

Elderly Problems in Rural Andhra Pradesh – A Preventive Strategy

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ABSTRACT

The socio economic problems of the elderly are aggravated by factors such as lack of social security and inadequate facilities for the health care, rehabilitation, and recreation. Also, in most of the developing countries, pension and social security is restricted to those who have worked in the public sector or the organized sector of industry .The 60th National Sample Survey (January-June 2004) collected data on the old age dependency ratio . It was found to be higher in rural areas than urban areas. So the research carried out with the objectives to assess the socio-economic, demographic and health status and psychological problems care and support received from the family. The study carried out in Kanpur village it comes under Nellore district of Andhra Pradesh. The study result that majority of the elderly 75 years and above. As regarding the gender aspect half of the respondents were males (50%) and the other females (50%). Most of the respondents had stated that they are facing minor health problems (Body pains, cough, cold, indigestion, less sleeping etc.) and long term health diseases (Blood pressure, Diabetes, Cardiovascular, Impaired vision, Loss of memory, Impaired hearing). The study reveals that nearly two fifths i.e. 40 percent of the respondents were facing impaired vision and one third i.e. 32 percent of the respondents were having cardio vascular, one fifths i.e. 20 percent were having loss of memory, one sixths i.e. 16 percent were having diabetes problem, one sixths i.e. 14 percent were having blood pressure and one tenths. The study reveals that 100 percent of the respondents were having anxiety over health and three fifths i.e. 70 percent of the respondents expressed that their financial sources are not enough to meet their needs due to less income, four fifths i.e. 75 percent were having feeling of spouse. Three fifths i.e. 60 percent of the respondent's family members are not taking their opinion in family matters. The preventive strategy formulated by the researcher to make elderly stay happy physically, psychologically, socially, economically. Now-a-days we have been facing lots of burning problems among which the elderly problem is also a perennial and prom dial problem to be taken in to consideration.

Key words: Elderly, health problems.

INTRODUCTION

The population ageing or demographic ageing is global phenomenon. The demographic transition in which population moves from high to low fertility rates has created a worldwide trend towards an increasing overall number of elder people constituting an increasing proportion in the society

(UNPD, 2003). Indeed in 2000, people aged over sixty five totaled more than 419 million or 6.9 percent of the world's population. The same group expected to rise to 1419 million people, or 15.9 percent of the world population by 2050 (UNPD, 2003). India is currently going through the initial stages of

the ageing of its population, a phenomenon that started decades ago in developed countries. India is expected to continue to age at a constantly increasing rate and will face a serious problem in the next 50 to 100 years. The population of the elderly is increasing all over the world. The elderly population is going to cause major political, socio-economic and psychological problems of the world. India is the second most populous nation and is home to the fourth largest population of elderly people in the world. One in eighth among older persons in the world now lives in India. The older population has been increasing steadily in number and proportion. According to Indian census figures, there were 12.1 million in the 60 plus age group in 1901, the number rising to 24.7 million by 1961, and then, following sharp increases in each decade, to 55.3 million in 1991 (Government of India 2000). In 1999, the figure, according to the United Nations, stood at 75.2 million, which was eight percent of the country's total population of 998 million. This is expected to rise to 21 percent, 323.9 million, of the population by 2050.

As greater Urbanization has resulted in the out migration of the younger generation, more old parents live in rural areas and work in agriculture. Majority of the elders belongs to unorganized sector and particularly to lower middle income group. Middle income people are exposed to misery. According to 2001 census, out of 80 million elderly 71 million are in the unorganized sector, which is likely to increase by 120 million by 2031. Elderly from organized sector have social security benefits like pension, health services etc., which can combat the expenses of the elderly to some extent. The benefits available for elderly from unorganized sector are a meager amount of Old Age Pension Schemes etc., (Which is far less than the actual needs). Those of the

elderly who are poor and whose families continue to be poor constitute the most vulnerable section of the aged population. Today 90 percent of India's elderly population lives in the poverty line and 50 percent them are widows and widowers are especially vulnerable to poverty (Times of India, 08.02.2000).

In Indian rural society the elderly are facing physical, psychological, social and economic problems due to lack of ample support from their children. The second reason for their suffering is that they had not saved enough money for their future life when they reach old age. Despite, the property is in the name of aged people, it has been looking after by their children. As a result the aged are unable to enjoy the fruits of the property they legally owned. The heirs who enjoy the property of their parents are financially exploiting them. . For the elderly reduced income along with acute and chronic illness, inadequate housing, loose of physical fitness, inaccessible public services and insufficient social support is leading to dependence on others.

