

## **Situation of Elderly People Living in Old Age Home A Study of Gandaki Province**

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### **ABSTRACT**

*The study is on the “Explaining the Situation of Elderly People Living in Old Age Home (A Study of Gandaki Province)” by the method of collecting tool. The main purpose of the study is to collected data form primary and if required secondary data has collected. Primary data has collected from all elderly people of aged 60+years at the old age home. From the lottery method researcher has taken western development region of Gandaki Province. Researcher has selected three districts viz. Kaski, Tanahun and Syanjga and three districts were excluded. The collection of the data procedure is based on personal interviews and the cross table. The main objective of this study is to be identify the socio economic and demographic characteristic of elderly people of old age home, analyzed the health status care facilities and utilization of elderly allowance provide by old age home, and to identify the reason of senior citizen going to old age home. This study has limited to the population who are 60 years above and some are excluded especially who are physically and mentally disable or who are unable give answers. The researcher shows that numbers of elderly women are high than elderly men. The highest elderly people age group is 70-79 years. At the old age home Hindus are highest which is 94 percent and most of them are Brahmins which is 70 percent. Most of the elderly people are illiterate. Majority of widow/widower are high at old age home carrying 60 percent and rest of 17 percent are unmarried or who have no relatives. The proportion of time duration (5-10 years) of staying at old age home is high and the main reasons of joining old age home is the lack of rearing and caring person in their families, 63 percent are there because of death partner. Most of the times they want to spend their daily life time chatting with friends, doing religious activities, visiting the surrounding. Elderly people are facilitated with old aged allowance and single women/widow. They use it for own expenses such as medicine, food, and clothing. Most of the elderly people faced back pain, headache, swelling of legs, poor eyesight. Most of the elderly people are satisfied from old age home. Research shows that elderly people are satisfied from old age home; they get free treatment from government and some private provide free health camp. However, rooms are common and no attached bathroom but they have friendly environment.*

**Keyword: Elderly people, old age home, health condition, depression, reason**

### **1 Background:**

*“Matri Devo Bhawah; Pitri Devo Bhawah; Guru Devo Bhawah” (Mother is the Goddess; Father is the God; and even Teacher is the God). - The oriental Tradition.*

Ageing refers to the increasing inability of the body to maintain itself and to perform the functions it once did. As the body begins to decline, our abilities withstanding the stresses and strains of life are diminished by developing more ailments to heal and more time to recover. The problems of age structure changes in population in developed country results in the growing proportion and absolute number of elderly people; whereas in developing countries it results with the problem of increasing young age structure. However, the proportions, change there in and the direction of

change are important measures of old and of an ageing population. In Nepal, recently ageing is an emerging social issue for Nepal because fertility has started going down in recent years, the mortality is declining fast and the life expectancy is continuing to increase for both sexes in Nepal. old age is a relative concept. Demographers consider 65 years of age as the old age for international comparison of elderly people. The World Assembly on Aging adopted, as its main focus of concern, the population aged 60 or over as elderly population. The age 60 is also a convenient one for its statistical analysis. The United Nations considers 60 years as the boundary of old ages. The age cut-off for the elderly population varies across the countries and overtime.

According to Neysmith and Edwardh (1984), and Tout (1989), elderly people have been considered as “inactive”, “burdensome” and “passive recipients of support” largely because he or she can no longer provide effective or efficient economic service to capital. There are different basic for defining senior citizens, one of the most common in use is the chronological age who defines senior citizens as people 60 years and above.

Population aging is one of the most distinctive demographic events of the twenty first century. Initially experienced by the more developed countries, the process has recently become noticeable in much of the developing world as well. As a result of declining fertility, mortality as well as improved health, population aging has been a world-wide phenomenon. People today are living longer and generally healthier lives (David & Phillip, 2005).

**Nepal also defines the senior citizens as “people who are 60 years and above”.** The retirement’s age of military in Nepal is 45 to 48 years in lower position, for general government services 58 years and for university teachers 63 and the judiciary services 65 years. **Civil Code 1963** has provision for elderly people in its section on property rights distribution. It has been clearly stated that son and daughter should take care of parents. If the older parents cannot survive their income, sons and daughters must take care of them for foods and clothes as per their earning.

