



The Causes of Sadness in the Elderly Resident in a Nursing Home from their Viewpoint. A Qualitative Study

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Abstract

Background and Aim: Mood swings such as sadness and depression are very common among the disabled elderly living in nursing homes. A systematic diagnosis of depression is very rare, and treatment is not always based on the best evidence. Distinguishing between grief and non-pathological depression can be challenging, and we have little information about the elderly. The purpose of this qualitative study is to explain the causes of grief and grief from the respective of the elderly living in the nursing home.

Materials and Methods: The present study is a qualitative research of hermeneutic phenomenology based on Van Mann's method. Based on the purposeful sampling method, 16 elderly people were selected from the nursing home and were answered in in-depth interviews. After receiving the code of ethics and starting the research, With the permission of the elderly, the interviews were recorded and analyzed based on Van Mann's research activities after handwriting and gaining a comprehensive understanding of them. In this study, the accuracy of qualitative findings based on the criteria of validity, verifiability, reliability, and transferability was examined.

Results: From the findings of the study, three main themes and fifteen sub-themes were obtained, which included past events, current events, and future events.

Conclusion: Given that the causes of grief are different in the nursing home and can include events from the past to the future, steps must be taken to identify these factors as soon as possible. In this way, managers and caregivers of nursing homes have a very special role, because most of the cause of grief mentioned in this study is related to the current situation of the elderly in nursing homes, and the managers of nursing homes should, that is. Include in your planning.

Keywords: Sadness; Nursing Home; Qualitative Study; Elderly

Introduction

According to statistics, aging is undoubtedly one of the most important health problems in the future of societies. In this age group, psychological problems, especially sadness and depression,

are the most common problems. On the other hand, due to the different prevalence of depression in different societies, it seems that this disease can have a different prevalence in different cultures and ethnicities [1].

Sadness is a feeling that results from losing the ability or after feeling hurt. Sadness is usually accompanied by tears, low energy, and isolation. It's normal for people to feel sad, but increasing these feelings, along with stress and stressors, can lead to depression in the elderly. In such a way that the depressed person has a constant and unpleasant feeling of sadness for days and weeks, which causes disturbance in social relations [2].

Sadness can disrupt mood, depression, and frustration. Causes of sadness include family problems, loss of friends or family members, loneliness, lack of love, social frustration, poverty, and failure in love [1].

Sadness and grief are inherently human, although the severity varies and people express it in different ways. Grief is an internal response and is associated with different experiences. Its severity is related to the cause of sadness and is the main symptom of depression. When an elderly person in the nursing home seems upset, the nurse takes the matter to a doctor, and the doctor begins treatment with antidepressants without even interviewing the elderly person to find out the cause of the depression [3].

Undiscovered grief leads to depression. Depression is the most common disorder among the elderly and affects about 40% of the elderly. According to studies, depressive symptoms are more common in older women because they are more vulnerable to stress and live longer than men. Depression may be associated with other clinical psychiatric disorders, such as emotional bipolar disorder [2].

Depression can range from mild to severe, such as suicide, which should be considered in dealing with the elderly. Depression can have organic factors such as hypothyroidism and diabetes or social psychosis, retirement, grief. Depression is often associated with the environment of older people, such as the nursing home and its structure. Predictable causes of sadness that lead to depression include: visual impairment, hearing loss, Alzheimer's, cancer, decreased self-sufficiency, cognitive impairment, sleep disorders, changes such as fatigue, decreased energy, sleep and eating disorders, and in the elderly depressed is more than others [4].

According to studies, the probability of death in depressed elderly is 1.5 to 2 times higher. In the study of depression, social factors, quality of life, and the use of medical services are examined [5].

In a study that looked at the nutritional and health status of 244 elderly people aged 60 and over at the Norwegian Nursing Home, the study found that food mismatch with age, dissatisfaction with staff and lack of sleep due to environmental conditions and neglecting their needs was one of the causes of sadness in the elderly, which led to depression. Findings from other studies indicate that sadness can be caused by health problems and dysfunction, dependence on care, inefficient assistance, and lack of care [6,13].

