

A New Study on Taking Care of Elder People in Rasht City, Iran

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Abstract – Elderly ages and its problems is one the most undeniable part of problems in our recent world life. In this section of life the detected person loose most of his/her abilities and day to day will get worse. Some problems will involve parallel with increasing their disabilities. Such as their dependency to others for doing their usual and daily activities, raising the cost of their taking care, increasing the prescription cost and also they may lose the attractiveness for other members of family, especially for young member(s) of his/her family, and their relevant. In this paper we first study the most usual problems of elder people, especially in Rasht city in Iran. Then, we investigate that whether the variables: religious beliefs, social behaviors, family and upbringing children in their families, gender (male or female), income and (urban or rural) residence effect on taking care of elderly people or not. To investigate on possible effects of these variables for taking care of elderly people, we divided every above mentioned variables to different possible levels or sub variables then based on the answer of questioners we used the SPSS package to apply ANOVA one way, Cross tab Chi-square, Tukey tests. Finally, based on analyzed data we provide the conclusion and useful comments of this research.

Keywords – Elderly; Taking care; Social behaviors; Upbringing; Religious beliefs

1. Introduction

Most of people in the end of their life reach to elderly age and need to others for supporting or taking care them. Some of these people may get different types of sickness and some disabilities then the emergency helps for them seem necessary. Thus the problem of this part of life is undeniable. Some usual problems of elderly people are explained below.

Elders face too many types of problems. Too many to choose from. Declining health, money/retirement funds, cost of living, and discrimination in the work place, in life in general. The younger society views them as useless and frail. Even in movies and cartoons they are seen negatively. Nursing home residents particularly have stereotypes facing them daily and are often compared with children and babies [3].

They have a mutual withdrawal from society and their world gets smaller and smaller. They don't tend to venture out in the neighborhoods; they stay homebound. So much for the 'golden years'. They are alone a lot more, families are too busy to visit them, and they have less motivation for self-care and end up losing weight, dehydrated, feeling like burdens to their loved ones. It is very sad [7].

They elder people may have financial problems too. Many elderly people live on social security alone or social security with a small pension. Transportation issues. Since not all elderly people are able to retain their vehicles due to the expense of upkeep and fuel as well as possible vision problems. Not all senior citizens are located on a bus-line. Some must walk or depend upon family or friends. Health concerns (such as limited mobility, arthritis, vision or hearing problems) which may hinder the everyday tasks which many of us take for granted. These everyday activities or tasks include grocery shopping, bathing, grooming, housekeeping, cooking, budgeting, etc [1].

The first thing that comes to mind is that they become off balanced. And often need a cane or a walker to keep them stabilized. Nothing is worse than for them to take a fall, being off balanced, and breaking a hip. It takes forever to heal from. And so often the person becomes depressed and anxious to be well and they often don't heal right, so never walk again. Instead, they stay in a wheelchair. Another problem is that often they are taken advantage of, by quick talking, con artists at their door. And they can be taken in and sign checks that put them into arrears at their banks. I knew of an insurance company branch, which sent their salesmen out twice a month to collect the premiums. And the elderly would not remember they

have already paid their monthly bill. Memory loss is next for the elderly often do not remember doing or saying the same things they did earlier. So it's up to the person they spoke to, to remind them that they already spoke on the same subject earlier[6].

One last problem is having to give up a lot of foods that they used to enjoy. Either it's due to ill fitting false teeth, or they are not able to disgust some foods they did when they were younger. Eating corn on un realist views about them being stupid, not needing love or companionship. The negative stigma about them not being able to judge, and the fact that they are considered crabby for trying to keep there yard or whatever they like neat and pretty. They are way over looked for their wisdom and experience that can only be learned through experiencing life. Some people think the elderly are like an old shoe, just get rid of it is of no use.

Loss of life roles because of death or illness or retirement or moving to new places. Realizing that people (our friends, relatives) develop and change over time. In some cases, you cannot always rely on people who were once close to you for emotional support like you once did.

Medical conditions that you never had start to crop up or you begin to show signs of conditions older relatives had.

