

**Situation of Elderly People in Nepal  
(A Case Study of Amchowk VDC, Ilam District)**

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**September 2015**

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**SITUATION OF ELDERLY PEOPLE IN NEPAL  
( A Case Study Of Amchowk VDC, Ilam District )**

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## **DECLARATION**

Except where otherwise acknowledged in the text, the analysis in this thesis represents my own original research.

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## ABSTRACT

This study entitled “Situation of Elderly People in Nepal (A Case Study of Amchowk VDC, Ilam District)”. Study is based on the primary data collected in four wards 3,5,8 and 9 from these VDC.

The main objective of the study was to identify the situation of elderly people and their socio-economic and demographic, health status and support and care system available in the community for elderly people in this area. The primary data was collected from using by lottery ( probability) and purposive sampling method. From the Amchowk VDC one fourth wards 3,5,8 and 9 was selected by lottery system. The total population was listed and 150 respondents was identified by calculating sample interval among total elderly population from each ward.

Major findings were that, respondents were 50 percent male and 50 percent female, whereas found that majority of the elderly people 28 percent Limbu and then 24 percent Brahmin and 20.7 percent Rai. Among the total respondents 50 percent currently married and 41.3 percent were widow/widowers. By religion, more than 46.7 percent were Kirat and 43.3 percent were Hindu and among them 50.7 percent were illiterate. Similarly, most of the elderly people 35.3 percent have 3-4 child and 59.3 percent elderly people are living with their son/daughter in law and also 40.7 percent of elderly people decided by their son/daughter in law.

Higher the number of elderly people are engaged in agriculture as well as main source of consumption and large 82 percent of elderly people reported that they have health problem; during sickness they go to health post/hospital for the treatment. Most of the elderly people 90 percent have knowledge about old/widow allowance and 68 percent are getting old/widow allowance which were used 54.9 percent for eating food. Majority of elderly people 46.7 percent were wish to prayer/worshipping from the community and 37.3 percent elderly people wish to do well treatment and take care from the state.

The study conclusion that elderly people have poor health status and most of elderly are illiterate. Status of elderly people is directly or indirectly affected by their education, economic status and family support. So that it is need for elderly people family, society and nation should give the positive support and utilized their knowledge and experience for development sector.

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## **ACRONYMS AND ABBREVIATIONS**

CBS	Central Bureau of Statistics
CDPS	Central Department of Population Studies
CEB	Children Ever Born
Gov	Government
HH	Household
HMG	His Majesty's of Government
ICPD	International Conference on Population and Development
KTM	Kathmandu
MOHP	Ministry of Health and Population
NEPAN	Nepal Participatory Action Network
NGO	Non Governmental Organization
NPC	National Planning Commission
Ops	Older Person
SAARC	South Asian Association For Regional Co-operation
SLC	School Leaving Certificate
SPSS	Statistical Package for Social Science
TU	Tribhuvan University
UN	United Nations
UNFPA	United Nations Population Fund
VDC	Village Development Committee

# CHAPTER ONE

## INTRODUCTION

### 1.1 Background

Elderly is the natural phenomena of human life cycle. Among the various stages of human life elderly is last stage. Elderly refers to old age which cannot be defined exactly because it does not have the same meaning all societies of countries. In generally define elderly people as people 60 years and above. Elderly stage is not only the critical stage of human life but also global issue.

Ageing is growing old or maturing, progressive changes related to the passage of time. For many, ageing is progressive attainment of ages of last stage of maximum life span of human being, 100 to 110 years as general (Taber's encyclopedia medical dictionary, 2005). "Shakespeare probably characterized it best in his elegant description of the seven stages of man it beings at the moment of conception, involves the differentials and maturation of the organism and its cells at some variables point in time, leads to the progressive loss of functional capacity characteristic of senescence, and ends in death" (Robbins, 1998). With age, there are physiological and structural alternations in almost all organ system. Ageing-induced alternation in cells is an important of ageing of the organism (CBS, 2003)

The elderly population in Nepal has, on average, increased by 2.51 to 3.13 fold in 2011 from those reported in 1981, with an annual growth rate of 3.07 % for persons aged 60 years and above, 3.50 % for persons aged 65 years and above, and 3.78 % for persons aged 75 years and above. In absolute number, the volume of the elderly population aged 60 years and above is reported as 8,57,061 in 1981 that has increased to 21,54,410 by 2011. Similarly, the population of elderly persons aged 65 years and above increased from 4,89,566 in 1981 to 13,97,583 by 2011. Likewise, the old population i.e. aged 75 years and above increased from 1,44,197 to 4, 47,981 during the 30 year interval between 1981 and 2011 (Singh M.L, 2014).

Aging is difficult to define. According to western experience it generally starts after 65 years of age where as in case of developing nations it's lower limit is 60 years and above. In Nepal various age limits have been described for different purposes e.g. 58

years for compulsory retirement from civil service, 63 years for university services, 65 for judiciary services, 60 years for UN member of constitutional bodies and after 70 years only the elderly people get social security benefit from government i.e. old age allowance.

**Table 1.1 Aging Indices in Ecological Regions by sex of Nepal,2011in Percentage**

Age	Sex	Percentage		
		Mountain	Hill	Tarai
Aged <15	Both	38.22	33.46	35.70
	Male	39.64	35.65	37.17
	Female	36.90	31.45	34.28
Aged 65+	Both	5.67	5.75	4.82
	Male	5.70	5.82	5.05
	Female	5.64	5.68	4.59
Ageing index	Both	14.84	17.18	13.50
	Male	14.38	16.33	13.59
	Female	15.28	18.06	13.39

*Source: CBS,2014*

The above table shows that the percentage of the population 15 years and under is higher in mountain regions than in other regions. The percentage observed in this region is 38.22% for both sexes, 39.64% for males and 36.90% for females. In Hills and Tarai, the percentages observed for this age group are 33.45% and 35.70% for both sexes respectively. As in the case of Tarai, in hill the percentage for males is higher than females. As regard to the population age 65+ the highest percentage of 5.82% is observed for males in Hill region, while the lowest of 4.59% is observed in females in the Tarai region, The ageing indices for eco-regions shows that they are higher in Hills than in other regions at 17.18% for both sexes, 16.33% for males and 18.96% for females respectively. Low indices are observed in the Tarai region, 13.50% for both sexes, 13.59% for males and 13.39% for females respectively. In Mountains the indices observed are 14.85% for both sexes, 14.38% for males and 15.28% for females respectively. Sex differentials in regions show that ageing indices for females are slightly higher than for males in both Mountains and Hills but in Tarai, the opposite is the case (Singh M.L,2014).

Among communities, Gurung community is has the highest percentage of elderly population at 8.03%, aged 65+ years and 3.33% aged 75 + years. Newar also has a

high percentage of elderly population, 7.12% of its population is in the age group 65+ years. Other communities with a high percentage of its population in this age group are Hill Brahmins (6.92%), Gharti/Bhujels (6.14%), and Tarai Brahmins (6.04%). In aged groups 75+ years, Newar and, Hill Brahmins, each reported their percentages as 2.61% and Terai Brahmins as 2.63 %. Other communities reported percentages in the age group 65+ years in the range of 4 to 6 % and in the range of 1 to 2% in the age group 75+ years. This shows that the percentage of elderly populations is higher among upper social communities (Singh M.L,2014).

According to the socio-economic status of elderly in Nepal conducted in 1995 found that average of household with elderly is 7, in the study area, elderly population was found at least one in 20 percent of households. Elderly populations in Nepal live short lives after age 60 out of every 100 disabled elder, 60 are blind and 15 deaf and 12 suffer from paralysis. Most of elderly suffer from various other disabilities causing disease. Even though overwhelming majority of elderly live with family and relatives many are unhappy of long for better lives. Lack of interaction with family and friend was reported by one-third of elderly (Sapkota,1995).

