



MSSG: The Future of Community Based Geriatric Care

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Introduction

- Communal efforts are better than individual efforts to move the wheel of time to future.
- The Indian elderly who have been basked into nuclear family system from the traditional joint family system has not only become the victim of loneliness and depression but also of "neglected ageing".
- Although several studies done in various regions of the world has implicated the importance of community based care but they have failed to provide a fool-proof plan for implementation.
- This study has lead to the foundation of a MSSG- a micro social group, which can be used as a corner-store for future improvement of community based care.

Aim

- To study the future of community based strategic approach in Geriatric Care Awareness
- To formulate a plan of action to implement in future times as community based care for elderly

Objectives

- To make community based care available for elderly at home
- To make stratification in middle class community by creating a self – help group of individuals
- To give a plan of action the group to implement to the rest of the community
- To study the impact of non medical& social approach for the care of elderly

Materials and Methods

- A micro social group consisting of 10 senior citizens who were all residents of Kamothe, Navi Mumbai was formed. This group of people were retired from various professions and all between the age of 60-70 years had attended monthly meetings making them aware of the importance of :
 1. Diseased vs healthy ageing
 2. Nutrition
 3. Compliance to medications
 4. Available health schemes for elderly
- 50 elderly individuals in Kamothe area were randomly selected who were not part of the above MSSG. It comprised of 25 male and 25 female elderly. These individuals were given a questionnaire and

asked to fill it twice. Once before the exposure of one year (31st October 2016) to MSSG and second time (on 31st October 2017) after the completion of the year from contact with the MSSG.

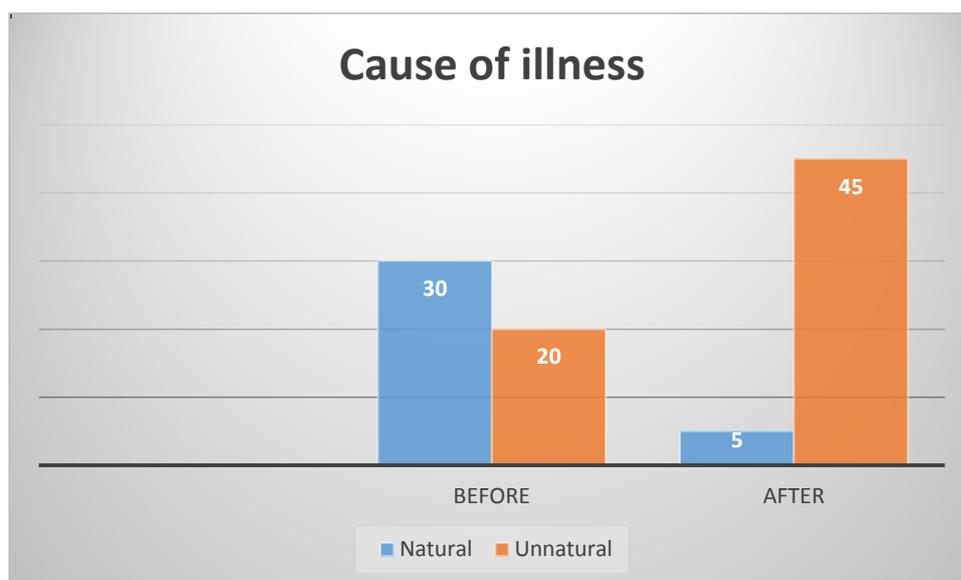
The questionnaire comprised of following:

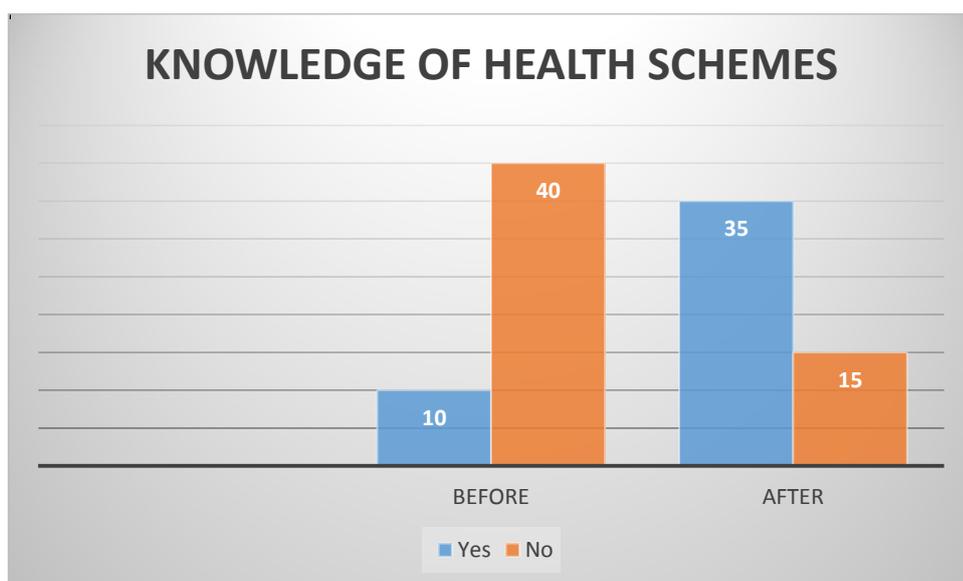
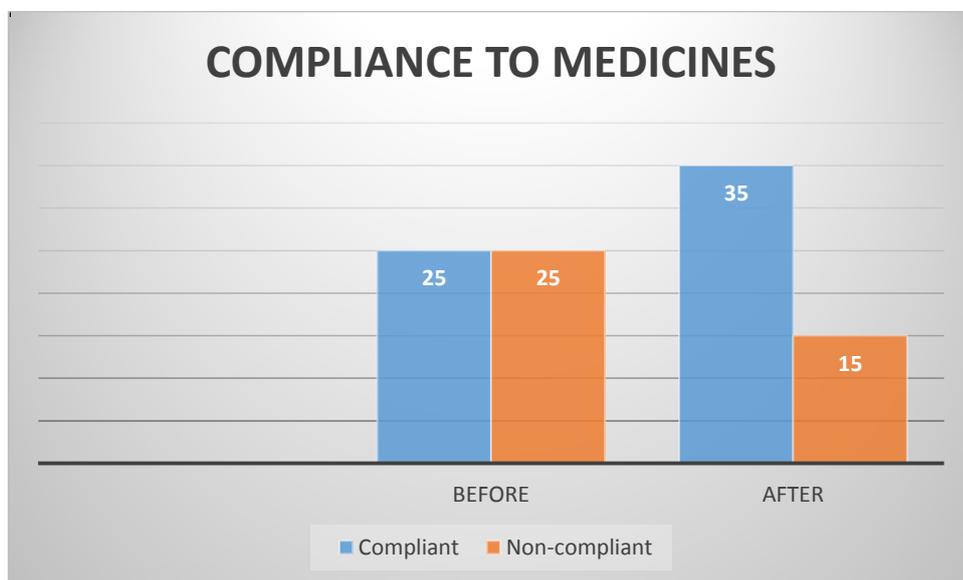
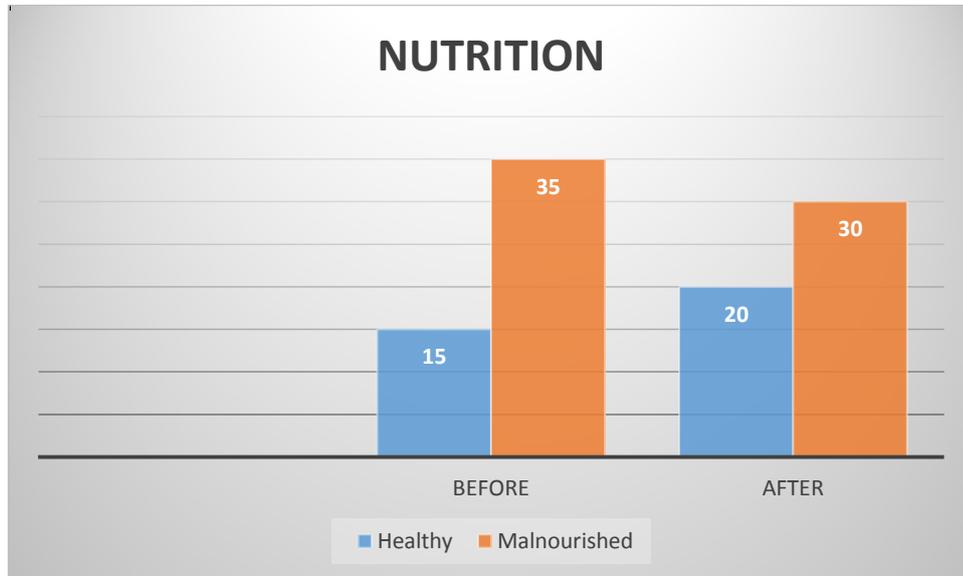
- Do u think you are ill? Yes/No
- Cause of your illness? Natural/Unnatural
- Is your diet nutritious? Yes/No
- Do you take your medicines regularly? Yes/No
- Are you aware of schemes for elderly? Yes/No
- Do you think you will be relieved with treatment? Yes/No

