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Full Length Research Article

ACTIVITIES OF DAILY LIVING: ELDERLY

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ABSTRACT

Background: Population aging is observed world-wide. As per Census 2011, elderly constitutes 7.4% population of India. It is expected to increase to 19% in 2050. The geriatric assessment is a multidimensional, multidisciplinary assessment designed to evaluate an older person's functional ability

Objectives: to determine the functional status of elderly using Katz ADL index and to determine the association of level of ADL with selected demographic variables

Methods and materials: Descriptive cross sectional survey research design was conducted among 40 elderly people by using convenient sampling technique in rural area of Etawah. The Katz index of Activities of Daily Living tool was used to assess the ADL. Data were collected by interview method. For data analysis, SPSS version 16 was used for descriptive and inferential statistics.

Result: The result showed that there was full functioning ability with mean score of 1 in dressing and continence and with 0.97 means score in bathing, toileting & feeding. there was moderate functionalability with 0.55 mean score in transferring. Total Mean score of elderly was 5.47 which show full functional ability with SD 0.640. There was no significant association found with selected demographic variables.

Conclusion: Rural area elderly people had 5.47 Katz ADL score which shows nearly full functional ability in elderly of 60 years & above.

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INTRODUCTION

Elderly population, in India as well as world-wide, is increasing rapidly over the years. The proportion of world's elderly population will double from 11% to 22%, between 2000 and 2050. The number of people aged 60 years and above is expected to increase from 605 million in the year 2000, to 2 billion in 2050 (WHO, 2013) . In India, the proportion of elderly was 8% in 2012, which is expected to increase to 19% in 2050 (Population ageing and development, 2012). Elderly persons, being one of the most vulnerable groups of the society have more chances of chronic disease, infections, as well as disabilities. Disability has been defined as a restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being. (International Classification of Impairment, 1980) The number of older people in the developing countries who are not able to look after themselves any longer is estimated to increase fourfold by the year 2050.

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Many of those who are very old lose the ability to live life independently due to limited mobility, weakness or other physical as well as mental health problems. Most require some or the other form of long-term care (WHO, 2012; WHO, 2002). An activity of daily living (ADLs) is the term used to refer to the daily activities of self-care within the place of residence of an individual, the outdoor environments, or both. Health professionals refer to the ability or the inability to perform the ADLs as an important measurement of functional status of an individual, particularly with regard to the people with disabilities and the elderly (Activities of Daily Living Evaluation, 2002). The Katz Index of Activities of Daily Living (Katz ADL) is designed to assess functional status, specifically, the client's ability to perform activities of daily living (ADLs) independently. The Index ranks adequacy of performance in the six basic functions of bathing, dressing, toileting, transferring, continence, and feeding. It has been only in the last few years that health care planners and the governments have started taking measures to address age related issues. Despite the felt need of the aged data regarding the health of the elderly are still inadequate. This is more so in most developing countries like India.

MATERIALS AND METHODS

A descriptive cross sectional survey research study was done among 40 elderly people in rural area of Bahupura. Convenient sampling technique was used to select the samples. All the elderly people who were above age of 60 years were included. Standardized index of Katz activities of daily living was used in the study to assess six basic functions of bathing, dressing, toileting, transferring, continence, and feeding. Data was gathered by interview method. Data was analysed by SPSS version 16 to assess descriptive and inferential statistics.

RESULTS

Table 1 show the frequency and percentage distribution of elderly of rural area of Bhaupura of Etawah city. Table 2 shows that there is full functioning ability with mean 1.0 in dressing and continence, elderly shows independence in ADL, 0.97 mean score in bathing, toileting and feeding and More than half of the elderly shows moderate functional ability with 0.55 mean score in transferring respectively. Overall mean score of the total Katz score of elderly was 5.47 (91.25%) which show full functional ability with SD 0.640. Table 3 despite that there was no association of level of ADL with selected demographic variables. Hence Hypothesis was rejected.

Table 1. Frequency and percentage distribution occupation

| Variables | f (%) |
|----------------|------------|
| Age in years | 19 (47.5) |
| 60 - 69 | 14 (35) |
| 70 - 79 | 5 (12.5) |
| 80 - 89 | 2 (5) |
| 90 & above | |
| Sex | |
| Male | 23(57.5) |
| Female | 17(42.5) |
| Family Type | |
| Nuclear | 18 (45) |
| Joint | 22 (55) |
| Religion | |
| Hindu | 40 (100) |
| Social status | |
| Lower | 2 (5) |
| Lower upper | 5 (12.5) |
| Middle lower | 22 (55) |
| Middle upper | 11(27.5) |
| Education | |
| Literate | 12 (30) |
| Illetrate | 28 (70) |
| Marital status | |
| Married | 39 (97.5) |
| Widow | 1 (2.5) |
| Occupation | |
| Farmer | 25 (62.5%) |
| Businessman | 1 (2.5%) |
| Unemployed | 14 (35%) |

