

Socio-Economic and Health Problems of Age Old: A Cross-Sectional Study in Chikodi Taluk

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Abstract: The present study is an attempt to examine how elderly people facing social economic and health problems in their day today life. The main objectives of the study are to examine living conditions, socio-economic status, social contacts and health conditions of age old persons. This Study conducted in rural area of Chikkodi taluk of Belgaum district in Karnataka state. Sample respondents were selected by simple random sampling technique and a structural interview scheduled was prepared for collection of data. The study reveals that Majority of the respondents belonged to nuclear families. High percent illiteracy among the other literate categories reveals the lesser importance given to education for women by the society. Maximum respondents were suffering with disease of Hypertensions and Anemia. Age old persons are not satisfied with their earnings. They have felt of insecurity. Illness of spouse and poverty is the main cause of insecurity feelings of age old.

Keywords: Socio-economic, Health, Age old, social contacts, Insecurity, Attitudes.

1. Introduction

India is a rich country with rich cultural heritage which is thousands of years old. Every one religion like Hinduism, Buddhism, Jain, and other religions belong to devotional schools, and folk traditions rules and guidelines on birth, growth and old age. Hindu Ashram system categorized the every individual's life span in four stages Brahamacharya, Grihastha, vanaprastha and sanyasa. The last stage of sanaysa had plenty of knowledge, an experience, which helps to lead ascetic life. In all families, the aged are cared and obeyed for their services rendered by them for family members.

Indian rural society's characterized by traditional systems like caste, family, kinship etc. caste and joint family systems and kinship encourage living together in neighborhood. This living together system helped the young and the old people to lead and enjoy happy life with fulfillment of all desires. These systems helped them to protect good health and contacts also. The knowledge elderly help to their group by way of setting disputes, conflicts; they give advices guidance for needy people. They engaged themselves in socio-religious activities and felt busy in life. Sometimes, aged feels helpless and useless about themselves and their family and in their community also. This feeling give to anxiety and depression in old age ageing is a fact it. Some people have graceful ageing which consists of important three aspects. Like good adjustments and satisfaction of life they always maintain good understanding and affectionate relationship with family members and neighbors and with community.

One the contrary some people feel and perceive agency as a problem and burden to the family. They feel neglected ignored and less respected in family. Elders often silent in their day today sufferings and incapability because they may be physically and mentally family and society elder people are likely to face some problems in daily life. Physical problems like loss of eye sight, loss of bearing capacity and

some old age diseases, diabetes and hypertension are common. These all physical problems reduce their mobility and increase the physical problems.

Psychological problems are also common among elder one. The loss of occupation is main cause for psychological depression in the minds of some people. The family members are unable to understand the mental condition of age old. Loneliness and feeling of isolation is main problems. Because of physical problems elder people face the social problems also some are very busy with their occupation and family responsibilities. In old age they stop to participate in social activities and reduce social contacts. Economic incapability also brings many problems among age old. They depend on their children and family members. It disturbs the life of age old weak and sick persons and not earning and also not having saved enough for their last days they were facing a variety of problems.

In olden days society provides the needed security and support to the aged their skills, knowledge, experience were also utilized for the development of family and society. Now in old age being retired from active duties and having fulfilled their responsibilities, the aged have plenty of free time. They engaged in socio-religious activities and socio service activities also.

2. Methodology

The present study is an attempt to examine how elderly people facing social economic and health problems in their day today life. The study is both descriptive and analytical based on primary and secondary sources. The present study conducted in rural areas of chikodi taluk. The sample respondents were selected by simple random sampling teaching the total 120 respondents 60 male and 60 female age old were selected from 6 villages selected for the present study .A structural interview scheduled was prepared for

relevant information collection from elderly person who belonged the age group above 50+.

3. Objectives

This paper examines some of the social economic and health problems faced by the age old. The main objectives of the study are as below.

- 1) To examine living conditions of the aged.
- 2) To study social and economic status of the age old.
- 3) To examine social contacts of age old.
- 4) To study health conditions of age old.
- 5) To know the awareness of the respondents about government policies.

