

Psychological Capital and Self-Perceived Success among Senior Citizens in Community Based Geriatric Settings

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ABSTRACT

Purpose: India is witnessing a phenomenon called population aging that is not only altering the shape of the population pyramid but also bringing regarding new needs, demands for new and increased resources and new opportunities as well. In India, family is still the major caregiver for the elderly. The conventional joint family arrangement is giving way to the nuclear family systems as people become more mobile. The social life of the elderly is undergoing changes. The changing and demanding requirements of the elderly are not taken care properly in the traditional old age care centres and homes. While the Western World is advanced with institutionalized support systems for the elderly population, India lacks adequate institutionalized support system and policy support mechanism. In this context traditional system of geriatric care and upcoming Community based geriatric care is reviewed systematically in this paper. The basis of secondary data the concept of community-based geriatric care in India and psychological capital, flourishing and hope among older persons in the community-based geriatric care is analysed.

Design: The codes are taken from the literature and used in the review of literature. This paper analyses the notion of community-based geriatric care in India, as well as psychological capital, flourishing, and hope among older people in community-based geriatric care, using secondary data. Desktop research was conducted using the internet platform. A total of 80 research articles were examined in depth and methodically to identify the research gap.

Findings: The factors, for instance, Community based geriatric care, psychological capital, flourishing among old age people, and the geriatric care system in India are reviewed and analysed. The various theories are examined to comprehend psychological capital and flourishing. The hedonic and eudemonic theories were collected by the literature and studied to develop the concepts in this study. It also highlights the importance of community-based geriatric care for healthy aging.

Originality: A new conceptual geriatric care system is introduced called community - based geriatric care.

Paper Type: Review type paper.

Keywords: Community based geriatric care, Geriatric care in India, Psychological capital, Flourishing, Institutionalized care for older persons, ABCD analysis framework.

1. INTRODUCTION :

In India, the aging population has risen considerably over the last two decades. The department of UN that controls economic and social affairs expected a rise in the percentage of elderly population in India from Eight percentage in 2015 to Nineteen percentage in 2050 [1]. According to the National -Policy on Older Persons' 1999, Government of India defined a person who is of sixty years or above as a senior citizen or elderly. The term "elderly" or "old age" refers to ages close to or exceed the normal human life duration [2]. Massive advances in medical research, combined with a steep drop in reproduction, have exacerbated the senior population's share and caused the challenge of 'population ageing' in recent

decades [3]. With the constantly increasing population of elderly people in India, all equations are swiftly altering. While it is crucial and required to assess and meet the miscellaneous requirements of every older person, this is critical and required to ensure their health, social security, skill training, financial security, well-being, and dignity as they get older.

Despite the country's large older population and their growing influence at practically every level family society business and polity- elder friendly atmosphere is rare. As a result majority of elderly people are marginalized and isolated in their homes or elderly care institutions, which resulted a large amount of human resources named as 'veteran experience and knowledge' remains untapped. In the lack of a suitable and sufficient social security system and an efficient population's management mechanism, the rapid growing senior population would provide more challenges, not just to the government but to the entire society. The challenges faced by the society as a whole are to provide healthcare, to make a safe and sound stay, palliative care, to protect their rights, social welfare activities above all to keep them engaged and use their expertise knowledge.

Though aging is a natural part of life, it comes with a slew of concerns to those who have reached retirement age. As a result, aging populations necessitate proper policies and govt. action for nations to maintain long term financial growth, alleviate poverty, and address disparities [4]. The fundamental question is how elderly people can maintain themselves, stay fit, contribute to society, and have a good standard of living without slowing down progress. Avoiding the trap of a common approach, the solution to the difficulties of the elderly must take into account the realities of each country or region [5]. It is high time to make policies for senior citizens among rapid socio-economic changes and situations seen in India in which elders are probably exposed to multifaceted insecurity in the years to come [6]. In this context, this study discusses community - based geriatric care. The succeeding sections give a brief review and narration on the studies and analyse the multifaceted problems faced by older people, community geriatric care, psychological capital, flourishing, and hope among geriatric people. The different types of theories are also reviewed and discussed underpinning geriatric care.

