Social Support and Quality of Life of Elderly at the Empty Nest Period: A Study with Special Reference to Elikkulam Grama Panchayat in Kottayam District

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Abstract: The UN defines a country as "Ageing" or "Greying Nation" where the proportion of people over 60 reaches 7 percent to total population. By 2011 India has exceeded that proportion (8.0 percent) and is expected to reach 12.6 percent in 2025. According to the SRS Bulletin published in the year 2012, Kerala has 11.8 % old age Male and 13.3% Female old age and total elderly population is 12.6% in 2011 in Kerala. Now it is increased. (Source: SRS Bulletin (Sample Registration System) October, 2012, Registrar General of India, New Delhi). According to data from the World Population Prospects: the 2017 Revision, the number of older persons — those aged 60 years or over is expected to more than double by 2050 and to more than triple by 2100, rising from 962 million globally in 2017 to 2.1 billion in 2050 and 3.1 billion in 2100. Globally, population aged 60 or over is growing faster than all younger age groups.

A man's life is normally divided into five main stages namely infancy, childhood, adolescence, adulthood and old age. In each of these stages, an individual has to find himself in different situations and face different problems. The old age is not without problems. In old age physical strength deteriorates, mental stability diminishes; money power becomes bleak coupled with negligence from the younger generation. Late adulthood is inevitable, inexorable. The glamorous youth comes and goes, never to return. But the old age stays until one breaths the last and it behaves us to accept the sunset years gracefully and live with dignity. Through these systematic changes that occur between conceptions to death, three main areas of development are affected, including changes in physical development, cognitive development, and psychosocial development.

In Kerala context, family system is deeply rooted with strong relationship between parents, children, relatives etc. But the 21st century witnessing a vital issues in family relationships with old age parents and children. When the educated youth are not able to work in the homeland or the unavailability of jobs, lead them to trust in other countries. When the last child leaves the home for further study or job in abroad or live apart from the parents, literature shows that, they may feel it difficult to adjust with these situation. The present paper deals with the quality of life and social support of elderly people at the Empty Nest period with special reference to Elikkulam Gram panchayat which is in the heart of Kottayam district, Kerala.

The main objective of the study was to know the quality of life and social support of the Empty Nest people when the last child leave the home. The specific objectives were to study the association between the health and social support, social support from family and friends, how overall social support leads to quality of life and how the empty nest people look their life overall. If the Empty Nest people has low quality of life and social support, how they adjust with this situation. Whether they rely on any support system in society or know any senior citizen centres or adult centres help them to relax from the situation.

Key Words: Old Age, Quality of Life, Social Support, Empty Nest

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1. Introduction

The ageing process is of course a biological reality, which has its own dynamic, largely beyond human control. The age of 60 or 65, roughly equivalent to retirement ages in most developed countries, is said to be the beginning of old age. Thus, in contrast to the chronological milestones which mark life stages in the developed world, old age in many developing countries is seen to begin at the point when active contribution is no longer possible. The population of seniors in India has grown from 3.3 percent in 1950 to 7.6 percent in 2000. Government of India adopted 'National Policy on Older Persons' in January, 1999. The policy defines 'senior citizen' or 'elderly' as a person who is the age of 60 years or above (GK, 2013). By 2020, it is projected that three-quarters of all deaths in developing countries could be ageing-related. 16 % of the world's elderly population will be in India (India, nd). Kerala adds one million elderly every successive year since the census of 1981.The State estimated to reach 20 per cent in the next ten years, so the government is getting ready to prepare its offices and employees to become more senior citizen friendly. As part of the initiative, a mass awareness program related to dealing with old persons will be launched in all government, quasi and co-operative sector offices in the state on October 1, the International Day of Older Persons (PTI, Business Standard, 2014).

Life of elderly is deeply affected by their health factors, which in turn contribute to their functional autonomy or their functional status. A proper care provided to them can automatically rise up their quality of life and social support in empty nest period. Social support system decline can negatively affect the quality of life of the elderly, in that it compromises both their autonomy and their independence. Good Health is a crucial factor for elderly to maintain their role in society, which leads to have a better quality of life at their old age. Quality of life was defined in 1994 by the World Health Organization, Quality of Life (WHO-QOL) as an individual perception of the position in life in the context of the cultural system and values in which people live and related to their goals, expectations, norms and concerns. Regarding the elderly, the concepts of quality of life presented in the literature are also characterized by their multidimensionality, that is, they take into account functional capacity, emotional, psychological and sexual well-being, social support, satisfaction with Life in general, the perception of health status, among others. (Ermelinda, 2017) . When comparing the social support system and quality of life of the elderly in our society and family set ups, those living without their children, there is a considerable amount of differences that could be observed. Ageing of the population along with changes in the family structure and shifts in intergenerational relations has brought into focus issues pertaining to health status across all domains, which in turn reflect the quality of life of elderly in India (Praveen, nd).