Table 1.1: Age Group of the Respondent

Age Group	Male		Female	
	Frequency	%	Frequency	%
50-55	20	33.33	22	36.66
56-60	25	41.67	29	48.33
61-65	05	8.33	04	6.66
65+	10	16.67	05	8.33

Table 1.1 shows that (20 male and 22 female) aged belonged to the age group of 50 to 55 and 25 and 29 aged belong 56 to 60 years (5 male and 4 female) belong to the age group of 61 to 65. Remaining (10 and 5) were belonged the age group of above 65 years. Above data clearly shows that majority of female aged and male aged belonged the age group of 56 to 60 years It shows that the female aged number is higher than the male aged.

3.1 Marital Status of the Respondents

The study of marital status of the aged helps us to understand the type of life lead by age old. In traditional Hindu society the marital status of an individual conveys the many things lack of their socio-economic and religious, health status in family as well as community. In traditional setup the beliefs and products influenced the moral and religious life of individuals. The divorced and widows and separated women is considered as very inauspicious and lower marital status helps to understand the psychological conditions of the aged also.

Table 1.2: Marital Status of the Respondents

Opinions	Male		Female	
	Frequency	%	Frequency	%
Married	37	61.66	39	65.00
Unmarried	03	0.05	02	03.33
Widower	19	31.66	19	31.66
divorced	01	0.01	-	-
Total	01	100.00	60	100.00

Table 1.2 shows the marital status of the respondents (37 and 34) are married (3 and 2) are unmarried and (19 and 19) are widower and widows and one male age old is divorced. Above data shows that the majority of male and female aged are married. Three men and two women are never married. Among the widowed 19 were men and 19 were women. In the present study equal number of men and women are widows and widower.

Table 1.3: Type of family of the respondents

Type of family	Male		Female	
	Frequency	%	Frequency	%
Joint family	20	33.33	28	46.67
Nuclear family	32	53.34	22	36.67
Single family	08	13.33	10	16.66
Total	60	100.00	60	100.00

In a traditional society the institution of family plays an important role. The joint family and elder members takes the honorable place among the family and community. The joint families claimed kin relation to the family for Hindus where all those who claimed kin relation to the family got a place to live and for maintenance.

Above data clearly shows that majority of the respondents were belonged to nuclear families. Today owing to loss of traditional values joint families have integrated nuclear families. Because of modernization the number of single families also increased.

3.2 Educational level of the Respondents

Education is an important aspect in society. Informal and formal education is needed to the every one individual. The attitude of the education towards the formal education is important to the development of society.

Table 1.4: Educational level of the Respondents

Opinion	Male		Female	
	Frequency	%	Frequency	%
Illiterate	46	76.66	51	85.00
Literate	11	18.33	5	08.33
Primary	03	0.05	4	06.66
Secondary	--	--	--	--
Total	60	100	60	100

Above table 1.4 shows that (46 male and 51 females) aged are Illiterate (11 male and 5 female) aged are literate (03 male and 4 females) aged studied up to primary school level education. The above information clearly shows that high percent illiteracy among the other literate categories reveals the lesser importance given to education for women by the society.

Table 1.5: Occupational status of the respondents

Opinion	Male		Female	
	Frequency	%	Frequency	%
Working	52	86.66	48	80.00
Not working	08	13.34	12	20.00
Total	60	100.00	60	100.00

Occupational background of the aged is an important aspect to understand their life and living conditions of age old in rural areas the available occupations like agriculture, labour, services and home industries are common. All category people engaged in these occupations regularly. Table 1.5 indicates that (52 male and 48 females) are engaged in different at occupations like agriculture working as daily labourer etc. Remaining (08 male and 12 females) are not working. They are leading rest life to compare female aged higher number of male aged engaged in many occupations who are not working, they facing the problem of poverty.

