



Home Based Care for the Elderly in India

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Abstract

The aging population in India presents significant challenges for healthcare systems. Home-based care emerges as a vital solution, enabling elderly individuals to receive personalization support and medical attention within the comfort of their own homes. This approach not only enhances their quality of life but also reduces the burden on hospital and care facilities. This study explores the current landscapes of home-based care for the elderly in India, highlighting its benefits, challenges, and potential for future development.

Keywords: Home based care, elderly care, aging population, geriatric care, caregiver supports.

Introduction

Ageing is an irreversible and progressive physiological phenomenon characterized by degenerative changes in the structure and functional reserve of organs and tissues. It is the prelude to death. As the last phase of an animal's life it is associated with a gradual decline in many of its functions and capabilities. Like infancy, old age is very susceptible to many diseases and disorders. So long as the old people formed only a small part of the population, their health was not a matter of much concern. But with the steady increase in the proportion in the last 30 years or so, the world has started focusing its attention on them and their welfare. The United Nations has identified the top three socioeconomic issues the world is facing in the 21st century, and these are global warming, global terrorism and global ageing.

It was in 1882, that a World Assembly on Ageing was for the first time held in Vienna, Austria. An International Plan of Action was formulated at this Assembly, and later the same year it was endorsed by the United Nations General Assembly. The Vienna International Plan of Action contains 62 recommendations for action for the benefit of the aged relating to such topics as health and nutrition, housing and environment, family support, social welfare, income security, employment, and education.

India

The ancient India medical system had eight medical divisions. One of them was geriatrics which was termed 'Rasayana sastra' the writing of this system contain methods of treatment of ageing and age-related disorders

The number of "older people" is also on the increase in India and other developing countries as regard proportion of elderly

in India against world elderly, it has been estimated to increase from 12.4 per cent in 1995 to 14.5 per cent in 2025.

Definitions

Elderly is an individual over 65 years old who have a functional impairments elderly care, or simply eldercare, is the fulfillment of the special needs and requirements that are unique to senior citizens. This broad term encompasses such services as assisted living, adult day care, long term care in home (often referred to as residential care), hospice care, and home care.

Principles

- Encourage independence and encourage them to make their choices and decision
- Assess the elderly to achieve emotional stability .support them during period of anxiety. Give them time to express their feeling. Praise their even minimal achievement. Encourage contact with other
- Stimulate mental activity and sensory input and physical activity to uplift their self-esteem, self-concept and confidence.
- Provide divisional/therapy
- Maintain privacy
- Handle them gently
- Encourage them to maintain body hygiene thus regular body temperature
- Assist them to take care of visual, auditory and dental aids
- Help the elderly to establish good sleep pattern
- Caution the elderly about the use of drugs
- Have them physically examined annually and whenever needed

- Observe any psychophysical changes which alter their body image and behavior
- Ensure adequate nutrition.

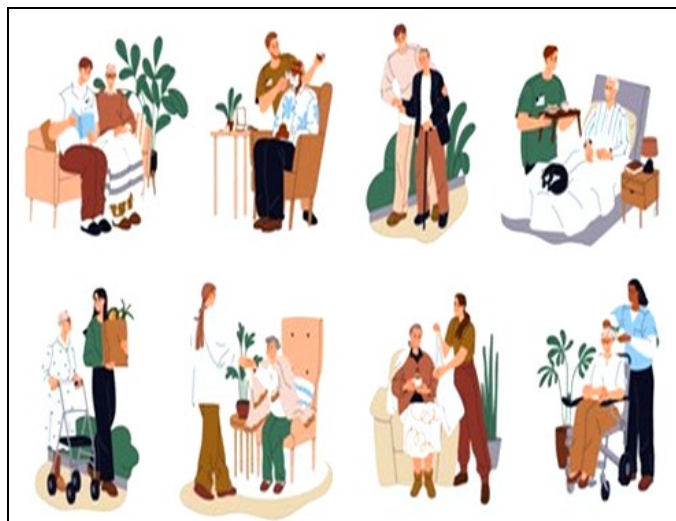


Fig 1: Principles of home-based care

Points to be kept in Mind in Care for Elderly Person

- Have a support system
- Seek help from each family member
- Regular visit to the doctor
- Educate elderly
- Get the right insurance for them
- Encourage them to socialize
- Mindful communication
- Take care of the care giver
- Keep your self-updated
- Create a safe environment

Hygienic Measures

1. Oral Care in Elderly



Fig 2: Oral care in elderly

Nursing Responsibility

- Conduct a thorough assessment of the patient's oral cavity, including teeth, gums, tongue, and mucous membranes.
- Assess patient's oral hygiene practices.
- Assess and evaluate patient's saliva production.
- Identify risk factors.

