Mental wellbeing: An urgent priority for elderly

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Demographic projections suggest that mental illness along with heart diseases, AIDS and cancer will account for the top four illnesses around the globe very soon. It already ranks up at the top along with heart disease, cancer, obesity, AIDS and injuries as leading causes of suffering. It is amongst the most common, serious and deadly human health problems faced worldwide. In one way or another, mental health problems are associated with all of these debilitating conditions. A major study conducted by the World Health Organization, the World Bank, and Harvard University concluded that mental illnesses account for a major portion of the burden of diseases in the developing countries (Kemper, 2010). It is believed (e.g. Qualls, 1999) that the dividing line between mental health and mental disorder is not simple. However, mental health can be conceptualized simply as the absence of mental disorders or mental illnesses as for instance guided through the current Diagnostic and Statistical Manual of Mental Disorders [DSM IV] (American Psychiatric Association, 1994).

381 study participants aged, 65 to 79 years has been chosen for present study, from both rural and urban area of residence to evaluate the level of depression, anxiety and loneliness. Considering individual mental health traits, it is discernible that in respect of depression, anxiety and loneliness rural elderly of both sexes experienced greater adversities compared to their urban counterparts. The above mentioned observations clearly are suggestive of relatively more adverse mental health profile among the rural elderly as against the urban elderly considered in the study. Possible upliftment in economic condition in one hand and appropriate health care services on physical and mental health which would be accessible on the other, for the rural elderly should be an utmost necessity to reduce their mental health problems.

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