Many hold misconceptions that as the volume of elderly and ageing indices increase, the life expectancy at elderly ages also increases at the same pace as the increase in aged persons. However this is not the. Although the life expectancy at birth will increase with a fall in infant mortality rates, life expectancy at elderly ages increases at a very slow paces which is shown in Table 3.23.

**Table 1.2 Life Expectancies at Birth and Different Elderly Ages,Nepal,1911-2001**

Life expectancy	Years									
	1911	1921	1931	1941	1951	1961	1971	1981	1991	2001
at birth	19.2	21.71	24.27	30.45	34.63	37.47	41.96	48.2	53.5	60.7
at age 50	13.5	14.28	14.96	17.02	18.07	18.85	19.98	21.75	22.465	23.8
at 65 years	7.89	8.77	8.46	9.37	9.76	10.25	10.85	11.81	12.312	13.2
at 75 years	4.71	4.88	4.98	5.52	5.88	6.07	6.38	6.81	7.231	8

*Source: CBS,2014*

The table shows that although life expectancy at birth increased substantially from one census to other, the increase in life expectancy at older ages are small. For instance, life expectancy

at birth was 19.2 years in 1911 increasing to 60.7 years in 2011. But the in case of life expectancies at older ages, the growth was from 13.5 years to 23.8 years during the same period.

Today, almost 10 percent of the world's comprises of senior citizens above 60 years of age. Of the current 15 countries with more than 10 million older person (OPs), seven are developing countries. By 2020, there will be 1 billion people Ops (over the age of 60 years) worldwide. By 2030, there will be more people over 60 years of age than under 15. By 2050,30 percent of the population in 64 countries will have senior citizens above 60 years of age. By 2050, for the first time in recorded history, Ops will outnumber children under 14.80 percent of these Ops will be in the developing world, where population ageing is growing fast (HAI-Nepal, 2012).

## **1.2 Statement of the Problem**

In Nepal, Decrease in fertility and increase in mortality rate with improvement in life expectancy have led to add about 65,000 new elderly people each year. Furthermore, projections indicate that the number of older of 1474379 (6.5 percent to the total population) in 2001 was to be 2037309 (6.9 percent to the total population) by the end of 2011 which shows an increasing trend. Such a way the increasing aging dependency ratio (present dependency ratio of 11.2 percent) is projected to be 12.5 percent in 2016 has the potential to increase the existing vulnerability of the elderly people with weakening social support system (Bhattarai, 2003).

Generally, the people of ages 15-59 for an individual is considered as economically active population or working agepopulation and age 60 and above are considered as the age of retirement. The elderly people have right to get the proper care from their offspring and to fulfill the desire of their elderly parents is the responsibility of their offspring. But all of elderly people don't have offspring. And yet a lot of elderly people in Nepalese society works in the old ages having the agricultural occupations. In the case of aged women, they perform all the domestic works as well as the agricultural activities. Their offspring be busy on their study, business and work, then the aged people should deal with problems arises in the household and take care of grand children and cattle. They don't get a single time as leisure in a whole day. So it



is necessary to investigate whether all elderly people work and nature of works they are engaged in.

Most of village of Nepal has experience large mass of elderly people. The migration pattern from rural to urban increase the rural poverty. Modern generation also does not pay any attention towards elderly care. Elderly population is increasing towards the lack of helping hand. Rural family does not capable for regular maintain of their purchasing power doesn't sufficient for solving hand to mouth problem. It is necessary to take elderly issue.

Elderly people are respected persons in the society and they are resources of social values and norms. They have knowledge, experience and maturity in life, so their contribution is necessary in the society. However they are facing different kinds of problems in their later life such as; economic, physical, social, mental, professional, family problems, and aloneness. It is emerging issue in the modern society.

However, the practice that treats elderly with respects is rapidly changing. Intervention of new technology new idea and new practice has changed a lot on the life style of the people at the present world. Indigenous ideas and practices have been replaced by the modern practices and new ways of thinking. New socialization process replaced the previous proverbs as well as the ways of living for the elderly has considerably altered. Contradiction has been elderly people expectations and new generation attitudes towards old age issues are emerging every day. For example: elderly people viewed as burden by the younger generation as the older person as not able to earn income and remain dependent on their families for survival. Now days Nepal is experiencing declining fertility and mortality with increasing longevity, resulting in both the number and proportion of the elderly people. The growing life expectancy of the Nepalese means that there will be more aged persons in coming years. Obviously the aging problem will become more pressing in the future. So that it is important to the study of elderly people.

### **1.3 Objectives of the study**

The objectives of the study is fine out the situation of elderly people among Amchowk VDC, Ilam district.

- To examine the socio-economic and demographic status of the elderly people living in Amchowk VDC.
- To examine the health status of the elderly people.
- To examine the support and care system available in the community for elderly people.

#### **1.4 Rational of the Study**

The main purpose of this study is to identify the status of elderly people who had 60+ years and above. This study focused on the Amchowk VDC, study among the different castes from 3,5,8 and 9 wards in this VDC. The rational of the study as follows:

- This study is important in the field of ageing to identify situation of elderly and to implement some welfare program to improve their status.
- This study will be explores the problem faced by the elderly people in family and society.
- It will be useful to further researcher and help local people to develop awareness about the elderly and it also helped to know the socio-economic and the demographic status of the elderly people within study areas.
- This study will be helped to make proper plan and policies including the elderly people as well as GO's/NGO's program also.

#### **1.5 Limitation of the study**

There are limitations at resources, time and economic etc which have compelled to do small-scale study. The study area of this study will have limited in the following areas.

- This study covered the situation of elderly people in Amchowk VDC.
- In this study those elderly people are not included who have the hearing problem.

## **CHAPTER TWO**

### **REVIEW OF LITERATURE**

Literature review is very necessary to have deep knowledge about any subject matter before doing research on it. That becomes a basic guideline and helpful tool to run a research work in an easy way. It is necessary to understand that some demographic characteristic may be similar with the research work. A researcher can guess and manage the necessary materials for the work and a better and accurate analysis can be done by avoiding the previous mistakes generating new idea through literature review.

#### **2.1 Theoretical Literatures**

The rapid growth of the elderly population may be a new phenomenon, but the concept and images of older people are not new. One of the main demographic events during 20<sup>th</sup> century was increasing longevity and decrease in birth and death rate. On the basis of social and economic structure, old age is defined in different way. According to economic structure it is defined as “retirement age” or “age at which people is eligible for social security benefits” and according to social structure “The elderly persons”, “Golden age”, “Senior citizens” and so on. The beginning of the old age is also characterized by the working capacity begins to be affected by physical, mental and biological condition of the people, making the operational definitions of old age limits to 60, 65, 70 years or above (Bisht, 2004). Getting into the elderly normally means individuals can no longer consider themselves as self-sufficient, independent and self-reliant (Subedi, 1996).

August Weismann was responsible for interpreting and formalizing the mechanisms of Darwinian evolution in a modern theoretical framework. In 1889, he theorized the aging was part of life's program because the old need to remove themselves from the theater to make room for the next generation, sustaining the turnover that is necessary for evolution. This theory again has much intuitive appeal, but it suffers from ‘teleological thinking’. In other words, a purpose for aging has been identified, but not a mechanism by which that purpose for aging could be achieved. Aging may have this advantage for the long-term health of the community; but that doesn't explain how individuals would acquire the genes that make them get old and die, or why individuals that had aging genes would be more successful than other individuals

lacking such genes. (In fact, there is every reason to think that the opposite is true: ageing decreases individuals fitness). Weismann disavowed his own theory before his life was over.

Globally 1 out of 10 people was aged 60 or over 60 in 2002, by 2020 corresponding ratio will be about 1 in 8. Already, over 60 percent of all older people live in developing countries and that share is growing both numerically and proportionately. In both developed and less developed regions but especially in late are expected to rise markedly in the decades ahead (UNFPA, 2002).