- Assess patient for pain or discomfort.
- Check for oral mal odor

2. Skin Care in Elderly



Fig 3: Skin care in elderly

Nursing Responsibility

- Keep the skin dry.
- Establish an effective continence care and bowel management program.
- Keep the skin clean.
- Keep the skin protected.
- Reduce mechanical injuries

3. Pressure Ulcer Care in Elderly



Fig 4: Pressure ulcer care in

Nursing Responsibility

- Keep your skin conditioned and clean, and do not expose it to urine and stool
- Avoid prolonged sitting on wet clothes or on moist surfaces
- Eat a nutritious diet and drink adequate fluids
- Properly maintain and check your cushions – this is an important step
- Maintain a healthy weight and avoid becoming overweight

4. Eye Care in Elderly

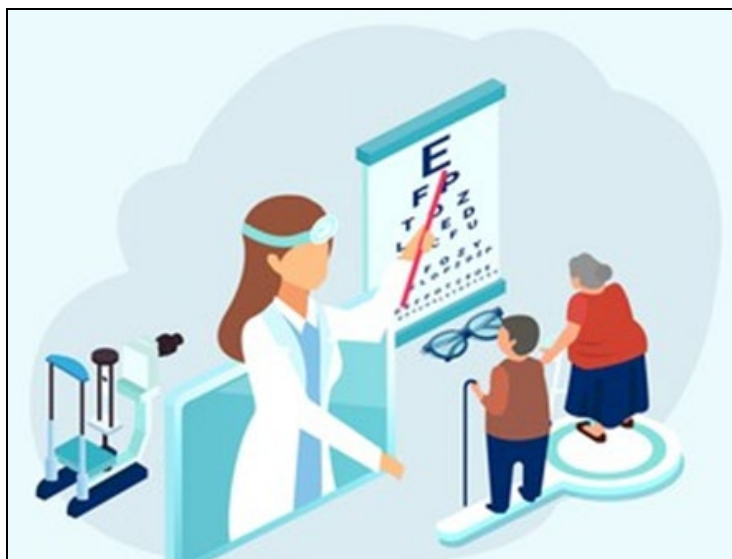


Fig 5: Eye care in elderly

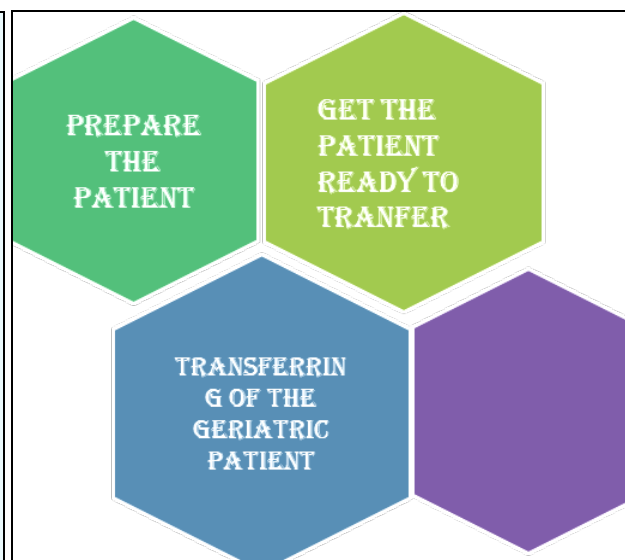


Fig 6: Transferring of the geriatric patient

Nursing Responsibility

- **Eye Power:** Wear the right glasses.
- **Shade Your Eyes Well:** Limit UV exposure
- **Give Your Eyes a Break:** Relax them regularly
- **Get Regular Eye Checkups:** Annual Eye checkup for all ages
- **Medical Conditions:** Watch your blood sugar & BP!

Transferring of the Geriatric Patient

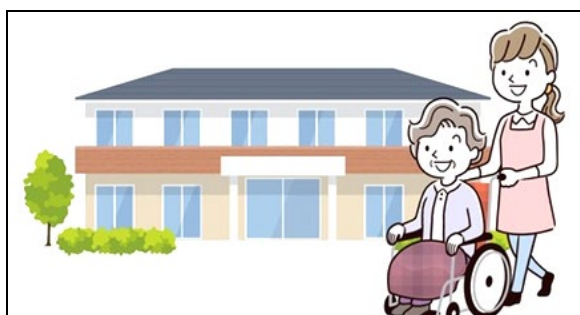


Fig 7: Flow chart of prepare the patients

i). Prepare the Patients

- Perform hand hygiene
- Introduce yourself
- Confirm the patient identity
- Listen to the patient
- Ensure the patients privacy and dignity
- Assess the patients ABCCS, suction, oxygen, and safety
- Ensure the tubes and attachments are properly placed

ii). Get the Patient Ready to Transfer

- Roll the patients into the same side as the wheelchair
- Put one arm under the patients shoulders and one behind the knees
- Bend your knees

