
RELATIONSHIP OF SOCIO-ECONOMIC STATUS (SES) WITH DEPRESSION OF SENIOR CITIZENS OF HIMACHAL PRADESH AND UTTAR PRADESH STATE



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ABSTRACT

The main objective of the study was to know the relationship of Socio-Economic Status (SES) with Depression of Senior Citizens of Himachal Pradesh and Uttar Pradesh State. 2000 senior citizens were selected on the bases of simple random sampling method, viz: 1000 of each state. The study was conducted by using the Standardized Questionnaire for data collection i.e: Zung Self-Rating Depression Scale (SDS). Percentage and Chi Square method was used to analyze the data. On the basis of statistical analysis briefly concluded that senior citizens of Himachal Pradesh and Uttar Pradesh State differed significantly in respect to their socio-economic status and depression level.

Keywords: Socio-Economic Status, Depression, Senior Citizens, Himachal Pradesh & Uttar Pradesh State.

INTRODUCTION

The Socio-economic status denoted the sub-group to which an individual belongs in the Society. Each sub-group has its own typical sub culture with emphasis on different values, morals, ideas etc. For instance, educationist all over the world have found low aspiration level for educational achievement in the lower Socio-economic strata as they do not get ideal images for educational attainment from adults in their immediate social environment. They lack facilitation to make optimum use of educational opportunities and they have lower expectations of educational outcomes. Kulcinki (1945) pointed out that the relationship between intelligence and the learning of fundamental muscular skill was very quick and significant. (Thomas 1970) found that there was relationship between physical fitness and Socio-economic status, (Young, 1970) conducted the study on personal social adjustment, physical fitness, attitude towards physical education of high schools girls by social economic level for that he used AAHPER physical fitness test to measure physical fitness and found no significant difference between Socio-economic groups with reference to physical fitness. (Davis 1970) found that physical fitness was not infused by Socio-economic Status. Caroline T.M. et al (2000): The aim of the study was to describe the relationship between socioeconomic status and mortality in Dutch

elderly people. Methods: A prospective follow-up study was performed among 4,878 women and 3,105 men aged 55 years and over living in Ommoord, a district of Rotterdam, the Netherlands. At baseline, data on education, occupation and income were collected. Data on mortality were obtained from the municipal population registry and general practitioners. Relative risks of mortality by indicators of socioeconomic status were estimated after an average follow-up period of 4.1 years. Separate age-adjusted analyses were performed for men and women. Results: The findings in this study indicate that for men (mean age at baseline of 69 ± 9 years), differences in mortality exist for all three indicators of socioeconomic status. Mortality risks were higher for lower educated men, unskilled manual workers and those with a lower equivalent household income. For women (mean age 72 ± 10 years), the relative risks of mortality were also higher for lower educated groups, but lower equivalent household income and occupational status appeared not to be related to mortality. Conclusions: In elderly Dutch people, there are clear differences in mortality across groups of different socioeconomic status. The mechanisms for explaining the apparent inequalities in health among older subjects require further research. **Leone et al (2012):** Non-communicable diseases account for more than 50% of deaths in adults aged 15–59 years in most low income countries. Depression and diabetes carry an enormous public health burden, making the identification of risk factors for these disorders an important strategy. While socio-economic inequalities in chronic diseases and their risk factors have been studied extensively in high-income countries, very few studies have investigated social inequalities in chronic disease risk factors in low or middle-income countries. Documenting chronic disease risk factors is important for understanding disease burdens in poorer countries and for targeting specific populations for the most effective interventions. The aim of this review is to systematically map the evidence for the association of socio-economic status with diabetes and depression co morbidity in low and middle income countries. The objective is to identify whether there is any evidence on the direction of the relationship: do co-morbidities have an impact on socio-economic status or vice versa and whether the prevalence of diabetes combined with depression is associated with socio-economic status factors within the general population. To date no other study has reviewed the evidence for the extent and nature of this relationship. By systematically mapping the evidence in the broader sense we can identify the policy and interventions implications of existing research, highlight the gaps in knowledge and suggest future research. Only 14 studies were found to analyse the associations between depression and diabetes co morbidity and socio-economic status. Studies show some evidence that the occurrence of depression among people with diabetes is associated with lower socio-economic status. The small evidence base that considers diabetes and depression in low and middle income countries is out of step with the scale of the burden of disease. **Munir et al (2005):** The present study was an attempt to probe into the socio-economic factors which influence the socio-economic,

