

Perception, Facilitators and Barriers of the Employed Middle-Aged Population Regarding Prospective Living in a Quality Retirement Home

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Abstract

Older people are a valuable resource for society. The present study was aimed at assessing the perceptions, facilitators and barriers of the employed middle-aged population regarding prospective living in a quality retirement home. A quantitative non-experimental research approach was selected. A descriptive survey design was used, with 368 employed middle-aged people selected through convenience sampling. The tools used were a personal data sheet, a Likert scale for assessing the perception of employed middle-aged population regarding prospective living in a quality retirement home, and checklists for assessing the facilitators and barriers perceived by the employed middle-aged population regarding prospective living in a quality retirement home. Majority of the subjects (80.2%) had neutral perception, the top ranked statement suggested by the subjects as facilitator was, 'quality retirement home provides physical exercises, diversional or recreational activities' (91.3%) and the top ranked statement suggested by the subjects as barrier regarding prospective living in a quality retirement home was 'it is the responsibility of children to care of their parents' (81.0%). There was a significant association between the perception of the employed middle-aged population regarding prospective living in a quality retirement home with selected variables such as marital status, number of children, educational status, occupation, and monthly family income.

Key words: Quality retirement home; perception; facilitators; barriers

The onset of ageing, and more specifically its timing, is a related topic that has significant demographic and social implications, and it also impacts the clinical sphere in terms of age-related diseases (Gilbert, 2019).

A retirement home is a multi-residence housing facility for the elderly. Typically, each person or couple in the home has a deluxe or suite room. The facilities can include meals, gatherings, recreational activities, and some form of healthcare. A place in a retirement home can be on a payment basis or a rental basis, or can be bought in permanently. A retirement home differs from a nursing home primarily in the level of healthcare services given (Wikipedia, 2019).

'Retirement homes' started taking shape in India about 15 years ago. In simple terms, it refers to housing for people who are over 55 years and is designed to fulfil their needs. Most people are searching for a facility that maximises relaxation during their old age (Dungarwal, 2023).

Objectives

This study was undertaken with following objectives to:

- Identify the perception of the employed middle-aged population regarding prospective living in a quality retirement home.
- Find out the (a) facilitators, and (b) barriers, perceived by the employed middle-aged population regarding prospective living in a quality retirement home.
- Check the association between the perception of the employed middle-aged population regarding prospective living in a quality retirement home with selected variables.

Hypothesis - H_1 : There is a significant association between the perception of the employed middle-aged population regarding prospective living in a quality retirement home with selected variables at the 0.05 level of significance.

Review of Literature

A cross-sectional study was conducted to assess the quality of life between elderly people living in an old-age home and within a family setup. It was conducted at two old age homes and two

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areas of Ranchi-Kantatoli and Kanke. The sample consisted of 80 participants (40 each from old age homes, and from families). The researchers used tools such as a socio-demographic data sheet and Quality of Life (QOL) scale to obtain the data. The findings indicated that QOL was better for those elderly people who were living in old age homes in comparison to those elderly people who were living within a family setup (Panday et al, 2015).

A study examined the attitudes and intention towards old age home placement among 186 young, 161 middle-aged and 185 older Chinese in Hong Kong. Results showed that there was no group difference on attitudes toward older people ($t [345] = -1.47, p > 0.05$). However, a significant group difference was noted on intention to refer older people to old age home care ($t [345] = -3.24, p < 0.001$), with middle-aged respondents showing greater intention than young adult respondents. For young adult respondents, intention to refer older people to old age home care was best predicted by their favourable attitudes toward old age homes, beliefs about independence, and positive attitudes toward older people ($\beta = 0.42, 0.21, 0.18$, respectively). For middle-aged and older respondents, favourable attitudes toward old age homes were the only significant predictor of intention to refer/ enter old age home ($\beta = 0.30, 0.33$, respectively) (Tang et al, 2009).

A study was to find out the supportive housing preferences among a sample of 533 seniors aged 55 and over in Victoria, British Columbia, showed a moderately high level of interest in three of the most important components of supportive housing like personal alarm systems, resident managers or caretakers, and meal services. This interest was greatest among those aged 75 and over who are living alone, and the poor elderly. The study concluded that extended family support systems will greatly reduce demands for formal community support services (Baker & Prince, 2008).

A study explored the use of smart home information-based technologies in care facilities to enhance resident quality of life and safety. Subjects and setting participants ($n=14$) were recruited from community-dwelling older adults, aged 65 or older, living in one of two midwestern US continuing care retirement communities (CCRC) facilities. The findings from this study indicate that although privacy can be a barrier for older adults' adoption of smart home technology and their perception of their need for the technology can override their privacy concerns (Courtney et al, 2008).

Materials and Methods

In this study, a Quality retirement home refers to an Institution designed for old age people to stay and receive complete physical, social, and psychological aspects of care.