2. OBJECTIVES :

- (1) To understand the various demographic details of elderly people.
- (2) To know about the various problems faced by senior citizens.
- (3) To understand the concept of Community Based Geriatric Care.
- (4) To know about well-being of elderly people.
- (5) To know about the positive psychological state of elderly people.
- (6) To suggest community geriatric care as an alternative to institutionalized geriatric care.

3. METHODOLOGY USED :

This paper develops the concept of old age care in the community setting or community geriatric care. It is primarily studied through analysis of different research papers using an online platform. Systematic and scientific review of nearly eighty research articles helped develop research gap. Various studies reports helped to discover problems faced by the elderly people in existing institutionalized situations. Several concepts have been built by obtaining the codes from the literature.

4. RELATED WORKS :

Caring for the greying population is an important concentration of both private and public concerns in India. Traditional geriatric caregiving approaches are being altered by the accelerated rate of social change. Defeatist stereotypes and lack of understanding, information, or recognition of gerontology as respectable subject lead to the remoteness and low care being provided to India's elderly. As a result, a proactive course of action to harness the elderly's money and enhance their socioeconomic standing in society is required. This study prioritizes community-based geriatric care among the different techniques established for senior care around the world. Community-based elderly care allows seniors to remain at home while yet having access to vital care facilities or personal care assistance.

4.1. Challenges Faced by Elders in Existing Systems:

The challenges of the senior people are enduring, manifold, and multidimensional, demanding lifelong follow up. The support system from society or state and family have of now is insufficient to meet the needs and demands. As a society or state, we have a lack of resources and personnel to meet up the

requirements of the elderly, especially in the field of healthcare [17]. It is evident that we lack many of the facilities, such as free and hazard free walking facility, accessibility to the common space, common toilet facilities, transportation facilities, and inexpensive accommodation, to cater the needs of the elder people in India [18]. Serious health issues affects elderly people both in institutions and home setting. Different studies reveals varied results related with morbidity profile of the elders. Most affected disease condition of elders is visual problems [19]. Some other studies revealed that the important problems faced by them are joint and muscle pain [20], anaemia, CODA (chronic obstructive airway disease) cataract and arthritis [21]. Obesity is also disturbing old people especially who belong to average and above average income people [22].

Table 1: contains some data about this relevant topic area.

S. No.	Title of the paper/journal	Focus area/Finding	Reference
1	Demand for community-based care service and its affecting factors amongst the elderly in affordable housing-communities: a case study in Nanjing City.	This study determined the requirements and desires of the elderly in China's inexpensive housing complexes for several forms of community basis care services. Major findings reveal various kinds of community-based care services. A definition of community based care is being developed.	Gu, T., et al. (2020). [7]
2	Community-Based Supports and Services for Older Adults: A Primer for Clinicians	Community-Based support helps the older adults to be their home safely or delay institutional care.	Siegler, E. L., et al. (2015). [8]
3	Morbidity, Health Care and Condition of the Aged.	The organizations, which collects multifaceted economic information is 'NSSO (The National Sample Survey Organisation)'. Based on the demand from the MHFW (ministry of health and family welfare), in its sixtieth round, the subject for discussion was on the 'Morbidity and Health care'. The study revealed the fact that institutionalized elders face psychological, physical and social problems.	National Sample Survey Organization. (2006). [9]
4	The necessary for community care between older people in China.	This article gives information regarding the expressed desire for various community care services with China's senior citizens. The major components of geriatric care based on community, are daily life care provided during medical emergencies, entertainment activities, and psycho-social and legal aid.	Zhou & Walker (2016). [10]
5	The Elderly's Demand for the Community-Based Care Services and its Determinants: A Comparisons of the Elderly in the Affordable Housing Community and Commercial Housing Community of China.	Comparing the needs and factors of different community-based services among elders in two different settings, this article pointed out that it includes services at meal time, housework assistance, bath-aid service, vocational training and rehabilitation assistance, first-aid service, and psychosocial interventions.	Gu, T., et al. (2020). [11]
6	Psychological Capital as a Buffer to Student Stress.	The result of this study reveals that Psychological Capital empower students in difficult situations. It also defines the concept of a positiveness state	Riolli, L., et al. (2012) [12]