psychological and health problems of senior citizens: A study of urban male senior citizens. The study was conducted in two colonies of Faisalabad. A sample of 120 male senior citizens was randomly selected from two colonies. According to this study, majority i.e. 89.2 percent of the respondents reported that they were respected. A huge majority i.e. 97.5 percent were in favor of the view that welfare homes should be established for the aged person. A vast majority i.e. 97.5 percent of the respondents said that special services were needed for the aged persons.

OBJECTIVE

The main objective of the study was to know the relationship of Socio-Economic Status (SES) with Depression of Senior Citizens of Himachal Pradesh and Uttar Pradesh State.

DESIGN OF THE STUDY

2000 senior citizens were selected on the bases of simple random sampling method, viz: 1000 of each state. The study was conducted by using the Standardized Questionnaire for data collection i.e: Zung Self-Rating Depression Scale (SDS). Percentage and Chi Square method was used to analyze the data.

DATA ANALYSIS

Table No: I

Table showing the Relationship of Socio-economic Status (SES) with Depression of Senior Citizens of Himachal Pradesh and Uttar Pradesh State

Depression Category	SES Category									
	Upper		Middle		Lower Middle		Upper Lower		Lower	
	H.P.	U.P.	H.P.	U.P.	H.P.	U.P.	H.P.	U.P.	H.P.	U.P.
High	8 (16.33)	19 (23.75)	16 (15.69)	56 (28.72)	49 (12.47)	54 (14.21)	33 (12.99)	39 (17.33)	27 (13.37)	17 (14.17)
Average	23 (46.94)	49 (61.25)	55 (53.92)	110 (56.41)	225 (57.25)	233 (61.32)	119 (46.85)	127 (56.45)	103 (50.99)	83 (69.16)
Normal	18 (36.73)	12 (15)	31 (30.39)	29 (14.87)	119 (30.28)	93 (24.47)	102 (40.16)	59 (26.22)	72 (35.64)	20 (16.67)
Total (N)	49	80	102	195	393	380	254	225	202	120
(χ^2)	8.087		12.751		3.353		10.527		13.829	

Figure in parenthesis indicates the percentage of significance df. = 2, tab. = 5.991 at 0.05 level

The above table shows that senior citizens of both states having different socio economic background in majority showed moderate depression level.

The upper lower class (40.16%), upper class (36.73%) and lower class (35.64%) senior citizens of Himachal Pradesh reported normal depression level than middle (30.39%) and lower middle (30.28%) respectively. In Uttar Pradesh the highest percentage of senior citizens having normal depression were found in upper lower (26.22%) and lower middle (24.47%) class, while the percentage of normal depression is noted averagely around 15% in other classes. The percentage of highly depressive senior citizens (28.72%) is found more in middle class followed by upper class (23.75%) of Uttar Pradesh, while in Himachal. The percentages of highly depressive individual are ranging from 12.99 to 13.37% in lower middle, upper lower and lower classes except upper class. The maximum figure of highly depressive person in Himachal is found 16.33% in upper class and 15.69% in middle class. The calculated chi square of lower middle class 3.353 is found less than the tabulated value at 0.05 level of significance, which concludes that senior citizen of upper class of both states do not differ significantly in respect to depression. Table also concludes that senior citizens of upper class, middle, upper lower and lower class of Uttar Pradesh and Himachal Pradesh differed significantly in respect to depression, as the calculated square 8.087, 12.75, 10.257 and 13.289 respectively is found significant at 0.05 level of significance.