The New Indian Express published in 2014 shows that the major population of Kerala is growing old compared to other states in India. S Irudaya Rajan and U S Mishra mention that the older age group is expanding compared to the younger age group and Kerala is increasing the case of elderly population every successive year. Kerala state planning board report (in surviving a lonely evening, 2011) caregivers are given responsibility for looking after the elderly in most of the families (Mishra, 2014). It is because

children work outside the state or country. This increases the day care centers and old age homes. The highest number of old age homes in Kerala is in Trissur (82), Ernakulum has (33) and Kottayam has (27). About 6% of the elderly is living alone in Kerala and it increases with in few years. The elderly who are living alone face many psychological issues like problem of coping with retirement, death of partner, loss of income, lack of independence, children leaving the home etc. Due to loneliness their emotional imbalances leads to suicide. Social support system is very important among elderly otherwise they will be isolated and will feel lonely. Lonely and isolated elderly people have a high risk of physical and mental decline, and will die faster. Psychological and physical wellness will be affected due to lack of social support system. The social support system plays an important role in the empty nest period of elderly and it will affect the quality of life. The young generation doesn't care about the elderly who have sacrificed their whole life for upbringing them. Many of them are placed in institution or left in their homes. The condition of the elderly is not good as they have no one to give them affection and love.

Empty Nest period is a phenomenon in which parents experience feelings of sadness and loss when the last child leaves home. Parents might find it difficult to have no children at home who need children's care and support. In empty nest period the elderly face many problems like health issues, financial problems, changing society and social norms, in home-trauma and isolation etc.

Empty Nest can leads to,

- Depression
- Persistent sadness
- A feeling of loneliness
- Uselessness
- Empty Nest in married life

From the journals, articles and field experience social work trainee came to know that by increasing the social support and the quality of life can be increased among the elderly to make them productive. Then the empty nest will not be lonely or isolated. Old age is the growing area and it should be consider in a systematic way and make them productive.

2. Research Methodology

Empty Nest is a stage, when parents feel with the absence of their children. It can influence individual's health, ability to maintain social relationships, and decreases their Quality of Life. Social Support is meaningful because it is essential for Empty Nest people as well as enhancing their Quality of Life. The study was conducted among the elderly people living in the Elikkulam Gram Panchayat age group of 55 to 70 years. Elikkulam Gram panchayat is situated in the heart of Pala Ponkunnam state highway road in the Kottayam district. This area has more number of old age people live alone in their home due to the reason of job seekers in abroad and many other family issues. This panchayat has 3 old age homes with lot of old age people. In this research Quantitative approach and Descriptive research design were followed. For the study, the researcher used probability sampling and simple random

sampling method. Both the self-made questionnaire and the rating scale were used for collecting data. First of all the researcher found out the old age people who live without their children in the panchayat.

The researcher used self-prepared questions to collect data on socio demographic status of respondents. In order to collect the data regarding social support system, the researcher used The Lubben Social Network Scale. There are 12 items in the scale divided into two dimensions such as family and friends. According to the scale, as the point increases, social support system increases.

In order to collect the data regarding quality of life, the researcher used older people's quality of life by using the scale of A. Bowling, St George's University of London & Kingston University. There are thirty five items in the scale divided into eight dimensions such as life overall, health , social relationships, independence, control over life, freedom, home and neighborhood, psychological and emotional well –being, financial circumstances, leisure activities. According to the scale, as the point increases the quality of life increases.