The study was conducted using a descriptive survey design after obtaining ethical clearance from the Institutional Ethics Committee in selected offices in Kozhikode Corporation. The data was collected from 27/03/2023 to 22/04/2023 in two settings in Kozhikode: Baby Memorial Hospital, and Civil Station. The researcher selected both the government and private sectors. The sample consisted of 368 employed middle-aged people. The sample size was calculated by using the formula, $n = 4SD^2/d^2$ (in a previous study, mean score was 2.82, standard deviation (SD) 0.24, and precision (d) was 0.025). To accomplish the objectives of the study, a convenience sampling technique was used. The investigator selected people who were present on the day of data collection and met the inclusion criteria. Sampling was done subjectively; however, it provides no external, objective method for assessing the appropriateness of the selected participants. The inclusion criteria were the employed middle-aged population who were willing to participate in research, within the age limit of 45 to 60 years, and employed in selected offices, Kozhikode Corporation; those unavailable at the time of data collection were excluded.

The self-prepared tools, and a self-reporting technique were used to mark the opinion. The tools were given for content validity to seven experts in Psychiatry and Psychology. The tools were: Personal data sheet, a Likert scale to assess the perception of the employed middle aged population regarding prospective living in a quality retirement home, and a checklist to assess the facilitators perceived by them (11 Yes/ No questions), a checklist to assess the barriers perceived by them (8 Yes/ No questions). The personal data sheet covered nine items such as age in completed years, gender, marital status, number of children, educational qualification, occupation, type of family, monthly family income and place of residence. The perception of the employed middle-aged population was checked by using the Likert scale. It consisted of 21 items, each with five options: 'strongly agree', 'agree', 'neither agree nor disagree', 'disagree' and 'strongly disagree'. The tool had both positive and negative statements. There were 16 positive statement items and five negative statements. Each item had a minimum score of one and a maximum score of five; the total score was 105 (Scores: 21-49: Negative perception 50-77: Neutral perception, 78-105: Positive perception). Negative

perception means that the subjects disagree with most of the statements in the Likert scale, and the neutral perception indicates that the subjects agree with some of the statements and at the same time disagree with some other statements. Positive perception indicated that the subjects positively agreed with most of the statements in the Likert scale.

A pilot study was conducted from 13 to 17 March 2023 with 36 subjects to find the feasibility and practicability of the main study; Baby Memorial Academy was selected for the study due to the convenience and accessibility of the subjects. The tool's reliability in the current study was established using the data collected from 36 subjects from Baby Memorial Academy, Kozhikode. Cronbach's alpha was used to measure the internal consistency of the Likert scale, and the value obtained was 0.848. Hence, the tool was reliable. Cronbach's alpha was used to measure the internal consistency of the checklist, and the value obtained was 0.740. Hence, the tool is considered reliable. In retest method, the value was 0.968 showing that the tool was reliable. Cronbach's alpha was used to measure the internal consistency of the checklist, and the value obtained was 0.890. Hence, the tool was considered reliable. In retest method, and the value was 0.843 showing the reliability of the tool.

Results

Personal data of the employed middle-aged population: The personal data sheet of 368 subjects revealed that most of the subjects were in the age group of 45-49 (44.8%) years; 55.2 percent of the subjects were males, majority were married (85.9%); 65.5 percent of subjects had two

children, 51.9 percent of subjects had a degree or above education, 42.4 percent were in clerical job, and 86.4 percent belonged to the nuclear family. Most of the subjects had a monthly family income between Rs 50,001 - 10,0000 (34.8%), and 50.5 of percent subjects resided in a municipality.

Perception of the employed middle-aged population regarding prospective living in a quality retirement home: Out of 368 subjects, majority of the subjects had neutral perception (80.2%) (Table 1).

Table 1: Perception of the employed middle-aged population regarding prospective living in a quality retirement home (n = 368)

Perception category	Range of score	Frequency	Percentage (%)
Negative perception	21-49	23	6.3
Neutral perception	50-77	295	80.2
Positive perception	78-105	50	13.5

Facilitators perceived by the employed middle-aged population regarding prospective living in a quality retirement home: Table 2 shows that the top-ranked statement suggested by the subjects as a facilitator regarding prospective living in a quality retirement home was 'quality retirement home provides physical exercises, diversional or recreational activities' (91.3%).

Barriers perceived by the employed middle-aged population regarding prospective living in a quality retirement home: Table 3 shows that the top-ranked statement suggested by the subjects as a barrier regarding prospective living in a quality retirement home was 'it is the responsibility of children to care for their parents' (81.0%).