The socio economic problems of the elderly are aggravated by factors such as lack of social security and inadequate facilities for the health care, rehabilitation, and recreation. Also, in most of the developing countries, pension and social security is restricted to those who have worked in the public sector or the organized sector of industry .The 60th National Sample Survey (January-June 2004) collected data on the old age dependency ratio . It was found to be higher in rural areas than urban areas. With regard to the state of economic development a higher number of males in rural areas, 313 per 1000, were fully dependent as compared with 297 per 1000 males in urban areas. For the aged female, an opposite trend was observed (706 per 1000 per females in rural areas compared with 757 for females in urban areas). On an average

30% male and 73% females in geriatric group are economically dependent, mainly on their children.

Methodology

In the light of above facts, a study was carried out with the objectives to assess the socio-economic, demographic and health status and psychological problems care and support received from the family. The study carried

out in Kanpur village it comes under Nellore district of Andhra Pradesh. **Sample, sampling unit, sample size.** An interview schedule is developed and utilized for the data collection. Non-participant observation is also utilizes for data collection to improve the quality of data and also supplement to the schedule.

Results and discussions

Demographic and socio- economic characteristics of the elderly are very important to understand the problems among the elderly which are presented in table.

Table-1: Percentage -wise Respondents Distribution According to their Socio-economic status.

Characteristic	Categories	Percentage
Age	60-64	28
	65-69	44
	70-74	20
	75 and above	88
Total		100
Sex	Male	50
	Female	50
Total		100
Education	Illiterate	58
	Read & write	22
	Primary education	18
	Higher education	2
Total		100
Caste	O.C	18
	B.C	12
	S.C	42
	S.T	28
Total		100
Family type	Nuclear	50
	Total	
Occupation	Not applicable	22
	Agriculture	32

	Business	18
	Daily wage work	20
	Pensioners	8
Total		100
Characteristic	Categories	Percentage
Income	<Rs 5,000	20
	<5,000-10,000	14
	Rs 1000,-15,000	42
	Rs 15,000 and above	24
	Total	100
Source of income	Agriculture	40
	Cattle	28
	Petty business	16
	Vegetable business	16
	Total	100
Marital status	Married	46
	Widow	38
	Widower	16
	Total	100
Availing pension facility	Availing	70
	Not availing	30
	Total	100

It is clear from the data (Table no.1) that major proportions (88 percent) were in the age group of 75 years and above. As regarding the gender aspect half of the respondents were males (50%) and the other females (50%). Nearly three fifths (58 percent) of them are illiterates and more than two fifths (42 percent) belonged to scheduled caste and all the respondents were in nuclear families. With the advent of industrialization, urbanization and modernization radical

changes have taken place in the society. The family system is in transition shifting from the traditional extended and joint family system in the pre industrial period to the modern nuclear family. This changing pattern of the family has deleterious effects for the elderly. In the family system even the extended and joint families particular from the lower and middle aged elders are under great economic pressure, the reasons are meager income on one had increasing necessities on the besides

lack of opportunities for employment. Thus making the life miserable for the elderly. Further the study stated that nearly one third (32 percent) of the respondents are in Agriculture sector, and more than two fifths (42 percent) were having personal annual income between Rs. 10,000-15,000 though nearly one fifth (20 percent) of the respondents have an annual income of less

than 5,000. However, most of the respondents getting their annual income through the source of agriculture and agriculture work. Pertaining to the marital status of the respondents, the respondents revealed that all the respondents were married, out of them, the above half of the respondents (54%) were widows, widowers (38%).

Table no-2: Health problems faced by the respondents

Health problems	YES		NO		Total	
	Number	%	Number	%	Number	%
Blood pressure	7	14	43	86	50	100
Diabetes	8	16	42	84	50	100
Cardiovascular	16	32	34	68	50	100
Impaired vision	20	40	30	60	50	100
Loss of memory	10	20	40	80	50	100
Impaired hearing	5	10	45	90	50	100

Table -2, gives the health problems faced by the respondents. Most of the respondents had stated that they are facing minor health problems (Body pains, cough, cold, indigestion, less sleeping etc.) and long term health diseases (Blood pressure, Diabetes, Cardiovascular, Impaired vision, Loss of memory, Impaired hearing). The study reveals that nearly two fifths i.e. 40 percent of the respondents were facing impaired vision and one third i.e. 32 percent of the respondents were having cardio vascular, one fifths i.e. 20 percent were having loss of memory, one sixths i.e. 16 percent were having diabetes problem, one sixths i.e. 14 percent were having blood pressure and one tenths i.e. 10 percent of the respondents were having hearing problem.

