Exploring the Quality of Life for Elderly Residents in Old Homes in Punjab: A Qualitative Inquiry into Socio-Cultural Factors and Perceptions

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Abstract

Pakistan's rapidly aging population needs a thorough evaluation of the quality of life experienced by senior citizens in old-age facilities. This qualitative research paper describes a study that looks into residents' actual experiences to better understand how socio-cultural influences and their perspectives affect their general well-being. The study looked into the complicated relationship between traditional family structures, deeply rooted societal norms, and expectations associated with the living conditions and services provided by these facilities.

The study used a convenience sampling strategy to interview approximately ten senior citizens (aged 50 and above with no cognitive disabilities). In-depth interviews were conducted to collect detailed perspectives from residents, offering insight into their sense of belonging, social interaction, and satisfaction while living in an old age home setting. By identifying areas for improvement, the study aimed to inform the creation of more resident-centered services that respond to the specific requirements and preferences of Pakistan's aging population.

Furthermore, the findings can be used to argue for improved services for families handling elderly members, promoting a more comprehensive approach to senior care throughout the country by looking into factors such as socialization and healthcare services. Finally, this study contributes to a broader knowledge of aging in Pakistan, opening the way for the creation of high-quality old-age facilities that promote cultural awareness while contributing to a healthy life for residents. Furthermore, this study can be a helpful resource for policymakers and social service providers, allowing them to

develop programs based on research that improve the well-being of elderly people living

in old age homes throughout Pakistan.

Introduction

The population of Pakistan is rapidly growing. There are approximately 241 million residents, as per the latest statistics for 2023 ([Pakistan Bureau of Statistics](#)), and surprisingly, a large proportion of the population is old. Indeed, 11.63% of the population, which is 28 million people, are regarded as seniors, a number greater than Karachi, which is the largest city in Pakistan as a whole. ([Pakistan Bureau of Statistics](#)). Moreover 16.3 million out of 28 million people are residents of Punjab which accounts for 57% of Pakistan's old population.

Punjab is also experiencing changes. Large families with grandparents and grandchildren living together under one roof used to be the norm. However, the trend is shifting from Orthodox families to nuclear family systems. This implies that in the future, there will probably be an even greater ratio of elderly people needing to be placed in Old Age Homes.

There are new difficulties brought forth by this population movement. This is where old home facilities come into play, but we must ensure that these are suitable living environments for the elderly.

Since we have a large number of senior citizens. The number of senior citizens in Punjab is far greater than the capacity of existing old-age facilities. With a large elderly population of nearly 16.3 million ([Pakistan Bureau of Statistics](#)), the present 310 old age institutions around the province appear insufficient ([Smartscrappers](#)). Dividing the aged population by the number of houses produces an astonishing total of approximately 52,580 people per facility, which is an unsustainable number for any single home to

adequately accommodate. This raises an important question: do our current old age homes have the resources and facilities to adequately care for the elderly who live there?

Pakistan has an ancient tradition of extended families, with numerous generations living together, and Punjab is highly influenced by this tradition. This is shaped by religious beliefs, followed by culture, and a strong emphasis on family values. However, this custom may create a societal stigma associated with placing elderly parents in retirement homes (old age homes). Many families may believe it is their responsibility to care for their elderly loved ones, even if it is difficult for the family to manage.

Punjab and Pakistan's approach towards taking care of the elderly population is quite different as compared to the Western World. Traditionally, families care for their elderly members at home, and living with children is regarded as the best way to spend one's golden years. This approach can create a negative perception towards old-age facilities in society, as the members living in these facilities would be considered abandoned by their families, which creates a social stigma around the concept of old-age homes.

Unlike the Western world, where people choose to live in old age facilities for various reasons including socializing and medical facilities. Living in old age homes is considered the last option in Punjab province. Most people end up living there due to unfortunate circumstances or a lack of family support, and not because they wanted to be shifted to the assisted lifestyle in this age.

This study explores the factors contributing to the social stigma around living in old age facilities in Punjab and throughout Pakistan. Its goal is to discover the important factors that influence the quality of life for older residents in these facilities.

Significance of the Study

Punjab's gradual shift towards a rapidly aging population needs a greater examination of the condition of elderly residents in old-age facilities. This qualitative study is significant for various reasons.

- **Understanding Resident Needs:** The study captures the complex aspects of their quality of life by digging into the everyday lives of old-age home residents through in-depth interviews. This improved awareness of resident requirements, attitudes, and the impact of socio-cultural aspects will help to form a structure of more resident-centered facilities and services.

- **Improving Old Age Homes:** The research identifies opportunities for improvement in Punjab's old age homes. This includes the physical environment, social activities, medical care, or training for staff members. By focusing on these areas, the study can serve as a road map for improving the quality of care and services given at these old-age homes.

- **Policy and Social Change:** The findings can be utilized in support of wider beneficial improvements in elderly care in Punjab and eventually in Pakistan. The findings can help drive policies about family support systems for elderly residents, enhanced rules for nursing homes, and, ultimately, the development of new senior living models that promote cultural awareness and resident well-being.

- **Fulfilling Cultural Needs:** Given Punjab's significant cultural focus on family care for the elderly, it is necessary to have an in-depth knowledge of how these values deal with the harsh realities of old-age facilities. This study

provides insight into how to develop facilities that respect the cultural norms of society.

Overall, this research has the potential to improve the quality of life for senior citizens in the old age homes of Punjab. It can also inform changes to laws, increase awareness in care for older adults, and contribute to a more comprehensive understanding of aging in the province as well as in the country.