The subculture theory of aging shows how aging is viewed from the conflict perspective. This perspective asserts that the elderly compete with younger members of society for the same resources and social rewards and suffer a variety of disadvantages because of their lack of social power. The subculture theory of aging states that older persons form subculture in order to interact with others with similar backgrounds, experiences, attitudes, values, beliefs and lifestyles. This happens not only by choice but because of segregation, social differentiation and discrimination based on age. This theory assumes that aged people sever social ties with people from other age cohorts and increase them with others of similar age. These result in intensified age consciousness, crating social bond based on age that becomes more important than other variables that differentiate people (Levine, 2007).

Aging is inevitable: this is gerontological dogma. And humans do inevitably grow old, which is probably why it seems so unlikely to us that other forms of life could escape aging. Escaping aging is not escaping death. Death is an inherent part of life, and it can strike any time. But the question is whether death necessarily becomes more likely as life proceeds. And it does not. The theoretical results in this monograph indicate that life provides alternative strategies. While some organisms will deteriorate over adult ages, for others mortality appears to fall or remain constant, at least over an extended period of life after reproductive maturity. This empirically observed especially for species that keep on growing during adult ages. Perhaps the diversity of aging matches the diversity of life (Baudisch, 2008).

Psychosocial theories provide insight into the behavior, personality, and attitudes exhibited during the aging process. These theories focus on ego development and the

challenges associated with each life stage. They analyze how personality, mental processes, and attitudes influence a person's adaptation to these life changes. Role change, gender, image, and status within a culture also influence the adult's adaptation to aging and are the focus of sociological theories (Hagestad and Dannefer, 2002).

Human Needs Theory (Maslow, 1954) suggests a hierarchy that initially requires fulfillment of physiologic needs, followed by safety and security, then love/belonging, self-esteem, and finally self-actualization needs. Some flexibility when interpreting the hierarchy is relevant for the nurse caring for adults who may have or need advance directives. The nurse reprioritize either with the individual or with family to make love/belonging needs supersede fulfillment of physiologic and even safety and security needs in order to respect the person's wishes (Grossman and Lange, 2006).

According to population data of the U.N, 2013, there are 7,137 million population in the world; 124 million live in developed countries, 4891 million live in less developed countries and the remaining population live in the least developed countries. The data reported that people aged 65 and above make up 8% of the world's population, of which 17% are in developed countries and 6 % in less developed countries. This means there are 570.96 million people aged 65 years and above in the world, of whom 211.92 million live in developed countries, 293.46 million in less developed countries and 65.68 million in the least developed countries (Singh M.L,2014).

**Table 2.1 Percentage of population in Age Groups < 15 Years and 65+ Years and Ageing Index 1988-2011, Developed and Developing Countries**

	1988			2001			2011		
	% <15	% 65+	Index of ageing	% <15	% 65+	Index of ageing	% <15	% 65+	Index of ageing
More developed	19	14	73.68	18	15	88.33	16	17	106.25
Less developed including China	35	5	14.29	32	5	15.63	29	6	20.69
Less developed excluding China	37	4	10.81	36	4	11.11	32	5	15.63
World	32	7	21.88	30	7	23.33	26	8	30.77

Source :CBS,2014.

The table shows that during the period 1988 to 2011, while the index for all world has increased by 9%, from 21.88% in 1988 to 30.77% in 2011, there is a sharp contrast in the increase of indices between developed and developing countries. Also during the period 1998 to 2011, while the index of ageing in developed countries increased by 32 points, from 73.68% in 1998 to 106.25 in 2011, the index increased by only 5 points, from 10.81% to 15.63% in less developed countries (Singh M.L,2014).

## **2.2 Empirical Literatures**

Societal attitudes and the non-realization of the human rights of women. Some harmful traditional and customary practices result in abuse and violence directed at older women, often exacerbated by poverty and lack of access to legal protection. Women's poverty is directly related to the exacerbated by poverty and lack of access to legal protection. Women's poverty is directly related to the absence of economic opportunities and autonomy, lack of access to economic resources, including credit, land ownership and inheritance, lack of access to education and support services and their minimal participation in the decision-making process. Poverty can also force women into situation in which they are vulnerable to sexual exploitation (UNFPA, 2005).

Most developed world countries have accepted the chronological age of 65 years as a definition of 'elderly' or 'older person', but like many westernized concepts, this does not adapt well to the situation in Africa. While this definition is somewhat arbitrary, it is many times associated with the age at which one can begin to receive pension benefits. At the moment, there is no United Nations standard numerical criterion, but the UN agreed cutoff is 60+ years to refer to the older population (UN, 2001).

The development activities, modernization and industrialization are not similar in all countries of world. Some countries already have the fertility in replacement level where as others are currently experiencing the demographic transition. Mortality seems different region. There is a correlation between aging and decline in fertility and mortality. When the fertility and mortality levels continue to descend to much lower levels the life expectancy increases in the region and the proportion of aged population also increase in developing regions with the mortality and fertility decline,

average life span becoming longer. The proportion of older population is expected to increase more rapidly than ever (Acharya, 2001).

### 2.2.1 Elderly People in the World

Aging is universal, affects every individual and family, community and society and it is an abnormal dynamic process. The ageing of population is now a worldwide phenomenon and the world is increasingly becoming aware of this and the problems tend to bring about threatening to create societal imbalance (Regmi, 2006). The trend of increasing ageing population all over the world is ascending order since 20<sup>th</sup> century. The temps of ageing in developed countries are more rapid than in developing nations. The less developed states will have less time than their developed counterparts to adapt to the consequences of ageing (Bisht, 2000).

It is already clear that population ageing is a global phenomenon. The developmental activities, modernization and industrialization are not similar in all countries of the world. Some countries already have the fertility in replacement level where as others are currently experiencing the demographic transition. Mortality seems different in different regions. There is a correlation between ageing and decline in fertility and mortality. When the fertility and mortality levels continue to descend to much lower levels the life expectancy increases in the region and the proportion of aged population also increases. In developing regions with the mortality and fertility decline, average life span becoming longer. The proportion of older population is expected to increase more rapidly than ever (Achraya, 2001).

**Table 2.2 Population Aged 60 and Above: World 1950-2050 in Million**

<b>A.D</b>	<b>World Population in Billion</b>	<b>Population in Million</b>	<b>Percent</b>
1950	2.5	205	8.2
1975	4.1	350	8.5
2000	6.1	600	9.8
2009	6.8	737	10.7
2012	-	-	8
2025	8.1	1143	14.1
2050	9.4	2000	21.3

*Source: UN, world population ageing 2012*

An international conference on population and development (ICPD) held in ciaro, from 5 to 13 September 1994 high lightened some main issues on elderly. It suggested and recommended the countries to make policies to enhance the self-reliance of the elderly people, to promote quality of life and independency to develop the health care system and to develop economic and social security system (UN, 1994). The second world assembly was held in Madrid, Spain in 8-12 April 2002, organized by UN. The political declaration and Madrid international plan of Action on ageing recommended priority direction on older persons and development, advancing health and well-being in to old age and ensuring, enabling and supporting environments. It also recommended active participation, employment opportunity, improving of living condition alleviation of marginalization, integration access to knowledge education and training, full utilization of potential and expertise. Strengthening of solidarity, eradication of poverty, health promotion, universal and equal access to health care services, abuse and violence, images of ageing and research on ageing are some key area of action plan recognized by Madrid International plan of action on ageing (Chhetri, 2006).

### **2.2.2 Elderly People in SAARC Countries**

In SAARC countries there is no similarity in categorizing the aged people. Maldiveshas taken 65 years, Sri- Lanka 55 years, Bhutan 58 years where as India, Pakistan and Nepal 60 years as criteria to define ‘aged people’ (Kamai, 1994). It has made difficulty in cross-sectional comparison of ageing process. Countries are using different cut of points to define old age, sometimes depending on the official national ages of retirement (Achraya, 2001).

