RESEARCH ARTICLE

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Adjustment problems among elderly : A comparative study

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ABSTRACT

The effectiveness of the individual's effort to meet his needs and adapt to his environment is called adjustment. It is a process by which individual tries to bring harmony, stable and satisfying relationship with his environment. Aging is a natural phenomenon that refers to changes, which occur during the life span and results in differences in structure and function between the youth and the elderly. Old age is the stage of life, when problems increase manifold. Present study is an attempt to analyse the problems of aged. The study was conducted on 40 elderly males and females in the age group of 65-75 years. Shamshad-Jasbir old-age adjustment inventory was used to assess the adjustment problems of the elderly in the areas of health, home, social, marital, emotional and financial. Selected elderly belonged to middle socio-economic status families and were leading a retired life. Significant differences existed between males and females elderly with regard to various adjustment problems.

KEY WORDS : Adjustment, Problems, Elderly

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INTRODUCTION

Adjustment as an achievement means how efficiently an individual can perform his duties in different circumstances, it is concerned with the individual's ability to cope effectively with his environment. The term 'adjustment' has two meanings. In one sense, it is a continual process by which a person varies his behaviour to produce a more harmonious relationship between himself and his environment, the direction of his efforts may be toward modifying his own behaviour and attitudes or toward changing the environment or both. In other sense, adjustment is a state, *i.e.* the condition of harmony arrived at by a person whom we call "well adjusted" (Agarwal, 2003).

The word "Adjustment" has been described in many ways by different psychologists, biologists, mental hygienists and other behavioural scientists. The "effectiveness of the individual's effort to meet his needs and adapt to his environment" is called adjustment (Coleman, 1960). Adjustment is a process by which individual tries to bring harmony, stable and satisfying relationship with his environment. By this process, the individual alters his impulses and responses to fit the demands of his environment. A good adjustment always aims at long-term satisfaction instead of satisfying an immediate intense need. He has control on impulses, thoughts, habits, emotions and behaviours in terms of self imposed principles or of demands made by the society. He enjoys a normal life, which is free from depressions, tensions, fears, acute anxiety, hostility, sense of guilt, insecurity, disruption of thought etc. to a great extent. In short, it can be said that his behaviour is not disturbing to himself and to the people around him (Sultania *et al.*, 2010).

Aging is a natural phenomenon that refers to changes, which occur during the life span and result in differences in structure and function between the youth and the elderly. Traditionally the term elderly has been referred to people who have attained certain age chronologically. Aging is an inevitable process in which physiological, emotional and mental changes are observed in declining form. It is also known as closing period of life span. It is "moving away" from more, desirable period. Aging is a toilsome treadmill grinding to a tragic halt as the years pile up. It is a life spanning process of growth and development running from birth to death. It is generally associated with decline in the functional capacity of the organs of the body due to

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physiological transformation. According to Aeri and Sharma (2001), old age means physical liability, declining mental ability, the gradual giving up of role in social activities and a shift in economic status and moving from economic independence to economic dependence on others for support.

Adjustment during old age is difficult because of the limited capacity of the old and their diminishing energy and declining mental abilities. Health conditions affect adjustment in old age. Due to health problems, older people suffer social losses by loss of work associates, death of relatives, friends, spouse etc., which restrict their participation in social activities. Problems of aged have arisen due to breakdown of traditional social network and changing value system (Prasad, 1991). Retirement makes aged economically dependent. In old age, psychological problems arise due to death of spouse. Elderly feel loss of relationships as for them retirement is loss of contract with coworkers. Sharma and Singal (1987) reported that the acute problems faced by the aged pertain to financial stringency, withdrawl from the mainstream of the society and the feeling of uselessness, segregation from younger generation, poor health and slow cognitive functioning.

Old age is the stage of life, when problems increase manifold. Developing countries have witnessed a steep increase in the population of old people due to improved medical facilities. This system has stressed the traditional system of old age care. An attempt has been made in this paper to analyse the problems of aged with the following objectives:

- To study the health, home, social, marital, emotional and financial adjustment problems of elderly.

- To compare the adjustment problems of male and female elderly living in the nuclear and joint families.

METHODOLOGY

Sample:

The present study was conducted in Ludhiana (Punjab). The sample consisted of 40 elderly (21 males and 19 females) in the age group of 65-75 years. Fifty five per cent of the total sample was from joint families and 45% from nuclear families. Out of total sample, 77.5% respondents were living with their spouses, whereas 12.5% were without their spouses. Only those respondents were selected for the study who belonged to middle socio-economic status families and were leading a retired life. Shamshad-Jasbir old-age adjustment inventory (Hussain and Kaur, 1995) was used to assess the adjustment problems. The inventory measures problems of adjustment faced by elderly people in the areas of health, home, social, marital, emotional and financial. Socio-economic Status

Scale by Bharajwaj (2000) was administered to assess the socio-economic status of the elderly.