Aims of Study

This study seeks to not only examine the existing situation of old-age facilities but also to apply that knowledge to create a better future for the elderly residents of old-age homes in Punjab. The following are the aims of this study:

- **Important Factors:** The goal is to identify key characteristics that influence the quality of life for elderly residents in these facilities.

- **Identify areas for improvement:** The study will highlight areas where elderly care facilities can improve their services and environment. (healthcare, social contact, physical access, living standards)

- **Policymaking and social change:** The findings of this study will be utilized to push for improved support systems for families caring for older people, as well as to stimulate the construction of more high-quality old-age homes.

Research Questions

This study looks into the experiences of senior citizens in Punjabi old age homes, specifically how various circumstances affect their well-being. To acquire an extensive understanding of residents' quality of life, this study will explore the below-given research questions:

- What are the primary socio-cultural factors influencing the quality of life for elderly residents in old age homes in Punjab?

- How do environmental factors within old age homes impact the quality of life for elderly residents in Punjab?

- What role do healthcare services and accessibility play in determining the quality of life for elderly residents in old age homes in Punjab?

- How do social support networks and relationships affect the quality of life for elderly residents in old age homes in Punjab?

- What are the perceptions and experiences of elderly residents regarding their quality of life in old age homes in Punjab?

Literature Review

Pakistani society including Punjab, which has historically been built from the strong ties of extended families, where elderly people are respected and cared for by younger generations, is evolving (Mateen & Sadaf, 2022). Demographic developments point to an increase in nuclear families, which may influence the well-being of the older population, particularly those living in nursing facilities (Saad, M. 2022). This thesis paper explores this issue, aiming to investigate the quality of life for elderly residents in Punjab old age homes using a qualitative research method, focusing on the complex interplay of socio-cultural factors, family dynamics, institutional resources, and resident perceptions. This literature review sheds light on the current studies on the subject, stressing the complex relationship of social norms, family dynamics, institutional resources, and individual experiences that determine the quality of life for elderly residents in Punjab.

While family devotion, which is strongly rooted in Pakistani society, has historically ensured that elderly parents are cared for by their children (Saad, M. 2022), times are changing. Modernization, the rising trend of nuclear family systems, and the growth of women in the work industry are changing the traditional ways of supporting the elderly population (Akber, L. 2021). As a result, the number of old age facilities is rising in Punjab, to facilitate the increasing number of elderly residents who are not living with their families due to various reasons or lack of family support. Despite the fact, that the demand is increasing for old age homes, the social stigma is still associated with these assisted facilities. Society perceives that the people living in these facilities are neglected

or unwanted in their families, which can make the residents feel abandoned and humiliated. (Saad, M. 2022). It is important to understand the cultural beliefs of the society to research the emotions and quality of life of the people residing in old age homes.

As per the research, socialization both inside and outside the old age homes is highly crucial for the physical and mental health of senior citizens. (Tariq, J. & Zakar, R. 2023). Healthy relationships with the staff, visitors, and other residents can improve the experience of the senior citizens residing in assisted facilities, reduce feelings of isolation, and create a sense of belonging. The research also emphasizes that social connections can also be created inside the old age homes by introducing different activities and events considering the cultural backgrounds of the residents. These activities highly impact the well-being of the residents (Tariq, J. & Zakar, R. 2023). M, Rafael highlights the fact that the well-being of the residents is affected due to compromised healthcare services, lack of personal space, and social activities. The lack of these services can result in feelings of abandonment and poor physical and mental well-being. (M, Rafael. 2022).

Existing research portrays the complexities of residing in old age homes, revealing various factors that influence the experience of the residents living in these facilities. (Saad et al, 2022) emphasizes the importance of taking family circumstances, social connections, and social stigma into consideration. It is crucial to research the experiences of the elderly, residing in old age homes. This research can take a deeper look that how the residents feel about their quality of life, how the interactions are inside and outside of the old age homes, and what they feel about the currently available

facilities. It can also explore the issues faced by the older women living in these assisted facilities, like possible differences in access to healthcare facilities and personal space.

Further research is required as there are major discrepancies in the data currently available. A more thorough study is needed to completely understand how cultural and religious values impact the experience of elderly residents in old age homes. For example, how do some norms and traditions contribute to the emotional and physical well-being of the residents? Similarly, the influence of government policies and laws in determining the quality of care in old-age facilities is worth investigating. Are there any current policies that unintentionally add to the societal stigma surrounding these institutions? Finally, the efficiency of current social and recreational programming inside these institutions must be assessed. Do these programs meet the special requirements and preferences of the senior residents, or is there room for improvement?

From the above-cited literature, assessing the quality of life for senior residents in old age organizations of Punjab requires a holistic approach that takes into account socio-cultural factors family dynamics, institutional resources, and residents' daily interactions. This research paper uses a qualitative investigation to contribute to a fuller knowledge of this complicated subject, eventually informing efforts to enhance the well-being of Punjab's senior population. This research will not only shed light on the existing reality of senior people in nursing homes, but will also support the creation of more comprehensive and culturally sensitive care models that value their dignity, social relationships, and general well-being.