Other causes include poor care that causes sadness in the elderly, for example, one of the elderly say: I do not dare to ask for help to do certain things. Other factors include loneliness, loss of family, friends, spouse, lack of contact with neighbors and staff, and separation from one's spouse can be a source of sadness [7].

On the other hand, studies show that proper communication between employees and the elderly can detect the causes of sadness in the elderly and improve the quality of care and increase the satisfaction of the elderly. The good behavior of the nursing home staff supports the elderly and dramatically reduces the isolation and loneliness that are the causes of sadness. Efforts to train employees about the needs and problems of the elderly and undiscovered sadness and appropriate approaches are essential to solving them [8].

Because depression is mainly associated with other psychological and neurological disorders, discovering the causes of grief in a nursing home helps us better understand these disorders and develop interventions to improve the lives of the elderly. Nurses and nursing home physicians need to identify and respond to grief, which is a logical response to controllable causes before it can lead to depression, suicide, or medical interventions [9].

Given that nursing homes are considered a permanent home for the elderly and can have a huge impact on the mental health of the elderly, early detection of the causes of grief and providing appropriate interventions to maintain the mental health of this vulnerable group is essential [10].

Considering that sufficient research has not been done to discover the causes of sadness in the elderly living in the nursing home in Kermanshah and that this issue can become a deep challenge in the nursing home. It seems necessary to conduct such research to clarify the dimensions of the problem.

Materials and Methods

The present study is a study of phenomenology based on the philosophy of phenomenology of Max van Manen (2001) which examines the lived experiences of Iranian elderly from the concept of grief in old age in the stages of attention and orientation to nature of life experience, exploring the experience. In the same way that life has been lived, it has dealt with the intrinsic themes that characterize the phenomenon, describing the phenomenon using the art of writing and rewriting, establishing and maintaining a strong and conscious connection with the phenomenon, and matching the research context to the components and the whole.

In this study, the participants were selected based on the purposeful sampling method of Kermanshah nursing home. Sampling was performed to fully understand the phenomenon of sadness in the elderly. The study included elderly people who were able to express their experiences and feelings of sadness and lived in a nursing home and were over 60 years old, according to the World Health Organization.

The objectives of the study were explained to the elderly. Interviews were conducted in his room to reassure the elderly, and all samples were taken with conscious consent. They were assured that they would withdraw from the study whenever they wished. Then, using the method of deep open interviews, the response from the elderly was collected.

The interviews were conducted individually and face to face with each elderly person. Interviews were recorded with the permission of the elderly. In addition to the interview, the researcher used various interview techniques such as encouraging to dig deeper into the phenomenon of sadness during old age.

The main question of the in-depth interview was designed based on Van Manen's research philosophy, reviewing the studies and opinions of experts. The main question of the research was, what is the meaning of sadness in old age?

Pursuit questions were also used during each interview to clarify the content. The interview lasted an average of 35 minutes. After conducting each interview as early as possible and after listening several times, the researcher writing the recorded information word for word on paper. After multiple readings and a comprehensive understanding of each handwritten interview, they were

analyzed using holistic and Van-Mann analysis methods. Based on this, the themes related to the phenomenon of grief were extracted. The process of extracting topics was reviewed several times by the researcher for each interview to clarify the contents of each interview. After obtaining the contents of each interview, the researcher described the phenomenon of grief during old age based on Van Mann's guidelines.