Table-3: social and psychological problems faced by the respondents.

S.no	Social and psychological problems	Percentage (%)	Total
1	Financial sources are not enough to meet the respondents.	70	100
2	Family members are not considering the respondents opinion in family matters.	60	100
3	Pension is not sufficient to meet the respondent needs	60	100
4	Feeling of fatigue	40	100
5	Feeling of loneliness	60	100
6	Felling of lack of love and affection	68	100
7	Felling of care and support	40	100
8	Anxiety over health	94	100
9	Anxiety of their treatment	54	100
10	Felling of spouse	75	100

Table-3. Explains about the social and psychological problems faced by the respondents. The study reveals that 100 percent of the respondents were having anxiety over health and three fifths i.e. 70 percent of the respondents expressed that their financial sources are not enough to meet their needs due to less income, four fifths i.e. 75 percent were having feeling of spouse. Three fifths i.e. 60 percent of the respondents family members are not taking their opinion in family matters like (respondents grand children marriage matters, buying and selling the agriculture land or other any other properties, in family management matters etc). Three fifths i.e. 60 percent of the respondents who are taking the aged pension they said that pension is not sufficient to

meet their general needs (purchasing the grocery items, medicine, clothes, etc.) due to inflammation in market and the same percent were having feeling of loneliness lack of their children love and affection With the advent of old age retirement from activity socio-economic life individuals starts facilities neglected and deprived of social participation. Life spans change and adaptation are the leading issues at this stag. Further the study states that nearly three fifths i.e. 68 percent were having feeling of love and affection, nearly three fifths i.e. 54 percent were having anxiety of their treatment and two fifths i.e. 40 percent of the respondents were feeling of fatigue, the same percent were having feeling of care and support.

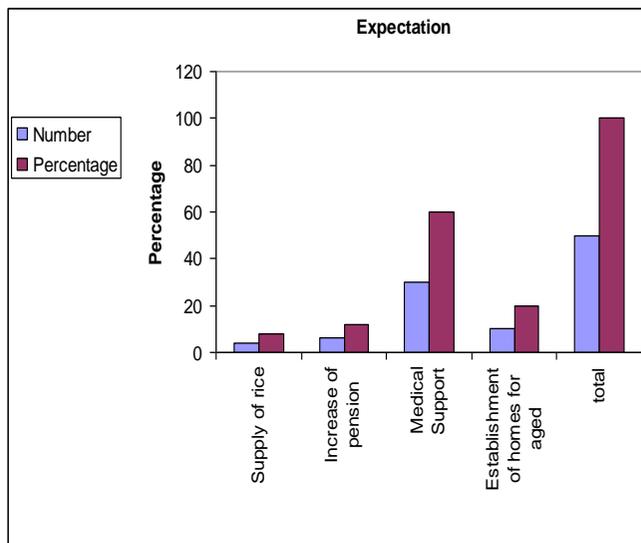


Fig: 1 Respondents expectation regarding Governments.

Fig: 1 Explain about the respondents expectation regarding government. Three fifths i.e. 60 percent of the respondents expecting support from government regarding medical relief, 22 percent of the them desire a hike in the pension, 20 percent of them are wishing that homes for aged may be established by the government without any charges being laid and 8 percent of them seeking more supply of rice and clothes through ration card.