Theoretical Framework

This research paper explores the quality of life for senior residents in Punjab old age homes, adopting a theoretical framework that focuses on structural functionalism and social network theory. Structural functionalism, pioneered by Emile Durkheim, believes that society operates as a complex system with interconnected aspects, each serving certain demands for the whole. In the context of old age homes, this means investigating how residents interact with the established structure - the rules, routines, services, and workers - and how this affects their well-being. Do these frameworks enable people to meet their basic needs, be involved in purposeful activities, and feel confident and empowered? Or, do strict rules and regulations or the lack of services contribute to the feelings of being dependent and alone? This framework allows us to examine how the organization of an old age home impacts resident experiences.

Contrary to this, social network theory highlights the value of social connections and the web of interactions that provide individuals with support and resources. Within nursing homes, these networks may include fellow residents, staff members, and even relatives and friends who maintain communication. The quality and quantity of these social relationships are critical to residents' well-being. Positive relationships with people may reduce loneliness, provide a sense of belonging, and offer emotional support.

Social network theory encourages us to investigate how the old age home setting encourages or discourages the creation and maintenance of these critical social relationships. Does the physical arrangement of these facilities promote interaction? Are there any possibilities for residents to form connections with others who have similar

interests? Do staff members actively encourage social interaction, or do residents feel secluded in their rooms? By investigating these elements through the perspective of social network theory, we obtain a greater understanding of how social relationships impact the quality of life of senior residents.

This combined framework allows a comprehensive assessment of resident experiences in Punjab old-age facilities. The structural functionalist approach explains how residents navigate the established foundations of these facilities, but social network theory provides light on the importance of social interactions in these settings. By taking into consideration both the infrastructure and social life of old age homes, we can get valuable insights into how these factors contribute to the well-being of elderly residents. Moreover, these theories will help in understanding and providing recommendations for making the quality of life in these facilities better for the residents. Making sure that they not only get the basic needs of life but also feel a sense of community and social security within the aging population of Punjab.

Methodology

Research Design

The study used a qualitative methodology to take a deep look into the real-life experiences of senior residents (aged 50 and above with no cognitive disabilities) living in the old age homes of Punjab. Convenience sampling was used to choose individuals from different old age facilities. In-depth interviews were conducted to obtain detailed narratives and contextual information about the experiences of elderly residents, their social interactions, and resident perceptions of the surroundings. A thematic approach was utilized to identify and understand repeating themes in the data, eventually providing valuable insights for developing strategies to improve the physical and mental well-being of elderly residents in old-age institutions of Punjab.

Sampling Design

A convenience sampling strategy was used. An interview guide was used which contained a list of questions to explore the healthcare services, socio-cultural factors, environmental factors, family relationships, and perceptions and experiences of senior citizens.

Sampling Size

10 senior individuals (aged 50 and above with no cognitive disabilities) from different old age homes in Lahore were chosen, including men and women, and from government and private sectors to ensure representation from a variety of settings.

Data Analysis

Interviews in Urdu or other languages (Punjabi) were professionally translated to retain the actual meaning and authenticity of the interviews. Audio recordings were transcribed into Word documents to facilitate analysis.

Thematic analysis was a qualitative approach that identified recurring themes in interviews. By examining the data, this paper informs us about the senior residents' underlying meanings and experiences. Themes focused on key concerns and experiences relating to quality of life in old age homes.

Conceptualization

This thesis project goes beyond a single metric of physical well-being to reveal a complicated network of factors impacting the quality of life for senior residents in Pakistani old age homes. The following are the concepts that are explored in this study:

- **Family Dynamics**: Traditionally, culture in Punjab has been profoundly based on a concept of family devotion, in which adult children are responsible for caring for their aging parents. However, the landscape is undergoing a dramatic transition. Demographic trends show a rise in the number of nuclear families, as well as greater female employment engagement, which may impair these traditional support structures. As a result, some older people may become more reliant on senior care facilities. This shift can be very difficult, sometimes leading to feelings of loneliness and abandonment. The study looked into the frequency and quality of interaction with family members, and how it affects resident well-being. Do regular, significant connections with family

members increase residents' sense of belonging and connection, or does infrequent contact lead to feelings of loneliness and isolation? Furthermore, the study looked at the influence of disrupted family connections, which may be a contributing cause to placement in an old age home in the first place.

●   **Social Networks**: Beyond relationships with relatives, the strength and quality of social interactions in an old age home have a substantial impact on resident well-being. These social networks include not just other residents but also staff members, who play an important role in building a feeling of community. This study looked into the potential for residents to form friendships and engage in social engagement within an old age home. Do the physical arrangements of the housing encourage contact or create a sense of isolation for the residents? Do staff personnel actively promote social participation through planned incidents, or do they merely offer basic care? By investigating these characteristics, the study intends to uncover how the design and administration of old-age homes might contribute to a richer social environment. Furthermore, the study looked into the impact of social links with people outside the household, such as acquaintances from prior communities or religious groups. Does maintaining these external relationships add to a sense of purpose and belonging, and if so, how can old-age homes help residents with this element of their lives?

●   **Cultural Continuity**: Cultural practices and traditions are deeply entrenched in the human experience, giving people a sense of identity, belonging, and comfort. The capacity of senior residents in old age homes to sustain these traditions can have an important effect on their quality of life. This study looked

into how old age homes meet their inhabitants' cultural requirements, such as celebrating religious festivals, providing traditional meals, and offering opportunities to participate in traditional art forms. Furthermore, the study looked into how these facilities incorporate components of the culture of Punjab into their everyday routines and activities for residents. Does cultural stability in old age homes improve resident well-being and provide a sense of belonging when they are shifted to a new environment? Investigating these factors will provide a perspective on how to build culturally aware assisted facilities that align with the norms and values of Pakistan's senior population.