In this study, the accuracy of qualitative findings based on the criteria of validity, verification, reliability, and transferability have been investigated (Strobert., *et al.* 2011). To verify the validity, the information of each interview was given to the participants in the research to review and confirm the information after the analysis, and the necessary corrections were made based on their opinions. Reliability is that recorded experiences reflect the lived experiences of older participants in the study. For this purpose, the themes extracted in the study were examined and corrected by using the opinions of four experts. To verify the information, the researcher tried to maintain the validity of the obtained information by leaving aside her opinions and prejudices in the field of research. Transferability indicates that the findings of this study can be used for other researchers in similar situations. For this purpose, an attempt was made to provide a rich description of the findings of this research so that it can be used in other contexts after reading by other researchers.

Finding

The study involved 16 elderly people (8 men and 8 women) with an average age of 70 years. The findings are presented in the form of themes. From the analysis of the obtained data, 3 main themes and 15 sub-themes were extracted, which included the following items. 1- Past events 2- Current events 3- Future events were (Figure 1-3).

Past events

Several elderly people attributed their current grief to their children's past misbehavior. For example, Elder No. 1, a 70-year-old man, says, "I've spent my whole life with my children, I've spilled my youth on them, and I've hoped that one day they'll take care of me in their own right, but they won't take care of me". "No, they took my possession and kicked me out of my house, and nowhere, these thoughts are making me sad and upset, Or the elderly No. 3, a 68-year-old woman, explains one of the reasons for her grief: "I

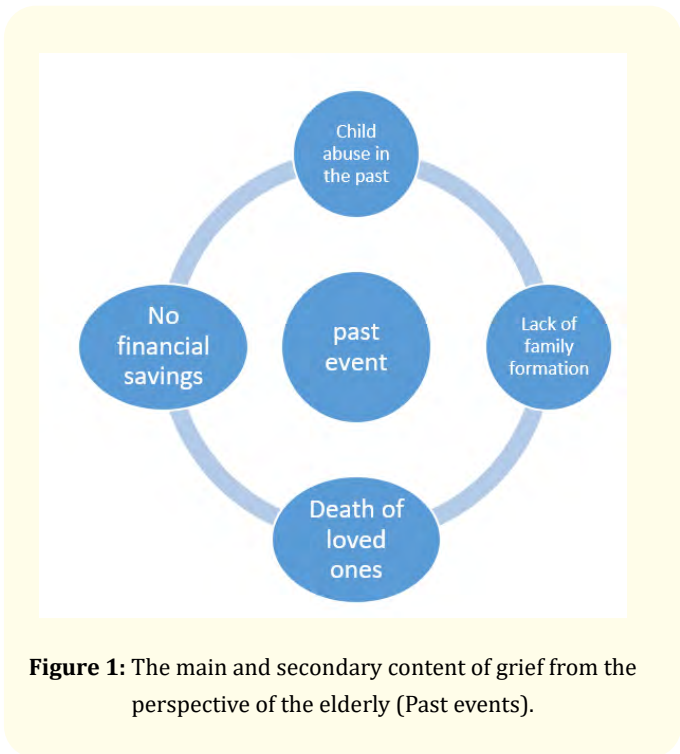


Figure 1: The main and secondary content of grief from the perspective of the elderly (Past events).

