

# SOCIO- ECONOMIC AND HEALTH CONDITIONS OF SENIOR CITIZENS LIVING PARAKKAI VILLAGE IN KANYAKUMARI DISTRICT

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**Abstract :** Ageing is the natural process that begins at birth, or to be more precise, at conception a process that progresses throughout one's life and end's death. Ageing is a constant. Predictable process that involves growth and development of living organisms. Majority of the senior citizens still live in or on margins of poverty. For those who work in the subsistence economy. Elderly continue to work as long as physical abilities and health permit. They do not receive any pension nor have any income security when they cannot do major work. The high incidence of poverty and low incomes among older people is reflected in other measures of deprivation.

**Index Terms - Health, Health expenditure, Nutrition status, psychology.**

## I. INTRODUCTION

Ageing is the natural process that begins at birth, or to be more precise, at conception a process that progresses through out one's life and end's at death. Ageing is a constant. Predictable process that involves growth and development of living organisms. Ageing can't be avoided, but how fast we age varies from one person to another. How we age depends upon our genes, environmental influences, and life style. Ageing can also defined as a state of mind, which does not always keep pace with our chronological age. Attitude and how well we face the normal changes, challenges and opportunities of later life may best define our age.

The optimum age fixed for treating a person as 'aged' varies from country to country. In India the attainment of the age 55 has been mostly accepted for the purpose if classified aged persons. The joint family system where in the old, the employed and unemployed, the bread winners and the bread eaters, the kith and kin the near relations and the not so near relations lived in idyllic harmony and happiness has cracked up and the old bonds of love and respect for each other are fast disappearing.

The project Old Age Social and Income Security(OASIS) initiated by the Government of India indicated that the total population in India is expected to rise by 49 percent from 846.2 million in 1991 to 1263.5 million in 2016, the number of aged(60 and above) are expected to increase much faster by 107 percent from 54.7 million to 113 million, in the 25 year period. Thus as against a share of 6.4 percent in total population in 1991, the share of the aged in 2016 will rise to 8.9 percent. While there is an increase in the proportion of the aged, the accumulations for old age provision are inadequate and lower only a small proportion of the workforce.

### Plight of aged in family

The disintegrating system of the joint family-rural urban migration rapid industrialization and urbanization and changing social values have together caused serious problem of the aged. For instance , the disintegration or joint family, gradually leads to situations where in many in the lower middle or upper classes move to old age homes. On the other hand, the elderly people find is difficult to adjust with their own sons and daughters because of the generation gap and their varying perceptions.

Financial problems are also exist especially in the lower and middle class. Having spent all their hard earned money on children's education and marriage they are shocked when their off spring refuse to give them shelter. Old people who live alone are highly vulnerable in respect of illness. For instances, ill they have nobody to turn to. Family member of many elderly people are reluctant to spent money on specialized care for the aged who are also highly subject to attack by anti-social elements. On account of thefts for even small items of jewelry or meager amounts of cash, sometimes daughters-in- law have leveled false charges of dowry on their parents-in-law to escape living with them.

The rising rate of divorce and emergence of single parent families as well as the trend towards smaller families restrict the possibilities of home care for the aged. The changing role of women also affects the aged segment. Historically caring for elders was the task of daughters or daughters-in-law, who were full time home makers. As more women work outside the home, they are less available to care for aged parents.

### **Definition of aged**

Backer defines aging in the broadest sense as those changes occurring in an individual as a result of the passage of time.

According to Stieglitz aging is a part of livings. It begins with conception and terminates with death.

Aging may best be defined as the survival of a growing number of people who have completed the traditional adult roles of making a living and child bearing.

In this study the investigators states that the persons who belongs to the age group of 60 and 60+ is considered as Senior Citizens.

### **Poverty and old age**

Majority of the senior citizens still live in or on margins of poverty. For those who work in the subsistence economy. Elderly continue to work as long as physical abilities and health permit. They do not receive any pension nor have any income security when they cannot do major work. The high incidence of poverty and low incomes among older people is reflected in other measures of deprivation.

### **Health Expenditure**

The rising health expenditure, public or private should be of concern. The fact that many of the rural poor do not seek treatment or do so too late is usually described to their ignorance or callousness. If health services are to be delivered at an affordable cost it is imperative that the pattern of the public sector health expenditure be changed. Less should be spend the bureaucratic super structure and more at the delivery level and manpower production and deployment should be rationalized.

Being in the new millennium of the 21<sup>st</sup> century where human values and human dignity are praised to the heights. It is shocking to know that the revered senior citizens often suffer abuse and are neglected due to poor economic and social conditions.

