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Mental Health in the Elderly People in two Welfare Homes in Malaysia

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Abstract:
The purpose of this study was to determine the mental health status among the elderly in two welfare homes in Malaysia. Methods: A cross-sectional design was employed to determine the mental health among elderly people. A total of 100 subjects were selected by simple random sampling from two welfare homes (Cheras in Selangor, and Seremban) in Malaysia. To describe the data, use averages, standard deviations and percentages. Also, for comparing the mean mental health of individuals in groups, independent t-test or ANOVA were used. According to the cutting point 23 in the questionnaire
(GHQ-28) 37% of the elderly were suspected of having mental disorders. Also, there was a significant difference in mental health between gender, education level, marital status, economic status and family composition(P <0 /001). According to the results of this research and special needs of elderly people, mental health of the elderly can be easily threatened.

Keywords: Elderly people / mental health/ welfare homes

1. Introduction

The ageing population has become a global phenomenon. World Health Organization revealed that the cohort of 60 years and above is expected to increase globally from 600 million in 2000 to 1.2 billion in 2050 (1).Malaysia like many other countries world-wide is experiencing the population aging phenomenon, owing to declining fertility rates combined with increasing life expectancy over the latter half of the 20th **c**entury (2). The World Health Organization also defines health as a complete, psychological and social well-being, not just the absence of physical illness (1).Meanwhile, aging is a change that occurs over time, has positive and negative aspects and includes the dynamics of biological processes, perception, development, and maturity (3)Disorders such as depression, Anxiety, memory loss, change in sleep pattern, feeling Loneliness and social isolation are among these problems(4) The major causes of these disorders are those that lead to mournful reactions, such as: job losses and the social and welfare state of retirement ,Losing loved ones, leaving home By children, loss of health, power and ability. It also leads to the loss of a person's freedom, Loss of stability and economic ability, loss of consciousness and so on. A change in self-image that threatens the mental health of the elderly (4). It is believed that If the daily life and useful activities of the elderly are disturbed, their physical and mental health will be damaged (5).Movement, sports and entertainment for the elderly provide a joyful and satisfying life, and this has an important role in providing mental health for the elderly (4).Awareness of the mental status of elderly people will achieve their real needs and will help planners plan their needs according to their needs (4).The statistics provided on the main causes of mortality indicate that 53% of the causes of deaths are related to the lifestyle of unsanitary care (6). The US Department of Health and Human Services emphasizes regular exercise, cigarette smoking, alcohol avoidance, proper nutrition and age-appropriate immunization to promote health in the elderly (7).

2. Methodology

In this descriptive cross-sectional study, 100 individuals aged 60 years and over in two welfare homes who had no physical disabilities, were mentally alert and able to answer questions.In the first step elderly people 60 years and above were asked to participate in the survey. In the second step those who agreed to participate were written informed consent. The survey was conducted in two welfare homes in Serdang and Seremban states of the Malaysia country. Every registered elderly who live in welfare homes had a recorded document called personal file in the welfare home center.
The data gathering tool was a questionnaire which was collected by interview with the interviewer. According to inclusion and exclusion criteria and using a complete list of identification number for every older people the simple random sampling (using computer) was used to select every subject for this study. We invited and explained forelderly people in coming to this study and fortunately most of them accepted.

The study adopted face to face interview technique for questionnaires to gather data. It has done from the first day of august 2012 through the first day of November 2012. In order to check the health generally (General Health

Questionnaire; GHQ) we use of this questionnaire. Goldberg has four general sections that its validity and reliability It has been reported (8).

The general health questionnaire in the field of physical symptoms related to issues such as feeling good, feeling weak and weak, headache, the need for strengthening drugs, and others in the form of 7 questions were studied.he scale was 4 from 0 to 3 (very high).Also to measure disturbance A total of 7 questions in social performancewhich was measured with a scale of 4 from zero (more than ever) to 3 (much less than ever).To measure depression in the elderly also, 7 questions with 4 items were considered as zero (no) to 3 (very high);In the end, anxiety and sleep problems were also discussed in the form of 7 questions, which examined the effects of factors such as worry, anger and bad mood, horrifying and awakening in the middle of sleep during the night on the health of the elderly. By scale 4, the measure was measured from zero (up to 3) (very high).