Another problem can be the prescription rates such that the continual doctor visits, the cost never comes down. Continual testing at hospitals and doctors offices [7].

I think older people should get a break. I lived through five wars, fought for two years in one and was wounded. I raised five kids that are all high wage earners, they pay high taxes, why shouldn't we get a break. We have to go through hell to get a car, a house or buy anything of value. We cannot get reasonable medical insurance or burial insurance. We think these are all self explanatory. We think the major problem is discrimination-- younger people thinking that just because they are old they must be senile and in bad health.

- This is self explanatory:
Loss of independence, i.e., no longer driving, how to do this and how to do that. What we should eat, etc.
- All of the above, plus, neglect from family, feeling unloved and in the way, a nuisance. not in all cases but way to many.
- I think the major problem is discrimination-- younger people thinking that just because they are old they must be senile and in bad health.

Since everyone is living longer, I think the major problem is Money/Healthcare. Will they have enough money to pay health care premiums, plus still be able to live [8].

- Alzheimer disease, strokes, heart-attacks.

Modern society is built by the young for the young. It is a dynamic creation that does not give much consideration to the old, sick, handicapped or incapable. They are merely tolerated as so much liability or nuisance. So these hardly wanted people face many problems in their everyday living.

The old, who were once young; helped to make the present society, and now they pay the price of their former neglect of the old. They themselves are neglected and unappreciated in turn.

2. Physical Ability

An old person does not have the physical ability of a young person. Walking can be an effort. Crossing a road can be impossible without assistance. On many occasions we have come across old men and old women who just could not cross a busy road that had no pedestrian crossing. No driver stopped for them. So these old folks had to wait patiently until a kind soul happened along to lead them across. We have helped a number of them. Some of them were very grateful but some simply cursed the traffic. Whatever their attitudes, they were better off staying at home.

It is common to hear of old people being knocked down by vehicles on the roads. They just cannot handle the traffic anymore.

This busy world is certainly not kind to old folks. Crossing a road is just one problem they encounter, getting onto a bus is another. The old person is usually the last to get on, if he manages. We have seen a bus conductor telling an old man to wait for the next bus because his bus was full. If the old man does get on, the likelihood is that he will have to stand, which does no good for his/her old bones. Rarely does anyone give up his seat for an old man, or woman.

3. Left Alone

In the old days, most people did not go every far from their birthplace and thus families usually stayed together. The family unit is strong and practical. Today the family unit is breaking apart as young men and women travel widely in search of better jobs. So the chances are that the old folks will be left alone and neglected. Sometimes they are not wanted by their children at all. The luckier ones may have a child or two staying with them. The less fortunate ones may have to pine their lives away in an old folks' home or in their now empty house that once was filled with the sound of children's laughter. This neglect is a very real problem in our society and it is what the old dread most – being wanted and uncared for in the time of need.

4. Indifference and Neglect

There are other problems old folk's faces, but none can be as bad as the indifference and neglect of the young. The young have no time for the old even though the old have virtually no time left. Soon they will die and the young will take their place.

5. Analysis of Data

Here are four age groups 16-24, 24-35, 35-55 and others (see Fig1.) to examine the thoughts and opinions about the way we take care of the elderly. We also considered five different levels of education for questioners as follow: Diploma, Degree, Bachelor, Master and Ph.D

levels (see Fig2). In this regard, based on a questionnaire distributed between these groups will examine and analyze the resulting data. In fact, we want to examine that is there significant difference between age and education groups view for take care elderly people. In this research we studied that whether the religious beliefs, social behaviors, family and upbringing education, gender (male or female), income and residence (urban or rural residence) variables effect on the care of elderly people or not. We employed the SPSS software to examine the above desired variables [2,4,5]. In Anova, Tukey, cross tab Chi-square tests we set $\alpha < 0.01$ then the all results are obtained in more than 99 percent of confidence.