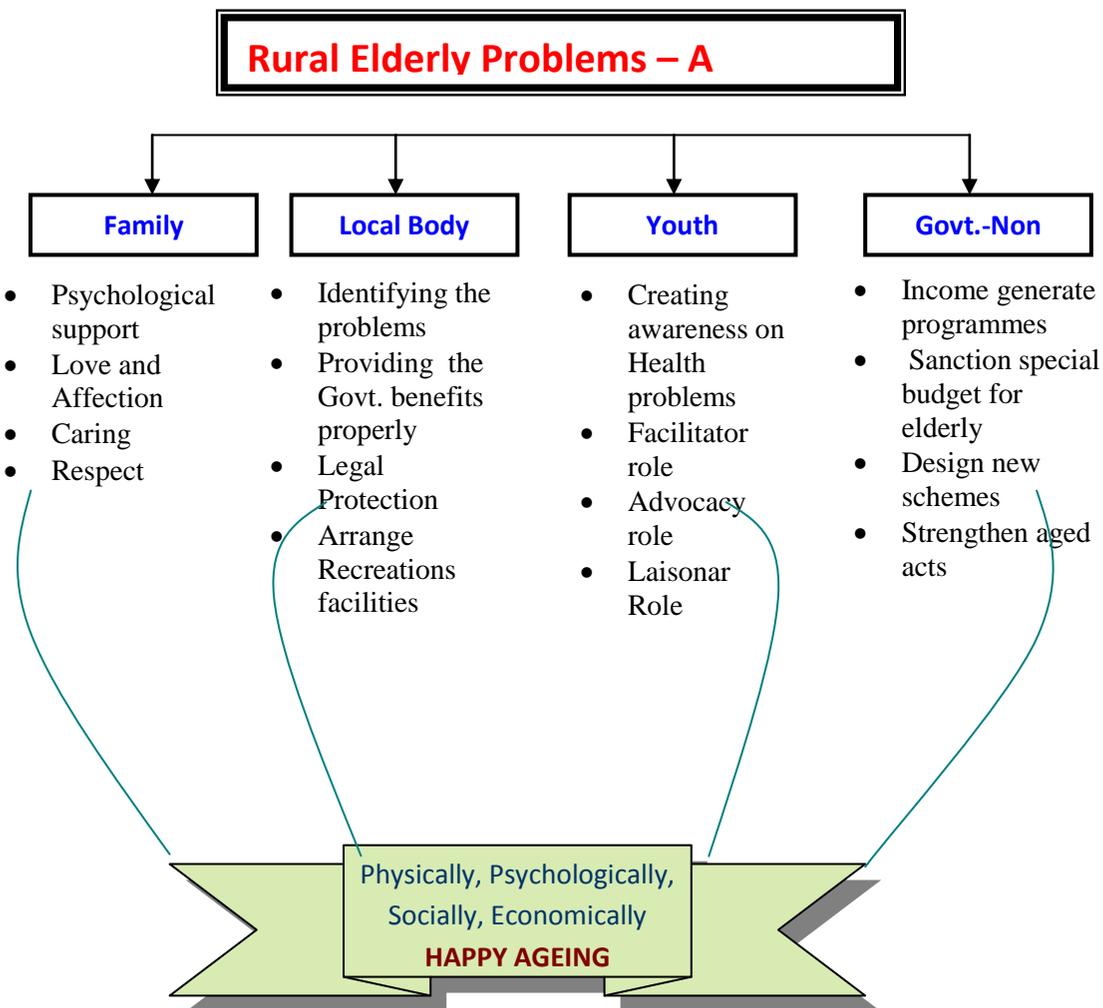


Fig: 2 Explain about the preventive strategy formulated by the researcher to make elderly stay happy physically, psychologically, socially, economically. Now-a-days we have been facing lots of burning problems among which the elderly problem is also a perennial and prom dial problem to be taken in to consideration. We have caved out many reforms and legal acts to make the elderly stay happily but this problem has been haunting like a devil and creating impediments in the process of progress. Why are we logging behind in achieving the success? The big answer is **'FAILURE IN PRACTICE'**. Failure in the practice and adhering to the legal acts and welfare

schemes is the major cause in logging behind and in achieving the desired results in elderly problems. How many welfare schemes have been designed? How many legal acts have been carved out? Are not the questions but how far we have achieved success in the progress of implementation and practice of the designed framework to get rid of problem are the pivotal pillars in achieving.

Hence, the researcher has framed a preventive strategy to create a congenial and pleasant atmosphere to make the elderly stay happy physically, psychologically, socially, economically. If we take a few steps to mitigate the dire ageing problems in rural society with the involvement of prominent

role of the Family, Youth, Local bodies, Government, Non-Govt. organizations we can create a happy atmosphere in the rural society making ageing problem a less object.

Suggested roles to be performed by the following disciplines of the society

1. FAMILY: At the time of ageing, every human being prone to physical, psychological, social, economical problems and lack of care and mostly the aged people expect for the psychological support, love and affection of the family members to get rid of themselves from the psychological fatigue and frustration. The aged people also feel sad due to the lack of respect from the family members. In these circumstances the family has to play a pivotal role in extending the Psychological support, Love and affection, Care, and respect to make the aged people live happily.

2. LOCAL BODY LEADERS: Local body has to play a central role, after the family, in looking after and taking the responsibility of the aged people in quenching and meeting the social needs. The local body has to identify the problems and sufferings of the aged people, helping them to receive the benefits provided by Govt. Further, the local leaders have to provide with the legal protection cum- legal help to the aged people because they will be in an exploitable position. Unlike and contrary to the urban areas, the rural aged people have not been provided with recreational facilities. The local body has to take initiation to create recreation facilities for the aged people by establishing Libraries, Recreational Clubs, performing dramas on mythologies, narrating the folk dramas etc. The aged people may feel psychologically happy through participating and experiencing the above recreation facilities.