**Table 2.3 Indices of SAARC Countries**

<b>SAARC countries</b>	<b>65+ years</b>	<b>Life-expectancy</b>	<b>Indices of Ageing</b>
Sri-Lanka	6	67	22.22
Bhutan	5	68	12.82
India	5	64	11.11
Nepal	4	64	9.76
Pakistan	4	66	9.52
Bangladesh	4	66	7.5
Afghanistan	2	44	8.6

*Sources: UN's world population date sheet, 2010*



According to above table Sri-Lanka has the highest index i.e. 22.22 percentage followed by Bhutan 12.82 percent. Least index of ageing is observed for Bangladesh with the figure of 7.5 percent followed by Pakistan of 9.52 percent. In case of Nepal, the index of ageing of ageing at age 65+ is observed as 9.76 percent.

### **2.2.3 Elderly People in the Nepal**

Nepal's demographic situation is characterized by an existence of large mass of young population and lower proportion of adult and aged population but all three age groups i.e. young (0-14 years), mature (15-59 years) and aged (60 year and over), the pace of growth of aged population has been faster. The growth rate of the elderly population is faster than the growth rate of the total population in Nepal. Census data of Nepal reveals that in past three decades, 1970 and onwards there has been a high rate of growth in the elderly population. Between 1991 and 2001 the elderly population has increased at faster rate 3.5 percent per annum compared to 2.24 percent growth rate of the total population. The high growth rate of elderly population in 2001 census implies that the number of the elderly will double in less than 20 years (Bisht, 2004).

Old age is stereotypically seen as a period of decline, and people can find it difficult to more about and easy to become isolated. An ageing global population means that resources to tackle the situation become more limited as the need grows to find ways to help elderly people to continue their normal everyday lives (Upadhaya, 2004).

As in most of the countries, the size of the family plays an important role in the social structure of Nepal. The ageing of population alters the size and the structure of the family household structure or co-residency patterns, living arrangements, family support system, marital status and gender gap in life expectancy (Bisht, 2005).

A participatory research shows that, the elderly men on an average work for 5 to 10 hours and the elderly women up to 16 hours a day. Elderly women work from early in the morning till night, they are engaged in helping their families. Elderly men are involved in the handing over the traditions and cultural values, imparting their knowledge and conserving culture/traditions. They also help in building able citizens by educating the youth about the virtues of truth and non-violence (NEPAN and Help Age International, 2003).

Nepal has started to conduct census since 1911 A.D. But scientifically period from the 1952/54 the census report are given only by broad group 0-15, 16-49 and 50+ years ages. Then after the 1952/1954 the census has been conducted in every 10 years interval and latest's 2011 but which is still not published so we can use the 2001 census data. The following table shows the size and percentage of the different census period.

**Table 2.4: Elderly People in Nepal 1952-2011**

<b>Year</b>	<b>Total population</b>	<b>Number of elderly people</b>	<b>Percent</b>
1952/54	8256625	403961	5.0
1961	9412996	489346	5.2
1971	11555983	621597	5.4
1981	15022839	857061	5.7
1991	18491097	1071234	5.8
2001	23151423	1474379	6.5
2011	26499504	2154410	8.13

*Source: CBS and MoHP, 2004 and CBS, 2012.*

Table 3 shows the aging in Nepal, decrease in fertility and increase in mortality rate with improvement in life expectancy have led to add about 65000 new elderly people each year. Furthermore, projections indicate that the number of older people of 1474379 (6.5 percent to the total population ) by the end of 2011 which shows an increasing trend 8.13 percent such a way the increasing ageing dependency ratio (present dependency ratio of 11.2 percent) is projected to be 12.5 percent in 2016 has the potential to increase the existing vulnerability of the elderly people with weakening social support system (Bhattarai, 2003).

### **2.3 National Policies and Programs for the Elderly People**

Among various 5 years plan of Nepal, Ninth plan (1997 -2002) is the first which provides special attention on special goals, policy and strategies for senior citizens. It also aims to utilize the capability; experiences and knowledge of senior citizens for national development by offering them appropriate care and attention (Bisht, 2005). Some programme such as, maintaining records of senior citizens, granted monthly allowance, reservation schemes and establishing elderly home in each development region were introduced in the ninth plan (NPC, 1998).similarly the tenth plan (2002 –

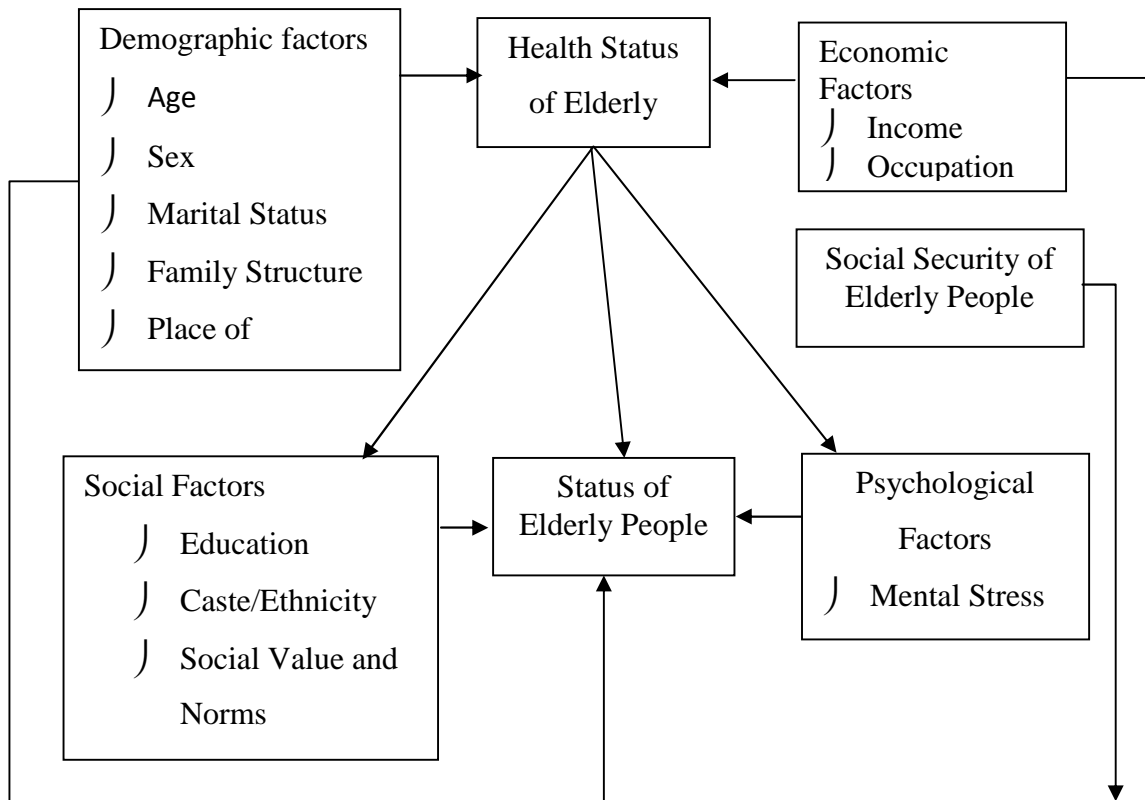
2007) also formulated the objectives, policies and strategies regarding senior citizens as to make the common, secured and respective live of elderly people and to use the capabilities, experiences, knowledge and skills and senior citizens in social development tasks. Plan also assured some policies and strategies regarding senior citizens as, development of legal, structural network, providing right of elderly, and social security (NPC,2003).

Similarly, the Interim 3 year plan (2007-2010) has mainly focused on senior citizens to make their life convenient, utilized their knowledge, create necessary infrastructure to allow them to live dignified life in the society, develop respect and a sense of duty in the new generation for them and to create appropriate environment for protection of their rights and welfare (NPC, 2008).