The total score of the sum of scores for the questions was calculated and classified according to the cut-off point in the score of the 23 elderly into two healthy categories (less than 23) and suspected of mental disorders (greater than 23), so that the high score indicates health the public was less. The answers to the score of the score 1 and the good answers were given a zero score. The mean, standard deviation, and percentages were used to describe the data. In addition, independent t-test and one way ANOVA were used to determine the relationship between qualitative independent variables. The software version 20 was used and the SPSS software was used in the analysis of meaningful information equal to 5%.

Based on the results obtained, mean age of the elderly 5.2 ± 7.65 years, the lowest was 60 years and the highest it was 93 years old. 54% of them were illiterate and 60-65 years old. Table1 General status of mental health in the elderly of the two welfare homes is shown taking into account the cutting point (In the score of 23) mental health questionnaire, 37% Seniors suspected of having a mental disorder and status Mental health is not favorable.

Mental Health Statues	Number	Percent
Healthy (score less than 23)	63	%63
Unhealthy(score more than 23)	37	%37
	100	100

Table 1: Determining the General State of Mental Health of Participants

Table 2 shows the effect of demographic variables on the mean the mental health .score of elderly people shows that the results T-test and ANOVA Showed that the variables of sex, education level, status Marriage, family composition and economic situation of elderly people in two welfare homes has a significant effect on the mental health of the elderly (p <0.001) .

Mental Health Statues		Average	Standard Deviation	Result
Sex	Man	19.2	10.1	t= 4.893
	Woman	23.7	5.8	P=0.001
Education	Illiterate	22.4	6.9	
	Elementary	21.2	6.9	F=7.074
	High school	19.3	9.02	P=0.001
	Academic	11.1	7.2	
Marital status	Married	20.4	7.3	t=2.2.13
	Single	23.2	9.1	P=0.02
	With wife	19.3	7.2	
Family	Loneliness	26.2	10.3	F=7.33
	With children	20.4	8.1	P=0.001
Economic statues	Independent	21.1	8.2	t=2.136
	Dependent	23.2	8.9	P=0.002

Table 2: Determining the Mental Health Status of the Elderly According to the Demographic Variables

3. Discuss

The aim of this study was to investigate mental health status among elderly people who live in two welfare homes in Malaysia. The aging of the qualitative experience is that of any someone understands it in a different way (10).Physiological, social, psychological, economic, environmental and cultural aspects of this period, quality affects the lives of the elderly (11).

Increasing human life and adding population seniors are one of the achievements of the last century. Aging is a phenomenon due to the improvement of conditions hygiene and increasing life expectancy; therefore, knowledge of garlic the evolution and problems of this era can be greatly enhanced the inability of this vulnerable stratum of society is prevented.

Research results the present study showed that the elderly studied with the acquisition %21.3, have moderate mental health, and 37% of elderly people in welfare homes are somehow suspected of mental impairment; also among four criteria for mental health, depression and disorder social performance has the greatest impact and anxiety sleep problems with physical signs have the lowest problem.

Other findings suggest better mental health men are more likely to be women than women, which is consistent with the results(9). The reason for this can be because structural factors of society role and social bases men in the community, society has more power and more opportunity Provides them with a sense of self a higher efficiency will lead to better mental health. Also in this study between educations level there is a significant relationship between mental health and mental health people with higher education than mental health were better.

Higher availability of educated elders Health facilities and facilities awareness of the media can be high reason being the quality of life of literate elderly people. In examining the relationship between marital status and health the mental findings of the findings indicate a better mental health of the elderly Married; these results are similar to those of other studies shows the consistency. It seems that poverty and deprivation of social life the biggest obstacles to comfort and security in the elderly. In addition, in poorer elderly people suffering from diseases, it is also more likely to reduce their mental health.

Continued improvements in living standards, health behaviors, and low level of infectious and chronic disease mortality are important for increasing life expectancy, but this does not automatically translate into improved quality of life. It is evident that mental problems is predictor in poorer quality of life. Hence, there is a need to develop social and health interventions program towards mental diseases to improve the quality of life among elderly people. Health care providers should also be educated on how to assess the mental problems among elderly. In addition, the finding demonstrated reduced mental health is one of the most feared health conditions affecting quality of life and physical functioning. Yet maintaining adequate mental health necessary to perform every day activities especially among older age groups when the risk of more debilitating chronic conditions, such as arthritis and risk of stroke, cancer and heart disease, are of greater concern.

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