ORIGINAL ARTICLE

# To Assess the Knowledge and Practice among Senior Citizens about Selected Geriatric Health Problem: A study 

T. Lakshmamma*, P. Sudharani*<br>College of Nursing, Sri Venkateswara Institute of Medical Sciences (Svims) University, Alipiri Road, Tirupati-517 507. A ndhra Pradesh, India.


#### Abstract

Ageing is a natural and an inevitable development phenomenon bringing along a number of changes in physical, psychological, hormonal and the social conditions. Health problems tend to increase with an advancing age and very often the problems appropriate due to neglect, poor socioeconomic status etc. A descriptive approach was chosen and 100 senior citizens were participated. The data was collected by structure questionnairewith an interview technique. The result reveal ed that out of 100 senior citizens 33(33\%) wereknown hypertensive's, 13(13\%) were hypertensive's but unawarethecondition and $11(11 \%)$ had systolic hypertension. A n overwhelming percentage (64\%) of senior citizens had below average knowledge followed by $32 \%, 4 \%$ average knowledgeand aboveaverageknowledge. A mong known hypertensive's $36 \%$ were maintained blood pressureunder control, and the rest $64 \%$ werehad uncontrolled blood pressure. Finally the study was shown that the significant association between the knowledge on hypertension and selected demographic variables likegender, occupation, and education ( $p<0.01$ ). It is important to create a caring society with an emphasis to improveawareness on hypertension management and prevention of complication. Community based supportive services for elderly should bedeveloped in partnership with public, privateand family member of senior citizens.


Keywords: Geriatric Problem; Senior Citizens; Systolic H ypertension.

## Background

The elderly are a precious asset for any country and their health and economic issues differ from thoseof thegeneral population and vulnerablegroup in the society. In India the elderly account for 7\% of the total population. By 2020, 10.4\% of population accounting to 142 million people 60 years old age will beliving in India[1].

Thecare of theelderly is drawing moreand more attention of the government and public. Themoreof peoplewith hypertension arise from 600 million in 1980 to nearly onebillion in 2008. Theprevalenceis significantly higher in geriatric population.

[^0]Worldwide, raised blood pressure is estimated to cause 7.5 million deaths about $12.8 \%$ of total of annual deaths[2].

Hypertension is the commonest cardiovascular disorder positioning a major public health challenge to population in socio-economic and epidemiol ogical transition. It is use of the major risk factor for cardiovascular disorder mortality which accounts for $20-60 \%$ of all deaths [3].

M orerecently Sir James Sterling Ross committed: you do not heal old age; you protect it, you promote it; you extend it. Theseare in fact the basic principles of preventive medicine. Chronic diseases like hypertension aremorepreval ent among older people than in younger people. The prevalence of hypertension and related complications including congestive heart failure, coronary artery diseases, stroke and end stage renal diseases rises sharply as a function of advancing age. The knowledge and
health beliefs of individuals can play a critical role in blood pressure control [4].

This present study attempts to assess the knowledge and practice among senior citizens and hyper tension. This information may help shape health care policy, education and research aimed at reducing the adverse consequences of hypertension in older population.

Theobjectives of thestudy were:

1. To assesstheprevalence of hypertension among senior citizens.
2. To assess the knowledge about hypertension among senior citizens.
3. To assess the practice of known hypertensive senior citizens.
4. To compare the knowledge of senior citizens with the selected demographic variables.

## M ethodology

A descriptive Research approach was adopted for thestudy.

Setting of theStudy
Thestudy was conducted in urban area, Tirupati, Chittoor District, Andhra Pradesh.

## SampleTechniques

100 Senior citizens were selected based on nonprobability purposivesampling.

Criteria for Selection of Sampling
SeniorCitizenswho areaged above60years bothmale and femalewho arewilling to participatein thestudy.

Description of Tool
The Structured questionnaire was developed by using both closed and open ended questions. The questions are constructed, based on the personal experiences during interaction with senior citizens, and fromreview of literatureand guidancefrom experts.

The questionnaire consists of 3 sections: Section-I, Section II, and Section III.

Section I: The Section-I consisted of sociodemographic data of the respondents such as age, gender, education, occupation and income and
family history and also included theBlood Pressure, measure for therespondent.

Section II: The Section-II questionnairecomprised
i. General information about hypertension
ii. Risk factors of hypertension
iii. Signs and symptoms of hypertension
iv. Prevention and control of hypertension
v. Complications of hypertension

Section III: Questions related to practicearea of the known hyper tensive senior citizens

## Pilot Study

Pilot study was conducted on 10 subjects and reliability was computed by applying the split half method, using Karl Pearson Coefficient of correlation, it cameout to ber $=0.96$ and tool was highly reliable.

## Results

Table 1: Prevalence of hypertension among senior citizens

| S.No | Variable | Frequency | Percentage |
| :---: | :---: | :---: | :---: |
| $\mathbf{1}$ | Known cases <br> hypertensives <br> $\mathbf{2}$ | New cases of <br> hypertension | 13 |
| $\mathbf{3}$ | Cases of <br> systolic <br> hypertensives | 11 | $33 \%$ |

Table 1 shows that out of 100 senior citizens the known hypertensives were 33 percent followed by 13 percent and 11 percent werenew cases of hypertensions and cases of systolic hypertensions. The overall prevalenceof hypertension among participants of the study was 57 percent which shows higher prevalence of hypertension among senior citizens.