Khanal, (2009). Demographically the age of senior citizens can be classified into two clusters: (1) active life: active life is productive age from 60 to 75 and (2) care life: care life is 75 years and beyond who need specially care for them. The total population of Nepal was 26.9 million living in an area of 147,181 square kilometers. The population of the elderly was 2.1 million during 1991. In 2011 the annual elderly population growth rate was 8.1 percent which is higher than the annual population growth rate 1.35 percent. The 2011 census data showed that 83 percent population lived in village. 60+ elderly populations who lived in urban area are 1.17 percent and 6.96 percent in rural area. In Nepal, senior citizen population had almost doubled from 6.5 percent in 2001 to 8.1 percent in 2011. This rapid increase in the proportion and absolute number of the elderly among the total population will have an impact on socio-economic and health policies and culture in future. In Nepal, life expectancy was 31 years in 1961. But now 68.5 years in average in 2011. Life expectancy is 68 years for males and 69 years for females in 2011.

**Table 1. Growth rates of the total population and elderly population in Nepal 1952/54-2011**

Census Year	Total population	Doubling Time (in years)	Inter-census Growth Rate %	Elderly Growth Rate %	Elderly Pop <sup>n</sup> %
1952/54	8,256,625	30	2.30	-	4.99
1961	9,412,996	42	1.65	1.79	5.22

1971	11,555,983	34	2.07	2.42	5.61
1981	15,022,839	26	2.66	3.26	5.71
1991	18,491,097	33	2.10	2.26	5.80
2001	23,151,423	31	2.25	3.5	6.50
2011	26,494,504	50	1.35	3.5	8.13

Source: Population Census, Nepal: 1952/54, 1961, 1971, 1981, 1991, 2001 and 2012

Table 1 shows the Population of Nepal is growing very rapidly. In the 10<sup>th</sup> census of Nepal conducted in 2001 the population enumerated was 23,151,423. In 2001 was 2.24% per annum. Now the population stands at 26,494,504 showing population growth of 1.35 per annum. Although doubling time of population is increasing order. In 2001 doubling time was 31 years but now in 2011 doubling time is 50 years which very clearly shows that population is increasing slowly. Similarly the elderly growth rate is 3.5 percent and elderly population is 8.13 percent. The table

Census year	1911	1921	1931	1941	1952/54	1961
% of Elderly aged 60 and Above	4.28	4.15	5.25	5.33	5.58	5.59
Index of ageing <sup>2</sup>	11.67	10.63	14.15	13.61	11.87	11.67
GDR <sup>3</sup>	7.50	7.31	9.17	9.60	11.20	12.03
Life Expectancy <sup>4</sup>	19.18	21.71	24.27	30.45	34.83	37.41
Crude Birth Rate <sup>5</sup>	50.00	50.20	44.82	40.70	47.74	46.81
Infant Mortality Rate <sup>6</sup>	236.59	226.59	216.99	193.81	177.39	167.49
Census year	1971	1981	1991	2001	2011*	
% of Elderly aged 60 and Above	5.8	85.71	5.80	6.49	8.34	
Index of ageing <sup>2</sup>	12.11	11.38	11.13	13.02	14.28	
GDR <sup>3</sup>	12.90	12.95	13.78	14.87	10.21	
Life Expectancy <sup>4</sup>	41.96	48.20	53.82	58.00	68.00	
Crude Birth Rate <sup>5</sup>	42.14	39.95	37.30	31.00	29.00	
Infant Mortality Rate <sup>6</sup>	150.65	127.25	106.18	64.00	46.00	

shows that elderly population is in increasing trend.

**Table 2. Demographic transition of ageing in Nepal is interpreted by considering six measures based on the population census (1911-2011) as shown under the table**

Source: Singh 2003,\* based on population census 2011

Table 2 shows that the crude birth rate and infant mortality rate was high since 1921, after 1931 that rate has been decreasing order till. The life expectancy was 19.18 in 1911 year. At present the life expectancy was 68 year. Because of falling crude birth rate, this was resulted by the increased of elderly aged 60 and above.

<sup>2</sup> index of ageing is calculated as: Ageing= Total number of aged population (60+) \* 100/ Total number of children aged 0-14.

<sup>3</sup> The Gerontological Dependency Ratio (GDR) is defined as: Total no of aged Population (60+)\* 100/ Population of the intermediate ages 15 and 59.

