

Elderly Life in a Changing Society: A Case Study of Sahid Lakhan Gaupalika, Gorkha

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Abstract

The contemporary society, the elderly continue experiencing various challenges and wins due to rapid social transformations. This research explored the geriatric respondents' quality of life in the context of dynamic social change in Sahid Lakhan Gaupalika, Gorkha, Nepal. With a convenience sample of 37 elderly participants, this qualitative study examined the impact of socio-economic change on the participants' quality of life, more specifically in the areas of health, social support, financial stability, and healthcare insurance.

The challenges learnt about older persons were; poor health with half of the elderly persons having no access to health facilities. 65% reporting inadequate facilities. Social isolation affected 54.5 percent by the result of the migration phenomenon of young family members to urban areas. Economic instability was observable manifested in that 51 percent of the households experienced some form of economic turnover. 35% of the households reported that they had no regular sources of income, 27.03% depended on pensions and 21.62% on remittances. However, the backbone of help came from within the community structures and non-governmental organizations as 37.31% regard themselves as connected with their community or else strongly connected and ... 84% of those respondents. 43 percent of which they get assistance from local actors.

This paper proves that friend and neighbor support systems are crucial in preventing negative change effects experienced by the elderly population. It identified the need for better health care facilities, strong supporting frameworks for promoting the elderly's quality of life and strong economic policies for the advancement of the elderly living poor rural life in Nepal. Such ideas are crucial for policy makers, social workers and other organizations that want to develop and implement efficient related programs and policies on similar environments for the elderly.

Keywords: Aging, Elderly, Community Support, Gorkha, Social Change

Introduction

As societies develop, the elderly people are at the crossroads of the traditional and the contemporary, receiving all the possibilities and threats (Harper, 2018). Such dynamics are

inherent in the developing countries, especially in Nepal because of socioeconomic transformation, mobility, and evolution of family paradigms (Subedi, 2014).

What is more, the challenges of ageing population are relevant all over the world, therefore the interest to the effects of such trends on the healthcare, economy and social integration remains high (United Nations, 2019). Western research has stressed social relations as well as involvement in the community as key factors to enhance quality of life among elderly persons (Cohen-Mansfield & Perach, 2015). Stemming from this however is the issue of generalizability of these findings to non-western societies because basically, there are cultural and structural differences (Lamb, 2013).

Flexible and low-cost care delivery is also hardly achievable in developing nations, and when the elderly are placed in neglected positions, they become even more vulnerable because developing countries do not have sound social security and efficient health care facilities to fend for the elderly population (Bloom et al., 2015). Streitberger and Harder (2009) state in a study conducted in South Asia that there are increasing changes of nuclear families, new social structures due to urbanization and migration are causing the deterioration of support systems that are based on the culture of the family. This shift has led many elderly people to have inadequate care and support thus compounding their social as well as the economic problems (Thapa & Sapkota, 2015).

Thus, it becomes imperative to study elderly life in an emerging country like Nepal which features the measured dynamics of social change. The country has gone through many changes both at political, social and economic level in the last few decades (Adhikari, 2018). Those changes impacted social relations and the family in particular, and determine the conditions of the elderly's late years (Parker et al., 2014).

The effect of GM on people residing in rural regions such as Sahid Laxman Gaupalika is worse especially senior citizens who are prone to diseases and are also dropped out of the labor market and hence have no access to health and economic services as espoused by Chalise (2010). Despite these challenges, culture and social relations help to cope with depressive elderly according to the different authors, including Dhungana, 2016. For instance, in most cases, relations in other words can complement this deficiency through the absorption of efficacious practices from local institutions (Gautam 2017).

Despite the fact that studies on aging in the context of Nepal have been widely documented, there is relatively little research that targets on rural contexts and the situations of the elderly people dwelling in the places (Subedi, 2014). Such gaps have left existing studies with inadequate insight into the connection between conventional social resources and new emerging challenges in elderly people's lives; hence, this study only sets out to investigate how the elderly adjust themselves to the emerging social environment by undertaking research in the Nepalese context (Gautam & Pokharel, 2011).

Statement of the Problem

The Ageing population of Sahid Lakhan Gaupalika involves extensive social changes that put them in one or many forms of vulnerability, including; access to improved health care, social isolation and economic vulnerability. Forcing a client to engage with traditional support systems erases the little knowledge on how such systems work in the modern world today. This implies that, this study will try to address this by exploring the experiences of the elderly thus offering policy makers' and practice relevant information for Nepal particularly the rural setting.

Research Questions

1. How do social changes affect the daily lives and well-being of the elderly in the study area?
2. What role does society play in supporting the elderly amidst social changes?

Objectives

1. To assess the effect of social changes on the daily lives and well-being of the elderly.
2. To evaluate the effectiveness of society support systems in addressing the needs of the elderly.