Table 2: Ranking of facilitators perceived by the employed middle-aged population regarding prospective living in a quality retirement home based on frequency and percentage

SI No.	Items	The number of people responded (Frequency)	Percentage (%)	Rank
1	A quality retirement home provides physical exercises, diversional or recreational activities	336	91.3	1
2	Children staying in far places or abroad can be assured that their parents are safe and secure	335	91.0	2
3	A quality retirement home is a relief for individuals whose children are not taking care of their parents properly	328	89.1	3
4	A quality retirement home ensures sharing life with similar age group people	319	86.7	4
5	Quality retirement homes ensure better safety, health care and supervision	297	80.7	5
6	A quality retirement home maintains a daily routine and ensures/ guarantee a more scheduled life	292	79.3	6
7	Avoids unnecessary interferences in children's or grandchildren's lives	209	56.8	7
8	Ensuring a harmonious relationship with children and not burdening them	204	55.4	8
9	Have adequate resources for meeting the financial requirements of a quality retirement home	151	41.0	9

Table 3: Ranking of barriers perceived by the employed middle-aged population regarding prospective living in a quality retirement home based on frequency and percentage

SI No.	Items	No. of people who responded (frequency)	Percentage (%)	Rank
1	It is the responsibility of children to care for their parents	298	81.0	1
2	Will be separated from family if a quality retirement home is chosen	281	76.4	2
3	A quality retirement home is expensive	276	75.0	3
4	Retirement homes have strict rules and regulations	240	65.2	4
5	While choosing a quality retirement home, it is difficult to attend the family function	207	56.3	5
6	It is a disgrace to the children that parents are staying in retirement homes	180	48.9	6
7	The stay at retirement homes affects the person's prestige	159	43.2	7
8	Ashamed to live in the quality retirement homes	146	39.7	8

Association between the perception of the employed middle-aged population regarding prospective living in a quality retirement home with selected variables: Table 4 shows that the obtained p-value for marital status, number of children, educational status, occupation and monthly family income was 0.000, 0.000, 0.015, 0.020 and 0.009, which

was lower than 0.05 level of significance. So, the research hypothesis was accepted, and the null hypothesis was rejected. So, there was a significant association.

The obtained p-value for age, gender, type of family and place of residence was 0.550, 0.061, 0.604, and 0.071, which was higher than the 0.05 level of significance. So the null hypothesis was accepted, and the research hypothesis was rejected. So, there was no significant association.

Discussion

The present study revealed that the majority of subjects had neutral perception (80.2%). Another study examining the attitudes and intention towards old age home placement among young, middle-aged and older Chinese in Hong Kong showed no group difference on attitude toward older people. Middle-aged respondents showed greater intention than young adult respondents. For young adult respondents, intention to refer older people to old age home care was best predicted by their favourable attitudes toward old age homes, beliefs about independence and positive attitude towards older people. For middle-aged and older respondents, favourable attitudes toward old age homes were the only significant predictor of intention to refer/ enter old age home (Tang et al, 2009).

Our study revealed that the most frequent facilitator perceived by the subjects was 'quality retirement home provides physical exercises, diversional or recreational activities' (91.3%). A systematic review conducted on facilitators and inhibitors of transitions for older people who relocated to a long-term care facility found that a potential facilitator was older people being enabled to create their own space, to have a place they could call their own; other facilitating factors were older people feeling that their arrival was expected, having designated staff to manage the admission process who were confident and experienced, and leadership that communicated to all staff (Fitzpatrick & Tzouvara, 2019). Different facilitators were identified in the present study and in the systematic review.

Table 4: Association between perception of employed middle-aged population regarding prospective living in a quality retirement home with selected variables (n = 368)

Variables	χ^2 value	Df	p value	Inference
Age	3.048	4	0.550	NS
Gender	5.578	2	0.061	NS
Marital status	54.747	8	0.000	S*
Number of children	41.415	6	0.000	S*
Educational status	18.909	8	0.015	S*
Occupation	18.2=22	8	0.020	S*
Type of family	2.727	4	0.604	NS
Monthly family income	16.986	6	0.009	S*
Place of residence	8.621	4	0.071	NS

*Level of significance at 0.05

The present study found that the most frequent barrier perceived by the subjects was 'it is the responsibility of children to care for their parents' (81.0%). Another study (Courtney et al, 2008) to explore the use of smart home information-based technologies in the care facilities to enhance residents' QOL and safety found that privacy can be a barrier for older adult's adoption of smart home technology and their perception of their need for the technology can override their privacy concerns. Different barriers were identified in the two studies.

Our study revealed that there was significant association between selected variables among employed middle aged population such as marital status, number of children, educational status, occupation, and monthly family income with perception of employed middle aged population regarding prospective living in a quality retirement home ($p < 0.05$). Another study (Chen, 2011) to explore the Chinese elders' willingness to use institutional care found that male elders were less willing to use institutional care than female elders. This study also found that elders' willingness to move into elder care homes is negatively related to elders' confidence in familial care, while positively associated with elders' knowledge about and impressions of elder care homes.

Recommendation

A similar study can be conducted by using mixed-method research. A comparative study can be done (a) for young adults and the middle-aged population, and (b) among the urban and rural populations. A qualitative study can be conducted to assess the perception of inmates of a quality retirement home.

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Nursing Implications & Conclusion

A geriatric nurse cares for patients who are ageing or suffering from conditions normally affecting ageing patients. They encourage patients to do as much as possible for themselves. Nurse administrators can take initiative in conducting an in-service education programme on geriatric care and implement policies related to the routine assessment of needs and problems of the elderly population. Appropriate tools should be developed for identifying the perception, facilitators and barriers regarding prospective living in a quality retirement home.

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