## **2.4 Conceptual Framework**

The conceptual framework attempts to show the relationship between dependent and independent variables. In this framework independent variables are demographic factors, social factors, economical factors, health factors and social security factors and the status of elderly people is dependent variable. This framework shows that status of elderly is influenced by these independent variables.

### Conceptual Framework



Above framework shows that demographic, economic, social and psychological are the main dominant factors for affecting the health and overall status of the elderly people. Demographic factors such as age, sex, marital status, family structure and place of residence and social factors such as education, caste/ethnicity, social value and customs affects on the health status of elderly people. Similarly, economic factors such as income, occupation and psychological factors such as mental tension and poverty affects on the health status of the elderly population. The demographic, social, economic and psychological factors also directly determine the overall status of the elderly population.

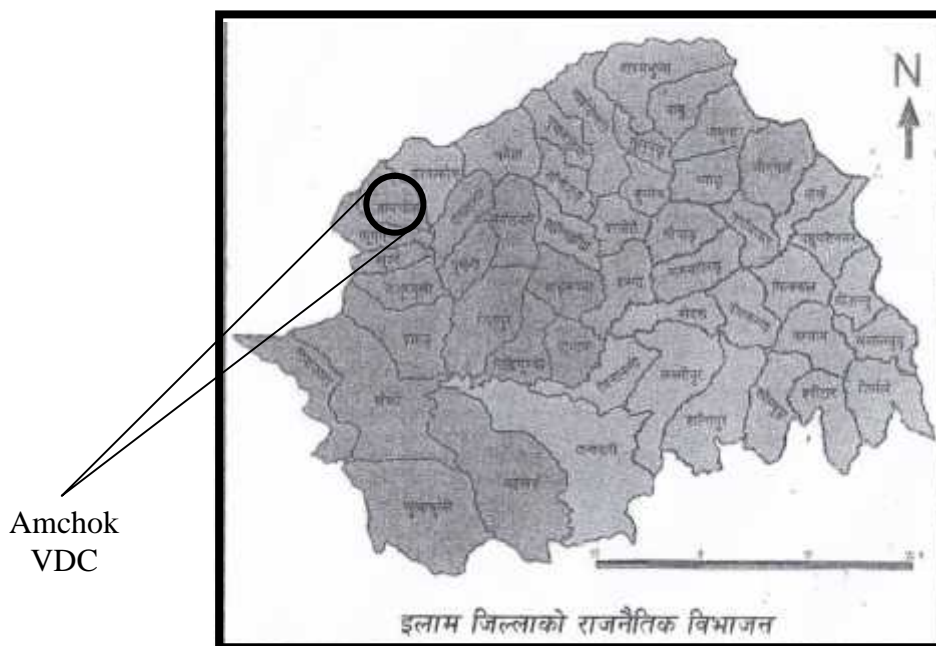
## CHAPTER- THREE

### RESEARCH METHODOLOGY

This chapter gives the methodologies that were employed to find out the objective of the research. It includes the following.

#### 3.1 Study Area

The study was conducted in the AmchowkVDC of Ilam district. This district is located in hill areas. It is lies in eastern region of Nepal. And 290254population are lived in Ilam district This VDC is located EktappaVDC in the east, Phuyatappa VDC in west and south, Panchthar district in the north. This VDC covers an areas of 22.66 sq km. According to 2011 census 991 households in this VDC. Whereas 4730 population are lived in this VDC. Among them 2184 are male and 2546 are female population .



#### 3.2 Study Population

The study population were select 150 respondent. The study were included people who are of 60+ years or above of different caste/ethnic group.

### 3.3 Sources of Data

This study is based on primary data generated from the field survey whereas a primary data as well as some had taken secondary data for references.

### 3.4 Techniques of Data Collection

This study was based on purposive method Till to list out the Eligible respondent as a condition of male -female- male respectively in a study area. After then One set of semi- structured questionnaire was developed to collect information. The question included information about socio-economic, demographic, health condition and overall situation of elderly population. The questionnaire were divided into seven sections. The first section of the questionnaire presents the family description. The second section presents the background characteristics of respondent. The third section presents the currently living arrangement of elderly people. The fourth section information on economic situation of elderly people such a way the fifth section presents the information on health status. The six section presents on the psychological status and final as well as last section information on social security status of elderly people.

### 3.6 Sampling Technique

A probability sampling procedure especially, cluster sampling technique was used in 3,5,8 and 9 wards off Amchowk VDC. From the total elderly population in 3,5,8 and 9 wards in Amchowk VDC the respondents are selected through systematic random sampling method. As applying SRS the total elderly population is listed and identified sampling interval by the following relations.

Sampling Interval (i) =  $193/150 = 1.28$

As per the sampling interval, respondents are selected by the randomly selected first respondent and applied SRS of total respondents.

{1,2,}3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18, 19, 20.....193

At first 1 is selected by lottery method out of first 2 respondents. So the first respondent is no 1, 2<sup>nd</sup> respondent no.  $\{1+1.28\} = 2.28 = 2$ , third respondent no.  $\{2.28+1.28\} = 3.56 = 4$ , and fourth respondent no.  $\{3.5+1.28\} = 4.84 = 5$ , in this way no. 150 respondents was selected for the study.

### **3.7 Data Analysis**

The data analysis is simply based on descriptive form. In this study has used frequency table and other necessary information has extracted from the statistical package for social science (SPSS) edited data methods to meet the research objectives. Frequency table has used to describe the household and individual characteristics of the respondents. Table are presented for data analysis and findings of the study has been interpreted with previous limitation .

## CHAPTER FOUR

### DEMOGRAPHIC AND SOCIO-ECONOMIC CHARACTERISTICS OF THE ELDERLY PEOPLE

#### 4.1 Demographic characteristics

Demographic characteristics included age, sex, marital status, age of first birth of the elderly people to obtain the information about the demographic characteristics by using data of questionnaire.

##### 4.1.1 Sex and age

Life expectancy of male and female is not similar in our country. Such a way elderly people of study area had more of elderly female than male do that we can see in the table male people die in early age where ad some survive up to late age. The number of the elderly people is increasing day by day. In study area I took 50 percent male and 50 percent female from the total 150 elderly people .

**Table 4.1 Distribution of the Elderly People by Age and Sex Group**

Age/Sex	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
60-64	24	32.0	26	34.6	50	33.3
65-69	17	22.7	14	18.7	31	20.7
70-74	15	20.0	14	18.7	29	19.3
75-79	10	13.3	9	12.0	19	12.7
80+	9	12.0	12	16.0	21	14.0
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

The table 4.1 shows the distribution of sex on the basis of age. Age group of respondent had categorized into 5 groups from the total respondent number of male and female. Table shows the highest 33.3 percent of elderly people are in the age group of 60-64 years and lowest 12.7 percent of elderly in age group of 75-79 years. Similarly 14.0 percent in age group of 80+ and 19.3 percent and 20.7 percent in age group 70-74 and 65-69 respectively.



### 4.1.2 Marriage and Fertility

The United Nation define that “marriage is the legal union of opposite sex. The legality of the union may be established by civil religious or other means as recognized by the laws of each country and irrespective the type of marriage, each should be reported for vital statistic purpose.” Marriage is one of the important proximate determinants of fertility. In most of the societies child bearing is takes place only within marriage.

**Table 4.2 Distribution of the Elderly of Marital Status**

Marital status	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Unmarried	-	-	-	-	-	-
Currently Married	44	58.7	31	41.3	75	50.0
Widow/Widower	26	34.7	36	48.0	62	41.3
Divorce/Separation	4	5.3	6	8.0	10	6.7
Others	1	1.3	2	2.7	3	2.0
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 4.2 shows that no one had unmarried in the total number of elderly people in study population. 50 percent of respondent are currently married. i.e. 58.7 percent male and 41.3 percent female, the elderly respondent 41.3 percent are widow/widower whereas 34.7 male and 48.0 percent female among total respondent of elderly 6.7 percent are divorce/separation i.e.5.3 percent male and 8.0 percent female and 2.0 percent are other marital status like a lost etc.