Significance of the Study

This research makes some contribution toward the knowledge enhancement about the life of elderly in rural Nepal and the ways of social change impact their lives. When applied to the issue of disconnectedness and the traditional support structures, the study's findings allow for the identification of areas that require major attention in order to improve the quality of the elderly population. The knowledge presented in this paper will prove helpful for policymakers, social workers, and other community-based organizations to develop efficient programs and policies for the elderly in similar settings.

Limitations of the Study

One of the main weaknesses of the study is the specificity of the chosen subjects by the location and the fact they live in a rural area only. Also, there is a general concern of small sample sizes: in this case, just 34 subjects are included in the study, which is enough to perform the qualitative analyses but can potentially present limited generalization of the results by focusing on the elderly population. Subsequent studies should cover a larger region and enroll more patients to support or further research the conclusions.

Research Methods

Research Design

The study used both quantitative and qualitative research approaches to obtain a richer stream of data on the study population which comprised of elderly people. The qualitative was extremely valuable in gaining more detail about individual experiences while the quantitative gave the big

picture regarding the demographic facts. The study consequently focused only those persons more than 60 years old and living in Sahid Lakhan Gaupalika, Gorkha. Random sampling technique was employed and 37 participants were selected, but they were purposefully chosen to include people of different age, male and female participants, people of different educational levels and marital status.

Results and Discussion

Table 1

Respondents' Demographic Characteristics

Demographic Characteristic Categories		Number of Respondents	Percentage (%)
Age	60-69	15	40.5
	70-79	13	35.1
	80 and above	9	24.3
Gender	Male	20	54.1
	Female	17	45.9
Educational Status	No formal education	22	59.5
	Primary education	10	27.0
	Secondary education	4	10.8
	Higher education	1	2.7
Marital Status	Married	24	64.9
	Widowed	13	35.1

Field Survey, 2023

As depicted in Table 1, during the course of the study aimed at providing an insight into the life of the elderly in Sahid Lakhan Gaupalika, Gorkha, the demographic details of the respondent were captured and summed up. Similarly, the largest number of respondents 40.5% users were between the ages of 60-69 years. The age group 70-79 formed 35 percent both for males and females who received social protection. 1 % of the sample, and respondents who belonged to the age group of 80 and above accounted for only 24.3% of the total.

Gender distribution was slightly biased with a higher percentage of the male population, which was 54% as shown below. 1%, of respondents said that their organization relies only on public transport while 45% said that any of their organizations use the service. 9% females. This slight dominance of males implied a gender stereotype characteristic of elderly life in this society.

The education level analysis established that majority of the elderly had little or no formal education, 59%. 5% of the patients had no education at all and 30% completed their education till the primary level. A smaller portion, 27. percent had primary education only, 8. These depicted that 8% had attained secondary education, and only 2%. 7% had higher education. This distribution did help bring to the attention of such audiences the restricted education rates that this generation was entitled to.

Regarding marital status, 64. It was established that 9% of the respondents were married while 35% of the respondents were single. 1% were widowed. This data portrayed the social relations within the community that was useful for estimating the social relations and supportive structures as the majority of the elderly still had marital partners and companions.

Table 2

Healthcare Access

Response	Number of Respondents	Percentage (%)
Adequate healthcare access	8	21.62
Limited healthcare access	18	48.65
Rely on traditional medicine	6	16.22
Travel long distances for medical care	5	13.51
Total	37	100

Field Survey, 2023

This situation was allocated in many elderly populations concerning their health care needs. A considerable percentage, 48. 65% of the respondents had poor access to health facilities /health care services. Some elderly respondents, 16. 22%, used traditional knowledge to treat the sickness and 13. 51% of the patients had to cover long distances just to access health facilities. Only 21. According to the survey, respondents' access to healthcare was generally reasonable, with 62% of the participants reporting access to adequate medical care.

Table 3

Social Isolation

Response	Number of Respondents	Percentage (%)
Socially isolated due to urban migration	20	54.05
Engage in community gatherings	10	27.03
Support from local organizations	7	18.92
Total	37	100

Field Survey, 2023

Social isolation was a significant issue among the elderly. Over half of the respondents, 54.05%, experienced social isolation due to the urban migration of younger family members. However, 27.03% participated in community gatherings, and 18.92% received support from local organizations, which provided some social interaction and support.

Table 4***Economic Aspects***

Response	Number of Respondents	Percentage (%)
Lack stable income sources	19	51.35
Depend on pensions	10	27.03
Receive remittances from family abroad	8	21.62
Total	37	100

Field Survey, 2023

Economic instability was a pressing concern for many elderly individuals. Over half of the respondents, 51.35%, lacked stable income sources. Pensions were a source of financial support for 27.03% of respondents, while 21.62% received remittances from family members working abroad, which were crucial for their financial stability.

