

An Exploratory Study To Assess The Psychosocial Aspects Among Elderly Residing In Selected Old Age Homes Of Pune City

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ABSTRACT

Introduction

Aging is a multidimensional process accompanied by physical, psychological, emotional, and social changes. Rapid urbanization, migration, and the shift from joint to nuclear family systems have contributed to an increasing number of elderly individuals residing in old age homes. Although these institutions provide basic facilities such as shelter, food, and healthcare, many elderly residents experience psychosocial challenges including loneliness, reduced social interaction, emotional stress, and loss of family support.

Title

An exploratory study to assess the psychosocial aspects among elderly residing in selected old age homes of Pune city.

Purpose

To assess the psychosocial aspects among elderly residing in old age home of Pune city. To find the significant association between demographic variables and psychosocial aspects is the main purpose of this study.

Background of the study

Aging is a multi-dimensional process that affects the psychosocial factors such as physical, psychological, emotional and social aspects of the life. Rapid changes in living standards, urbanization, migration including the shift in nuclear family to joint family have led to increase living of elderly in old age homes. Though facilities are provided in organizations like shelter, food, medical assistance and psychological support still some may experience loneliness, decreased social interaction, emotional stress and lack of family support. So, it is important to assess psychosocial aspects of elderly living in old age home for healthy aging and overall quality of life.

Materials and Methods

A quantitative, non-experimental exploratory study design is adopted. Total 200 samples (elderly aged 65 years and above) were selected from selected old age homes of Pune city by using Non-Probability purposive sampling technique. Data were collected using a validated self-structured questionnaire, and descriptive and inferential statistics were applied for analysis.

Results

The findings revealed that 42.5% of elderly participants had high psychosocial well-being, 38.5% had moderate well-being, and 15.5% demonstrated very high psychosocial well-being. Only 3.5% of participants reported low or very low psychosocial scores. No statistically significant association was found between psychosocial well-being and demographic variables such as age, gender, marital status, education, occupation, pension status, duration of stay, and previous living arrangement ($p > 0.05$).

Conclusion

The study concludes that most elderly residing in old age homes demonstrated moderate to high psychosocial well-being. A supportive institutional environment, peer interaction, and structured daily routines play a significant role in maintaining psychosocial health among elderly residents.

Keywords: Elderly, Psychosocial aspects, old age homes, Psychosocial well-being.

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INTRODUCTION

Aging is a natural and inevitable process characterized by progressive changes in physical, psychological, emotional, and social domains of life^[1] Traditionally, elderly individuals in India lived within joint family systems, where they received emotional support, companionship, and care. However, rapid urbanization,

industrialization, migration for employment, and changing family structures have resulted in a gradual shift from joint families to nuclear families, leading to increased institutionalization of the elderly.^[2]

India is witnessing a rapid growth in its elderly population. According to the Census of India (2011), more than 104 million people were aged 60 years and above, and this number is expected to

rise significantly in the coming decades. With children migrating to urban areas or abroad, many elderly individuals are left without adequate family support and are compelled to reside in old age homes^[3]

Old age homes provide essential services such as shelter, food, and medical care; however, institutionalization often results in psychosocial issues such as loneliness, emotional insecurity, loss of autonomy, and reduced social participation^[4] Psychosocial well-being, which includes emotional health, social relationships, self-esteem, autonomy, and life satisfaction, is a crucial determinant of healthy aging^[5]

While numerous studies have focused on physical health and morbidity among elderly individuals, limited attention has been given to psychosocial aspects, particularly among those residing in old age homes^[6,7] Understanding psychosocial well-being is essential for developing appropriate interventions and improving the quality of life of elderly residents. Hence, this study aims to assess the psychosocial aspects among elderly residing in selected old age homes of Pune city.

NEED OF THE STUDY

From a gerontological and nursing perspective, psychosocial well-being is an essential component of holistic elderly care. Addressing emotional, cognitive, and social needs is as important as managing physical health conditions. Nurses play a vital role in identifying psychosocial problems and implementing supportive interventions. Research focusing on psychosocial aspects provides evidence-based insights to improve institutional care and promote healthy aging.