- **Religious Practices:** Religious Practices: Religion is an important aspect of Pakistani culture, offering a feeling of community, and a foundation for a meaningful life. Access to religious activities and the freedom to express one's religious beliefs is crucial for any society including the senior people in old age facilities. This study deep-dived into the religious practices provided in old age homes. Do the homes welcome a variety of religious backgrounds, ensuring that all residents have the freedom to practice their religion? Are residents allowed to attend daily prayers and seek direction from religious scholars? Furthermore, the research also focused on how religious activities and freedom contribute to resident's spiritual well-being, providing a sense of calm and comfort in their older years.

This study provides a vast spectrum of quality of life for senior citizens in Punjab's old age institutions by connecting important interrelated threads: family dynamics, social networks, continuity in culture, and religious practices. The goal is to

ensure that these facilities provide social and religious freedom in addition to physical health, enabling Punjab's senior citizens to have fulfilling lives.

Research Ethics

This study focused on the dignity and well-being of elderly residents in old-age homes in Punjab. To create a considerate and respectful environment, the following research ethics were followed:

Informed Consent

A consent form was provided to the residents, explaining the purpose of study, processes, potential benefits, as well as the option to withdraw at any time. The aim of study and consent form were described in simple terms.

Each person had several opportunities to ask questions and make an educated decision regarding their involvement. There was no pressure to participate, and the participants could decline to answer any question. Residents were informed that their decision would not have an impact on their treatment at the old age home.

Written informed consent was acquired using a form. For people with inadequate literacy, a witness was present to watch the procedure and sign the form on their behalf.

Confidentiality and Anonymity

All data, including interviews and observations, were anonymous. Pseudonyms were utilized throughout the study process and any later publications. Audio recordings were securely saved

and accurately transcribed, with identifying information removed before analysis. Following completion, data was preserved according to institutional norms.

Interviews took place separately in privacy where residents felt comfortable speaking freely. Residents had the option to seek breaks or stop the interview at any time.

Open-ended questions were framed carefully to prevent unnecessary emotional stress. If residents showed a desire for emotional or psychological help, the researcher was prepared to recommend them to appropriate support services.

Ethical Review and Oversight

Before beginning the study, it was submitted to the appropriate Institutional Review Board (IRB) for ethical approval. The IRB assessed the study protocol to verify that it followed ethical norms and safeguarded the participants' well-being. The IRB's suggestions were carefully studied and adopted before proceeding.

Ethical issues were monitored during the study. If unanticipated ethical difficulties occurred, actions were taken to resolve them as soon as possible while ensuring ongoing participant's safety.

Timeline

Goal: Complete thesis research and submit a final report (Fall 2024).

Month 1-2: Develop proposal (topic, methods, ethics) & get approval.

Month 3-4: Collect data (interviews, observations, etc.)

Month 5-6: Analyze data, draft thesis chapters, and finalize the report.

Submission: Submit the final thesis according to university deadlines (Fall 2024).

Budget

The appropriate budget in terms of finances was allocated to meet the expenses of conducting this academic research, including paper buying, printing, binding, and transportation costs, which were estimated to be approximately PKR 25,000.

Findings

1. Socio-Cultural Factors

The resident's sociocultural background has a big impact on how well they adapt to living in old age homes. Most respondents stated that their cultural values, rooted in traditional Punjabi family systems, have been challenged by their transfer to these facilities. Relocating to a place of assisted living is typically considered a last resort in Punjab, where caring for the elderly is deeply rooted in traditional and religious customs. The residents feel alone because of this social stigma.

There aren't many significant language or cultural barriers among those interviewed because the interviewees have mainly similar cultural origins. Some respondents did, however, note that they miss particular habits that are hard to replicate in an institutional environment, such as eating particular national foods or celebrating Eid with their families. As quoted by one of the residents,

"Since I have lived the major chunk of my life in Karachi and I belong to an Urdu-speaking family, I don't get the pure Punjabi dialect. Therefore, I am unable to understand some of the residents and feel difficulty in communication."

In addition, when cultural events are held in homes without any personal touch, the residents typically find these celebrations to be empty and impersonal, which lessens their emotional value. In another interview, another respondent mentioned,

"When my parents were alive, I was happily living in Sargodha but when they both passed away I was not happy there anymore. I have two sisters, both of them are married and went to

America. After that, I was living with my wife and I don't have kids, so when my wife passed away, I came to live here. My mother used to cook Stew, that was my favorite dish. I haven't had it since she passed away. I miss eating that."

Religious freedom is frequently upheld in households despite these obstacles, as seen by the large number of residents who participate in religious festivals and prayers.

2. Environmental Factors

The physical atmosphere of old age homes has a mixed impact on the people' daily lives. Although satisfactory, many people pointed out that the living circumstances are minimal and could be better. Many issues were brought up, such as the crowded rooms and lack of privacy. Despite this, a few respondents indicated that cleanliness was upheld, although inconsistently depending on the day and the cleaning staff's dedication.

The inability to move around freely or participate in outdoor activities is one of the biggest environmental concerns. Many people feel crowded in these old houses, with little chance to move outside or get some fresh air. The space restrictions in the facilities and the lack of planned recreational events worsen this restriction. One of the respondents mentioned:

"We don't get this opportunity often to breathe in the fresh air or to go out. We do go to the rooftop and spend the afternoons on the rooftop in winter, but in summer as now it's hot outside, so we go neither on the rooftop nor anywhere outside. We only go to the nearby Mosque to offer prayer, that is the only time when we get to go outside the facility. We should, though, it is important for health to go out in fresh air."