Graph: I- Showing the percentage of Depression Level of Senior Citizens having different Socioeconomic Strata of Himachal Pradesh and Uttar Pradesh

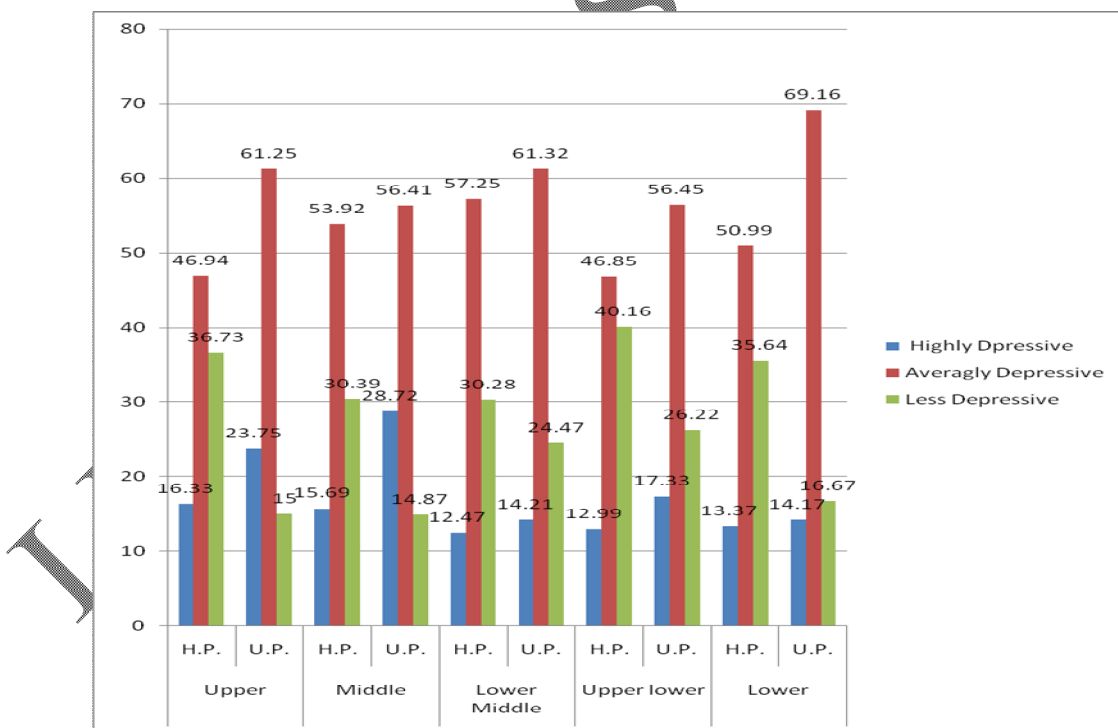


Figure- I

FINDINGS OF THE STUDY

The followings were the main findings of the study:-

- The upper lower class (40.16%), upper class (36.73%) and lower class (35.64%) senior citizens of Himachal Pradesh reported normal depression level than middle (30.39%) and lower middle (30.28%) respectively.
- The percentage of highly depressive senior citizens (28.72%) is found more in middle class of Uttar Pradesh followed by upper class (23.75%), while in Himachal the percentages of highly depressive individual is ranging from 12.99 to 13.37% in lower middle, upper lower and lower classes except upper class.
- The senior citizen of upper class of both states does not differ significantly in respect to depression, as chi square of lower middle class 3.353 is found insignificant.
- The senior citizens of upper class, middle, upper lower and lower class of Uttar Pradesh and Himachal Pradesh differed significantly in respect to depression, as the calculated square 8.087, 12.75, 10.257 and 13.289 respectively is found significant at 0.05 level of significance.

CONCLUSION

On the basis of above findings and conclusions it can be briefly concluded that senior citizens of Himachal Pradesh and Uttar Pradesh State differed significantly in respect to their socio-economic status and depression level.

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