<sup>4</sup> The life expectancy is the expected number of years remaining at a given time.

<sup>5</sup> The Crude Birth Rate (CBR) is the annual number of births divide by the total mid- year population.

<sup>6</sup> The infant mortality is calculated by the number of newborns dying under a year of aged divided by number of live births during the year times 1000.

**Table 3. Indicators of Demographic Derives of aging in Nepal**

Indicators	2001	2011
Number of elderly population (000)	1,504	2,154
Index of aging	18.89	23.20
median age	19.98	22.21
population under age 15	39.30	34.90
Percentage of population 15-59	54.20	57.00
Percentage of population 60+	6.50	8.10
Sex ratio of 60+	-	97.00
Sex ratio of 80+	-	92.00
National Population Growth	2.25 (1991-2001)	1.35 (2001-2011)
Elderly population growth rate	3.39 (1991-2001)	3.58 (2001-2011)

Sources: CBS, 2003, CBS, 2012

Table 3 shows that the index of demographic derives of aging in Nepal are presented the above table. There has been a sharp rise in the relative and absolute size of the elderly population in the recent decades is the strapping evidence of derives of aging in Nepal. Similarly the increments in index of aging, median age also the evidence of such situation. Here growth rate of elderly population is the major alarming indicators.

## Materials and method

**Study Area:** According to the 2011 census data, ageing population is highest in westerns development region, and absentees' population also high at western development. So, for my study purpose using purposive sampling Gandaki Province has been selected. In Gandaki Province there are six district. Viz Kaski, Tanahun, Syanjga, Lamjung, Manang and Gorkha. Among each district only three districts viz Kaski, Tanahun, Syanjga has been visited and other districts have no old age home. The researcher visited 155 elderly people but twenty-eight elderly people are physically and mentally disable and they are not in good condition for giving answer so the researcher face to face visit who can give answer for the study purpose.

## Research Design

Primary data was collected from all elderly people of aged 60+ years at the old age home both male and female at study area. This study of sample size 127 elderly people aged of 60 years above

totality from all old age home. According to 2011 CBS, the proportions of older populations are highest in the western development region and absentees population also high. Thus, in first stage took this development region. In the second stage, Gandaki Province was selected purposively from the western development region and three districts was selected purposively and three districts is excluded.

### Data Analysis

The data collection was used qualitative and quantitative methods. For quantitative data collection semi-structure questionnaire and for qualitative data open ended questionnaire, was prepared on the basis of research questions and objectives. For the study and information was collected by researcher face to face personal interview. For the qualitative information researcher was should three elderly people (one elderly people from one district) studied in details under in-depth interview. Semi structure and open ended questionnaire was developed by the nature of required data. Data was analyzing by cross table and describe various factors influencing the satisfaction of the elderly people life in old age homes.

### Respondents by age and sex

**Table 4. Percentage of respondents by age and sex**

Age (in year)	Sex		Total (%)
	Female (%)	Male (%)	
60-69	22(23.4)	5(15.2)	27(21.3)
70-79	39(41.5)	16(48.5)	55(43.3)
80-89	26(27.7)	6(18.2)	32(25.2)
90+	7(7.4)	6(18.2)	13(10.2)
Total	94(100.0)	33(100.0)	127(100.0)

Source: Field Survey, 2014

Table 4 shows that that numbers of female elderly people are found more than male elderly people. Percentage of female elderly people was 94 and that of male elderly people was 33 only. It is also found that the percentage of elderly people of age group 70-79 is highest (43.3 %) followed by 41.5 percent female and 48.5 is males, 90+ females are 7.4 percent and 18.2 percent are male elderly population.

### Time duration of staying at old age home of the elderly people

**Table 5. Percentage distribution of elderly people time duration of staying at old age home**

Time duration	Sex		Total%
	Male%	Female%	
Below 1 years	17(18.1)	5(15.2)	22(17.3)
1-5 years	21(22.3)	14(42.4)	35 (27.6)
5-10 years	26(27.7)	9(27.3)	35 (27.6)
10-15 years	12(12.8)	3(9.1)	15 (11.8)
15 years above	18(19.1)	2(6.1)	20 (15.7)
Total	94(100.0)	33(100.0)	127 (100.0)

Source: Field Survey, 2014

Table 5 shows that 27.6 percent elderly people are staying old age home time duration is 5-10 years. 17.3 percent are staying below 1 year, 15.7 percent are elderly people and only 11.8 percent elderly people are staying 10-15 years.