" The administration should take us for morning and evening walks or should take us to the parks. That could be improved."

Since the majority of people reported quiet neighborhoods, safety and noise levels were typically not viewed as major concerns. However, the absence of infrastructure to manage emergencies, such as falls or other health issues, was a big concern. Many respondents emphasized the need for improved safety elements.

3. Healthcare Services and Accessibility

One of the most important demands that the old houses failed to meet was healthcare services. Many of the respondents said that their visits to the doctor were rare, frequently happening just once a week or once a month. Residents have to leave the facility for routine examinations, and emergency care is not provided quickly. Especially for residents with chronic illnesses like diabetes or heart disease, medical staff in the homes are sometimes undertrained to handle significant health conditions, which can cause delays in treatment. As per the respondents:

"I get my treatment done from one of my Doctors privately, we go on our own, to visit the doctors we are getting the treatments from. There is no specific doctor who visits on a monthly or weekly basis. Yes, sometimes the students who are in their final year of Medical visit the old age home.

If someone gets sick or there is any emergency, No, no doctor visits us."

"Medical facilities are very essential for your health, especially at this age. All medical services should be available when the organization is dealing with the elderly population. However, I am

in a very good health condition, but the people living here are sick. Some have heart issues, some

have diabetes, some have blood pressure because of age factor."

"They do send us to the Hospital. If someone is severely sick, the nurse provides them with first

aid, and then the next day they can go and get themselves checked at the Hospital. Otherwise,

medication is covered. I don't need much but yes some people are really sick so for them, there

should be proper arrangements."

Basic medical treatments are usually offered, such as blood pressure monitoring and

prescription medicines for common illnesses. More complicated medical requirements, such as

specialized treatment for cardiac issues or appropriate control of diabetes, are not, however,

effectively fulfilled. Additionally, a few residents brought out the lack of routine medical exams,

such as blood or ECGs, which are vital for their health at this age.

A further concern expressed by the respondents was the absence of prompt medical aid.

In crises, residents must wait for a shift at a hospital, which can take hours. Delays in receiving

essential medical care might worsen health outcomes and raise anxiety.

4. Social Support Networks and Relationships

One of the main problems among the population is social isolation. While they do

socialize with other residents, the majority of respondents said that these encounters are

frequently formal and lack emotional depth. While many residents value their friendships with

other residents, many miss the intimacy and warmth of family life. Family ties cannot be

replaced. The fact that many families do not keep in meaningful touch or make frequent visits

only contributes to this feeling of emotional isolation. However, some of the facilities don't

allow the residents to have personal cell phones, and they are only allowed to communicate through the organization's phone. As told by one of the residents:

"There are a lot of restrictions here. We aren't allowed to keep personal cell phones, we aren't allowed to go somewhere out without any supervision. If we are going somewhere, such as the nearest medical shop or Mosque, we all can go on our own but if we have to go somewhere else, the incharge will send a boy with us. I don't feel good about it."

Some interview participants mentioned that although they still communicate with their relatives over the phone, these conversations are frequently irregular and don't have the same impact on them as they previously did. The homes don't actively assist residents in keeping up their contacts with their relatives or arrange for family visits.

The inhabitants' backgrounds also have an impact on the social environment in the residences. Tension occasionally results from the presence of people from various geographic or cultural backgrounds. For instance, a few respondents brought up the fact that some people argue verbally, which adds to the stress of living there, this trend is mostly seen among the female residents, as per one of the respondents:

"The people in the administration are not good. They don't have any checks and balances, therefore, they don't listen to the needs of the residents. I come from a good well-educated background. We have women living here who come from different backgrounds, some of them are from villages. They verbally abuse each other. Abuse me at times too. Women fight a lot. Therefore, the environment is not good, so I feel like moving somewhere else."

5. Perceptions and Experiences

Living in an old home is generally viewed as a forced acceptance. The majority of respondents were placed in these facilities by force, such as after a spouse passed away or their family was unable to care for them. They did not desire to live there. Their stays in the old houses are therefore defined by a sense of resignation and the impression that time is passing them by. As mentioned by some of the residents:

"It's not all bad, but it's not real life either. You're just waiting. Waiting for someone to visit, waiting for something to change, waiting for the end. It's important to have more than just food and shelter. We need care, attention, and love."

"Not the very best experience of one's life. One should at least have someone to share the life with."

Many people feel that their quality of life decreased in the old house compared to their past place of residence. Many of them believe that their emotional and mental health has suffered, even if they are grateful for the stability and basic care offered. Many respondents said that there is little to look forward to in life other than everyday rituals and that life is slower and emptier.

Some respondents did, however, highlight a few advantages of residing in older homes, such as the absence of daily chores like cleaning and cooking. The organized setting gives people a feeling of security, particularly those who need ongoing medical care. As per the respondents:

"I have been living here for 4 years now. I have made some friends, some moved to other facilities, and some passed away. I still learned a lot at this age living here. However, old-age

homes aren't as bad as society thinks of them. The residents living here all belong to good respectable families."

" I don't have to worry about my food, I get all the meals of the day on time. I don't have to worry about my bills, everything is covered and we aren't or neither our families are paying for it. We have a roof over our heads, that is enough."