		of mind, which includes resilience, optimism, self-efficacy, and hope.	
7	Positive Psychological capital: measurement and relationships with performance and satisfaction	The study reveals the major elements of psychological capital that are resilience, optimism, self-efficacy, and hope.	Luthans, F., et al. (2007) [13]
8	Ageism, psychological capital and life satisfaction: a study on an elderly women.	The result of the study, which was designed to determine the connection between psychological capital and ageism among elderly women, reveals that compassionate ageism has an affirmative relation with life satisfaction and psychological capital. Furthermore, life happiness among them was positively connected with psychological capital.	Pramanik & Biswal (2020). [14]
9	Strength in adversity: The impact of psychological capital on job search.	The study among expatriate employees reveals that psychological capital helps them cope with the situations and discover new jobs with their qualification.	Chen & Lim (2012). [15]
10	Measurement quality of life: Social, Economic, and subjective indicators.	In this paper, the authors affirm the fact that flourishing as an indicator of quality of life, and it is strongly related to various states of mind.	Diener & Suh (1997). [16]

In India, where the dominant joint family systems exist, old age care has traditionally not been a concern. Different social, cultural and monetary variations in the society and attitudinal changes of the younger and elder generations supported admitting senior citizens in the old-age homes that were unacceptable earlier. The expansion of old age homes in the country is also fuelled by a shift in attitude among the elderly, who considers such facilities as a reasonable solution to living as an unwanted guest in a son's house. Although attitudes on aging and care are shifting in India, families continue to favour home-based care for elder persons [23] because it offers unofficial social support to the elderly people [24]. Word widely older people engagement chances lies upon two core settings, which is in disagreement by many scholars [25], that are, family bonds and friendship circles [26, 27]. The elder people in India consider home as the most peaceful and desired place for living [28].

Various reasons support the institutionalization of elderly like the increasing tendency of nuclear family structure, lack of economical and psychological conditions in the family care setting, family problems, death of a partner, physical illness dementia and related issues and craving of elders wish not to disturb others [29]. But the elderly care in the institutions face many challenges. Institutionalization of elderly care in India is associated with a social stigma because such settings are understood as degeneration symbols of new generation where senior citizens are deserted [30, 31]. It is evident that residents are called as 'inmates' and often considered as orphans by the staffs in these settings [32]. In brief, given the proliferation of elderly care management facilities throughout India, these organizations are regarded with suspicion and apprehension.

Life in institutions is not at all times pleasing and happy. Because Indians choose home care for their elderly, organizations like hospices, old -age homes, and other long-term facilities are viewed with scepticism. Institutionalized care for elders in India is only 2.73 percent [33]. The qualitative life of the elders in the establishments is worse than community-dwelling elders [34]. The explosion of old age homes and placing elderly in these institutions may help children abdicate their accountability to caring for their elderly. Such situations may lead to grind down anticipated value base of family and could even lead to the dissolution of the family institution itself [35].

Furthermore, research has been shown that elderly persons who stay in institutionalized settings have poorer literacy level, weak health conditions, totally depending on others, weaker coordination of movements, physically inactive, limited entertainments and too old [36]. Institutionalization negatively affect the life of people who are having dementia [37]. In a study by Mani et al., (2014) found that

stress level of older people staying in institutions is high and a significant association with stress and presence of spouse or staying with spouse [38]. And also older people in the institutions faces time management problems especially when the institutions have tight time table. When they are separated from their kith and kin, they are anxious about trusting a stranger in the institutions. For majority of them are in a feeling that they are cared for or loved [39]. Several other findings disclosed that elders in institutions have high levels of psychological problem, and lower level of physical and social problems [40]. Some of the psychological problems seen in the institutionalized elders are the feeling of being lonely, isolated experiences [41] and depression [42, 43].