Table 2. Mean, standard deviation of Katz ADL index score among elderly

| | N | Minimum score | Maximum score | Mean | Std. Deviation |
|-----------------|----|---------------|---------------|------|----------------|
| Bathing | 40 | 0 | 1 | .97 | .158 |
| Dressing | 40 | 1 | 1 | 1.00 | .000 |
| Toileting | 40 | 0 | 1 | .97 | .158 |
| Transferring | 40 | 0 | 1 | .55 | .504 |
| Continence | 40 | 1 | 1 | 1.00 | .000 |
| Feeding | 40 | 0 | 1 | .97 | .158 |
| Katzscoreof ADL | 40 | 4 | 6 | 5.47 | .640 |

Table 3. Association between the Katz ADL score and selected socio demographic variable N = 40

| | | N = 40 | | | |
|-----------------------------|------------------------------|---------------------|---------------|-----------------------------|--|
| Socio demographic variables | Severe functional impairment | Moderate impairment | Full function | X^2 , p, df | |
| Age (years) | | | | .025, 9.318*, 3 | |
| 60 - 69 | 0 | 0 | 19 | | |
| 70 - 79 | 0 | 1 | 13 | | |
| 80 - 89 | 0 | 2 | 3 2 | | |
| 90 & above | 0 | 0 | 2 | | |
| Sex | | | | | |
| Male | 0 | 3 | 20 | .122, 2.397*,1 | |
| Female | 0 | 0 | 17 | | |
| Family Type | | | | .433, .615*, 1 | |
| Nuclear | 0 | 2 | 16 | | |
| Joint | 0 | 1 | 21 | | |
| Religion | | | | | |
| Hindu | 0 | 3 | 37 | No chi square calculated | |
| Social status | | | | $.058, 7.502^*, 3$ | |
| Lower | 0 | 1 | 1 | | |
| Lower upper | 0 | 1 | 4 | | |
| Middle lower | 0 | 1 | 21 | | |
| Middle upper | 0 | 0 | 11 | | |
| Upper | | | | | |
| Education | | | | | |
| Literate | 0 | 0 | 12 | .238,1.390*, 1 | |
| Illetrate | 0 | 3 | 25 | | |
| Marital status | | | | .773, .083 [*] , 1 | |
| Married | 0 | 3 | 36 | | |
| Widow | 0 | 0 | 1 | | |
| Occupation | | | | .378, 1.946*, 2 | |
| Farmer | 0 | 3 | 22 | | |
| Businessman | 0 | 0 | 1 | | |
| Unemployed | 0 | 0 | 14 | | |

^{• =} NS- non significant

DISCUSSION

Harinder Sekhon, Sukhmeet Minhas (Harinder Sekhon and Sukhmeet Minha, 2014) 2014, cross sectional descriptive study over ADL of elderly in Urban community of north India and found there was no difference in activities of daily living found in the males and females and the dependency increased with increasing age in both. In the current study same result found with sex and age. Srivastava Dr. Mrinal Ranjan et al. (Srivastava Dr.Mrinal Ranjan et al., 2014) 2014, crosssectional study interviews 400 elderly; comprising of 200 people each from the elderly living in the rural areas and 200 elderly living in the urban areas of Lucknow city and found 90.6% of males and 98.4% of females had the ability of toileting and the ability for toileting in rural areas are far better than urban areas. About 89.2% of males and 95.2% of elderly females had the ability for transferring. In all about 83.1% of elderly males and 92% of elderly females had the ability of self control over urination and defecation. Rural elderly had better self control over urination and defecation. In all 97.2% of elderly males and 99.5% of elderly females had the ability of self feeding. In the present study the result shows that there is full functioning ability with mean score 1.0 in dressing and continence, there is 0.97 mean score in bathing, toileting and feeding and more than half of the elderly shows moderate functional ability with 0.55 mean in transferring. A Crosssectional descriptive study over 743 elderly people aged 60 years & above including 369 males and 374 females and found majority of study population (97.3%), were totally independent for physical activities of daily living (PADL) (Singh et al., 2014). In the current study independence score of elderly people of rural area was nearly similar i.e. 91.25% shows full functional ability.

Conclusion

Rural area elderly people had 5.47 Katz ADL score which shows nearly full functional ability in elderly of 60 years & above. However, thesituation in the study is quite satisfactory as 91.25 per cent of the respondents'reported no or minimal problem in their daily routine activities. A total of 40 elderly people from rural setting were interviewed & assessed for these abilities. The majority of elderly persons were found independent showing 5.47 Katz ADL score which showsnearly full functional ability.

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