Procedure :

All the respondents were personally approached and were explained the purpose of the visit. Each and every question was made clear to them. They were assured that the information given by them would be kept strictly confidential. Thus, the study was completed and data were analysed to find out the results.

OBSERVATIONS AND DISCUSSION

Table 1 shows the differences in mean scores of various adjustment problems faced by elderly males and females. It is evident from the table that significant gender differences existed among males and females in case of financial and social adjustment problems. Females were facing more financial adjustment problems as compared to males whereas males were having more of social adjustment problems related to emotional, marital, home and health areas, but it is very much clear from the mean scores that elderly males were scoring better in all these areas as compared to their counterparts hence showing better adjustment and less adjustment problems.

Table 1 :	Differences	in mean	scores	of	adjustment among	
elderly males and females						

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Adjustment	Males $(n = 21)$	Females (n=19)	t-value			
problems	Mean±S.D.	Mean±S.D.				
Emotional	25.10±5.99	22.11±2.79	1.98			
Finance	20.95±5.01	16.68±2.45	3.36*			
Social	14.67±3.45	18.47±2.39	2.55*			
Marital	12.01±3.15	11.32±3.79	1.30			
Home	21.95±2.91	20.42±3.96	0.43			
Health	20.05±4.03	17.89±3.38	1.43			

* indicates significance of values at P=0.05

Table 2 demonstrates the differences in mean scores of adjustment problems experienced by elderly living in nuclear and joint families. Significant differences were found in the areas of emotional, financial and marital adjustment. Elderly living in joint families were having significantly better emotional and marital adjustment as compared to elderly living in nuclear families. On the other hand, elderly living in nuclear families reported better financial adjustment. In rest of the areas of adjustment *i.e.* social, home and health, non-significant differences were found. It is evident from mean scores that in these areas (social, home and health) elderly living in joint families

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Finance	20.95±5.01	16.68±2.45	3.36*
Social	14.67±3.45	18.47±2.39	2.55*
Marital	12.01±3.15	11.32±3.79	1.30
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 Table 2 : Differences in mean scores of adjustment across family type

were facing less adjustment problems as compared to elderly living in nuclear families.

Bose (1990) pointed out that the old people had feeling of being neglected by the society because nobody had the time to sit with them. Generation gap increases this gulf and increases the feeling of dependency. The aged had feeling of being neglected by the society and the members of the family as their children did not allow them to mix up with others. In old age, they feel they had become less active and due to their poor economic conditions they can't attend the social gatherings. Sarah (1980) stated that during the retirement period, the aged pass into a new social position with unique roles, expectation and responsibilities. This shift brings about an abrupt reduction in number of roles played and decline in status and standard of living.

The position of elderly is now framed by economic and social forces that tend to omit options for participation in society. The elderly were of view that their life is incomplete without spouse. The loss of spouse is an oppressing psychological problem. The aged depend more upon their spouse and they cared for their feelings. This long association and companionship of husband and wife develops into love and affection for each other in old age. Jayashree and Rao (1990) found that the older women whose spouses were living were found to be significantly better socially adjusted than the widows. The problems of emotional adjustment among elderly may be associated with the fact that normal aging do not provide opportunities to achieve a satisfactory emotional equilibrium involving a balance between inner needs and drives and external environment.

The generation gap creates differences between children and old parents, due to which children could not give respectable place to parents and parents too could not understand children's problem, that might have widened the gap between parents and children. This caused psychological imbalance for aged specially women. Rao (1975) studied the emotional problems of the aged and found that the aged persons suffered from psychological trauma like death of near and dear ones, fear of death, disappointments at sons and daughter's failure to live up to their expectations. Elderly living in joint family system and specially women were facing financial adjustment problems. The reason may be due to decreased income, less saving, more expenditure. They have divided their money and property amongst their children resulting in financial insecurity and had the feeling that there is not value without money. The above findings are inline with the observations made Desai (1988), who reported that the aged who have been working experience have more problems. Aged women continue to have some financial liabilities such as completing the education of their children and other social and religious obligations. Peterson and Balton (1980) emphasized that upon retirement, the elderly face difficulty in maintaining their self-image, self-esteem and self-motivation. Social security benefits and pensions were unable to keep up with rising prices. Singh and Sharma (1987) found that the economic problems of aged were followed by psychological, social and physical problems. Due to their poor economic conditions, they did not receive adequate quality and quantity of food, clothing and medical care. Shukla (2008) compared adjustment problems of institutionalized and non-institutionalized aged and concluded that institutionalized males and females have shown poor adjustment towards health, social, emotional, financial, home and marital areas as compared to noninstitutionalized aged.

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