Number of children is important for the elderly people that they are their care takers and supporters. By using the Children Ever Born (CEB) in a crude way, fertility performance of the elderly is also analyzed in this study, which is mentioned in following table.

**Table 4.3 Distribution of the Elderly People by Number of Children**

<b>Number of CEB</b>	<b>Number of elderly people</b>	<b>Percent</b>
1-2	24	16.0
3-4	53	35.3
5-6	43	28.7
7+	17	11.3
No child	13	8.7
Total	15	100.0

*Source: Field survey, 2015.*

Table 4.3 shows the highest number of respondent have 3-4 children are occupy 35.3 percent. Such a way in second position 5-6 children where we have 28.7 percent respectively, 16.0 percent have 1-2, 11.3 percent have 7 and above children and the 8.7 percent elderly respondent not having any children.

## **4.2 Social Characteristics**

Life in old ages is greatly influenced by family and society. The elderly are regarded as dependents in one hand and respected persons on the other. Family types, rule and regulation has effect on the every human life from birth to death. Which section study about the caste /ethnicity, religious, literacy rate as well as currently living arrangement of respondents.

### **4.2.1 Ethnicity and religious**

Ethnicity and Religious has great impact on the daily life of the people particularly on the life of elderly people. Their beliefs, values and practices are guided by the caste ethnicity and religious.

**Table 4.4 Distribution of the Elderly People by Caste/ Ethnicity**

<b>Caste/ethnicity</b>	<b>Number</b>	<b>Percent</b>
Brahamin	36	24.0
Chhetri	11	7.3
Magar	10	6.7
Limbu	42	28.0
Rai	31	20.7
Dalit	15	10.0
Bhujel	5	3.3
Total	150	100.0

*Source: Field survey, 2015*

Table 4.4 shows that about different caste/ethnicity of study area where largest ethnic group is Limbu which is 28 percent. Same as 24 percent Brahamin, 20.7 percent Rai, 10 percent Dalit, 7.3 percent Chhetri, 6.7 percent Magar and 3.3 percent are Bhujel respectively.

**Table 4.5 Distribution of the Elderly by Religious Status**

<b>Religion</b>	<b>Number</b>	<b>Percent</b>
Hindu	65	43.3
Buddhist	7	4.7
Christian	8	5.3
Kirat	70	46.7
Total	150	100.0

*Source: Field survey, 2015*

Table 4.5 Shows that higher proportion of elderly people follows the Kirat religion, which is 46.7 percent in the total respondent. Similarly the Hindus are 43.3 percent, 5.3 percent are Christian and 4.7 percent respondents are Buddhist in study population.

#### **4.2.2 Literacy and Education**

Education affect in the socio-economic and demographic status of the elderly people. It is also the base of the development of any society, community or the nation. The

education status of the people shows that whether the community is developed or not. The literacy status of elderly people are selected respondents are as follows.

**Table 4.6 Education Status of the Elderly People**

Educational attainment	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Illiterate	24	32.0	50	66.7	76	50.7
Informal education	13	17.3	18	24.0	29	19.3
Primary	15	20.0	6	8.0	21	14.0
Secondary	12	16.0	1	1.3	13	8.7
SLC and above	11	14.7	-	-	11	7.3
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Out of the total 150 respondents 50.7 percent are illiterate where 32.0 percent male and 66.7 percent female are illiterate. And 19.3 percent have informal education whereas 17.3 percent are male and 24.0 percent are female. Same as 14.0 percent have primary education, 8.7 percent have secondary level and 7.3 percent have level of SLC and above in total population of study area. This table shows that nobody have SLC and above level in female respondents.

#### **4.2.3 Nature of their family**

**Table 4.7 Distribution of Elderly People by Their Family Type**

Nature of family	Number	Percent
Nuclear	49	32.7
Joint	101	67.3
Total	150	100.0

*Source: Field survey, 2015*

Table 4.7 shows that joint family is practiced in large extent in study area. About 67.3 percent of the elderly are having joint family where as only 32.7 percent of the elderly people are living in nuclear family.

#### 4.2.4 Living arrangement

Living arrangement of the elderly has effect in their life. If the family members, community and states are friendly and helpful the life of the elderly can be prosperous. This study also aims to find out the living arrangement of the elderly respondents in the study area, which is presented in the following tables.

**Table 4.8 Distribution of the Elderly and Living Arrangement**

<b>With whom are you living</b>	<b>Number</b>	<b>Percent</b>
Self/ alone	9	6.0
Spouse	27	18.0
Son /Daughter in law	89	59.3
Daughter / son in law	7	4.7
Grand children	13	8.7
Brother	3	2.0
Others	2	1.3
Total	150	100.0

*Source: Field survey, 2015*

Table 4.8 Shows that living arrangement of elderly people where highest proportion 59.3 percent are living with son/daughter in law. Similarly 18 percent are living with spouse, 8.7 percent with grand children, 6.0 percent are living self/alone, 4.7 with daughter/son in law, 2.0 percent with brother and 1.3 percent are living with others.

**Table 4.9 The Elderly People by Satisfaction of Currently Living**

<b>Living satisfaction</b>	<b>Number</b>	<b>Percent</b>
Yes	109	72.7
No	41	27.3
Total	150	100.0

*Source: Field survey, 2015*

Table 4.9 Shows that 150 respondents of study area 72.7 percent are satisfied with their current living. About 27.3 percent of the elderly are not satisfied with their current living condition due to some reason of study area.

**Table 4.10 Distribution of the Elderly People by Dissatisfaction**

<b>Why dissatisfaction</b>	<b>Number</b>	<b>Percent</b>
Lack of respect	16	39.1
Lack of food	5	12.2
Lack of caring	9	21.9
Familydisputes	7	17.1
Feel alone	4	9.7
Total	41	100.0

*Source: Field survey, 2015*

The table 4.10 Shows that among the number of 41elderly people who had dissatisfaction of current living arrangement. The cause of dissatisfaction, 39.1 percent of elderly are being in lack of respect, 21.9 percent of respondents are dissatisfy cause of lack of caring. similarly 17.1 percent is family disputes, 12.2 percent is lack of food and 9.7 percent respondents are dissatisfy cause of feel alone.

**Table 4.11 Distribution of the Elderly by Their Desire to Live**

<b>Desire to live with</b>	<b>Number</b>	<b>Percent</b>
Self/ alone	11	7.3
Spouse	57	38.0
Son/daughter in law	54	36.0
Daughter/son in law	13	8.7
Grand children	6	4.0
Brother	-	-
Other relatives	-	-
Others	9	6.0
Total	150	100.0

*Source: Field survey, 2015*

Table 4.11 Shows that 7.3 percent of the respondents want to live self/alone. About 38 percent of elderly want to live with spouse. Similarly 36 percent want to stay with son/daughter in law, 8.7 percent want to live with daughter/son in law, 4.0 percent want to stay with grand children and 6.0 percent want to live with others like Birdha Ashram etc. respectively.

**Table 4.12 Elderly People by Their Role in Decision Making**

<b>Person who makes decision</b>	<b>Number</b>	<b>Percent</b>
Self	34	22.7
Husband/ wife	39	26.0
Son /daughter in law	61	40.7
Daughter / son in law	7	4.7
Grand children	4	2.6
Brother	3	2.0
Others	2	1.3
Total	150	100.0

*Source: Field survey, 2015*

The elderly people are matured and experienced persons in the family and society. During the different family affairs the elderly people are consulted. They are supposed to make matured decision during difficulties. Experienced behavior and skill of the elderly people support to make right decision in right time.