iii). Use the Right Equipment

- Use the sliders board and a full –size sheet or friction –reducing sheet

Comfort and Safety Measure in Elderly Patients



Fig 8: Safety measures for elderly patient

Safety Measures for Elderly Patients can include

- **Focus on Balance:** Exercise regularly to maintain strength, and rise slowly after eating, sitting or lying down to help avoid dizziness and loss of balance.
- **Medicate Safely:** Improper use and handling of medication can create serious safety concerns. Check medication expiration dates on all prescription and over-the-counter medications – and follow all directions.
- **Store Medications Safely:** Medicine is best kept in its original container, but if you must transfer medication to a new container, clearly label it with the medication name, dose, and expiration date.
- **Have Easy Access to Emergency Numbers:** Post National Poison Control Hotline and other emergency numbers next to all phones. Be sure to add emergency numbers as contacts on your mobile phone as well.

- **Wear an Alarm Device:** Consider wearing an alarm device in case you fall and cannot get up on your own.
- Get annual eye exams. Ensure your glasses or contacts prescription is up to date and that you do not have any conditions that limit your vision.
- Handle driving with respect and honesty. If you or your loved one has declining driving abilities, consider alternate forms of transportation. The decision, while difficult, can save lives.

Comfort Measures for Elderly Patients can include

- **Physical Comfort:** A clean and comfortable environment with proper bedding and pain management. You can also try physical contact, like holding hands or a gentle massage.
- **Emotional Comfort:** Create a supportive and empathetic atmosphere where patients feel heard and understood. You can try to be patient, flexible, and accommodating.
- **Communication:** Communicate clearly and kindly with the patient. Explain what is happening, what to expect, and why it is important. Listen to their questions, concerns, and preferences.
- **Non-medicine Therapies:** These may include massage therapy, relaxation methods, music therapy, acupuncture, and aromatherapy.
- **Involve the Patient:** If the patient can still communicate, ask them what they need. Be present, and talk or read to them, even if they can't talk back.
- **Recognize Their Needs:** Be ready to sit in silence when your loved one does not want to talk. Recognize when they need a break, and be ready to let them sleep.

Administration of Medicine

Long Term Care and Care Giver Issue

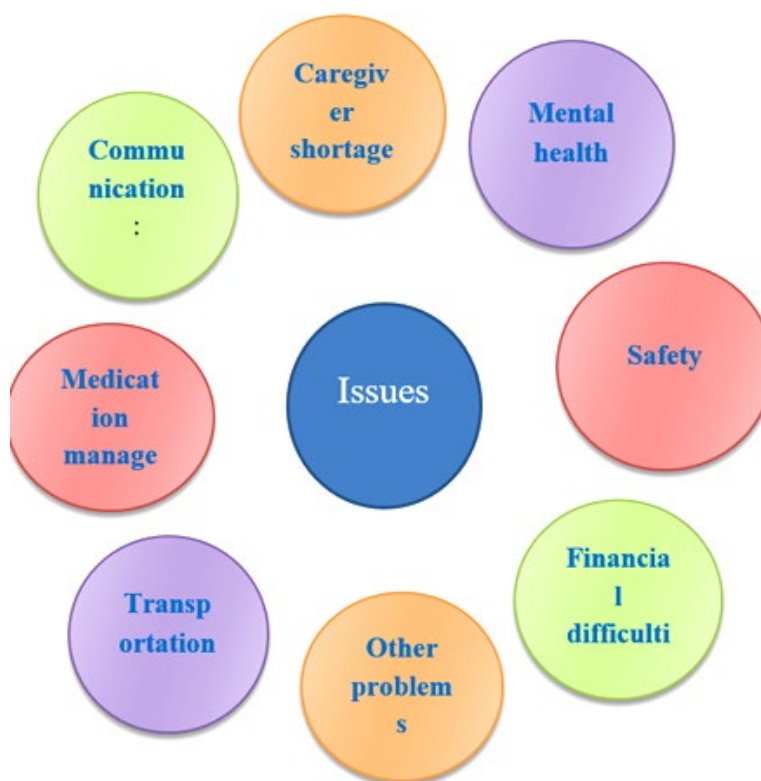


Fig 9: Rights medication list and dosing schedule

i). Create a Detailed Medication List and Dosing Schedule

- **Medication name:** Note both the medication's generic name and brand name(s) to avoid confusion.
- **Dosage:** Consider writing down the dose prescribed in terms of milligrams (or whatever unit the medication is measured in) and noting what that (e.g., one tablet, half a syringe, and so on).
- **Frequency and timing:** Note how often you are directed to take the medication and, if applicable, what time of day. For example, to take a medication with breakfast and again with dinner, or you may need to administer a dose every six hours.
- **Administration instructions:** Write down instructions from doctor or pharmacist regarding the correct way to administer the drug.
- **Possible side effects:** You should note potential side effects for each medication so you can identify problems quickly and work with your healthcare provider to manage the effects or find an alternative medication or treatment.

ii). Use Pill Organizers

Pill organizers make taking your medications on the go easier. Consider buying an organizer with separate compartments for each day so you can easily detach and take that day's pills before you leave the house.

iii). Establish Habits

Its help to try linking medication administration with existing habits or daily routines to create a natural rhythm you can easily follow.

