

A Study to Assess the Effectiveness of Selected Therapeutic Exercises on the Promotion of Self-Esteem among the Elderly at Selected Old Age Home in Bengaluru, Karnataka

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Abstract

A pre experimental study was conducted to evaluate the effectiveness of selected therapeutic exercise on the self-esteem of the elderly at selected old age home in Bengaluru, Karnataka. Totally 40 elderly clients who are residing in old age home were selected by purposive sampling technique. The data was collected by using Rosenberg's self-esteem scale. Therapeutic exercise consists of combined sessions of walking, jogging, stretching exercise (to increase flexibility and freedom of movement) and strengthening exercise (to build muscle, increase metabolism). The therapeutic exercise sessions were conducted after pre-tests and continued up to 20 days and post-test was conducted after a week. The study results reveal that, the pre-test score of all the respondents (100%) noticed to have low self-esteem. Post-test indicated that 70% of the respondent's self esteem level has increased from a low level of self esteem to a high level of self-esteem. Further 30% remained in low self self-esteem. The mean post-test self esteem scores of 16.5 of the respondents were significantly higher than the mean pre-test scores of 13.75. The calculated 't' value (16.353) was more than the table 't' value. The study findings concluded that the therapeutic exercise was found to be most effective in the promotion of self-esteem among institutionalized elderly people.

Keywords: Therapeutic Exercise; Self-Esteem; Old Age Home; Elderly Clients.

Introduction

Self esteem refers to the degree of regard or respect that individuals have for themselves and is a measure of worth that they place on their abilities and judgments. The promotion of self-esteem is about stopping self-judgments. It is about helping individuals change how they perceive and feel about themselves. Maslow postulates that individuals must achieve a positive self-esteem before they can achieve self-actualization [1].

According to Eric Erickson the last stage of psychosocial development is old age, in which the developmental task is integrity versus despair. During the period between the ages of 65 years to death, the goal is to review one's life and derive meaning from both positive and negative events. Achievement of the task results in a sense of self worth and self acceptance as one review the goals of life, accepting that some were achieved and some were not [1]. Ageing is normal process in which every individual undergoes physiological and psychological changes in his/her life time. Many types of physical changes associated with old age can manifest in every system such as difficulties in learning, memory loss, and deterioration in sensation. The problems associated with ageing are the result of accumulated stress, trauma, injury, infection, inadequate nutrition, immunological

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disturbances all of which increases the dependency on others. Failure to adaptation of ageing results in bitterness, inner withdrawal, depression and insecurities which can lead to suicidal tendencies in elderly people [2].

Self-esteem is lowest among young adults but increases throughout adulthood, peaking at age 60, before it starts to decline [3]. Several factors affect self-esteem in old age, such as *depression, anxiety, seclusion, alienation, and loneliness* and in this case having low activity stands out. In fact inactivity in the elderly can have mental and physical complications. One of the mental complications of inactivity is losing self-esteem gradually [4].

Low self-esteem occurs when we have a poor self-image of ourselves. We look at ourselves in the mirror and have nothing positive to say. This is a vicious cycle because what feeds our low self-esteem are the negative things we say to ourselves, and the lower our self-esteem goes, the more negative things we will have to say about ourselves. Low self-esteem can lead to many problems, such as eating disorders, body dysmorphic disorder, alcohol abuse, drug abuse and depression. It can be caused by our frustration with our own appearance, personal relationships, occupation and/or stress. Several researchers have said that our self-esteem can be boosted through exercise. Exercise makes us feel better about ourselves. It will increase our energy levels, release chemicals called "endorphins" into our brain which makes us feel happier. Exercise also lowers stress. Hence in this study, the researcher felt that having high self-esteem will be beneficial in many ways. It is never too late to start building self-esteem [5].

Objectives

1. To assess the level of self-esteem among elderly prior to administration of the selected therapeutic exercise program.
2. To administer the selected therapeutic exercise program.
3. To evaluate the effectiveness of selected therapeutic exercise on the self-esteem of the elderly.
4. To determine the association between self-esteem and selected demographic variables.

Methodology

Research Approach

Evaluative Approach

Research Design

Pre-Experimental; one group pretest post test design.

Sampling Technique

Non Probability; Purposive Sampling Technique

Sample Size: 40

Setting of Study

Selected old age home in Bengaluru.

Tool Used

Semi Structured interview schedule by using Rosenberg's self-Esteem Scale.

Section I : Socio-demographic variables of subjects.

Section II: Rosenberg's self-esteem scale.

Procedure of Data Collection

The formal permission was obtained from the old age home (Augustine Nivas), Bangalore. The study was conducted among 40 elderly clients. The samples were selected through non-probability purposive sampling technique. The investigator gave self introduction, explained the purpose of the study, subject's willingness to participate in the study was ascertained. The subjects are assured anonymity and confidentiality of the information provided by them and written informed consent was obtained. The Pre-test was done by administering the Semi Structured Interview Schedule on Rosenberg's self-esteem scale. Each subject took 30 minutes to answer the Semi Structured Interview schedule. After the pre-test, a therapeutic exercise program was administered and Post-test was done after seven days using the same questionnaire.