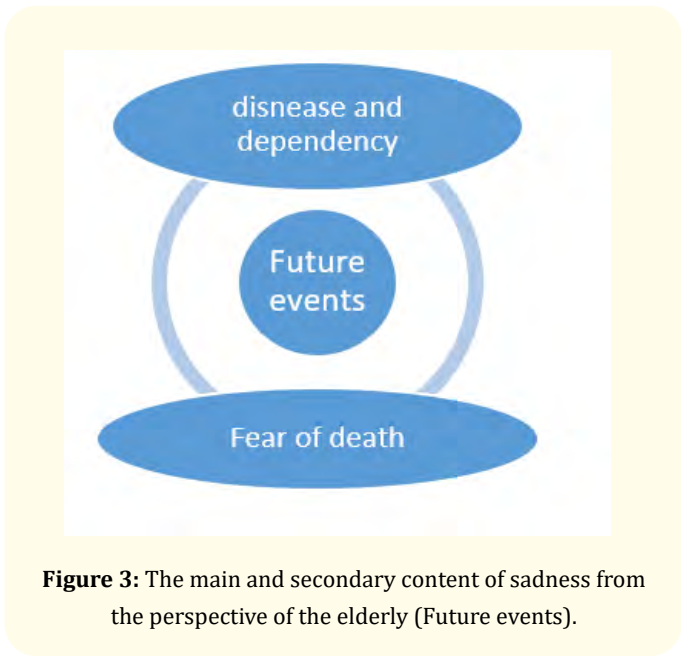


Figure 3: The main and secondary content of sadness from the perspective of the elderly (Future events).

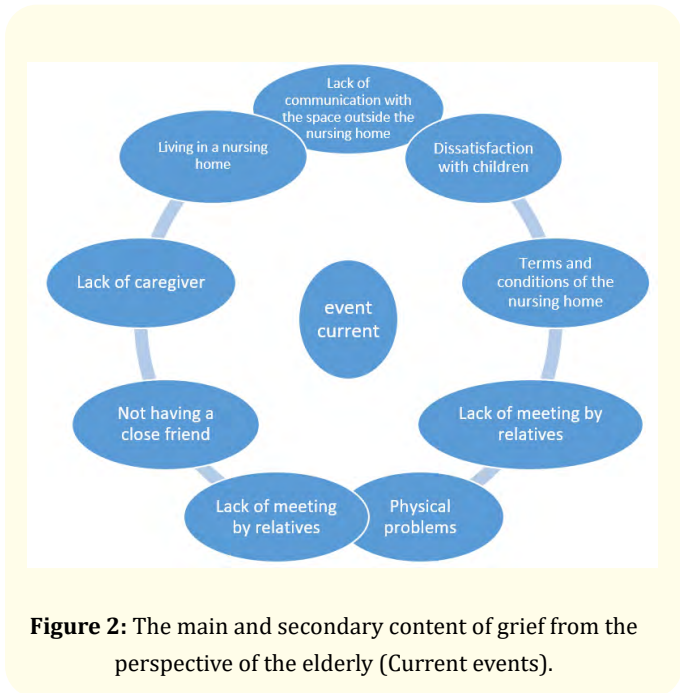


Figure 2: The main and secondary content of grief from the perspective of the elderly (Current events).

lost my parents a long time ago. I got married and everything was going well. I had a good life with my son and my wife. "Until I lost both of them in an accident and didn't have a job or shelter, and I had to come to this place, the death of my loved ones bothers me so much." On the other hand, Elder No. 5, a 75-year-old man, states that "In the past, I always worked and spent all my income on caring for my sick parents, and I could not get married and see my children, even the taste of family formation, it upsets me, but thank God my parents were happy with me and died in peace." Based on the above statements of the elderly, it can be inferred that factors such as (previous child behaviors, lack of savings and financial independence, and the death of loved ones) in the past can be a cause for sadness for the elderly living in nursing homes.

Current events

Several elderly people cited the factors of the present as the reason for their grief and were independent of the bitter events of the past, stating that one should not be overwhelmed by the past but complaining about their current situation. For example, participant No. 8, who is a 69-year-old man, in response to the researcher's question, what do you think are the causes of sadness in the nursing home? "Look, sir, it's like a graveyard here. People who are getting old and disabled are brought here so that when they die, they

come to us from time to time like the dead, but it's better not to come". "My son comes and tells me something bad and threatens me that you will never return to your home". On the other hand, it is like a prison here, we are not taken out at all and we are just inside the yard, we don't know outside at all. What is it like here? From there, the lights go out early at night, there are several people in one of our rooms, you can't sleep at all, it is repetitive here day and night. "Participant No. 12, an 86-year-old woman, answers the researcher's question". I have been blind for 20 years, no one is bothering me, so who should I talk to, I don't have anyone to come to see me. From the above statements, it can be understood that the causes of grief in several elderly people are related to the current events of the elderly (attending a nursing home, the rules, and conditions of nursing homes, not meeting relatives, physical problems, lack of professional care and lack of conversation)