Caregiver Shortages: The demand for long-term care services is increasing, but the number of care workers is not keeping up. This is due to poor working conditions, low salaries, and a lack of recognition.

- **Mental Health:** Caregivers can experience mental health concerns, such as depression.
- **Physical health:** Caregivers can experience physical health concerns, such as fatigue.
- **Safety:** Caregivers are at high risk for injury and adverse events.
- **Communication:** Caregivers can face communication challenges.
- **Financial Difficulties:** Caregivers can face financial difficulties.
- **Medication Management:** Caregivers can face challenges related to medication management.
- **Transportation:** Caregivers can face transportation challenges.
- **Other Problems:** Caregivers can experience other problems, such as stomach problems, headaches, chest pain, problems sleeping, feeling overwhelmed and helpless, and eating too much or not enough.

Counselling for Dying Person

Death counseling can help patients and their family members overcome the fear associated with death and the dying process, resolve psychological trauma by promoting mutual forgiveness, and adjust to life after the patient's death.

- Physical and mental health changes
- Loss of loved ones
- Fear of death
- Isolation
- Decline in cognitive abilities
- Mental illnesses like dementia depression phobias or Alzheimer's disease

General Care of Older Person

General care for older people emphasizes their social and personal needs, and includes help with daily activities and health care. Some ways to care for older people include:

- Spending time together
- Checking on their needs
- Ensuring their safety
- Helping with their health:
- Helping with their nutrition:
- Helping with mental fitness:
- Helping with financial soundness:
- Helping with activities
- Involving them in decisions:

Nursing Care

- Education and Counselling:** Routinely the nurses provide advice to the elderly regarding the kind of diet they should take and the kind of physical activity they should indulge in when an elderly is diagnosed with dementia, the nurse help him and his family understand it.
- Demonstration and Training:** Demonstration and training: If a diabetic elderly has switched over from oral hypoglycemic tablets to insulin and needs to learn how to administer insulin to himself, the nurse teaches it and ensures he does it correctly.
- Assessment:** Nurses carry out two kinds of assessment for the benefit of the elderly. First the assessment of

deficiencies in physical and mental health and adequacy of hearing and vision. Second the assessment of the shortcomings in self-care (performance of independent tasks such as brushing teeth, combing hairs, putting on the clothing, going to the toilet, etc.).

- Diagnostic Services:** Measuring weight, taking blood and urine samples, checking blood pressure, monitoring the glucose level in the blood are examples.
- Medical Services:** Some of the therapeutic procedures nurses can carry out at the homes of the elderly in the community reapplying of ointments, treatment of bed sores, giving of injection, bladder catheterizing intravenous drip infusions. Upholding the dignity of the elderly. Examples are drawing curtain when undressing the elderly patient and cleaning the terminally ill patient.

Communication with Elderly (Techniques to Communicate with Hearing or Cognitive Impairments)



Fig 10: Hearing aids

Here are some tips for communicating with people who may have hearing or cognitive impairments:

- **Get their Attention:** Before speaking, gently touch their arm or say their name.
- **Check their Hearing Aids:** If they have hearing aids, make sure they are turned on and working.
- **Face Them:** Position yourself so they can see your lips.
- **Speak Clearly:** Avoid shouting, which can be painful for people with hearing aids.



Fig 11: Face them

- **Reduce Background Noise:** Find a quiet place to talk.
- **Use Visual Cues:** Use gestures and lip reading to help them understand.



Fig 12: Using visual cues

- **Be Patient:** Give them time to process what you're saying.
- **Ask Questions:** Ask questions to start and maintain a conversation.
- **Use Written Information:** Provide written information to back up your message.
- **Teach Back:** Ask them to repeat back the main points in their own words to confirm you've been understood.
- **Ask How They Prefer to be Addressed:** Some people may prefer their first name, while others may prefer a title and surname.
- **Understand Their Background:** Take the time to understand their concerns, preferences, and background.
- **Give Them Options:** Give them opportunities to make decisions for themselves

Conclusion

Home-based care for the elderly in India offers a promising solution to address the growing needs of the aging population. By providing personalized care and supporting in the comfort of their own homes, home-based care enhance the quality of life, promote independence ,and reduce healthcare costs. While challenges persist, innovative approaches, community engagement, and policy support can help overcome these hurdles.as India continues to navigate the complexities of an aging population, home-based care is poised to play a vital role in shaping the future of elderly care in the country.

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