In summary, an elaborate interaction of issues is highlighted by the research on the sociocultural, environmental, healthcare, social, and personal experiences of senior citizens living in Pakistani retirement communities. Even while the homes offer necessary services, many of the residents experience emotional and social isolation, have little access to healthcare, and don't feel fulfilled personally. This highlights a need for more comprehensive care approaches that address not just the medical requirements of the elderly but also their emotional and social well-being.

Discussion

The thesis explores thoroughly the socio-cultural aspects that influence the quality of life of elderly residents in old age homes. It highlights how deeply ingrained cultural values in the society of Punjab shape the experiences of these residents. Traditionally, family care has been viewed as a primary role, with the elderly expected to live with and be supported by relatives. According to the research, this cultural expectation creates a stigma associated with old age homes, which are frequently considered as a last alternative for individuals without family support. This cultural image has a strong emotional impact on residents, many of whom feel abandoned or socially excluded.

The research depicts how residents miss out on traditional cultural customs, such as enjoying religious holidays like Eid with their relatives. These findings highlight the emotional and psychological impact of being removed from cultural and familial surroundings, which used to be fundamental to their existence.

Despite a thorough examination of these cultural problems, the thesis does not go into how these behaviors might be changed or retained within old age homes to improve the resident's quality of life. While there are references to religious events and language barriers, the study may have explored more specific ways in which cultural traditions—like family visits, food, or festivals—could be incorporated into daily life at home to offer a better sense of belonging. Gaining knowledge on how to adapt these sociocultural practices to the societal setting would help improve the mental health of senior citizens.

Thorough observations of the environmental elements influencing residents are

also provided by the thesis. Participants talked about a variety of problems that negatively impacted their overall experience living in old age homes, such as tight spaces, a lack of privacy, and limited accessibility. Many residents are limited by the insufficient area available for outdoor sports and recreational opportunities, which increases these problems. Since privacy is essential to one's well-being, the research effectively shows how these physical issues might restrict one's feeling of personal dignity as well as quality of life. A further element of vulnerability to the experiences of the residents is added by the lack of facilities to manage emergencies like falls or unexpected health problems.

Even though the environmental problems are well-developed, the thesis may go beyond outlining certain upgrades that the residents might want. More may be pointed out, for example, about how areas could be renovated to promote improved getting along, increase privacy, or even provide chances for outside activities. The study could offer specific recommendations that will improve senior citizens' daily lives by examining how outdated homes could be redesigned to provide a more positive and stimulating physical environment.

The study also focuses a lot of attention on healthcare services, indicating that residents are generally unhappy with how difficult it is for them to get medical care. Many of the respondents mentioned how infrequently they get doctors' visits; some even mentioned that they see a doctor once in two to three weeks or less regularly. For the residents requiring frequent monitoring and care due to chronic diseases like diabetes or heart disease, the lack of health access is a concern. The research also highlights the fact that medical staff at old age homes do not have the required training to handle critical

medical emergencies, which causes delays in treatment. The residents feel helpless and abandoned due to the delayed medical emergency response from the housing staff.

In old age homes, the enhancements in healthcare have never been discussed as a top priority by the housing staff, which is concerning. In order to make sure that the medical emergencies are given priority, the study has looked into the on-call medical services, on-site medical services, professionally trained medical staff, or collaborations with neighboring hospitals.

Relationships and social support networks are another area in which the thesis provides an informative evaluation. The study sheds light on the widespread problem of social isolation among the residents, many of whom claim that their contacts with others don't have the same emotional depth as their ties with their families used to. Many families either don't see their older relatives much or don't keep up meaningful communication, which contributes to the emotions of abandonment. The lack of ability of some residents to keep up these crucial relationships gets worse by rules prohibiting the use of personal cell phones at some old-age homes. Also, tensions within the homes might occasionally arise from the diverse histories of the residents, particularly when people from various socioeconomic or geographic origins find it difficult to relate to one another. The resident's social life becomes even more emotionally complex as a result, further worsening their already extreme isolation.

The thesis accurately portrays the perspectives and experiences of senior citizens living in old age living facilities; many of them show an overwhelming feeling of hopelessness about their situation. Many people perceive life in the houses as a kind of

"waiting" time in which there is little to look forward to other than the bare needs of food and shelter. Many residents believe that their emotional and social needs are not being satisfied, even though some value the security that the controlled environment provides—especially with regard to housing and meals. Many feel that their quality of life has declined since moving into the old home because of a shortage of meaningful daily activities and the emotional distance from family members. The depressing and disconnected feeling that surrounds the lives of many residents is captured in the research.

Even with this thorough image, the thesis might go deeper into strategies for enhancing the residents' mental and emotional health. For example, it may look at how residents would feel more meaning and purpose in their lives if they participated in more exciting daily activities, had closer social links, or even received mental health services. The findings could provide useful recommendations for how old age homes might better support the psychological and emotional health of their older populations by addressing the emotional emptiness that many residents experience.

The study offers a thorough and careful examination of the factors affecting the standard of living for senior citizens living in old age homes in Punjab. The socio-cultural, environmental, healthcare, and social aspects of the residents' experiences are carefully captured, offering deep qualitative insights into their day-to-day lives and emotional states. The study explains major challenges that need to be fixed like the stigma associated with elderly homes, the emotional isolation that many residents go through, and the shortcomings in healthcare services. These issues are essential to understanding the larger difficulties that Pakistan's elderly population in old age homes

faces.

Limitations

The research notices multiple limitations, which are as follows:

- The study focused on a specific location (Lahore) of Punjab, Pakistan, hence the results may not apply to the experiences of senior residents in all old age homes across the province. Future studies can broaden the geographical reach to provide a more comprehensive national viewpoint.

