

**A STUDY ON ASSESSMENT OF NEEDS, CARE IN THE
HOMES AND CLINICAL TRENDS AMONG THE
ELDERLY IN KENYA**

A RAPID SITUATION ASSESSMENT

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EXECUTIVE SUMMARY

Background

Little is known about the situation of Neuro-Psychological Disorders among the elderly in the Kenya and African countries at larger; although progressive mental deterioration in old age has been recognized and described throughout history. World wide, the populations of people above 60+ years are on the increase. This is despite the rise of deaths due to malnutrition, poverty, human conflicts and infectious diseases including AIDS.

General objective

To determine the needs of the elderly (60+) and their care givers in a rural and urban community, homes for the elderly and medical facilities in Kenya.

Specific Objectives

1. To determine the prevalence of dementia in the elderly using the 10/66 Dementia Research Group Module I format
2. To determine the needs of the care givers of the elderly (60+) in a rural and in community setting in Kenya.
3. To determine the challenges facing the homes for the elderly in Kenya.
4. To extract secondary data on the pattern of admissions to Kenyatta National Hospital of the 60+
5. To extract secondary data on the pattern of patients seen in two Health Centres for patients 60+
6. To review the Government of Kenya Policy on the elderly in Kenya
7. To determine the levels of depression in the elderly seen in the community and urban settings and in the homes for the elderly
8. To determine the level of depression in the elderly in Kenya

Study Design: The study took a cross sectional purposeful design.

Method

The study on elderly was a comparison between: a rural setting and informal urban settlement slum areas using mixed methodologies; in-patient elderly persons and elderly home persons; and

institutionalized elderly person in a general health facility, psychiatric hospital and old people's home.

The quantitative data was obtained using a structured interview schedule; Needs of the caregivers using Module I, all family care givers will be asked same series of pre-established questions in each category that have a limited set of responses. Clinical characteristics: The Community Screening Interview for Dementia (CSI 'D'); Psychological impact for the caregiver are assessed using the 12-item General Health Questionnaire (GHQ-12) as a measure of psychiatric morbidity; and the Zarit Burden Interview (ZBI) as a measure of caregiver strain. Qualitative data was collected using focus group discussion and these information was supplemented using secondary data.

Data Management

Data was analyzed using SPSS version 12.0 and results presented in form of narratives, tables, pie-charts and bar-charts.

Results

The results of the study indicated that the elderly who were of age 60-64 were 47% of the respondents while the elderly who were of age 65 years and above made 53% of the population. At the same time 47.83%, 29.71%, 13.41%, 6.16 and 2.90% of the elderly were widowed, married, single, separated and divorced respectively.

The study further indicated that 50.69%, 27.93%, 16.55% and 4.83 % of the elderly had no education, primary education, secondary education and college education respectively. It was indicated that 37.93%, 24.83% and 20.69% of the elderly were staying alone, with spouse and with other relatives.

The study revealed that majority of the elderly was protestant (87.63%) with the remaining one being of Catholic and Muslim faith. In addition, majority of the elderly were females (74.48%) while the rest were males with 25.52%.

It was also found that 26.90%, 19.66%, 16.55%, 14.48%, 3.45% and 1.38% of the care givers were of 30-39 years, 18-29 years, 40-49 years, > 59 years, 50-59 years and 13-17 years respectively.

The study results showed that majority of the care givers were females (69.96%) while the rest were male (30.04%). Additionally, 43.23%, 37.55%, 9.17%, 6.55%, and 3.49% of the carers were single, married, separated, widowed and divorced respectively. Further, 32.76%, 20% and 13.79% of the carers had secondary level of education, primary level of education and college/university level of education respectively.

The study results showed that majority of the care givers did not consider taking care of the elderly as a financial burden (75%) while 25% of the care givers felt that taking care of the Elderly was adding more financial burden to them.

Majority of care givers believed that taking care of the elderly was no burden to them (65.05%) while 20.76%, 7.96% and 6.23% of the care giver said that taking care of the elderly caused them some moderate, mild and severe burden respectively.

The results of the study demonstrated that females had a probability of having dementia at 18.83% while males had a probability of 21.93% of having dementia. Rate of diagnosis of dementia among the care givers according to gender was 24.7% for males and 26.02% for females.

The study showed that female care givers had the highest percentage of dementia symptoms than men; with females at 15% and men at 10%.

The study findings demonstrated that most of the female elders had depressive symptoms with 34% of females showing depressive symptoms while comparatively, 18% of males showed depressive symptoms. Most of the patients with dementia diagnosis were females with 27.78% being female elders while 21.62% of male elders had dementia.

Conclusion

Prevalence of depression among the elderly in this study was 6.3%; and was significantly associated with gender. Thus, health care personnel can be educated to look out for depression among elderly who are females since females are more prone to depression than men.

The prevalence of depression among the care givers also calls for policies and practices that identify and support the emotional needs of caregivers.