### **Problems of the aged**

The disintegrating system and changing social values have together caused serious problems for the aged. The elderly people who used to be the main decision makers in every family in the past have now become unwanted creatures. Under the changes circumstances in the urban areas one can find families where they are treated like an unavailable burden if they cease to remain productive members. Numerous predicaments faced by the aged may be classified as follows.

#### **Economic problems**

The economic problems are lack of money for clothing, medicine, pocket money, saving, pension and also for food. Financial problems are especially in the lower and middle class. Having all the money spend on their children education and marriage they are shocked when their off springs refuse to give them shelter. Family members of many elderly people are reluctant to spend money on specialized care for the aged who are also highly subject to attack by anti-social elements on accounts of thefts for even small items of jewelry or meager amounts of cash.

#### **Psychological problems**

There are many psychological problems of the old and some of them are many psychological problems of the aged and some of them are feeling of insecurity, maladjustment, constant fear of aging, fear of death, conflict with the younger generation, disappointment from the family, dependency and depression.

#### **Financial problems**

The majority of the elderly people have financial problems. Even those who are the recipients of retirement benefits after superannuation find it difficult to meet their basic requirements with the decrease in their income and increase in the cost of living. In the case of other aged people the situation is still worse as our country where the young are unemployed and under employed cannot effort to give employment to the elderly people.

#### **Health and medical care**

This is the major problem of the aged. Lucky are those who are able to maintain good health as they advance in age. Even when one is not suffering from any disease, one experiences a gradual decline in physical strength with the growing age. But in the most cases advanced age brings with it some chronic ailment and the aged get bedridden and depend on others for their mobility and need medical care for their treatment.

## Familial and emotional problems

These are mainly concerned with neglect and poor upkeep and give rise to emotional and psychological problems. During times of sickness it aggravates the situation leading to great emotional disturbances. Loneliness is most burdensome for the aged and especially for those who have nobody to live with. The aged face the problem of filling the void in their time by keeping themselves busy. This problem has become more acute with the joint family system which had absorbed the aged and the disabled. Today the old have to fend for themselves.

## Housing problem

There is paucity of housing in our country and the problem is becoming all the more acute with the rise in our population at an alarming rate and construction activity not being commensurate with the needs of our millions. Housing problem for the aged may not be that serious for the aged living in the rural areas where they stay with their children but in the towns and cities, the elderly experience the pinch of absence of housing facility as their grown up children find their present accommodation too small.

## Pension

Senior citizens may be entitled to a monthly pension, if their in a government job. Some public sector enterprises also have a pension scheme. Pension in government jobs is usually calculated on the average basic pay drawn by the employee during the last 10 months of service. Full pension with 33 years of services is 50 percent of the average, emoluments presently the minimum pension is Rs.1275 per month and the maximum is 50 percent of the highest pay in the government of India.

Many companies have annuity and pension funds managed by the life insurance corporation of India and other insurance companies. You may be entitled to receive a regular monthly pension if you were a member of such a fund.

## Nutritional status of senior citizens

India population consist of about 55.3 million senior citizens and is reached to 75.9 million by the year 2001. In developing countries the threat of daily hunger compounded by malnutrition booms over million of senior citizens. The population growth is increased along with elevated life expectancy of about 63 year by the year 2001. By the year 2020 life expectancy at birth in India will be close to 70 years. By the years 2001 India will have the highest population of elderly in the world.

## Balanced diet for the elders

1800 kcal (1 cup- 200ml, 1 tsp -5 ml ). Early morning: 1 cup coffee or tea ( with ½ cup milk and 2 tsp sugar).

## Break fast

Iddli-3 medium (or) chapatti- 3(or) pongal- 1 ½ cups (or) bread 5 slices (small) Egg-1 (or) Apple-1 (medium) sambar-3/4 cup (or) chutney- ½ cup (coconut or mint or tomato).

## Mid morning

Milk-1/2 cup with 1 tsp sugar (or) Butter milk- 1 cup (or) soup – 1 cup (or) fruit juice-1 glass (or) vegetable salad serving.

## Lunch

Cooked rice 1 ½ cups (or) chapatti -3 (medium) Dal – ½ cup (or) sambar -3/4 cup (or) chicken or fish (1 piece) curry, Rasam, Curd- ½ cup (or) Butter milk-1 cup, Greens- 3/4<sup>th</sup> cup.

## Tea

1 cup coffee (or), Tea ( with ½ cup milk and 2 tsp sugar) sundal – ½ cup (or) Biscuits -2.