Table 1.6: Social contacts of the respondents

Opinion	Male		Female	
	Frequency	%	Frequency	%
With relatives	27	45.00	23	38.33
With friends	11	18.33	12	20.00
With neighbors	22	36.33	25	41.66
Total	60	100.00	60	100.00

To know the social status of aged is an important aspect. Everyone is an individual in their young and middle age. Some were continue contact to become busy in old age also. But some age old unable to maintain good contact with any. Above table shows that 27 male and 23 female aged having good 11 male and 12 female aged maintain good contacts with their friends. Remaining 22 male aged and 25 female aged having social contact with Neighbors, majority of the age old opines that they want to be maintain good relations.

Table 1.7: Health condition of the respondents

Disease	Male			Female		
	Yes	No	Total	Yes	No	Total
Hypertention	49 (81.60)	11 (18.33)	60 (100.00)	52 (86.66)	08 (13.33)	60 (100.00)
Diabetes	21 (35.00)	39 (65.00)	60 (100.00)	25 (41.66)	35 (58.33)	60 (100.00)
Asthma	13 (21.66)	47 (78.33)	60 (100.00)	28 (46.66)	32 (53.33)	60 (100.00)
Anemia	42 (70.00)	18 (30.00)	60 (100.00)	49 (81.66)	11 (18.33)	60 (100.00)
Skin problem	7 (1.66)	53 (88.33)	60 (100.00)	19 (68.33)	41 (68.33)	60 (100.00)

Old age is occupational by a few health complaints such as hypertension, diabetes, asthma, anemia and etc with these problems like joint plan. Blindness deficiency and hearing and blood pressure also. Because of lack of awareness and poor economic condition they are unable to afford good traditional for their problems. Above table 1.7 shows that 49 male and 52 female aged facing the problems of hypertension 21 male and 25 female age old having the problems of anemia in their day today life. Some age old (7 male and 19 female) having skin problems also. Above data clearly shows that majority of the rural age facing the health problems like hypertetion, diabetes, asthma and anemia. Lack of awareness about good nutritious food and sanitation they face the health problems.

3.3 Economic insecurity of age old

Age old to lead leisure time or free from their heavier duties and responsibilities PF earning for themselves for them and their families some age old work active and make use of their skill and knowledge experience for their family development.

Table 1.8: Economic insecurity faced by age old

Opinion	Male		Female	
	Frequency	%	Frequency	%
Yes	50	83.33	53	88.33
No	02	03.33	01	1.67
Sometimes	08	13.33	06	10.00
Total	60	100.00	60	100.00

Above table shows that (50 male and 53 female) aged facing economic in security in their daily life. They engaged in some occupations to earn something which helps to lead their life. But they are not satisfied with their earnings. 08 male and 6 female age old also feel economic insecurity sometimes only limited respondents (2 male and 1 female) told they do not feel economic insecurity.

Table 1.9: Attitude towards old age

Attitude	Male		Female	
	Frequency	%	Frequency	%
Partially affected	09	15.00	05	8.33
Neglected	17	28.33	19	31.67
Unhappy towards old age	12	20.00	08	13.33
Feeling too burden	15	25.00	19	31.67
Natural feeling	07	11.67	09	15.00
Total	60	100.00	60	100.00

Being an old is a common to all individuals' life. Some age old lead happy and satisfied life they have good attitude towards to become old. Above table shows (15 male and 19 female) age old feel being old is burden in their life. 17 male and 19 female age old feel neglected in their old age time. Some are feeling unhappy and some respondents told that old age id partially affected in their day today life. Remaining, 7 male and 9 female age old having natural feeling towards their old age. Majority of the respondents have unfavorable attitude towards about old age.

3.4 Reasons for feeling insecure in old age

Old age is associated with many problems. So many reasons play a vital role to feel insecure in the time of old age socio-economic problems and psychological problems are common among all type of aged persons.

Table 1.10: Reasons for feeling insecure

Reasons	Male		Female	
	Frequency	%	Frequency	%
Regular illness	12	20.00	10	16.67
Irresponsible son	08	13.33	11	18.33
Unmarried daughter	06	10.00	06	10.00
Unmarried son	04	06.67	07	11.67
Illness of spouse	16	26.67	15	25.00
Poverty	14	23.33	11	18.33
Total	60	100.00	60	100.00

Above table 1.9 shows that various feeling for socio-economic and emotional insecurities. 16 male and 17 female age old feel insecure because of illness of their spouse with this reason 14 male and 11 female age old feel insecurity because of poverty. Some respondents feel insecure because of their unmarried daughter and sons. Remaining 12 male and 10 female respondents feel insecure due to illness of spouse poverty and their health problems. Government and Non government agencies provide so many facilities to age old to overcome their problems some polices and programmers provides the food shelter clothing and health facilities to the needy age old persons .In rural areas the lack of awareness regarding programmes restrict to utilize the programmes.

