidevisangs so well specially rabindrasangeet. PrasantoDas always appreciated her song. She performed in different types of functions. Later Prasanto das used to spend few hours with their children at night & holidays. His wife helped their child to do well in study. Her daughter was not so good like him. She was also good in music. Her tone was amazing. Whenever she performed anywhere he got a prize. She had interest in ARTS subject so she studied in Bengali Hons in Krishnan agar College. Later she comleted her M.A in Rabindrabharati University on Music. She also got a chance in AKASBANI radio &sangs well. OthersidePrasantobabu's son was his pride. He knew that his son will be like him. His son brilliant student passed board exam with star marks. He got also a scholarship. He also wanted to study on Mathematics HONS.. He went to study in aboard. PrasantoDs helped his both of children by providing them both mental & financial support always. His wife was by him without any questions. Prasanto Das had to take burden of repaying educational loan for providing good carriers for his son. But they were really happy & satisfied thinking of better futures for them. His son all through got a chance to be admitted to one of the renowned business institutes in India. After completed his management degree his son took a job in a reputed company & got a chance to go USA. In this time he was retired from her job life. He was so upset for some days after retirement. His caulics also bid good bye & arranged a beautiful farewell party for him. He did not spend his time but then he thought that he will start a new business. His daughter also opened a song school for all. She started her new life. Later she chose a life partner with whom she knew long times ago. Prasantobabu& his wife gave them full consent to them. She married her chosen partner. Soon after their marriage they flew to London only to get settled in their profession. His son initially keep a regular contact over telephone and used to come once in a year to home. Slowly this contact seemed to loose. One day his son told him that he loves someone & he wanted to marry her in there. But after hearing this Prasantobabufelt hearted because the girl was other religion which was against his family. After their marriage her son returned home for once with his newly wife. Afterthat his son once at a time called his parents. Gradually these people were totally detached with their son. His wife could not endure such heart-breaking shocks. Broken - hearted she stopped taking care of her own health. Later prasantobabu also got so much depressed and one day his heath got worse. He was admitted in a hospital. His wife till now supported him. His daughter came after hearing this news and take care both of them. After some months Prasanto Paul & his wife joined laughter club, yoga centre for their better health.

Though he conveyed the news of his new lifestyle to their children, his daughter contacted met with them.

CASE STUDY ON TERMINAL ILLNESS

George was an 69-year-oldmale, Protestant, married, and father of two children. George retired at the age of 65 from his work as an accountant and was fully independent prior to hospitalization. When admitted to the hospital, he suffered from a complex medical condition, including past history of cardio myopathy, prostate cancer, and COPD. Most recent medical history includes the car accident due to a sync opal episode, pneumonia, respiratory failure, renalin sufficiency, and proximal atria fibrillation.

It is essential to view George's course at the hospital in a chronological fashion because the short period of hospital stay incorporate intense medical, emotional, cognitive, and social changes in his life. His medical condition had slightly improved but eventually was

followed by a setback associated with delirium. During this period George's wife who was his primary caregiver, broke her hip and died after several injury.

PRESENTING COMPLAINTS

George inendorsed feeling depressed and express feeling of anhedonia and guilt over past smoking behaviour. George's vegetative symptoms are insomia, loss of weight, psychomotor retardation etc. During the course of his illness, George's level of awareness to environment had declined, and he was placed in wrist restraints.

HISTORY

George denied any personal or familial history of mental illness. George suffering from complex medical condition and are unable to tolerate a long evaluation process. When George was first admitted to the hospital, no family member or friend complained him. Only after George's death was the primary therapist informed that he was previously married twice. His wife at time of hospitalization had also been married in the past and had children from a previous marriage. It was unclear, however, whether George's biological daughters, who were most influential in his care, also were the biological children of his wife.

TREATMENT IMPLICATIONS OF THE CASE

George was evaluated three additional times toward the end of his life due to mental status changes associated with deterioration in his medical condition. George has decisional capacity to make end of life decision. Fear of death was George's main concern. Being in the hospital in a critical condition and abruptly losing his independence served George as a constant reminder of his own mortality. George, who had never attended church before hospitalization, became religiously involved while in the hospital. Depression was George's main complaint, end, throughout his stay in the hospital. Last, acceptance occurs when the patient is no longer angry or depressed about his or her fate. George's experience sad equately because he was functionally independent before hospitalization. The clinical psychologist who evaluated George was under the impression that he was able to comprehend the implications of his decisions and that he would prefer to stay connected to a ventilator machine. The medical condition of terminally patient has to be fully considered when developing a treatment plan as well as when conducting end of life decision. George's pathology was not are a result of erroneous thought process but rather a result of tragic life event and detoriating medical condition. George's feelings of loss of control were expressed as anger directed toward staff, his daughters, and himself. The doctors use mechanisms to ease the terminal reaction of George.

CONCLUSION:

It is concluded that George did not got that much of family support to reduce his terminal illness. The physiologists were used the mechanisms to treat him. Therapy also attempted to help George understand the origins of his anger. His only wife was his support, but after her death he was lost himself and he became more suffer from terminal illness. The treatment was needed to be striving to improve his health and mental stress problem.

THE HEALTH STATUS OF TWO CASESTUDIES

Case Study 1: in the case study on personal data I know that he is a patient of heart problem in the age 30 blood pressure is high then he was consulting with the doctor then he continue with the medicine then at the age 60 he was suffering from heart attack and then now he maintain his diet and continuing with the few medicine. Now he is a cure person.

Case Study 2:

In the case study on Terminal Illness, the person George who was 69 years old man. After his retirement he had suffered from terminal illness. He faced with lots of complications like insomnia, depression, feel Exhausted.

He was actually suffered from the complex medical condition of depression. With these health problems he suffered very much. At the end of his life he was not satisfied with his health. At the last moment of his life he was gone through with the critical condition when he was admitted in hospital because of terminal disease. His physical and mental health was not well because of terminal illness.

Conclusion

My work on "Aging Issues of Senior Citizen is the result of a study conducted by the researcher using detailed literature review, personal interviews and statistical techniques. It is evident that due to socio-economic changes in the wake of urbanization and increase in the proportion of the aged in the population, the problems of the aged have become formidable. The ultimate responsibility for supporting the aged is shifting from the family to secondary institutions. In these circumstances, it is essential for setting up a large number of Old Age Homes with adequate amenities for those who have no close relatives to look after them. But the coming generation realize that Old Age Homes are not a 'dumping place' for the aged. Finally, the aged should be considered as a valuable cultural resource and role models for the younger generation. Therefore, governmental and non-governmental organizations should come forward to motivate and create awareness among the youth to take care of the aged in the family. The Old Age Homes are no substitute for families. More research is needed on the issues of the senior citizens so that the coming generation may be more functional in finding ways of helping the seniors of the society.

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