4.2. Psychological Well Being and Life Contentment amongst the Elderly People:

Humanistic approach focuses on the concept from well and maximum performance in both theory and practice [44]. Being well in the old age is a multi-dimensional aspect that points out the perception of well-being according to one person [45]. Promoting wellbeing during later life spins around the notion is called successful aging [46].

Psychological well-being, being a comprehensive concept, can be defined as how a person assesses his/her present state of affairs. This ability provides coping skills for difficult times in one's life [47]. Evaluative wellbeing, which deals with satisfaction in life, hedonic well-being, which aims at assessing happiness and sadness and eudemonic well-being, which describes about life's purposefulness and meaning are the main facets of psychological wellbeing. The result of large-scale cross-sectional surveys conducted in European and American [48] countries about relationships among age and wellness revealed a U-shaped relation among wellbeing and age is discovered that means life satisfaction is higher among older adults. Growing older well entails the versatile application of adaptive methods to maximize human functioning and well-being within the limits of personal ability and resources [49]. Subjective well-being, which encompasses subjective experiences to situations and cognitive appraisals of one's sentiments of pleasure and fulfilment, is favourably influenced by life satisfaction. Objective wellbeing, which speaks about wellbeing based on external aspects also influence successful aging. Different studies conducted in various places pointed out most relevant objective aspects predicting 'successful aging' such as physical fitness [50], social back up [51, 52], leisure time activity [53, 54, 55], and physical exercise [56, 57].

Life satisfaction is a multifactorial aspect that creates positive outcomes in the life situations. In some situations, it is the subjective experience of life and in other related with eudemonic aspects of wellbeing [58]. As age increases the psychological well-being decreases [59]. According to the studies of Tejal (2010) elders who are placed in institutions have very low psychological well-being than who are in home [60]. Studies revealed that females have better psychological well-being than males [61]. Studies revealed that elderly who live with their spouses in old age homes had better scores on psychological well-being [62]. The research studies show significant association between dimension of social support and psychological wellbeing [63]. Yet another study stated that support systems like friends and family influence wellbeing and happiness [64].

Two concepts which are related to psychological well-being and life fulfilment are psychological capital and flourishing. Individual qualities and attributes that facilitate the expression of good resources and talents are referred to as psychological capital. The ideal mental health condition is referred to as flourishing.

4.2.1. Psychological Capital:

'Positive Psychological Capital' which includes positive aspects of persons' behaviour, is a concept derived in the 'post-modern positive psychology' era [65]. The pioneer in this concept is Seligman who discussed this concept in the year 1999, and later by Luthans in the year 2004 [66]. Psychological capital is defined as a crucial element or ability for various aspects such as motivating human behaviour, cognition, aspiration to succeed, and better performance at work [67].

The psychological capital paradigm assists people in dealing efficiently with everyday life by encouraging them to behave purposefully, confidence in their abilities, and look forward to future scenarios without becoming disheartened by challenges. Previous studies reveal the facts that different variables are linked with psychological capital like job assurance and satisfaction, occupational performance, nervousness, supposed stress, coping capacity in difficulties, happy state of mind and

pursuing behaviour [68]. Wellbeing in an old age spins about the concept called successful aging [69]. Psychological capital also encompasses concepts related to successful aging. Psychological capital examines how attitudes, feedback, and criticism add to the growth and development of an individual positively [66]. Studies revealed about the significant positive correlations between well-being and psychological capital [70].