## Dinner

Iddli – (or) Chapatti – 3 (medium) (or) cooked rice-1 ½ cups. Same as kench ( instead of greens ½ cup vegetable).

## Bed time

Milk-1 cup (with 2 tsp sugar) fat allowances per day 10 ml (2-3 tsp).

## II. RESEARCH METHODOLOGY

### 2.1 Importance of the Study

Socio-economic and medical implications of aging process in India were realized with the international year of older persons and the National year of older persons. During these periods, it is the change taking place in socio-economic dimensions the pressurizes society- both governmental and non- governmental sector to contribute to the increasing disadvantage of ageing population. The elderly are under severe threat physical financial and psychological especially because of decline in care received from informal care system. Major physical factor are illness, incapacity and sensory loss. Financial factors that creates difficulties in old age are poor economic conditions, lack of income, lack of economic independence and poor condition of children. The major psychological factors are disrespect, death of dear once, strained in house relations, disappointment, mental tension loneliness and lack of freedom, short temper, inferiority complex, fear of death, fear of illness and feeling of insecurity. Economic problems refers the elder people did not get enough money even to meet their daily life survival. As all their property is inherited by their sons and daughters they will be deprived of any source from which they can draw money. As they are penniless they have to depend on others for fulfilling their daily requirements.

The international year of older persons come to a close, together with the 20<sup>th</sup> century. Being in the new millennium the 21<sup>st</sup> century where human values and human dignity are praised to the heights, it is shocking to know that the revered senior citizens often suffer abuse, neglect and as in any group, women suffer more than men. The investigator has chosen the topic to know about the various problems faced by the old age people. The only remedy to overcome from this problem is the coming generation should show more interest by helping them.

### 2.2 Objectives of the study

1. The general objective of the study is to understand about socio- economic and health condition of senior citizens living in parakkai.
2. To find out the dimensions and extent of insecurity among the selected senior citizens in parakkai.
3. To examine the socio- economic conditions of senior citizens in parakkai.
4. To analyse the socio- economic conditions of senior citizens in parakkai
5. To study about the health conditions of senior citizens living in parakkai.

### 2.3 Statistical tools and techniques used

The data collected through interview schedule checked thoroughly. Then the data were property lined and placed in the master table and it has been classified tabulated for further analysis. The variable ware analysed with the help of percentages

### 2.4 Limitations

- ❖ As the period is short the investigator experienced shortage of time for deep and detailed
- ❖ The problems faced by senior citizens may differ from time to time. So it is not fair to make use of time series data.
- ❖ Some of the questions are close types and does not give room for elaborate answers.

## III. DATA ANALYSIS

### 3.1. Age composition

Age has been defined as the estimated or calculated of time between the data of birth and the data of census expressed to completed solar years. The age wise distribution of the respondents are presented in Table

**Table 1 Age composition of senior citizens**

S.No	Age group (in years)	No. of Senior citizens	Percentage
1	60 to 65	15	25.0
2	65 to 70	19	31.7
3	70 to 75	14	23.3
4	75 to 80	3	5.0
5	80 and above	9	15.0
	<b>Total</b>	60	100

Source: Primary data

Note: Mean age of senior citizens 70.6 years

The table shows that 15 ( 25.0 percent) of them belonged to the age group in between 60 years and 65 years, 19 (31.7 percent) of them belonged to age group from 65 years to 70 years, while 14 (23.3 percent) of them belonged to the group from 70 years to 75 years, 3 (5.0 percent) of them belonged to the age group in between 75 years and 80 years and 9 (15.0 percent) of them belonged to age group of 80 years and above. Mean age of the senior citizens worked out to be 70.6 years.

### 3.2. Sex composition

Sex wise distribution of the senior citizens is needed to know about the male and female ratio of aged people to the total population. It is also helpful to the researcher to identify problem faced by this aged person in sex wise. The sex composition of the senior citizens are presented in table.

**Table 2 Sex composition of senior citizens**

S.No	Sex	No. of senior citizens	Percentage
1	Male	38	63.4
2	Female	22	36.6
	<b>Total</b>	<b>60</b>	<b>100</b>

Source : Primary Data

The table reveals that 38 (63.4 percent) of them are male. On the other hand 22 (36.6 percent) of the female. In this study is based on male number is out number concerned with sex composition of the senior citizens.

### 3.3 Marital status

One of the important factor of social status in Marital status. In which it is possible to reduce many social, economical, psychological and emotional problems faced by the senior citizens. The following table status clearly about the senior citizens marital status.