Table 1.11: Knowledge about welfare programme

<i>Opinion</i>	<i>Male</i>		<i>Female</i>	
	<i>Frequency</i>	<i>%</i>	<i>Frequency</i>	<i>%</i>
Yes	17	28.33	12	20.20
No	43	71.66	48	80.00
Total	60	100.00	60	100.00

Above data clearly shows that 17 male and 12 female respondents having some knowledge about government welfare programmes provided by age old. Majority of the respondents (43 male 48 female) do not have any awareness regarding welfare programmes. It shows that the illiteracy among respondents is the main cause for lack of awareness regarding welfare programmes.

4. Conclusion and Recommendations

India is a vast country with all region and diverse culture. All religions give importance for all stages of individual life. In everyone's society status of a person is determined by his roles and power, authority he holds. The role playing is differing from age, sex, and position of person depending on skill knowledge and satisfaction. Old age is both boon and a curse. An individual who has economic capabilities and all skills knowledge lead good life in old age also. Aged are part of a society and they have also contributed to the well-being of society every one aged had a dominant and important position in family and community even then aged faced many problems and insecurities, helplessness in this stage. In traditional society the values of family and caste and community always protect the interests of age old and respect them in all time but now society began to change due to modernization and western values resulted in the loss of traditional values in turn brought problems and insecurities to the aged.

Rural society characterized by caste and kinship and village settlements are clustered type where caste and kinsmen living together as neighbors. This type of living together helped to young and old to live safely elder persons are great contributors of society. They help to younger to settling disputes, offering advice and guidance they take all responsibilities in all socio-religious practices also. The present study is aimed at knowing the problems of the rural aged in Chikodi taluk. The age old population is shown to increase with modern medical investigations. In rural setup age old lived with so many problems socio-economic and psychological and health related problems, insecurities have been taken in this present study.

The main finding reveals that majority of age old belong to the age group of 56-60 years. They feel higher dependency in this stage the socio-economic insecurities are common among age old majority of the respondents having good social contact with friends community members and neighbors. They want to lead life with all adjustments and commitments of family and community they spend leisure time to practice socio-religious celebrates and guide the young generation with the help of their knowledge wisdom and experience.

Health insecurities are common among age old due to lack of knowledge about good nutritious food and health

facilities, they are facing some ill health problems insecurities they feel dependent on others family difficulties brings hypertension among both male and female aged. The working age old also feel economic insecurities. In their limited income they are unable to afford all medical expenses and other necessities; again they depend on other family members. They feel neglected by their family members. Majority of age old do not have good and favorable attitude towards about their old age. They feel burden and unhappy about their age. The illiterate age old unable to understand the government policies and programmes which is provided for welfare of age old. Some responsibilities told that they are not interested to utilize the benefits also. In the light of our findings and analysis of the data researcher have the following suggestions and recommendations;

- 1) There is a great need for an in depth study of age old in rural areas.
- 2) Every one individual to take social security by family and community.
- 3) Health facilities and free medical care should be provided in rural areas.
- 4) The school and college students should be trained to meet the needy age old in rural areas.
- 5) The awareness is needed among illiterate age old about government policies and programmes.

Reference

- [1] Desai K. G (1982): Aging in India, Bombay, Tata institute of social science
- [2] Ishwaram K (1966): Tradition and economy in village India, London routledge and kegan paul.
- [3] Prabhu P. H (1979) : Hindu social organization Bombay popular
- [4] Phelps Harolda and Henderson Dand (1952) Contemporary social problems, practice hall Inc. New York.
- [5] Status of elderly women in India (2010) Agewell Foundation.