Table No 1

Socio – Demographic Details of the Respondents

No	Subject	Frequency and percentage (N=40)
1	Age of the respondent	60-65 years old: 8 (20%) 66-70 years old: 24 (60%) 71-75 years old: 8 (20%)
2	Gender	Male: 18 (45%) Female: 22 (55%)
3	Education	LP: 2 (5%) UP: 8 (20%) High School: 20 (50%) Higher Secondary: 10 (25%)
4	Occupation	Working: 8 (20%) Not working: 32 (80%)
5	Religion	Hindu: 20 (50%) Christian: 20 (50%)
6	Cast of the respondent	SC: 8 (20%) ST: 2 (5%) General: 22 (55%) OBC: 8 (20%)
7	Annual income of the respondents	Below-50000: 22 (55%) 50000-100000: 16 (40%) Above-100000: 2 (5%)

The demographic profile is an aid to an integral understanding of the personal details of a respondent. In this study the age of the respondents is between 60 and 75 and they are divided into three groups such as 60-65 which consists of 8 respondents, 65-70 which includes 24 respondents and 70-75 which comprises 8 respondents. Both male and females gender are selected for the study. The respondents are having different education qualification that is from LP to PG. Though the respondents are from two religions –Hindu and Christian- different castes are included such as SC, ST, General and OBC. The income level of the respondents is between 50000 and 100000.

3. Analysis and Interpretation

The collected data is analysed and depicted in tables according to the objectives of the study. Interpretation of the findings was done to answer the research questions and Statistical Package for Social Sciences (SPSS) is used for the analysis. The analysis includes the socio-economic and demographic details of the respondents and also their response to the questions framed for the attainment of the research objectives.

Table No 2

Gender and Social Support of the Respondents

Gender	Social Support			Total
	Less	Moderate	High	
Male	6(33.33%)	8(44.4%)	4(22.2%)	**18(100%)**
Female	4(18.2%)	6(27.3%)	12(54.5%)	**22(100%)**
Total	**10(25%)**	**14(35%)**	**16(40%)**	**40(100%)**

Social support is one of the components for the effectiveness of the Empty Nest period which has two dimensions such as family and friends. In this study the level of the respondents' social support was measured and the result was the 54.5% of the female respondents testified the high level of social support, whereas only 22.2 % of the male respondents reported the high level of social support. 44.4 % of the male respondents disclosed that, they have moderate level of social support compare to the 27.3% of the female respondents.

Table No 3

A Comparison -Social Support Dimensions of the Respondents

Social Support	N	Minimum	Maximum	Mean	Std. Deviation
Family	40	13.00	20.00	**16.75**	2.19
Friends	40	12.00	20.00	**15.40**	1.82

Family and Friends are the two dimensions of Social support. The above table describes the comparison of those two dimensions and found out that the all respondents irrespective of gender get social support from the family (Mean Value -16.75) than the friends (15.40).

Table No 4

Gender and the Quality of Life of the Respondents

Gender	Quality of Life			Total
	Less	Moderate	High	
Male	4(22.22%)	12(66.66%)	2(11.11%)	**18(100%)**
Female	2(9.09%)	17(77.28%)	3(13.63%)	**22(100%)**
Total	**6(15%)**	**29(72.5%)**	**5(12.5%)**	**40(100%)**

The above table explains the level of quality of life for both male and female. As the table explains, 72% of the total respondents have moderate level of quality of life in which 66% of the male and 77% of the female respondents reported same level. Only 13.63% of the female respondents and 11.11% of the male respondents declared the high level of quality of life in their life.

Table No 5

Quality of Life of the Respondents

Dimension	N	Minimum	Maximum	Mean	Std. Deviation
Quality of Life	**40**	**114.00**	**157.00**	**125.55**	**11.31**

The table outlined the total level of quality of life on the basis of mean value. According to the table 157 is the maximum level of quality of life and 114 is the minimum level of quality of life. The mean value of the respondents for the measurement of the quality of life is 125.55 and so we can infer that there is a greater than the minimum level of quality of for the respondents in this study.

Table No 6

A Comparison – Dimensions of Quality of life of the Respondents

Dimensions	N	Minimum	Maximum	Mean	Std. Deviation
Social Relationship	40	6.00	15.00	**10.50**	2.83
Health	40	8.00	19.00	**12.75**	3.49
Leisure Activities	40	11.00	23.00	**18.60**	3.22

From the eight dimensions, the researcher selected mainly the three dimensions of quality of life such as social relationship, total health and leisure activities. Here the table compare the above mentioned dimensions and explains which one at the most level in the quality of life of the respondents. As per the present study, leisure activities reported the most higher level among the three dimensions in which the mean value is 18.60 and the rest of the two dimensions such as social relationship and health reported the moderate level in the quality of life.

Table 7

Age and Health Dimension of the Respondent

Dimension		Age of the respondent	Total Health
Health	Pearson Correlation Sig. (2-tailed)	1	.436 .004
	N	20	20

The table reveals the relationship between the health dimension and age of the respondent. Here we reject the null hypothesis because the P Value is 0.04 which is less than 0.05. So we accept the alternative hypothesis and say that there is a relationship between age and health dimension of the respondent.