- The experiences of elderly residents in old age homes in urban areas may differ significantly from those of old age homes located in rural areas, in terms of facilities and socio-cultural factors.

- The ratio of women residing in old age homes compared to men is notably lower, particularly in the private sector, leading to research that may be biased toward male perspectives.

- Furthermore, being a qualitative study, the research focuses on subjective experiences, making it impossible to measure characteristics like physical health and mental stability. Future research might benefit from using a mixed-methods approach that combines qualitative interviews with quantitative measurements of well-being.

- Finally, the research acknowledges the possibility of participant unwillingness and language obstacles, which may hinder communication. To address these limitations, future research should use culturally sensitive interview procedures and work with skilled translators to guarantee proper communication

with all people.

Implications

The findings of this research can have a major impact on the following areas:

- **Academic Research:** The results of this study can be further explored in future studies on old age, social welfare, and the lives of elderly citizens in Punjab. The findings can be compared with the research from other institutes, provinces, and nations to identify best practices and possible areas for improvement.

- **Policy Development:** Appropriate regulations and policies can be created with the help of this research to guarantee that old-age homes in Punjab meet the proper regulations and standard operating procedures. The findings can help in creating a higher standard of care and services provided in old age homes.

- **Public Awareness:** The research can help promote elderly citizen's rights and help raise public awareness of the issues they face. It can contribute to societal change by addressing misconceptions and showcasing an accurate picture of senior resident's lives.

- **Social Services:** The research highlights the challenges that senior citizens encounter as well as their overall needs. It promotes support for senior citizens as well as the whole community.

Recommendations

Based on the findings and implications of this research, the following recommendations are proposed:

Policy Recommendations:

- Laws need to be put in place to give senior citizens access to affordable medical care, especially for chronic conditions.

- Government should increase social security benefits, such as pensions and medical reimbursements, to meet the particular needs of the elderly.

- Policies should be introduced to create and carry out infrastructure initiatives, such as ramps, elevators, and public transit, that are inclusive and accessible to senior citizens.

- Training centers should provide training and capacity-building programs for staff working in old age homes to improve their skills and knowledge.

Academic Recommendations:

- To find best practices, compare a number of senior living facilities (private, nonprofit, and government-run).

- To monitor how senior citizens' demands and experiences evolve over time, conduct research studies over time.

- To obtain a thorough grasp of the problems, collaborative research (quantitative and qualitative) should be promoted including public health, psychology, sociology, and elderly care.

Socio-Culture Recommendations:

- To foster respect for senior citizens and community participation in their care, public awareness initiatives should be launched by the old age facilities.

- Volunteer programs or Internships should be initiated by the educational institute to give senior citizens company, help, and emotional support.

- The old age facilities and NGOs need to collaborate with the media houses to educate the public and encourage them to participate in making the old age facilities a better place to live.

- Treat elderly individuals with respect and dignity. Families placing their elders in old age homes should maintain a healthy relationship with their elders and should remain in contact so that their feelings of abandonment can be lessened.

By addressing these recommendations, it is possible to improve the quality of life for elderly residents in old age homes in Punjab as well as in Pakistan and create a more supportive and inclusive society for all.

Conclusion

This study revealed a diverse tapestry of elements that influence the quality of life for senior residents in old age homes in Punjab. Exploring the behavior of residents' institutional features, and sociocultural issues, has given insight into the complexities that influence the experiences of elderly residents in these assisted facilities.

Although the old age homes offer the basic needs of food and shelter, many residents suffer from social and emotional isolation, restricted access to healthcare, and decreased quality of life. Communication issues, social stigma, and a lack of cultural activities add to the resident's sense of loneliness. Environmental issues, such as limited living spaces and lack of mobility also impact the well-being of elderly residents. Access to medical consultants and medical treatment is restricted, and healthcare services may not be sufficient and satisfactory. The resident's problems are worsened by internal conflicts, lack of social support, and occasional family visits. The study's findings emphasize the need for more streamlined strategies that address the healthcare services, and social, and emotional requirements of senior citizens living in Old Age facilities in Punjab.

The results of this research can help shape and align the overall old age home facilities that promote social interactions, cultural sensitivity, and support for religious beliefs. Making it easier for the residents to build meaningful connections with other residents, the staff, and their families can help deal with the feeling of loneliness and provide a greater sense of community. Furthermore, adding elements of the different cultures into everyday routines and activities can give a sense of security and belonging

to the residents.

This research also emphasizes respecting the resident's different religious beliefs and supporting them. By providing access to religious services and allowing them to celebrate their religious festivals, old age homes can enhance the resident's general well-being.

The research is also a step towards getting purposeful insights into the experiences of life for elderly patients in old age homes in Punjab. By shedding light on the factors that influence their mental and physical health, we should be able to create more engaging and comfortable environments for the residents. Finally, the objective of the study is to make sure that these assisted facilities are not just providing the least physical care, but also offering a feeling of community, social connections, and emotional and spiritual fulfillment to Punjab's elderly population.