Fig. 1: Comparison of knowledge with gender
Revealed that thefemalerespondents of study had poor knowledge 77.4\%, when compared to their counter of part of malehad $50 \%$ averageknowledge on hypertension.


Fig. 2: Comparison of knowledge with education
Significance difference found with educational status. Higher educational status secondary education increased the level of knowledge. ( $\mathrm{c}^{2}=$ $39.53, \mathrm{df}=10, \mathrm{p}<0.01$ ).


Fig. 3: Comparison of knowledge with occupation
Respondents of senior citizens as labor / housewife had poor knowledge when compare to Rtd. Employees and business holder. It is interesting to notethat Rtd. Employees had good knowledgeon hypertension ( $\mathrm{C}^{2}=18.57$, $\mathrm{df}=6 \mathrm{p}<0.01$ ).


Fig.4: Piediagram on practiceof known Hypertensivesenior citizens
65\% of respondents followed dietary restrictions and the rest arenot bothering the dietary and other practiceto control thehypertension.

## Discussion

The present study revealed that there was a significant association between some of the demographic variables has gender ( $p<0.01$ ), occupation ( $p<0.01$ ) and education ( $p<0.01$ ).

Hence the framed hypothesis for this study was accepted that thereis significant association between levels of knowledge with selected demographic variables of senior citizens.

The present was supported by a cross sectional analysis conducted by Janusz kacorowski at UK reported $47 \%(463 / 983)$ older people had poor awareness on hypertension and its related risk factors. Only $26.9 \%$ (87/ 323) had good knowledge on hypertension and its risk factors.

## Conclusion

Health in its concept signifies physical, mental, social and spiritual well being. As we all know the physical health remains one of the essential components, to sustain the physical health all aspects of it have to betaken care of. Dedine in physical and mental ability is generally associated with advanced age High blood pressureisamanifestation of structural and physiological abnormalities of cardiovascular system and theprevalenceof hypertension rises as the population growsolder. Thepur poseof thestudy was to assess the knowledge and practice among senior citizens about hypertension.

## Limitations of thestudy

$\checkmark$ Thescopeof thestudy was limited to only senior citizens.
$\checkmark$ The study was limited to only oneurban area of selected location.
$\checkmark$ Findings of the study cannot be generalized as the size of the sample is small.
$\checkmark$ Thestudy limited to socio-demographicfactors namely gender, age, religion, education, occupation, income, type of family.
$\checkmark$ The determined blood pressure for the study participants in the present study were based on the average of two measurement of blood pressuretaken during singlevisit only.

## Implications

Thefindings of thestudy haveimplications in the field of nursing practice, nursing education, nursing administration and nursing research.

## N ursing practice

> Nursing professionalsworking in thecommunity set up should educate regarding awareness on
hypertension among senior citizens to enhance their quality of life.
> Nursing professionals need to play a vital roleto create awareness about lifestyle modifications for older peopleto control their blood pressure and other clinical disorders.

## N ursing education

> As a nurse educator there are plenty of opportunities for nursing teachers to educatethe general public and family members of thesenior citizens regarding care taking, prevention of complications about cardiovascular disorder.
> Thestudy emphasis significance of short term education program for caretakers of theelderly peopleathomesetup.

## Nursing administration

> Nursing administration can take part in developing inflammation booklet / needs on hypertension and its controlling methods.
> A strategic lifestylemodifications and methods can be educated on hypertension related problems.
> Nursing administration can mobilize the availableresources planned towards conducting health talk on geriatric health problems for family members of senior citizens, so that the caretakers of senior citizens al so will beeducated and helps in maintaining the health of senior citizens.
> The nursing administration should plays and organizes health campaign on geriatric health problems and its control for senior citizens.
> Thenursing administrator should exploretheir practice.

## N ursing research

> This study helps nursing researchers to educate the senior citizens or older age group on age related health problems and its controlling
measures in community settings according to their demographic, socioeconomic and political characteristics.
> Nurses should comeforward to carryoutstudies on awareness program on geriatric health problems and publish them for the benefit of public and nursing fraternity. The public and privateagencies should also encourageresearch in this field through materials and funds.

## Recommendations

On the basis of thefindings of thestudy following recommendations have been made:
> A similar study can bereplicated on largesample to generalize the findings.
> A quasi experimental study can beundertaken with a control group for effectivecomparison of theresult.
> A study can beconducted by induding additional demographic variables.
> A comparativestudy can be conducted between rural and urban settings.
> Manuals, self instruction module may be developed which is self exploratory and useful for geriatric group.

## References

1. WHO Fact Sheet No: 135, Revised 2007.
2. HeFJ, MacGregor GA. A comprehensivereview on salt and health and current experience of worldwide salt reduction programs. J Hum H ypertens, 2009; 23: 363-84.
3. Brent M. Egan et al. A wareness, knowledge and attitude of older Americans about HBP implications for Health care policy, education, and Research US. Jama Internal Medicine.2003; 163(6): 681-687.
4. K.Park, Text Book of P.S.M., M/s Banarsidas Bhanot publishers, $18^{\text {th }}$ edition, 2005.

[^0]:    Reprint Request: P. Sudha Rani, Professor/ Principal, College of Nursing, Sri Venkateswara Institute of Medical Sciences (Svims) University, Alipiri Road, Tirupati-517 507. A ndhra Pradesh, India.

    E-mail: ssudha515@gmail.com

