



# Partnership in Development Research

# **Research Briefs**

No. 28

# Determinants of Physical and Psychological Health and Style of Life of the Elderly in Different Cultural Sectors in Egypt

### By: Dr. Gom'a Sayed Youssef

#### Introduction and research problem:

Physical and psychological health of the elderly is important because of its social value for old people. The better the health condition of the elderly, the more activities they are able to perform and the more their interaction with their neighbors, children and friends. This extends to include the general condition and feelings of the elderly and their psychological welfare in particular. It is also important to note that the deterioration of physical health causes more problems for the elderly and society in general which consume a large portion of the income of the individual and the state.

The number of the elderly in societies differs across time and between industrial and developing societies. It also differs among individuals and groups within the same society. Indicators point out that the number of adults who live their third stage after retirement is increasing. They also show that old people have between 20 to 30 years during which they can exercise meaningful activities. The change in the population equilibrium of the different social groups points to the progress achieved in medical, health and social care which has led to increasing longevity and to increasing potential social and economic problems simultaneously.

## **Objectives:**

The study seeks to

1.Uncover the health needs of the elderly who live with their families and others who live in homes for the elderly.

2.Identify determinants of the health condition of the Egyptian elderly who live among their families and compare them to old folks homes. This covers a large network of determinants including demographic and psychological variables, and the objective aspects of health as well as the old people's perception of the support they receive.

3.Determine the problems faced by the elderly in their daily life.

4.Determine the style of life of the elderly (health habits)

5.Determine the health condition of the elderly among different age groups and social sectors

6.Design a rehabilitation program for the welfare of the elderly and for individuals responsible for looking after them.

# **Research Briefs**

#### Methodology:

The study applies a descriptive comparative approach as dictated by the nature of the independent variables. The dependent variables on the other hand required that they be controlled through contrasting the different samples of the study. The sample consists of 501 elderly persons of ages ranging between 50 and 99. The sample was divided into those who frequent clubs: 132 males and 176 females and a group of elderly who live in elderly homes including 76 males and 126 females. The sample was selected from the governorates of Cairo and Giza from seven clubs and retirement homes. The study instruments comprised the mental state scale, and the depression, anxiety and physical health scales.

#### Findings:

-The elderly who live with their families were better than those residing in retirement homes with respect to their physical health

-Women residing with their families were less functional than men. Women residing in retirement homes were more functional than those residing with their families. Women were better than men when it came to adopting the right health behavior.

-The elderly in general (males and females) who lived with their families were better off than those who lived in elderly homes with regard to their physical health.

-Elderly women irrespective of their place of residence looked after their health more and smoked less than the elderly men. Women were also less functional than men irrespective of their place of residence.

-There were no differences between the elderly males whether those who lived with their families or those who lived in elderly homes in all aspects of physical health. Blood pressure was higher among elderly males who lived with their families than those who lived in retirement homes. Elderly women, on the other hand, were more susceptible to high blood pressure.

-Physicians described the majority of elderly as enjoying good or average health. More elderly females than males did not have health insurance perhaps because they were not working women or because of lack of awareness.

-Some retirement homes did not offer health care

-In general the elderly who lived with their families fared better on the scale of mental performance than those who live in retirement homes.

-In general elderly males living in retirement homes suffered more than those living with their families with regard to anxiety and depression.

-Elderly males ranked higher on mental performance than elderly females while the latter were higher on anxiety and depression.

-Elderly males who lived in retirement homes fared better than women in mental performance, while elderly women living in retirement homes were higher in numbers compared to men in homes with respect to anxiety only and anxiety and depression combined.

-There were no differences between elderly men and women living with their families with regard to mental performance but there were differences in anxiety and depression leaning towards women.

-There were differences between the elderly in both retirement homes and those living with their families with regard to depression only and with respect to depression and anxiety together. Differences leaned towards the elderly in retirement homes.

# **Research Briefs**

-There were no differences between elderly women both those who lived in retirement homes or within their families with regard to anxiety or depression or anxiety and depression combined.

-The style of life greatly determined the physical health of the elderly. This was a personal attribute, in which the elderly man or woman played a role. e.g. abstain from smoking or go for regular medical check ups.

-Age, marriage and perception of social support have a strong role in the physical and psychological welfare of the elderly. -The determinants that were examined were highly predictive with regard to physical and psychological health. However, the order of the determinants differed from one sample to the other. Nonetheless, in general the determinants that ranked first for all samples included education, style of life in predicting physical health and education and social support in predicting psychological health. This points to the need to pay attention to these aspects and include them in programs for the improvement of physical and psychological health for the elderly.

-It is important to emphasize the differences in the determinants that can predict physical and psychological health among the elderly males and females who live among their families and males who lived in retirement homes.

#### **Recommendations:**

-It is essential to exert more efforts and pay more attention to the research on old age in order to provide a psychological and social data base for them

-Provide more care and services to the elderly as target groups and seek to solve their social and psychological problems

-Supervise retirement or elderly homes and regularly check the medical, health and social condition of the elderly.

-Provide services to identify the psychologically vulnerable groups among the elderly and avoid the aggravation of their condition

-Provide health care housing

and attend to the poor and those who are socially disadvantaged.

-Design awareness raising program to educate people on how to deal with problems of the elderly in order to avoid the shock of retirement and changes that accompany old age.

-Reduce the risks of old people's reliance on others by emphasizing the need to avoid harmful health practices and habits and pursue regular and organized activities. It is also important to raise public awareness about old age through TV and radio programs, and organize visits by sports experts who would introduce exercises for the old people in the open air.

## About the Author

Dr. Gom'a Sayed Youssef, Psychology Professor, Faculty of Arts, Cairo University.

## About the Program

The Egyptian Partnership in Development Research Program aims to inform development policies and strategies by linking those who conduct research with those who can utilize its findings to promote development in local communities. It promotes a research agenda which is responsive to the needs and priorities of local communities. The program is characterized by a multi-disciplinary, demand-driven, and participatory approach. The program began in Egypt in 1999. The program is directed by an Advisory Board of prominent members who are concerned with development issues.

### **About the Series**

The PDR Research Brief Series disseminates the results of research conducted under the auspices of the Partnership in Development Research Program funded by the Netherland Ministry of Foreign Affairs, Development Cooperation. It is currently operative in nine countries, Bangladesh, Bolivia, Egypt, Kerala-India, Mali, Nicaragwa, Tanzania, Uganda and Vietnam. The authors are solely responsible for the content of the Policy Briefs. Copies of the Briefs can be ordered from the Secretariat of the Program or through the Program's web site.

> Partnership in Development Research American University in Cairo Social Research Center 11th Floor ,Cairo Center 106Kasr Al-Aini Street Cairo-Egypt Tel: 00202-797-6959 Fax: 00202-795-7298 Email: pdr@aucegypt.edu Website: www.aucegypt.edu/pdr

P D R