Studies reveal that psychological capital is a latest technique that supports in getting older persons live a non-apathetic, happy and meaningful life and is involved with an individual’s positive mental capacity. It also provides a new understanding on helping older people to live a vivacious and enthusiastic life. Psychological capital concentrating on improving psychological health by instilling a sense of hope, optimism, well-being, self-efficacy, and resilience in older adults who live in old-age homes & are lonely and have almost nothing to look forward to, will give them renewed faith and confidence in themselves [71]. Since psychological capital is a central discussion subject in positive organizational psychology, several studies have been carried in relation with different variables. Most analyses have concentrated on one aspect of psychological capital like self-efficacy, optimism and resilience. From the review the literature it is evident that not many studies have been carried to determine the relationship amongst psychological capital and ageism or related concepts of geriatric care. Since the concept is related to positive organizational studies, several studies have been carried in relation with the concept. The formation of psychological capital within the worker psyche has recently received much interest in the literature. The favourable results of establishing psychological capital inside industrial organizations have prompted educators and people within educational institutions to create it as well.

4.2.2. Flourishing:

Flourishing, originated from the Latin root that means growth, has been used to measure well-being [72]. It denotes well-being both performance and feeling level [73]. It incorporates various aspects such as happiness feeling, meaningfulness of life, assessment about life’s worth and involvement in daily life activities [74].

The two old theoretical approaches, hedonic and eudemonic, can be used to describe flourishing. The quest of happiness and life satisfaction is at the heart of the hedonic approach to flourishing. However, under the eudemonic perspective, flourishing refers to the quest of human potential realization [75]. The Flourishing -Scale is an 8-item summary assessment of a respondent's self-perceived success in key areas like self-esteem, relationships, optimism and purpose. An only psychological well-being score is given by the scale. Series of advantages that includes physical and psychological wellbeing, in relation with flourishing is identified by different researchers [76, 77]. It is also considered in positive psychology as finest behaviour of a human being in relation with contentment, development and bouncing back from difficulties [78].

Studies revealed a positive relation between cardiovascular recovery, lower health care maintenance costs, and powerful social relations with a high level of flourishing. It also improves immune system functions [79]. Different reviews showed a strong relation between loneliness, social support, academic achievement, financial level, gender and marital status and flourishing [80]. Assistance given to older people for flourishing helps to deal positively to depression, besides increase contentment and fulfilment in life [81, 82].

While the fact that this model has only been used in a limited fashion in aging life care, it can be used as a guide to help people flourish despite having Multiple Chronic Conditions [83]. Since it is a new area and subject matter, conceptualization and application into the gerontological field needs more research and studies. Some of the recent studies has explaining the correlation among psychological capital and flourishing with different variables are given in table 2.

Table 2: Codes from psychological capital and flourishing from literature.

S. No.	Title of the paper/journal	Focus area/Finding	Reference
1	A Comparison of Psychological Capital, Social Capital, Mental Health and Health Literacy among the	In a study conducted to compare psychological capital, social capital, mental health and health literacy among the mothers of children with mental disabilities and mothers of normal children, it is	Pirlo & Nikkhoo (2016). [84]

	Mothers of Intellectually Disabled Children with the Mothers of Normal Children.	revealed that the determining factor for quantitative and qualitative social interaction is psychological capital.	
2	The positive effect and development of hopeful leaders	In this study, results indicated that psychological capital is a forecaster of employment enforcement and achievement.	Peterson & Luthans (2003). [85]
3	Experimentally evaluating the effect of leader positivity on follower positivity and performance	The authors analyse leaders and followers performance and found that coping with difficulties in an innovative is related to psychological capital.	Avey, J.B., et al. (2011). [86]
4	Psychological -capital and work behaviour-related results amongst South African church ministers	The study conducted among church ministers proved that the forecaster of satisfaction from job, institutional affiliation, and mental wellness.	Kanengoni, H., et al. (2018). [87]
5	Psychological capital and career commitment: The mediating effects of subjective well-being.	The major goal of the paper was to identify the fact how psychological capital influences well-being of the person. It is shown that psychological capital is a predictor of subjective well-being and career commitment.	Singhal & Rastogi (2018). [88]
6	Feeling good and doing great: the relationships among psychological capital and well-being.	In the study, which carried to discover the relationship among well-being and psychological capital, revealed that both have a strong association relationship.	Culbertson, S.S., et al. (2010). [89]
7	The adaptation of the short version of the PCQ-12 (Psychological Capital Questionnaire) into Spanish.	In this study adapted the short version of psychological -capital in the Spanish context revealed that job engagement can be predicted through psychological capital.	León-Pérez, J. M., et al. (2017). [90]
8	Psychological capital as a moderator among emotional labor, burnout, and job satisfaction amongst school teachers in China.	The study that analysed the relationship among emotional labour and burnout explained that psychological capital is negatively connected to the burnout (49).	Cheung, F., et al. (2011). [91]
9	Psychological capital & performance between the undergraduate students: The role of meaning-focused coping and satisfaction.	In a study conducted among undergraduate students to identify the correlation among psychological capital, coping, happiness, and performance, it is proved that academic satisfaction and psychological capital was associated.	Ortega-Maldonado & Salanova (2018). [92]
10	How psychological capital mediates among study-related positive emotions and academic performance.	This study observes the association between academic achievement and academic feelings and performance. The result explains that it mediates the link between good feelings associated with school and	Carmona-Halty, M., et al. (2019). [93]