6. Figures and Tables

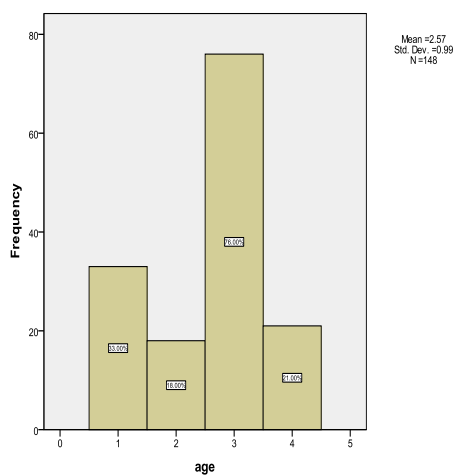


Fig1: different ages groups

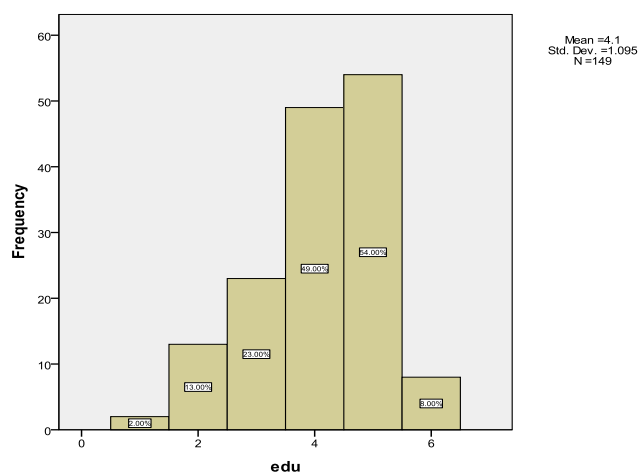


Fig2: different education levels

ANOVA

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	91.471	3	30.490	.214	.887
Within Groups	14128.393	99	142.711		
Total	14219.864	102			

Multiple Comparisons

Tukey HSD

(I) age	(J) age	Mean Difference (I-J)	Std. Error	Sig.	95% Confidence Interval	
					Lower Bound	Upper Bound
16-24	24-35	3.00455	4.48434	.908	-8.7140	14.7231
	35-55	-.09912	3.10471	1.000	-8.2124	8.0141
	Other	.41667	4.08039	1.000	-10.2463	11.0796
24-35	16-24	-3.00455	4.48434	.908	-14.7231	8.7140
	35-55	-3.10367	3.93414	.859	-13.3844	7.1771
	Other	-2.58788	4.74213	.947	-14.9801	9.8043

35-55	16-24	.09912	3.10471	1.000	-8.0141	8.2124
	24-35	3.10367	3.93414	.859	-7.1771	13.3844
	Other	.51579	3.46667	.999	-8.5433	9.5749
other	16-24	-.41667	4.08039	1.000	-11.0796	10.2463
	24-35	2.58788	4.74213	.947	-9.8043	14.9801
	35-55	-.51579	3.46667	.999	-9.5749	8.5433

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	62.121 ^a	60	.400
Likelihood Ratio	69.738	60	.183
Linear-by-Linear Association	1.166	1	.280
N of Valid Cases	147		

Some of the main obtained results based on this research are listed below:

1. Between religious attitudes and education in the care of the elderly, there is independence.
2. Religion and religious beliefs do not affect on the care of elderly people.
3. Social behavior and has no effect on the care of the elderly.
4. Family and upbringing of children in the care of elderly people are affected.
5. Educations of family members have no effect on the care of elderly members.
6. Education in the care of his/her elderly person is affected.
7. Between people in different ages, there is no significant difference in the care of the elderly.
8. Education of people of different age groups has no effect on the care of the elderly.
9. Attitude differences between men and women there are in the care of the elderly.
10. Attitude differences between single and married there are in the care of the elderly.
11. Between the attitudes of individuals with high income and individuals with low incomes in the care of elderly, there is no significant difference.

12. There is no significant difference between residence (urban or rural) in the care of the elderly people.

7. Conclusion

Based on the above results we see that upbringing children in their families and also the levels of education of elder people affect on the quality of taking care of the elder people. The other above mentioned and desired variables significantly do not effect on the taking care of elderly people. It proves that to improve the quality of taking care the elder people, we should note to the family as much as possible and also we should improve the education level of people before they reach to the elderly ages.

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