Future events

Fear of losing physical health and dependence on others for daily chores and fear of death were some of the things that seniors cited as a cause for sadness. They said it might not happen at all, or it might be too late, but This always upsets us. For example, Elderly No. 9, a 78-year-old man, has congestion in the arteries of his lower limbs, which is currently controlled by medication. In response to the researcher's question, he answers: "At the moment, I am eating and walking, thank God, and sometimes I exercise as much as I can, but I am afraid that one day this disease will paralyze me and I will fall to the ground. I have to get help from others". "On the other hand, one elderly person states that the older a person gets, the closer he gets to death". Well, I think death exists and everyone has to die one day, but every night I sleep, these thoughts come to my eyes and disturb my night and day.

Discussion

sadness is a normal human feeling that everyone feels from time to time. Sadness varies in severity and duration, but it is characterized by a temporary feeling that eventually disappears and is finally resolved. If sadness is exacerbated and persists for a longer period, a mental health professional should be consulted because depression is possible [12]. In this study, the causes of grief were examined from the perspective of a group of elderly people in the nursing home to gain an in-depth understanding of the causes of grief by these vulnerable groups. The results of this study were

among the main concerns of the elderly living in a nursing home and were given special attention. In this study, participants talked about the causes of grief, which included past, present, and future events, which were similar to other studies. In a study by Christina, *et al.* (2015) to examine the views of seniors living in a Norwegian nursing home on grief, the causes of grief were physical disability, lack of specialist care, loneliness in crowds, loss of family and friends, loss of dignity [13]. In the present study, in addition to the common dimensions mentioned, the participants also mentioned their presence in the nursing home, which seems to be due to cultural differences and the importance of the family's position in the Iranian elderly. Namaki, *et al.* (2008) in a study conducted to investigate the causes of depression in the elderly nursing home, the following topics were extracted after 32 interviews, including loss of independence and freedom, loneliness and social isolation, home conditions, and rules. the elderly were fearful of death, financial problems, and lack of expert care [14]. Which is consistent with the main content extracted from the present study. On the other hand, the results of this study are a strong reason that the factors that cause sadness in the elderly can cause depression in the elderly. However, caregivers of the nursing home should identify sources of grief and not allow this process to continue and lead the elderly to depression. Studies [13,14] have examined the causes of sadness only in the present, while the researcher has tried to examine the sources of grief in the past, present, and future. This difference may be due to the interview method used in the mentioned studies, which used a semi-structured method, while in the present study, the non-structured interview method was used to achieve the depth of the mentioned concepts. The results of this study show that the causes of grief can be caused by events that happened in the past or may occur in the present and future. And it may vary depending on the individual and the time and place [11]. Elderly caregivers should quickly identify sources of grief in nursing homes. Because if you do not pay attention to this issue, the risk of depression in the elderly increases, which is difficult to diagnose in the elderly and has many challenges [12]. Relieve grief in the elderly and prevent depression in nursing homes, it requires teamwork that includes families, caregivers of the elderly, and social and government agencies.

Conclusion

Because the causes of sadness in the elderly are different and can include events from the past to the future, steps must be taken

to identify these factors as soon as possible. In this way, managers and caregivers of nursing homes have a very special role, because most of the cause of sadness mentioned in this study is related to the current situation of the elderly in nursing homes, and managers of nursing homes should be aware of this and include in your planning.

Ethical Considerations

All participants entered the study through informed consent. The process of this study was approved by the ethics committee of Kermanshah University of Medical Sciences (Ethics Code: IR.KUMS.REC.1399.170).

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Author's Participation

All authors in this study participated in all stages.

Conflict of Interest

According to the authors, this article does not contain any conflict of interest.

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