		academic success (51).	
11	Why are a few people happier than others? The role of cognitive and motivational processes in well-being.	In this study, the concept of being happy compared with others is scrutinized and revealed that psychological capital can influence memory and attention function.	Lyubomirsky (2001). [94]
12	A relationship among psychological capital and Quality of Life: The Role of Courage.	The study, which conducted to discover the relationship among psychological capital and quality of life, especially on satisfaction and flourishing, revealed the facts that higher amounts of psychological capital are linked to improved performance and increased dedication and well-being.	Santisi, G., et al. (2020). [95]
13	Investigating The Relationship Among Flourishing And Self-Compassion: A Structural Equation Modelling Approach.	In the study, which analyse the association between flourishing and self-compassion flourishing is related to kindness and humanity.	Satici, S. A., et al. (2013). [73]
14	Positive Emotions And Resilience As Predictors Of Flourishing In Women	This study that analysed how positively emotions and resilience become predictors of flourishing among women identified that there is an affirmative and noteworthy relation among positiveness emotions and flourishing. Resilience also positively connected to flourishing.	Nabi & Rizvi (2017). [96]
15	Flourishing in later life.	In this study which assessed flourishing among elderly people, explained that if one person in flourishing, he/ she is free from mental problems.	Momtaz, Y. A., et al. (2016). [97]
16	A Tuesday in the life of a flourished The part of positive emotional reactivity in optimal mental health.	To study the relation among everyday activities and flourishing there is a study conducted & the result explained that there is a positive correlation with emotional quotient.	Catalino & Fredrickson (2011). [98]

5. COMMUNITY BASED GERIATRIC CARE :

India's senior population is estimated to grow to twelve percentages of the overall population by 2025, owing to the country's demographic change [99]. This unexpected growth poses socio-economic challenges to the country's different service providing institutions [100]. Apart from these challenges, social factors like the decline of children in the family, women participation and opportunities in the employment fields, traditional caretakers of the senior citizens in the family, fast and speedy urbanization and nuclear families, necessitate more emphasis on geriatric issues in both social and economic areas [101]. Amidst of these situations, we lack an ideal of social care and health for the altering needs of the elderly in India [102]. Although attitudes on aging and care are shifting in India, families continue to favour home-based care for an elderly person [23]. In connection with these changing needs of the elders, a new understanding called community based geriatric care can be adopted.

Community based care services can be defined as expert services delivered at home to the elderly with formally evaluated demands [103]. It is designed to delay institutionalization while remaining safely in the home [8]. Community based geriatric also deliver chances for various volunteer programs in collaboration with NGOs and civic engagements [104], and help the elderly population to control over

local aspects of their community [105]. It is in a way cost effective and feasible model that is acceptable and culturally competent in the Indian context.