**Table 3 Marital status of senior citizens**

S.No	Marital Status	No.of senior citizens	Percentage
1	Married	43	71.7
2	Unmarried	-	-
3	Widowed	17	28.3
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary Data

The table show that 43 (71.7 percent) of them got married and living with their spouse on the other hand 17 (28.3 percent) of them are widowed. In this study shows that none of them were unmarried and majority.

### 3.4 Education status

Education is universally regarded as a instrument of improvement in the status of people. Through a multiple of factors having bringing great change in people today, education has to play a greater role. The following table indicates the educational level of the respondents.

**Table 4 Education status of senior citizens**

S.No	Education status	No.of senior citizens	Percentage
1	Illiterate	6	10.0
2	Primary	18	30.0
3	Secondary	22	36.7
4	High school	9	15.0
5	Degree	5	8.3
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary Data

The table shows that 6 (10.0 percent) of them were illiterates, while 18 (30.0 percent) of them studied upto primary school level, that is, upto 5<sup>th</sup> standard, 22 (36.7 percent) of them studied secondary school level, that is up to 10<sup>th</sup> standard, 9 (15.0 percent) of them studied high school, that is 11<sup>th</sup> and 12<sup>th</sup> standard, and the remaining 5 (8.3 percent) of them complete their degree.

### 3.5 Elder person staying with their children

In the old period parents are expressed their option that their children must stay with them. But in practical it does not exist the same trend. The following table shows that how many parents living with their children.

**Table 5 Elder person staying with their children**

S.No	Opinion	No.of senior citizens	Percentage
1	Yes	41	68.3
2	No	19	31.7
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data



The table clearly status that at present out of 60 senior citizens 41 (68.3 percent) of them are staying with their children are 19 (31.7 percent) of them are not staying with their children due to many psychological, economical and social causes.

### 3.6 Pre- Retirement Occupation

Here the occupation refers to the occupation of the respondents before their retirement. Here the 'others' refers cooli, construction workers etc. the details of the previous level of occupation of the respondents are presented in the table.

**Table 6 Pre-Retirement occupation of the senior citizens**

S.No	Type of job	No.of senior citizens	Percentage
1	Private	7	11.7
2	Government	9	15.0
3	Self employed	15	25.0
4	Agriculture	6	10.0
5	Other	23	38.3
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary Data

The table shows that 7 (11.7 percent) have worked in private office, 9 (15.0 percent) have worked in government office, 15 (25.0 percent) were done business, 6 (10.0 percent) were done agriculture and the remaining 23(38.3 percent) were done in other job.

### 3.7 Post – retirement occupation

Here the post-retirement refers to the occupation of the respondents after their retirement as their occupation. It shows still some of the respondents are earning members.

**Table 7 Post- Retirement occupation of the senior citizens**

S.no	Types of job	No.of senior citizens	Percentage
1	Self employed	11	18.4
2	Agriculture	8	13.3
3	Other	12	20.0
4	No job	29	48.3
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data

The table shows b that 11 (18.4 percent) of the respondents are doing self employed (business) as their occupation, 8 (13.3 percent) of the respondents are doing agriculture, 12 (20.0 percent) of them respondents are doing other and remaining 29(48.3 percent) of the respondents are not working.

### 3.8. Health conditions

Elderly persons are suffering from health problems. The following table shows that health conditions of the senior citizens.

**Table 8 Health condition of senior citizens**

S.No	Health problem	No.of Senior citizens	Percentage
1	Healthy	13	21.7
2	Average healthy	30	50.0
3	Unhealthy	17	28.3
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data

The Table shows that 13 (21.7 percent) of them are healthy while 30 (50.0 percent) of them started healthy and 17 (28.3 percent) of them started unhealthy.

### 3.9. Disease wise classification

Commonly diseases are classified into major diseases and minor diseases. The diseasewise classification of senior citizens are analysed with help of the table.

**Table 9 Disease wise classification**

S.No	Diseases	Affected No.of Senior citizens	Not affected No.of Senior citizens
1	Nervous disorder	2(3.3)	58(96.7)
2	Hearing impairments	9(15.0)	51(85.0)
3	Joint pains	24(40.0)	36(60.0)
4	Heart complaints	9(15.0)	51(85.0)
5	High blood pressure	24(40.0)	36(60.0)
6	Poor eye sight	33(55.0)	27(45.0)
7	Diabetes	18(30.0)	42(70.0)
8	Asthma	4(6.7)	56(93.3)
9	Skin disease	4(6.7)	56(93.3)
10	TB	4(6.7)	56(93.3)
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data

The table shows that 2 (3.3 percent) of them had affected nervous disorder, 9 (15.0 percent) of them had affected hearing impairments, 24 (40.0 percent) of them had affected joint pains, 9 (15.0 percent) of them affected heart complaints, 24 (40.0 percent) of them had affected high blood pressure, 33(55.0 percent) of them affected poor eye sight, 18(30.0 percent) of them affected diabetes, 4 (6.7 percent) of them are affected asthma, 4(6.7 percent)of them had affected skin diseases and 4(6.7 percent) of them had affected TB.

