

PSYCHOLOGICAL WELL-BEING AMONG ELDERLY INDIVIDUALS IN RURAL VADODARA, GUJARAT: A CROSS-SECTIONAL STUDY

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DOI: <https://doi.org/10.63001/tbs.2026.v21.i01.pp2364-2371>

KEYWORDS

Elderly,
Psychological well-being,
Depression,
Anxiety,
Life satisfaction,
Community health

Received on: 28-02-2026

Accepted on: 17-03-2026

Published on: 28-03-2026

Abstract

Background:

Population ageing is a rapidly growing global phenomenon, particularly in developing countries like India. With increasing life expectancy, the proportion of elderly individuals aged 60 years and above is expanding significantly. While longevity is a positive indicator of improved healthcare, it also presents new challenges, especially concerning mental health. Psychological well-being among elderly individuals is often compromised due to factors such as chronic illness, social isolation, loss of loved ones, and economic dependency. Mental health issues like depression and anxiety are highly prevalent but remain underdiagnosed and undertreated in community settings.

Objectives:

The present study aimed to assess psychological well-being among elderly individuals in selected community areas of Vadodara district, Gujarat, and to examine the relationship between depression, anxiety, and life satisfaction.

Methods:

A community-based cross-sectional descriptive study was conducted among 114 elderly individuals aged 60 years and above. Participants were selected using a convenience sampling technique. Data were collected using standardized tools including a socio-demographic questionnaire, Geriatric Depression Scale (GDS), Generalized Anxiety Disorder-7 (GAD-7), and Satisfaction With Life Scale (SWLS). Data collection was carried out through face-to-face interviews after obtaining informed consent. Data were analyzed using SPSS software, employing descriptive statistics and Pearson correlation analysis.

Results:

The study revealed that 38.6% of participants had mild depression, while 21.1% experienced moderate depression. Anxiety levels were also notable, with 34.2% reporting mild anxiety and 17.5% moderate anxiety. Life satisfaction was moderate in 46.5% of participants, while only 18.4% reported high satisfaction. Correlation analysis showed a strong positive relationship between depression and anxiety ($r = 0.62$) and a negative correlation between depression and life satisfaction ($r = -0.55$). These findings indicate that increased psychological distress is associated with reduced life satisfaction among elderly individuals.

Conclusion:

The findings highlight the significant burden of psychological distress among elderly individuals in community settings. There is a pressing need for community-based mental health programs, early screening, and awareness initiatives to improve psychological well-being. Integrating mental health services into primary healthcare and promoting social support systems can enhance the quality of life among the elderly population.

INTRODUCTION

Ageing is a natural biological process characterized by progressive physiological, psychological, and social changes. Globally, the elderly population is increasing at an unprecedented rate, with projections indicating that individuals aged 60 years and above will constitute a significant proportion of the population in the coming decades. In India, demographic transition has led to a rise in the elderly population, posing new challenges for healthcare systems, particularly in addressing mental health needs.

Psychological well-being is a crucial component of overall health and encompasses emotional stability, absence of mental illness, and satisfaction with life. Among elderly individuals, psychological well-being is influenced by multiple factors including physical health status, family support, socio-economic conditions, and life experiences. Common mental health issues such as depression and anxiety significantly affect the quality of life and functional ability of elderly individuals.

Depression is one of the most prevalent mental disorders among the elderly and is often associated with disability, increased healthcare utilization, and mortality.

Anxiety disorders, though less recognized, contribute to significant psychological distress and impairment in daily functioning. In contrast, life satisfaction reflects a positive dimension of mental health and serves as an indicator of successful ageing.

In the Indian context, traditional joint family systems have historically provided emotional and social support to elderly individuals. However, rapid urbanization, migration, and changing family structures have weakened these support systems, leading to increased loneliness and psychological distress. Additionally, stigma associated with mental illness and lack of awareness further hinder timely diagnosis and treatment.

Despite the growing importance of geriatric mental health, there is limited community-based research focusing on psychological well-being in semi-urban regions like Vadodara district. Understanding the prevalence and interrelationship of psychological factors such as depression, anxiety, and life satisfaction is essential for developing targeted interventions.

Therefore, the present study was undertaken to assess psychological well-being among elderly individuals in selected community areas of Vadodara district, Gujarat, and to examine the relationships between key psychological variables.

METHODOLOGY

A community-based cross-sectional descriptive research design was adopted for this study. This design was considered appropriate to assess the psychological well-being of elderly individuals at a specific point in time without manipulating any variables.

The study was conducted in selected community areas of Vadodara district, Gujarat, India. The population consisted of elderly individuals aged 60 years and above residing in these areas. A total of 114 participants were included in the study using a non-probability convenience sampling technique.

Inclusion criteria included elderly individuals aged 60 years and above, those residing in the selected community areas, and individuals willing to participate in the study. Exclusion criteria included elderly

individuals with severe cognitive impairment and those unable to respond to the questionnaire.

Data were collected using standardized instruments. A socio-demographic questionnaire was used to gather information regarding age, gender, marital status, and other background characteristics. Psychological well-being was assessed using the Geriatric Depression Scale (GDS), Generalized Anxiety Disorder-7 (GAD-7), and Satisfaction With Life Scale (SWLS), which are widely validated tools.