References

Abbas, M., Jabeen, S., Idrees, A., Safdar, M. S., Safdar, A., Siddiqui, M., Hamid, I., & Sherazi, M. R. (2022). Health-Related quality of life among senior citizens in territory of Islamabad Pakistan-A community based Cross-Sectional study. *Ageing International*, *47*(3), 465–476. https://openurl.ebsco.com/EPDB%3Agcd%3A16%3A19201520/detailv2?sid=ebsco%3A

Arshad, Z. *REHABILITATING PAKISTAN'S ELDERLY POPULATION: Ever Increasing Issues of Old Age | Centre for Business and Society*. (n.d.). (2018) https://cbs.lums.edu.pk/student-research-series/rehabilitating-pakistans-elderly-population-ever-increasing-issues-old-age#:~:text=Key%20findings,due%20share%20of%20the%20GDP.

Cassum, L. A., Cash, K., Qidwai, W., & Vertejee, S. (2020). Exploring the experiences of the older adults who are brought to live in shelter homes in Karachi, Pakistan: a qualitative study. *BMC Geriatrics*, *20*(1). (2020) https://bmcgeriatr.biomedcentral.com/articles/10.1186/s12877-019-1376-8

Cassum, L. A., The impact of the institutionalization of the elderly in Pakistan. *The Express Tribune*. Tribune. (2021, January 13). https://tribune.com.pk/article/97262/the-impact-of-the-institutionalisation-of-the-elderly-in-pakistan

Earland, J., Earland, J., & Ahmed, M. A. (2021). Experience of conducting sensitive qualitative research as a cultural outsider: Formulation of a guide for reflexivity. *International*

Journal of Qualitative Methods, 20,

https://journals.sagepub.com/doi/pdf/10.1177/16094069211058616

Gul, S., Parveen, Q., & Yousuf, M. I. (2018). Ethics of conducting research in social sciences at

the university level in Pakistan. *Global Social Sciences Review*, *III*(IV), 486–497.

https://www.researchgate.net/publication/342528521_Ethics_of_Conducting_Resear

Tariq, J., Zakar, R., Ali, M.V. *et al.* Determinants of physical, psychological, and social

well-being in older adults: a cross-sectional study in senior care facilities of Pakistan

(2019/20). *BMC Geriatr* 23, 349 (2023)

https://bmcgeriatr.biomedcentral.com/articles/10.1186/s12877-023-04014-w#citeas

https://www.worldometers.info/world-population/pakistan-population/#google_vignette

https://www.pbs.gov.pk/sites/default/files/population/2023/Key_Findings_Report.pdf

https://rentechdigital.com/smartscraper/business-report-details/pakistan/old-age-homes

https://www.pbs.gov.pk/sites/default/files/population/2023/Press%20Release.pdf

<u>**Appendix A**</u>

<u>**Informed Consent Form**</u>

Title of Research Study: Exploring the Quality of Life for Elderly Residents in Old Age Homes in Punjab: A Qualitative Inquiry into Socio-Cultural Factors and Perceptions

Researcher: Amna Salahuddin-Forman Christian College (A Chartered University)

Introduction to Study:

You are invited to participate in a research study that explores the experiences of elderly residents in old age homes in Pakistan. This study aims to understand how socio-cultural factors and your perceptions influence your quality of life within these facilities.

Certificate of Consent:

If you agree to participate, you will be agreeing to the following terms:

- Participate in an in-depth interview (lasting approximately 30 minutes - 1 hour) where you will be asked questions about your experiences in the old age home

- All your information will be kept confidential. Your name and any other identifying details will not be used in any reports or publications.

● There are no direct benefits to you for participating in this study. However, your participation may contribute to a better understanding of the needs and experiences of elderly residents in old age homes.

● You are free to decline to answer any questions you feel uncomfortable with.

● Your participation in this study is entirely voluntary. You are free to choose not to participate.

● You can withdraw from the interview at any given time.

Your Consent:

By signing below, you indicate that you have read and understood this consent form and agree to participate in this study.

Participant Signature: _____

Date: _____

Appendix B

Interview Guide

Age:

Gender:

Marital Status:

Hometown:

Socio-Cultural Factors:

- Does the old age home allow you to practice your religion or participate in your festivals (Eid/Christmas/Diwali)? (If yes, Is there a designated space available for prayer? If no, have you ever requested the administration to have one, and how did they respond?)

- How do you believe your cultural background influences your interactions with staff and other residents?

Environmental Factors:

- Could you describe the environment (living conditions/medical conditions) inside this old home and how it affects your daily life?

- How do cleanliness, noise levels, and safety affect your overall pleasure with living here?

- What obstacles or hurdles do you face while living in this old age home? (probe; have you complained to the administration? What have they done regarding this)

Healthcare Services and Accessibility:

- How often do you get doctor's visits? (probe, do you get immediate treatment when you are sick or in an emergency?)

- Can you tell me about your experiences receiving healthcare services (checkups/ medicines/ medical tests) while living here?

- Are there any specific healthcare needs that you believe are not being sufficiently met in the old home? (Probe; if yes, what are those needs?)

Social Support Networks and Relationships:

- How does living here differ from your prior living situation in terms of social interaction and emotional well-being?

- How satisfied are you with the social interactions you have with other residents and

- Staff?

- When did you come here and who dropped you? (Probe, are you in contact with them? Does the old age home promote or support you in staying in touch with your family?

Perceptions and Experiences:

- Can you describe your living circumstances before moving to the old age home (for example, living with family or alone)?

- How would you evaluate your overall quality of life after relocating to an old age home? (Has it increased or decreased)

- Can you describe some of the benefits of residing in this old age home?

- Is there anything you would want to see improved at the old age home to improve residents' quality of life?

- Do you have any suggestions for families thinking about placing an elderly member in an old age home?

- Is there anything else you'd like to say about your experience in an old age home?