In normal circumstances, elderly individuals often live with their families, which allows them to maintain social connections, feel supported, and actively participate in family life. This interaction helps them preserve their emotional well-being, cognitive functioning, and overall life satisfaction. However, due to changing family structures, urbanization, and social shift

many elderly are now residing in old age homes where they experience reduced social interaction, feelings of isolation, and dependency on others for daily needs.

Previous studies have shown that elderly living in institutional settings often face higher levels of depression, cognitive impairment, and lower life satisfaction compared to those living with family.

Pandey, Neetu (2021) explored the psychosocial needs, psychological well-being, and hope among both institutionalized and non-institutionalized elderly. The study found that elderly individuals in old age homes often felt isolated, more dependent on others, and reported that the care and facilities provided

were insufficient to meet their needs.

Porwal, Khushboo (2020) studied the psychosocial determinants of cognitive function among elderly people in both old age homes and family settings. The research focused on aspects such as depression and life satisfaction. Findings indicated that elderly residents of old age homes experienced more cognitive impairments, higher levels of depression, and lower life satisfaction compared to those living with their families.

Srisailamian, M. (2019) conducted a study on the psychosocial determinants of depression among community-dwelling elderly. The study examined the influence of various socio-demographic variables and observed the levels of depression in elderly individuals living independently within the community.

Shirly and Irom (2014) conducted a descriptive study on psychosocial problems of the elderly. The study found that health-related issues were the main concern, leading to high expenses on medical care. Aging increased dependency on spouses and family, especially in performing daily activities. Reduced physical abilities and health problems also burdened family members. Social circles shrank, causing feelings of loneliness and isolation, particularly among widows and widowers. Government services were minimal, and cultural norms created stigma around staying in old age homes. Despite their challenges, most elderly preferred to remain with family.^[4]

Makwana (2021) in "Understanding Psychosocial Dimensions of Geriatric Patients" emphasized that elderly individuals often face psychosocial difficulties such as loneliness, depression, anxiety, and social isolation, which affect their health and recovery. The study highlighted that these issues contribute to increased morbidity, longer hospital stays, readmission, and functional decline. Social factors like marital status, social support, grief, and integration also play a major role in elderly well-being. The author recommended a comprehensive geriatric assessment that includes psychological, social, emotional, and functional dimensions along with medical care to ensure holistic management of older adults.

AIM OF THE STUDY

To assess the psychosocial aspects among elderly residing in selected old age homes of Pune city and to determine the association between psychosocial aspects and selected demographic variables.

RESEARCH OBJECTIVES

1. To assess the psychosocial aspects among elderly residing in selected old age homes of Pune city.
2. To find out association of psychosocial aspects with demographic variables among elderly residing in selected old age homes of Pune City.

RESEARCH METHODOLOGY

Research Type

A quantitative, non-experimental exploratory research design was adopted.

Research Sample And Size

The study was conducted in selected old age homes of Pune city. The sample consisted of 200 elderly individuals aged 65 years and above,

Sampling Technique

Selected using non-probability purposive sampling. Data were collected using a validated self-structured questionnaire assessing psychosocial aspects.

Validity

Content validity index was 0.96.

Reliability And Pilot Study

Reliability was established using the split-half method ($r = 0.85$). A pilot study was conducted and found feasible.

RESULTS

Analysis of data related to association between demographic variables and psychosocial aspects

Section I: Description of samples living in selected old age homes based on demographic variables.

This section presents the demographic characteristics of 200 elderly residents living in selected old age homes. With regard to age, the largest proportion of respondents belonged to the 70–79 years age group (46.5%), followed by 60–69 years (28%), 80–89 years (24%), and 90 years and above (1.5%). In terms of gender, males constituted 61% of the sample, while females accounted for 39%. Regarding marital status, 59.5% of the respondents were married and 40.5% were widowed. Concerning educational status, 58% had completed higher secondary education or graduation, 37.5% had secondary education, and 4.5% had primary education. With respect to occupation, 42% were skilled workers, 29.5% were professionals, and 28.5% were homemakers. Regarding pension status, 54% of the respondents were not receiving a pension, whereas 46% were pension beneficiaries. The duration of stay in old age homes showed that 34% had stayed for 1–2 years, 33.5% for ≤ 6 months, 20% for 3–4 years, and 12.5% for ≥ 5 years. Before admission to the old age home, the majority of respondents (81%) were living with their families, while 9.5% were living alone and 9.5% were living with others.