Data collection was carried out through face-to-face interviews after obtaining informed consent. Participants were assured of confidentiality and anonymity. An organized monitoring approach was used to ensure accurate recording of responses.

Data were analyzed using SPSS software. Descriptive statistics such as frequency, percentage, mean, and standard deviation were used to summarize the data. Pearson correlation analysis was used to determine relationships between depression, anxiety, and life satisfaction.

RESULTS

Table 1: Socio-Demographic Characteristics (N = 114)

Variable	Frequency	Percentage
Age 60–69	52	45.6
Age 70–79	38	33.3
Age ≥80	24	21.1
Male	60	52.6
Female	54	47.4
Married	72	63.2
Widowed	42	36.8

Table 1 presents the socio-demographic characteristics of the study participants. The majority of elderly individuals (45.6%) belonged to the age group of 60–69 years, followed by 33.3% in the 70–79 years category. A relatively smaller proportion (21.1%) were aged 80 years and above. Gender distribution showed a slightly higher number of males (52.6%) compared to females (47.4%). Regarding marital status, most participants were married (63.2%), while 36.8% were widowed. These findings indicate that the study population largely consisted of younger elderly individuals with a relatively balanced gender distribution.

Table 2: Depression Levels (GDS)

Level	Frequency	Percentage
Normal	46	40.3
Mild	44	38.6
Moderate	24	21.1

Table 2 illustrates the distribution of depression levels among the elderly participants. It was observed that 40.3% of participants had normal levels of depression, indicating no significant depressive symptoms. However, a considerable proportion (38.6%) exhibited mild depression, while 21.1% were categorized under moderate depression. These findings highlight that nearly 60% of the participants experienced some level of depressive symptoms, suggesting a substantial burden of mental health concerns among the elderly population.

Table 3: Anxiety Levels (GAD-7)

Level	Frequency	Percentage
Minimal	55	48.3
Mild	39	34.2
Moderate	20	17.5

Table 3 shows the levels of anxiety among the study participants. Nearly half of the participants (48.3%) reported minimal anxiety levels, indicating relatively stable mental health. However, 34.2% experienced mild anxiety, and 17.5% had moderate anxiety levels. These findings suggest that although a significant portion of the population had minimal anxiety, a considerable number still experienced varying degrees of anxiety that may impact their daily functioning and overall well-being.

Table 4: Life Satisfaction (SWLS)

Level	Frequency	Percentage
Low	40	35.1
Moderate	53	46.5
High	21	18.4

Table 4 presents the distribution of life satisfaction among elderly individuals. The majority of participants (46.5%) reported moderate life satisfaction, indicating an average perception of their quality of life. A notable proportion (35.1%) experienced low life satisfaction, while only 18.4% reported high satisfaction levels. This distribution reflects that a large segment of the elderly population may not be fully satisfied with their life circumstances, which could be influenced by psychological and social factors.

Table 5: Correlation between Variables

Variables	Correlation (r)
Depression & Anxiety	0.62
Depression & Life Satisfaction	-0.55
Anxiety & Life Satisfaction	-0.48

Table 5 depicts the correlation between key psychological variables. A strong positive correlation ($r = 0.62$) was observed between depression and anxiety, indicating that higher levels of depression are associated with increased anxiety. Additionally, depression showed a moderate negative correlation with life satisfaction ($r = -0.55$), suggesting that individuals with higher depression levels tend to report lower life satisfaction. Similarly, anxiety was negatively correlated with life satisfaction ($r = -0.48$). These findings highlight the interconnected nature of psychological factors affecting elderly well-being.

DISCUSSION

The present study provides valuable insights into the psychological well-being of elderly individuals residing in community settings. The findings revealed a considerable prevalence of mild to moderate depression among participants, which is consistent with previous studies conducted in similar socio-cultural contexts. Age-related challenges such as declining physical health, loss of social roles, and reduced family support may contribute significantly to depressive symptoms.

Anxiety levels were also found to be notable, with a significant proportion of participants experiencing mild to moderate anxiety. The coexistence of depression and anxiety, as indicated by the strong positive correlation, suggests that these conditions often overlap and require integrated mental health interventions. This finding aligns with earlier research indicating that comorbidity of mental health conditions is common among elderly populations.

Life satisfaction was found to be moderate in the majority of participants, while a considerable proportion reported low satisfaction. This may be attributed to socio-economic factors, lack of social engagement, and limited access to healthcare services. The negative correlation between depression and life satisfaction emphasizes the importance of addressing mental health issues to improve overall well-being.

Furthermore, the findings highlight the critical role of social support systems in enhancing psychological health among elderly individuals. Family involvement, community participation, and peer support groups can significantly reduce feelings of loneliness and isolation. Community-based interventions, such as mental health awareness programs and routine screening

for depression and anxiety, can help in early identification and management of psychological issues.

In addition, integrating geriatric mental health services into primary healthcare settings can improve accessibility and reduce stigma associated with mental illness. Training healthcare professionals in geriatric mental health care is also essential to ensure effective intervention strategies. Future research should focus on longitudinal studies and larger sample sizes to better understand the causal relationships between psychological variables.

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