6. PRESENT STATUS AND IDEAL SOLUTION :

The rise in the old population can be ascribed to several factors, including increased longevity due to tremendous advances in medical technology [106]. People staying in old-age homes feels more emotional problems such those who are staying with families [107]. If the solution for old age care is institutionalization, then the studies revealed that they face different psychological problems compared to non-institutionalized people. If they stay in the home then they must face financial instability [40]. The power and authority of old age people in the family are diminishing gradually due to decline nuclear family structure, specific ideological understandings or philosophy, and hasty growth of industrialization [29] and increased insecurity to them [8]. Governments are unprepared to pact with the consequences of a rapidly rising senior population, who have ramifications for the elderly's socioeconomic and health status [108]. Many parents are unaided in the home since their children settled in other nations for better life and money [109]. The changed socio economic situation hassled to diminish societal values caused by urbanization, modernization and globalization [110]. All these above-mentioned situations and realities necessitate new care giving method for the elderly in the Indian context.

Competent care must accommodate the demands of elderly adults who are no longer relatively independent but do not necessitate care home placement. The current situation in India necessitates community-based geriatric care as an alternate care facility for the aged people. Community based care facilities are the non-medical community amenities that provide living space in the home itself, meals, and protective control outside care homes [111]. The goals of such aging services are to retain seniors at community, empower individuals, reinforce basic social and wellbeing services, and enhance volunteer and local assistance. It will improve the value of the life of elder people in the community because of its advantages. The main benefit of this facility is the comfort given to an individual to be there in their usual circumstances. The key advantage of this facility is that it allows a person to remain in their normal surroundings. As an outcome, the older person will be able to maintain contact with their typical social group, will be able to eat familiar foods, and, most importantly, will be safe. Community-based care will provide self-sufficiency and freedom to the senior citizens [102].

7. RESEARCH GAP :

Despite a growing older population, geriatrics- the discipline of medicine concerned with the attention of the elderly- is still relatively new in India, with several practicing physicians unaware of the clinical and functional consequences of aging [112]. Even though India faces insufficient community-based health care system [113], the severity of the issue is unclear due to the lack of scientific studies and supporting evidence. It is very clear from the review of literature that comparative studies related with institutionalisation and community care is too minimum. People select institutions basically because of medical care and daily activity based time schedule. And community care can provide physical activity and free life selection [114]. But the impact cannot be calculated with limited reviews available.

According to an Indian literature study, the viewpoints of older individuals living in residential homes are diverse. Several elderly people who live in residential institutions think they're happy and medical necessities are fulfilled, as reasons. But majority needs to be there in their homes in spite of negative experiences.

Government of India described different policies and schemes for elders, in the reality population aging these policies and schemes are insufficient. Even though studies are related to old age and geriatric care, literature review shows that few analyses have been carried in the field of community-based geriatric care. From the literature analysis, no such study has been reported in India which focusing on the connection between human positive Psychological Capital and community based geriatric care.

8. RESEARCH AGENDAS :

(a) The rising age of the world's senior population is among the most prominent demographic developments in recent times. Conducting a study on community based geriatric will fulfil the incomplete data regarding the topic.

(b) The special characteristics related to the process of aging should be studied and discussed.

- (c) Alternative for traditional geriatric care need to be studied.
- (d) The experienced knowledge and skills of the elderly should be used for nation building. Another agenda for the research is to collect skill - based information to tap the resources of senior retired persons.
- (e) Promoting income generation activities so that senior people can contribute to the family resource.
- (f) Making an awareness of the consequences of aging.
- (g) A positive psychological state of mind is to be measured through Psychological Capital questionnaire.
- (h) Another agenda of research is to determine well-being of elderly person who are in the community based geriatric care situations by applying the Flourish scale.

9. ANALYSIS of RESEARCH AGENDAS :

The most important step to be undertaken is to collect present psycho-social state of mind of elderly people both in institutions and different community based geriatric care situations. The next step can be assessing the positive state of mind of folks in their senior years through psychological capital and flourishing scale. Finally, it is the aim of the research is to propose community based geriatric care as an alternative to the institutionalization.