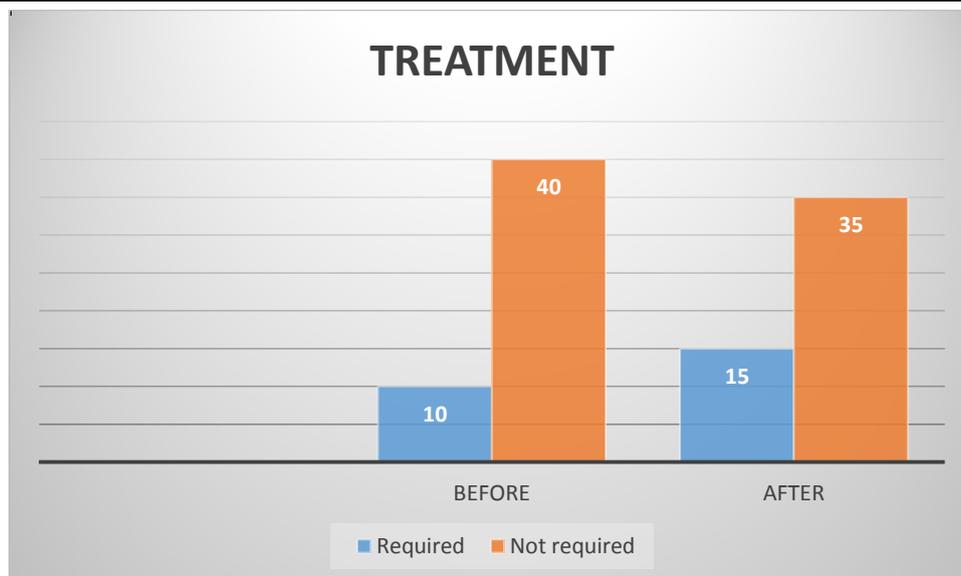
Results

- From the questionnaire before interaction with MSSG following features were obtained-
 1. 60% elderly thought that their health conditions are due to ageing and 40% thought it was due to disease conditions.
 2. 30% elderly thought that their diet was nutritious and 70% thought that they were malnourished.
 3. There was 50% compliance to taking medications regularly.

4. 20% elderly were aware of the government and private schemes available for their health care and 80% were unaware.
 5. 20% elderly believed that they require treatment for their condition and 80% thought they do not require treatment.
- From the questionnaire after interaction with MSSG following features were obtained-
 1. 10% elderly thought that their health conditions are due to ageing and 90% thought it was due to disease conditions.
 2. 40% elderly thought that their diet was nutritious and 60% thought that they were malnourished.
 3. 70% elderly were compliant to their medications while 30% were non compliant.
 4. 70% elderly were aware of the government and private schemes available for their health care and 30% were unaware.
 5. 30% elderly believed that they require treatment for their condition and 70% thought they do not require treatment.







Conclusion

- This study showed that creating awareness amongst senior citizens by forming a micro social seniors group (MSSG) as a part of community based care had the following impacts-
 1. More people were aware that being sick is not a natural part of ageing process.
 2. More people were getting compliant to medications and understood its importance.
 3. More people were made aware of economic schemes available for them.
 4. However it failed to have much impact when it came to creating awareness for nutrition and openness to receive medical treatment.

services for older adults: A primer for clinicians.

References

1. Moon A, et al. Gerontologist. 1998 Jun;38 (3):309-19; discussion 317-9. Awareness and utilization of community long term care services by elderly Korean and non-Hispanic white Americans
2. Eugenia L. Siegler, Sonam D. Lama, Michal G. Knight, Evelyn Laureano and M. Carrington Reid. Journal of Geriatrics, vol 2015 (2015). Community based supports and