Results

The Findings Related to Socio-Demographic Variables of Subjects

Majority (70%) of the respondents were between 71 - 80 years of age. Majority (75%) of the respondents were found to be female. Majority respondents (55%) were PUC qualified and 40% with high school qualification. Majority of the respondents (85%) were widows/widowers. Majority (72.5%) of the respondents did not have personal income. Majority of the respondents (47.5%) had two children with 35% of them having three children. Majority (57.5%) respondents with duration of stay of 6-10yrs years and 0-5 years 42.5%. Major disease of hypertension and diabetes observed among (67.5%) of the

respondents. Majority (82.5%) of the respondents were partially dependent on activities of daily living. Majority respondents (82.5%) were admitted voluntarily and 17.5% of the respondents were admitted to old age home by family members.

Findings Related to Assessment of Self-Esteem among the Elderly

Table 1 reveals that the pre pre-test score of all the respondents (100%) noticed to have low self-esteem. Post-test indicated that 70% of the respondent's self esteem level has increased from a low level of self esteem to a high level of self-esteem. Further 30% remained in low self self-esteem.

Findings Related to Evaluation of Effectiveness of Therapeutic Exercise Program

Table 2 depicts that the the mean post-test self esteem scores of 16.5 of the respondents were

significantly higher than the mean pre-test scores of 13.75. The calculated value (16.353) was more than the table 't' value, Therefore it can be said that the therapeutic exercise was found to be most effective in the promotion of self-esteem among institutionalized elderly people $p < 0.05$).

Analysis and interpretation of data to find out association between self esteem scores and selected socio demographic variables.

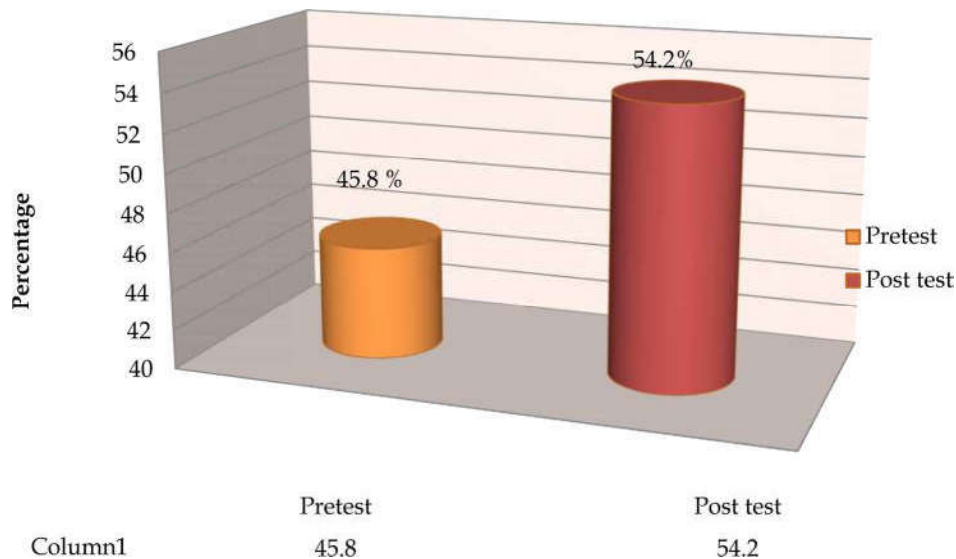
Since C^2_{cal} value $>$ C^2_{tab} value in case of age, educational status, current source of income and history of illness. These Probability values of c^2 contingency revealed that significant statistical association exists between the above variables and the self-esteem level post therapeutic exercises among the elderly. The C^2_{cal} value $<$ C^2_{tab} value in remaining eight demographic variables, which had non-significant association with the self-esteem level.

Table 1: Pre-test and post-test percentage of subjects self-esteem among the elderly N=40

| Scores | Pretest | | Post test | |
|---------------------------------------|--------------|----------------|--------------|----------------|
| | Frequency(f) | Percentage (%) | Frequency(f) | Percentage (%) |
| Score below 15 - Low self-esteem | 40 | 100 % | 12 | 30 % |
| Score 16 and above - High self-esteem | 00 | 00 % | 28 | 70 % |
| Total | 40 | 100 % | 40 | 100 % |

Table 2: Mean, Standard deviation and paired 't' values regarding self esteem among elderly clients N=40

| Pre test | | Post test | | 't' value | DF | P value inference |
|----------|------|-----------|------|-----------|----|-------------------|
| Mean | SD | Mean | SD | | | |
| 13.75 | 0.87 | 16.15 | 1.21 | 16.353 | 39 | $P < 0.05^*$ |



Graph 1: Bar Graph showing mean percentage of pretest and posttest self-esteem scores of elderly clients

Conclusion

Overall pre-test knowledge scores regarding self esteem and therapeutic exercise program was average. There was a need for therapeutic exercise program for elderly clients to improve self esteem. Post test results showed significant improvement in the level of self esteem. Thus, it can be concluded that therapeutic exercise program was effective specialised tool for elderly clients to increase and update their knowledge improve self esteem. The results revealed that there was an association between pre-test scores and selected socio demographic variables like age, educational status, current source of income and history of illness and No association between remaining eight demographic variables, which had non-significant association with the self-esteem levels.

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