3. YOUTH ASSOCIATIONS: Youth is the hub and core of the gyre of progress. Any society

or nation thrives a lot with the active participation of the youth. Youth have to play a crucial role in reducing the predicaments of the ageing. The youth have to pay attention in creating awareness among the aged and their health problems in particular and to take up preventive measures to avoid the problems of the aged in general. The youth associations also should act as a facilitation role in guiding the aged people in all deeds and helping them in arranging medicines and other facilities. Sometimes, youth also should intervene as per the dangerous situation of the aged on the basis of humanitarian perspective irrespective of relation. In addition to that they have to guide and advise the aged people to make their lives happier by way of counseling. Youth should love and shower love upon the aged because the 'man of happy can make others happy'. The association is an immediate intervention to negotiate between the parents and children as a group. The married youth (youth to youth) who has been taking care about their parents also a remedy, model and example for the non-amicability between the sons and parents. Out of that there would be a wider scope in reducing the problems of the aged scenario.

4. GOVT. AND NON-GOVT. ORGANIZATIONS: The aged people's problems have been increasing day-by-day in the present society. The government and non-governmental organizations have to play a primary role in overcoming this Herculean task. These two organizations' cooperation should go hand-in-hand in dealing with this dire problem. In these situations the government has to design special programmes, keeping the ageing problems in view, to mitigate the severity of the problem. If the government implements the acts which promise and herald the help and the benefits to the aged people, we can protect the aged

from the exploitations. Today 90 percentage of elderly population in India lives in below the poverty line. However, Out of them, the majority people belonged to the rural areas and majority of the aged have been depending upon their offspring (Times of India, 08-02-2000). Therefore the aged people have been treated as slaves and have been exploited by their children due to their dependence. To overcome and overhaul this hurdle, the government has to provide them with income generation programmes, which help the aged people, by the cooperation of the Non-governmental organizations.

The government should not rest on the laurels achieved so far in the abatement of the ageing issues. The government has to sanction special budget for the sake of benifitment of aged people and to see that the budget is reached to the deserved aged people. The governments also pay an attention to reduce the provision facilities to the children which were provided by the government for not taking proper care for their parents. The N.G.O's have to play a prominent role in bringing awareness among the families at gross root level in order to revitalize the structure of the joint families and reduce the enhancement of nuclear families. By doing this approach that there would be a chance to reduce the problems of elderly and also provide a provision protection or care for the aged people in the joint family system. The N.G.O's have to play an advocacy role between the parents and their children towards fulfilling the huge gap i.e. better understanding which can pave the way to deteriorate the severity of the problem. Moreover, it terms the changing scenario from the lack of understanding to better understanding and also enabling in them a sense of responsibility to pay a real gratitude towards their parents without

seeking any problems at time of ageing. If the N.G.O's followed this mechanism and methodology in sensitizing the public at large certainly the feeling of security and palliation of the aged will be the outcome. If the above organization go hand -in-hand extending cooperation, not only the aged but any severe hurdle can be overcome.

Summary and conclusion:

A rapid increased in the number elderly, as well as their proportion in our population had led us to being more conscious of the money social economical psychological and health problems of the elderly. In this context the researcher planned an innovative preventive strategy study entitled "**Elderly Problems in Rural Andhra Pradesh-A Preventive Strategy**". The present study was carried out with few to objectives to assess socio-economic, demographic and health status and psychological problems care and support received from the family. The finding of the study area majority of the respondents i.e., elderly belonging to the age group of 60-64 years, with low income and majority of the respondents depending on agriculture and agriculture works but they are not getting sufficient money through their occupation to meet their needs. Further the study observed that the elderly are facing socio economic, psychological problems and health problems. Moreover majority of them is living in nuclear families due to lack of their children support.

The study perceived that the problems of the aged are very pathetic condition which reflects the society as disrespected. Despite the government has been providing various welfare schemes and programmes for the wellbeing of the aged that the results could not come out as an expected level because the government providing support in the form of pension only without working to change the mindset of the

family as well as public. In this backdrop, there is an imperative need to focus the aged problems by organizing various sensitizing programmes such as the essence of joint family awareness campaigns, film shows, and counseling centers etc. to reduce the problems of the aged on par with pension based schemes. In addition to that the researcher would like to suggest an innovative strategy i.e. **FLYGN** centered strategy in association with salient groups such as Families, Local bodies, Youth associations, Government and Non-governmental organizations in order to reduce the problems of the aged in preventing perspectives in earlier discussion.

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Be not afraid of greatness: some are born great, some achieve greatness, and some have greatness thrust upon them.