10. RESEARCH TOPIC :

Psychological capital and self-perceived success among senior citizens in community based geriatric settings.

11. ABCD ANALYSIS OF THE CHOSEN RESEARCH PROPOSAL :

In this section the research area is qualitatively analysed using ABCD analysis framework. ABCD is the abbreviation for Advantages, Benefits, Constraints and Disadvantages. It is a simple and scientific technique for analysing various models and systems [115, 116].

Advantages- The main advantage of the community based geriatric care is that one can be safely placed in the familiar situations and can have the same friendship circle. It also provides familiar food, amenities and most importantly self-sufficiency and freedom.

Benefits- The important benefit from community based geriatric care is that it can surpass the sociocultural situations which hinder elderly care. Since relatives become informal care provider, the problem of health personnel shortage will be solved. It will reduce financial burden since they are in the home not in the institutions. Finally, it will increase the quality of life and happiness of the elderly people.

Constraints- Lack of research and studies are missing for the implementation of the concept, which is new to India's people.

Disadvantages- Quality and effectiveness is not known or little is known about community based geriatric care. Implementation and monitoring mechanisms are to be developed. Coordinating different stakeholders is a difficult task.

12. CHALLENGES :

Since community-based care is a less discussed and explored system, many challenges have been discovered in previous studies. Because of differences in population structure, historical development, culture, and welfare systems, the provision of community-based care service to the elderly varies widely among countries. Some other limitations hinder community based geriatric care. Quantitative studies on the actual needs of the elderly for many forms of community-based care services are lacking. Determinants of the demands of the elderly for community based geriatric care and the distinctions between these deterrents have not been analysed much for studies.

13. SUGGESTIONS TO IMPLEMENT RESEARCH ACTIVITIES :

Conducting a study on community based geriatric care is a herculean task. It is difficult to find out a system which works as a model for community based geriatric care. In order to find out the importance of community based geriatric care, it is necessary to find out all other existing system to giving service or care to elders. So first task of the research is to identify different existing system which provide geriatric care and compare these service providing system with community based geriatric care system. Secondly the researcher needs to identify any organisation which provide community based geriatric

care. Then as per the objectives it is needed to identify well-being of elders staying in different senior care systems through psychological capital questionnaire and flourishing scale. Finally suggesting community based geriatric care as an alternative to the existing geriatric care settings highlighting its advantages.

14. LIMITATIONS :

Community based geriatric care is not at all familiar to the Indian context. The concept of geriatric care itself is widely getting attention. The important limitation for conducting this research would be making others understand about what exactly is community based geriatric care. A huge percentage of older persons live alone at home without the help of close relatives, either in an assisted living facility or in a nursing home. It may not be easy to conduct a study that entirely depending on the elders living in the homes or institutions. The practical suggestion would be to intimidate relatives or group or clusters of elders, if at all one is existing. Since the quality of life of elders is only a term widely spoken, and cannot be measured due to lack of mechanism to evaluate, measuring psychological wellbeing is difficult. But a focus on Psychological Capital (PsyCap) of the Elderly can be helpful since it emphasises on a person's positive mental strength and positive ageing. It offers a fresh viewpoint on how to help older folks live a more satisfying, joyful, and vital existence.

15. CONCLUSION :

Changes in India's demographic scenario and population estimates show that the growth -rate of older adults in India is quicker than in other parts of the globe. But the government and other service providing centres and even the families are not ready or prepared to tackle the issues of the elderly. As a result, proper planning and welfare activates are not developed or implemented. The existing situation of institutionalization may not be the choice of the common people for elderly care in India. It is high time to think about alternatives such as community geriatric care in which elders stay safely in the home and service providers deliver services to the elders in the home and in the community itself. Since community geriatric care is a new concept and ideology, there are many challenges for government or NGOs in implement it. Elderly needs and services are entirely different from each state and communities, it is difficult to have a common structure or a model. Also, there is a scarcity of quantitative study on the elderly needs for diverse types of community-based care services. Still community based geriatric can be considered the new method for service providing to the aging people in society.

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