Table 5***Community Support***

Response	Number of Respondents	Percentage (%)
Strong community bonds	14	37.84
Support from local organizations	12	32.43
Depend on informal networks	11	29.73
Total	37	100

 Field Survey, 2023

Thus, there was need to have support from the communities throughout in enhancing the elderly persons' ability to cope with situations that arose. Thus, 37% of respondents, stated that the use of electronic medical records has positively impacted the quality of care that they receive. Overall, 84% clients said they had strong community ties. Additionally, 32.43 percent got assistance from local groups, and 29 percent from other sources. Seventy-three percent of the responders relied on informal sources for basic care and help.

Discussion

This paper examined numerous factors impacting the elderly and their day-to-day lives appropriately through the health, welfare, and economic aspects, social relations or company they receive, or lack thereof. The conclusions pointed out several issues among elderly people that was also awareness on some of the coping strategies, and sources of support available in their lives.

Even the availability of health care was a problem which was experienced by many elderly people. With 48. In view of the fact that 65% of the respondents indicating that they had poor access to health facilities and equipments, there was sufficient indication that a good percentage of the ageing population lacked adequate health care. The cultural practice of practicing traditional health care which stood at 16.22% and the long distance that people had to travel to access health care facilities, 13.51% also pointed to inefficiency in health care provision. The above challenges could lead the elderly to delay their treatments and in the long run, they deteriorate in their health conditions.

Loneliness proved to be the other problem that dramatically affected the health needs of the population. The increase in value is credited to the assimilation in their urban setting of other young members of the families which in the opinion of the author, is as follows 54. Also, the prevalence rate of social isolation among elderly respondents was at 05 percent. This social seclusion might have severe effects on their psychology as well as on the quality of their

existence. However, the respondents were somewhat consoled by community gatherings (27.03%) and support from the local organizations (18.92%) as they provided them with something to do. Such conclusions targeted encouraging the usage of community-based interventions to address the challenges of social isolation among the elderly population.

Other factors that were also of great concern related to economic facets. As a result of the above factors, the income sources that the poor families relied on became unstable in the year and this impacted 51. Newly married couples comprised 35% of the respondents, and they expressed that they could hardly provide for basic needs. Pensions which amounted to 27.03% of the households' income, and family members' remittances from abroad, comprising 21.62% of food consuming units' income, were of major importance to the support of the elderly people. This destination to outside capital signaled younger dependency, and weakness in crafting economic principles and insurance policies environmentally to cover the geriatric population.

However, it is seen that community support was also contributing majorly in elderly's coping with such a condition. Cohesion which is the level of integration that exist between the members of the community was recorded to be 37. As much as new sources of support were evident 84% of the respondents show that traditional support systems whereby still a source of strength. Additionally, 32. A total of 43% of the respondents engage with local organization for support and 29.73% relied on word of mouth. The support mechanisms offered basic and offered different assistance whenever the elderly faced diverse difficulties in their everyday activities.

The results of this research have revealed that social processes concerning the elderly are more difficult to categorize because they are far more complex. The problems of patients' health care access, social isolation, the stability of their revenues, and support from the community were intertwined challenges that could not be solved individually. Thus, policy interventions need to address the areas of healthcare, social support, economic status, and social relationships adding that quality of life for older adults ought to be a policy priority.

Conclusion

The findings of the study offered a clear understanding of the examined social shifts that influenced the lives of elderly people to the greatest extent. The findings of this study therefore suggested the need to conduct a more comprehensive survey with elderly people in the society which would form the basis of this research work 37 respondents and uncovered major information on the barriers and ways elderly persons cope with them.

Health care was a critical issue as close to half the respondents noted poor availability of health facilities and equipment. Traditional medicine and the fact that clients had to travel long distances to access quality health care was another proof that the health care docket lacked service delivery. They stressed the need to enhance the availability of health care facilities and the medical services in order to address the elderly's needs adequately.

The effect of social isolation due to family young generation shifting towards the urban areas had affected the elderly's quality and mental health. Family and friends from the community offered a measure of social contacts and support contrary to their assertions that loneliness and isolation

were rife among the elderly population; thus, the need to encourage local organizations to enhance the wellbeing of seniors.

Another concern that needed attention; the respondents indicated high levels of economic instabilities and low-income sources. This revealed the plight of elderly people and their source of finance through remittances from relative who were working in other countries hence the pensions. This led to what was seen as a desperate need to bring in stronger economic measures and SS for the provision of pension to the elderly.

However, there were several challenges from which the elderly grouped from strong community allowances that gave them the strength to continue with their lives. Family, friends, other local groups and other formal / informal organizations offered crucial support and gave seniors a spearhead to handle all sorts of issues that they faced in their day-to-day lives. These findings further underscore the need for the communities to maintain and hence improve support systems of the elderly citizens.

Overall, the study made an effort to stress that the issues regarding elderliness are many-faceted and cannot be solved by employing fragmented measures, which need to be addressed in a synchronized manner. Better health care, improved social relations or support, stabilization of the economic status, and the community's connection were important in improving the quality of life of senior citizens. The following areas should be addressed to improve on the lives of the elderly through supporting policies and environment for the elderly people.

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