### 3.10 Medical checkup

In old age doctors care and frequent consultation are very essential. The pattern of medical check up is analyzed with the help of the table.

**Table 10 Pattern of medical check up wise classification of senior citizens**

S.no	Medical check up	No.of senior citizens	Percentage
1	Regular medical checkup	-	-
2	Medical check up at the time of health problem	60	100
3	No medical check up	-	-
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data

In this study the pattern medical check up I classified into three broad categories. They are (1) regular medical check up (2) medical check up at the time of health problem, (3) no medical check up. In this study all the senior citizens consult doctor only at the time of health problem. It is interesting to note none of them consult doctors regularly.

### 3.11 Place of Treatment

The place of treatment of senior citizens is analysed with the help of the table.

**Table 11 Place of treatment of senior citizens**

S.no	Treatment	No.of senior citizens	percentage
1	Government	45	75.0
2	private	15	25.0
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data

The table shows that 45 (75.0 percent) of them government hospital treatment, 15 (25.0 percent) of them private hospital treatment.

### 3.12 Monthly household income

In the old age most of them in India depend on their sons or daughters or relatives. The income formation of the senior citizens are given in the table.

**Table 12 Monthly household income of the senior citizens**

S.no	Monthly household income(Rs)	No.of senior citizens	Percentage
1	Below 4000	4	6.7
2	4000-5000	7	11.7
3	5000-6000	5	8.3
4	6000-7000	12	20.0
5	7000-8000	12	20.0
6	8000-9000	13	21.6
7	9000 and above	7	11.7
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: Primary data

Note : Mean income of senior citizens in Rs.6883.4

The table shows that 4(6.7 percent) of them earned monthly income of less than Rs. 4000 while 7 (11.7 percent) of them received income between Rs. 4000 and Rs. 5000, 5 (8.3 percent) of them got income of Rs.5000 to Rs.6000, 12 (20.0 percent) received income between Rs.6000 to Rs.7000, 12 (20.0 percent) received income between Rs.7000 to Rs.8000, 13 (21.6 percent) received income between Rs 8000 to Rs.9000 and the remaining 7(11.7 percent) received income between Rs. 9000 and above. The mean income of senior citizens in Rs.6883.4

### 3.13 Monthly household expenditure

The standard of living of an individual is also indicated by the level of per capita expenditure includes on food, clothing, education, electricity, medicine, fuel and other expenditure. The extend of monthly expenditure of the senior citizens of study are presented in the table.

**Table 13 Monthly household expenditure of the senior citizens**

S.no	Monthly household expenditure (Rs)	No.of senior citizens	Percentage
1	Below 3000	23	38.3
2	3000 to 4000	22	36.7
3	4000 to 5000	14	23.3
4	5000 and above	1	1.7
	<b>Total</b>	<b>60</b>	<b>100</b>

Source: primary data

Note : Mean expenditure of senior citizens in Rs.3480.4

The table shows that 23 (38.3 percent) of them spent amount between Rs. Below 3000 for a month, 22 (36.7 percent) of them spent amount between Rs. 3000 and Rs.4000, 14(23.3 percent) of them spent Rs. 4000 to Rs.5000 and the remaining 1 (1.7 percent) of them spent amount between Rs.5000 and above for a month to meet their expenditure during a month. The mean expenditure of senior citizens in Rs.3580.4

## IV. CONCLUSION AND RECOMMENDATIONS

The management of old age home can start simple skill based employment activities like wire bag making, candle making, Agarbothi making to make productive use of aged persons in the home. The earnings of aged persons in the home. The earnings of aged persons can be used for the provision of welfare to the needy elderly. With a view to erase feeling of isolation among old age persons periodical Picnic trips may be undertaken by their family members. A small library can be established for the aged for the purpose of entertainment/time pass. The old age assistance programme may be extended to cover more areas in the cluster.

Old age welfare scheme implemental by the government should reach all deserving senior citizens. The deserving old age persons living in village can be linked with noon meal centres in villages to cater to their food needs. The primary health centres should undertake periodical health checkup programme for the village elderly.

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