Section II: Psychosocial Score Distribution.

This section presents the overall psychosocial wellbeing scores of 200 elderly residents living in selected old age homes. The findings revealed that 1% of the respondents had very low psychosocial wellbeing, 2.5% had low psychosocial wellbeing, 38.5% had moderate psychosocial wellbeing, 42.5% had high psychosocial wellbeing, and 15.5% had very high psychosocial wellbeing. The highest proportion of respondents was observed in the high psychosocial wellbeing category (42.5%), followed by the moderate category (38.5%). A smaller proportion of respondents demonstrated very high psychosocial wellbeing (15.5%), whereas only a few respondents were categorized as having low (2.5%) or very low (1%) psychosocial wellbeing. Overall, the results indicate that the majority of elderly residents had moderate to high levels of psychosocial wellbeing.

Association

The association between selected demographic variables and psychosocial score among elderly residents using the chi-square test. No statistically significant association was found between psychosocial score and age group ($p = 0.7535$), gender ($p = 0.9407$), marital status ($p = 0.3621$), education ($p = 0.7841$), previous occupation ($p = 0.3624$), pension status ($p = 0.5624$), duration of stay ($p = 0.2500$), or previous living arrangement ($p = 0.9666$). For all variables, the calculated chi-square values were lower than the corresponding table values, and the p values were greater than 0.05, indicating that none of the selected demographic variables had a statistically significant association with psychosocial score among the study participants.

DISCUSSION

The present study assessed psychosocial aspects among elderly residing in selected old age homes of Pune city and revealed that most elderly residents had moderate to high psychosocial wellbeing. These findings suggest that institutional environments may positively influence emotional and social health among elderly individuals. Factors such as structured routines, peer interaction, caregiver support, and availability of basic facilities may have contributed to improved psychosocial adjustment among the residents.

Similar findings were reported by Nagarajoo M, Salunkhe A, and Deshmukh J in their study on quality of life among elderly residing in old age homes in Pune city. The researchers observed that supportive surroundings and regular social

interaction contributed positively to the well-being of elderly individuals. Their findings support the present study by emphasizing the importance of emotional support and institutional care in maintaining psychosocial health.

The dissertation titled Psychosocial needs, psychological wellbeing and hope among institutionalized and non-institutionalized elderly people in Uttarakhand also reported that elderly individuals living in institutions showed better emotional adjustment when social support and recreational activities were available. Similarly, the dissertation Psychosocial determinants of depression among community dwelling elderly highlighted that lack of emotional support and social isolation increased the risk of depression among older adults, whereas social engagement improved psychological well-being.

Further support is provided by Seeman TE, Lusignolo TM, Albert M, and Berkman L, who reported that social relationships and social support significantly influence psychological and cognitive health among elderly individuals.

The present study also found no significant association between psychosocial well-being and demographic variables, indicating that environmental and institutional factors may play a more important role than personal characteristics in promoting psychosocial health among elderly residents.

CONCLUSION

The study concludes that the majority of elderly residing in selected old age homes of Pune city exhibited moderate to high psychosocial well-being. The findings indicate that institutional support systems, peer relationships, and structured daily routines contribute positively to psychosocial health and help elderly residents maintain emotional stability, social interaction, and a sense of belonging within the institutional environment. The presence of supportive caregiving practices and opportunities for communication and participation in daily activities may also play an important role in improving psychosocial well-being among the elderly population residing in old age homes.

No significant association was found between psychosocial aspects and demographic variables, emphasizing that psychosocial well-being is largely influenced by the quality of institutional care rather than individual demographic characteristics. This highlights the importance of creating a supportive, safe, and socially engaging environment for elderly residents irrespective of their age, gender, educational status, or other demographic factors. Strengthening psychosocial support services within old age homes through counseling services, recreational activities, emotional support, and social engagement programs can further enhance the quality of life, mental well-being, and overall

satisfaction of elderly residents living in institutional settings. The study also emphasizes the need for continuous monitoring and improvement of psychosocial care services to support healthy and dignified ageing among elderly residents

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest related to this study.

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