Table 4.12 presents the decision making role in family, large number of elderly 40.7 percent says son/daughter in law making decision in family. Same as 26percent along the husband/wife, 22.7 percent of self, 4.7 percent of daughter/son in law, 2.6 percent of grand children, 2.0 percent of brother and 1.3 percent of others respectively.

#### **4.2.5 Food habit**

Food is basis need of human being as well elderly people so naturally the elderly people need more nutrition and soft food, they need more help in food preparation system. Elderly have suffered from different health problems as well as cannot digest and consume a lot of food at one time if they are starving compare to young. The food is provided in the family according to respondents.

**Table 4.13 Distribution of the Elderly People Food Preparation**

<b>Who prepares food</b>	<b>Number</b>	<b>Percent</b>
Self	57	38.0
Husband/Wife	22	14.7
Son /Daughter in law	58	38.7
Daughter /Son in law	6	4.0
Grand children	3	2.0
Others	4	2.6
Total	150	100.0

*Source: Field survey, 2015*

Table 4.13 Shows that 38 percent of the elderly prepare their food themselves, 14.7 percent of the respondents consume food prepared by their husband/wife. Like that 38.7 percent of the respondents their son and daughter in law provides them food. 4.0 percent of the respondents consume the food prepared by their daughter/son in law. Respectively, 2.0 percent of elderly have food served by their grand children and 2.6 percent of elderly provide food to them by others in study area.

**Table 4.14 Basis of Daily Food**

<b>Daily food in take</b>	<b>Number</b>	<b>Percent</b>
Once	5	3.3
Twice	79	52.7
Thrice	51	34.0
Four times	15	10.0
Total	150	100.0

*Source: Field survey, 2015*

Table 4.14 shows that 52.7 percent of large elderly people take a food twice a day. Similarly, 34 percent of the elderly take food thrice times a day. Respectively 10percent respondents takea four time a day and 3.3 percent respondents take a one times a day.



#### 4.2.6 Personal hygiene

Elderly people have to need support and care for their personal hygiene from their family. So that family members play very important role to maintain hygienic environment for the elderly. Some information on help to the elderly to maintain personal hygiene is given in following table.

**Table 4.15 Elderly People by Help to Them in Personal Hygiene**

Help by	Number	Percent
Self	78	52.0
Husband/wife	34	22.7
Son /daughter in law	29	19.3
Daughter /son in law	3	2.0
Grand children	4	2.7
Others	2	1.3
Total	150	100.0

*Source: Field survey, 2015*

According to table 4.15, 52 percent of the elderly are take care of personal hygiene themselves, 22.7 percent of the elderly are helped by their husband/wife, 19.3 percent are supported by their son/daughter in law, 2.0 percent are supported by their daughter/son in law, 2.7 percent are supported by their grand children and 1.3 percent are helped by others peoples as relatives.

#### 4.3 Information on economic status

Economic status is very important components in analyzing the status of the elderly people. people above 60 years are called dependent population, occupation, income sources and involvement of the elderly in income generating activities influence the quality of life and maintain living standard.

##### 4.3.1 Occupation, income and land

Occupation of the elderly is directly indirectly related to health, economic and social aspect. Earlier occupation of elderly people explicitly as well as implicitly associated with present condition of elderly. Most of the Nepalese people engage in agriculture

so more than 80 percent people occupation is agriculture. Land is main property of people which plays important role in human life. The elderly who have the land ownership are comparatively more economically strong by using land in different ways. Such a way ownership of land is an important indicator that determines the economic status of the elderly people.

**Table 4.16 Distribution of the Elderly by Their Past Occupation**

<b>Past occupation</b>	<b>Number</b>	<b>Percent</b>
Agriculture	120	80.0
Daily wage	4	2.7
Business	8	5.3
Service other	15	10.0
Others	3	2.0
Total	150	100.0

*Source: Field survey, 2015*

Table 4.16 shows that the occupation status of the respondents in the study area. Among the total respondents 80 percent of elderly people are engaged in agriculture. Respectively, 2.7 percent in daily wage, 5.3 percent in business, 10 percent in service other and 2.0 percent of elderly people are engaged in others occupations.

**Table 4.17 Distribution of the Elderly by Their Main Source of Income**

<b>Main source of income</b>	<b>Number</b>	<b>Percent</b>
Agriculture	112	74.7
Pension	13	8.7
Old aged allowance	11	7.3
Trade	2	1.3
Donation other	9	6.0
Others	3	2.0
Total	150	100.0

*Source: Field survey, 2015*

Table 4.17 shows that majority of the people in the study area are depend on agriculture which is 74.7 percent. Similarly 8.7 percent respondents depend on

pension, 7.3 percent on old aged allowance, 1.3 percent on trade, 6.0 percent depend on donation by other and 2.0 percent are depend on others source.

**Table 4.18 Own Land of Elderly People**

<b>Ownership of land</b>	<b>Number</b>	<b>Percent</b>
Yes	114	76.0
No	36	24.0
Total	150	100.0

*Source: Field survey, 2015*

Table 4.18 Shows that 76 percent of the elderly have ownership of land and 24 percent of the elderly reported they do not have land ownership of respondents.

**Table 4.19 Reasons of not Having Land**

<b>Reasons of no having land</b>	<b>Number</b>	<b>Percent</b>
Transferred in sons name	18	50.0
Transferred in daughters name	13	36.1
Taken by others	5	13.9
Others	-	-
Total	36	100.0

*Source: Field survey, 2015*

Table 4.19 Shows that not having own land i.e.50 percent of respondents transferred in sons name. similarly 36.1 percent of elderly people transferred in daughters name and 13.9 percent of respondents land taken by others.

#### **4.3.2 Pewa/ Daijo/ Jeuni and economic involvement**

Pewa/Daijo/Jeuni are life secure property of elderly people. Those property them to meet the economic needs; it is the traditional practice in Nepalese community which is economic security especially in old age. When they are getting old and old not possible to work at that condition they can take that money for their life for daily expenses even no one take care of them.

**Table 4.20 Distribution of the Elderly by Having of Pewa/ Daijo/Jeuni**

<b>Having Pewa/Daijo/Jeuni</b>	<b>Number</b>	<b>Percent</b>
Yes	84	56.0
No	65	44.0
Total	150	100.0

*Source: Field survey, 2015*

According to this table 56 percent elderly people have own pewa/daijo/jeuni and 44 percent have not any types of pewa/daijo/jeuni.

**Table4.21 Distribution of Different Types of Pewa/Daijo /Jeuni**

<b>Types of Pewa/Daijo /Jeuni</b>	<b>Number</b>	<b>Percent</b>
Land	41	48.9
House	16	19.0
Livestock	5	5.9
Money	19	22.6
Others	3	3.6
Total	84	100.0

*Source: Field survey, 2015*

Table 4.21 Shows the majority 48.9 percent of the elderly have ownership of land. Similarly, 19.0 percent have house, 5.9 percent have livestock, 22.6 percent have money and 3.6 percent have others like vehicles etc.

**Table 4.22 Elderly People Currently Involve in Economic Activity**

<b>Currently involve in economic activity</b>	<b>Number</b>	<b>Percent</b>
Yes	121	80.7
No	29	19.3
Total	150	100.0

*Source: Field survey, 2015*

We see that table 4.22 present 80.7 percent elderly people are currently involve in economic activityand 19.3 percent elderly people are not currently involve in economic activity.

**Table 4.23 Elderly People Currently Involve in Economic Sector**

<b>Sector of involvement</b>	<b>Number</b>	<b>Percent</b>
Gov /organizational job	-	-
Agriculture	52	43.0
Trade	2	1.7
Animal raring	58	47.9
Others	9	7.4
Total	121	100.0

*Source: Field survey, 2015*

Table 4.23 Shows that 43.0 percent of elderly people engages in agriculture. Same as, 1.7 percent engages in trade, 47.9 percent engages in animal raring and 7.4 percent elderly people are engages in others like dally wage etc.