### Reasons of joining the Old Age Homes

Old age homes are generally the last resort for the aged. In the absence of joint family systems, nuclearisation of families with one or two children, the old parents are left no other alternative than joining the old age homes. According to a study conducted in the Old Age Homes of Gandaki Province most of the elderly people had nobody to take care of them, and among them had no partner (death of husband/wife).

**Table 6. Percentage distribution elderly people by reason for coming to old age home**

Reasons for joining old age home	Sex		Total %
	Female%	Male%	
Discuss with family	5(5.3)	1(3.0)	6 (4.7)
No money for care	2(2.1)	0(0)	2 (1.6)
No time for us	4(4.3)	1(0.8)	5 (3.9)
Death of husband/wife	25(26.6)	4(12.1)	29 (22.8)
No body for care	54(57.4)	26(78.8)	80 (63.0)
Praying for good	4(4.3)	1(3.0)	5 (3.9)
Total	94(100.0)	33(100.0)	127 (100.0)

Source: Field Survey, 2014

Table 6 shows that 63 percent elderly people had no care persons, 22.8 percent elderly people had no partner or death of husband/wife, 4.7 percent have discuss with family, 3.9 percent have no time for care them and spending time for god praying and only 1.6 percent have no money for them.

### Residence of elderly people before coming old age home

Before coming old age home the elderly people were staying with their family (son/daughter), relative, alone or on rent. According to 2011 census 85.26 percent have their own home, and 12.81 percent have no home they are staying on rent.

**Table 7. distribution of elderly people by previous residence old age home before coming old age home their residence**

Previous residence	Sex		Total%
	Female%	Male%	
Family (son/daughter)	42(44.7)	10(30.3)	52(40.9)
Relatives	40(42.6)	18(54.5)	58(45.7)
single	12(12.8)	5(15.2)	17(13.4)
total	94(100.0)	33(100.0)	127(100.0)

Source: Field Survey, 2014

Table 7 shows that when they stayed at home with their family 40.9 percent, with relatives 45.7 percent and only 13.4 percent elderly person stayed single.

### Table 8 Depression of elderly people at old age home

When people are old some people are suffer from depression because of no child care, no family, no relatives, no love and care.

*Table 8 Percentage of elderly people at old age home*

Do you feel depression?	Sex		Total%
	Female%	Male%	
Yes	90(95.7)	33(100.0)	123(96.9)
No	4(4.3)	0(0.0)	4(3.1)
Total	94(100.0)	33(100.00)	127(100.0)
<b>Main reason for the depression</b>			
Physical disable	4(4.4)	3(9.0)	7(5.7)
Economic problem	51(56.7)	23(69.7)	74(60.1)
Loneliness	83(92.2)	31(93.3)	114(92.7)
Ignore	51(56.7)	13(39.4)	63(51.2)
Detach from family	11(12.2)	7(21.2)	17(13.9)
Hate	9(10.0)	5(15.2)	14(11.4)

Source: Field Survey, 2014

Table 8 shows that 95.7 percent elderly people are suffering from depression especially elderly women are suffering depression. Most of the depression was loneliness (92.7%), economic problem (60.1%), family ignore (51.2), detach form family (13.9%) and physical disable (5.7%).

### Conclusion

Asthma, respiratory, diabetes, back pain, mental diseases, kidney malfunctions, memory lapse, eyes problems, teeth problems, are the major health problems of elderly people. Use of tobacco product and alcohol is leading use of poor health of elderly people. There is large grapping between of policy and delivery system of existing free health care services because, lacking of proper monitoring and evaluation mechanism. Most of the elderly people who are staying at old age home they have children who have only daughter, they never stay at daughter home so because in our culture parents never staying at daughter home. They are staying only sons home. When they are staying at old age home they missed their family or relatives, if some relatives come and visit them they feel very happy. The amount of old age allowance which elderly are receiving (Rs. 500 a month) is not enough for monthly expenses so they expecting to be increased at least up to Rs. 1000 a month. The family members could be the best care takers of elderly people rather than neighborhood and social organizations so required to be family influence policy.

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