Table No 8

Gender and Health of the Respondent

	Gender of the respondent	N	Mean	Std. Deviation	Sig
Health	Male	18	11.78	3.30824	1.10275
	Female	22	13.55	3.67052	1.10670

The table compares the gender and the health dimension of the respondent on the basis of mean value. According to the table the mean value of the female is 13.55 which is greater than the P Value of male which is 11.78. As per the table, the health level of the female respondents is high than the health level of the male respondents.

Table No 9

Health and Leisure Activities

		Total Health	Total Leisure Activities
Total Leisure Activities	**Pearson Correlation**	**1**	**.014**
	Sig. (2-tailed)		**0.04**
	N	**40**	**40**

The table shows the relationship between leisure activities and health of the respondents in relation to quality of life. Here the P Value is 0.04 which is less than 0.05, so we reject the null hypothesis by accepting the alternative hypothesis that there is a relationship between leisure activities and health.

4. Findings

Social Support

- As per the study 54.5% of the female respondents get high level of social support from the family and friends, whereas only 22.2% of the male respondents get high level of social support from the family and friends.
- 44.4% of the male respondents and 27.3% of female respondents get moderate social support from the family and friends.
- Comparing the dimensions of the respondents , family provides more social supports(Mean value16.75) than the friends provide(Mean value 15.40)

Quality of life

- 66.66% of the male respondents and 77.28 % of the female respondents have moderate level of quality of life 22.22% of the male respondents and 9.09 of the female respondents have less level of quality of life
- Measuring the total level of quality of life of the respondents ,the study revealed that all the respondents get minimum level of quality of life
- Comparing the tree dimensions of quality of life such as social relationship, health and leisure activities ,the respondents expressed that leisure activities have the prominent role to play in their life
- Statistical test revealed that though there are variations in the mean value of different dimensions of social support and quality of life ,there is no significant relationship and difference in the above mentioned dimensions

Some of the common findings from the study are,

- Some of the parents are enjoying this period as their second honeymoon.
- Some old age people are engaged in social activities while others are limited to the boundaries of their dwellings.
- People who have less social relation are lack in quality of life
- There is a strong relationship between Education and Health in Active Ageing

5. Suggestions

The following suggestions can lead elderly into a better life:

- There should be association of elderly like E-SHG for helping the elderly people and in which they should have weekly meetings, recreation activities and counselling services
- Include geriatric care in the curriculum of schools and colleges so that the younger generation will learn and implement it in their family.
- There should be geriatric care managers in the nearby places which is easily Approachable for the elderly and the family members.
- Religious institutions can promote good messages and chance to work for the old age people.
- Create both public and private health care system more age friendly
- financial Support on focused research on wide range of ageing issues

6. Conclusion

The study is concerned with the assessment of Social Support System and Quality of Life of Elderly in the Empty Nest Period. Empty nest period is the loneliest period in the life of elderly, as they are emotionally, physically, psychologically and financially weak. This period requires the most care and attention as they are vulnerable and is nearing the end stage of life. Studies showed that high social support system will increase the quality of life of the elderly as well. Providing good social support and care is important in the current scenario of India, as 7.4% of total population is in the elderly stage. Even if they are in the last stage of life they too have the right to live a dignified life. Special policies should be made for their development and wellbeing and make them more independent which will help them to live effectively to the maximum possible. Empty nest period is a phenomenon in which parents experience feelings of sadness and loss when the last child leaves home. Parents might find it difficult to have no children at home who need children's care and support. In empty nest period the elderly face many problems like health issues, financial problems, changing society and social norms, in home-trauma and isolation etc. But from my point of view it is vary from age to age, gender to gender and situation to situation. From the journals, articles and field experience social work trainee came to know that by increasing the social support can lead to the quality of life among the empty nest elderly to make them productive. Then the empty nest will not be lonely or isolated.

Old age is an important area to be more vigilant in coming years. I studied about the quality of life and social support of old age people at the Empty Nest period. I found the Empty Nest people enjoy this life in a moderate level not high or low. It clearly shows that they enjoy this period in a moderate level. And also this situation is mainly depended upon the social, economic, cultural and spiritual levels of the individual. In Active Ageing health and education became an important dimension to be give importance

at the early life of the individual not the later age. My study can be act as a foundation for the future studies related to the Empty Nest area

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