### **4.3.3 Personal expenses and support to their family**

Daily expenses and their family support would impact the situation of elderly people of those respondents.

**Table 4.24 Distribution of the Elderly People of Their Personal Expenses**

<b>Who does their expenses</b>	<b>Number</b>	<b>Percent</b>
Self	48	32.0
Spouse	28	18.7
Son/daughter in law	62	41.3
Daughter/ son in law	6	4.0
Grand children	4	2.7
Other relatives	2	1.3
Total	150	100.0

*Source: Field survey, 2015*

Table 4.24 Shows that 32 percent of respondents do their self personal expenses. Similarly, 18.7 percent of respondents take cared by their spouse. Respectively, 41.3 percent of respondents personal expenses cared by their son/daughter in law, 4.0 percent by their daughter/son in law, 2.7 percent by their grand children and 1.3 percent of respondents are take cared bye other relatives of their personal expenses.

**Table 4.25 Distribution of the Elderly People Does Support to Their Family**

<b>Support to their family</b>	<b>Number</b>	<b>Percent</b>
Yes	124	82.7
No	26	17.3
Total	150	100.0

*Source: Field survey, 2015*

Table 4.25 Shows that 82.7 percent of elderly people are supporting to their family but 17.3 percent of elderly people are not supporting to their family member.

**Table 4.26 The Elderly People and Types of Giving Support to Family**

<b>Giving support to family</b>	<b>Number</b>	<b>Percent</b>
Providing physical labor in farm	32	25.9
Providing money	9	7.2
Helping in HH work	44	35.5
Caring children	25	20.1
Others	14	11.3
Total	124	100.0

*Source: Field survey, 2015*

According to this table 25.9 percent elderly people are giving support to their family providing physical labor in farm. Similarly, 7.2 percent of elderly people providing money, 35.5 percent respondents helping in HH work, 20.1 percent giving support their family by caring children and 11.3 percent respondents are supporting to other sector like providing suggestion of critical situation etc.

## CHAPTER FIVE

### HEALTH STATUS OF THE ELDERLY

#### 5.1 Health status of elderly people

Health related problems are very common in old ages. The elderly people suffer from physical psychological and sociological problems. It is the natural process. Weakness of eyesight, digestive problem, prevalence of disease, physical weaknesses etc. are the common suffering of the elderly. In addition they might have economical problems that effect in health checkup. Support of family members in food taking system is also necessary to elderly. Information on these all problems is briefly discussed below about study area.

##### 5.1.1 Problem / disability, check up and disease

When people become elder they feel difficulties and physically weakness and loss the disease protection capacity and most of them are suffered from different kind of health problem which is known as disability. The following tables provide some information about health problem and the disability of the elderly in study area.

**Table 5.1 Distribution of the Elderly People by Problem/Disability**

Health problem	Male		Female		Total	
	Number	Percent	Number	Percent	number	Percent
Yes	59	78.7	64	85.3	123	82.0
No	16	21.3	11	14.7	27	18.0
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 5.1 shows that 82 percent elderly people have any type of health problem in total study population whereas 78.7 percent are male and 85.3 percent are female respondents. And 18 percent respondents have not health problem.

**Table 5.2 The Elderly People and Their Types of Health Problem/ Disability**

Type of problems	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Physical problem/disability	8	13.6	11	17.2	19	15.5
Poor eye sight	19	32.2	21	32.8	40	32.5
Poor hearing power	15	25.4	11	17.2	26	21.1
Mental disability	1	1.7	2	3.1	3	2.4
Toothache	13	22.0	15	23.4	28	22.8
Others	3	5.1	4	6.3	7	5.7
Total	59	100.0	64	100.0	123	100.0

*Source: Field survey, 2015*

Table 5.2 shows that 15.5 percent of the elderly are suffering from physical problem/disability i.e. 13.6 percent male and 17.2 percent female, 32.5 percent poor eye sight i.e. 32.2 percent male and 32.8 percent female. Among that 21.1 percent has poor hearing power problems i.e.25.4 percent male and 17.2 percent female. Similarly, 2.4 percent of elderly people they have mentally disability in health problem i.e. 1.7 percent male and 3.1percent female, 22.8 percent reported in toothache problem i.e. 22 percent male and 23.4 percent female and 5.7 percent elderly people have others health problem i.e. 5.1 percent male and 6.3 percent female respectively.

**Table 5.3 Distribution of the Elderly People by Health Checkup**

Health checkup	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Yes	39	52.0	41	54.7	80	53.3
No	36	48.0	34	45.3	70	46.7
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 5.3 shows that the elderly people who checkup their health regularly 53.3 percent, among them 52 percent male and 54.7 percent are female. Similarly, 46.7 percent respondents do not checkup their health, where 48 percentmale and 45.3 percentfemale respectively.



**Table 5.4 Health Checkup in a Year**

<b>Time in a year</b>	<b>Number</b>	<b>Percent</b>
Once a year	17	21.3
Twice a year	53	66.2
Thrice a year	10	12.5
Total	80	100.0

*Source: Field survey, 2015*

According to table 5.4, among the elderly people who checkup their health regularly 21.3 percent respondents are checkup their health once a year. Same as 66.3 percent respondents checkup their health twice a year and 12.5 percent of elderly respondents checkup their health thrice a year.

Chronic disease is that kind of diseases which attacks human being a long period of time. The elderly people who have been suffering from these kinds of chronic diseases are living more vulnerable life than normal elderly people.

**Table 5.5 Elderly People and Chronic Disease**

<b>Chronic disease</b>	<b>Male</b>		<b>Female</b>		<b>Total</b>	
	<b>Number</b>	<b>Percent</b>	<b>Number</b>	<b>Percent</b>	<b>Number</b>	<b>Percent</b>
Yes	41	54.7	57	76.0	98	65.3
No	34	45.3	18	24.0	52	34.7
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

The table 5.5 shows that 65.3 percent respondents have chronic disease where as 54.7 percent are male and 76.0 percent are female. And 34.7 percent respondents have not chronic disease i.e. 45.3 percent are male and 24.0 percent are female.

**Table 5.6 Elderly People and Types of Chronic Disease**

Types of disease	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Diabetes	10	24.4	9	15.8	19	19.4
Blood pressure	10	24.4	6	10.5	16	16.3
Back pain	5	12.2	13	22.8	18	18.4
Swelling of muscle	3	7.3	5	8.8	8	8.1
Joint pain	7	17.1	11	19.3	18	18.4
Asthma	4	9.7	9	15.8	13	13.3
Others	2	4.9	4	7.0	6	6.1
Total	41	100.0	57	100.0	98	100.0

*Source: Field survey, 2015*

Table 5.6 shows that 19.4 percent respondent are suffering from diabetes i.e. 24.4 percent male and 15.8 percent female, 16.3 percent of elderly are suffering from blood pressure i.e. 24.4 percent male and 10.5 percent female. Similarly, 18.4 percent of elderly people are suffering from back pain where 12.2 percent male and 22.8 percent female. Likewise, 8.1 percent of elderly people are reported swelling of muscle i.e. 7.3 percent male and 8.8 percent female, 18.4 percent suffering from joint pain where 17.1 percent male and 19.3 percent female. Among the total 13.3 percent of elderly people are affected from asthma i.e. 9.7 percent male and 15.8 percent female. And 6.1 percent of respondents are suffering from others chronic diseases where 4.9 percent are male and 7.0 percent are female.

### **5.1.2 Treatment and caring**

Elderly people have become more a burden than social obligation. Some take care of old parents only to inherit the property. The family members are more responsible in treatment and taking care of the elderly people and that of society.

**Table 5.7 Distribution of the Elderly People by Treatment Place During Sick**

<b>Treatment in place</b>	<b>Number</b>	<b>Percent</b>
Health post /Hospital	82	54.6
Dhami /Jhakri	25	16.7
Baidhya	13	8.7
Others	30	20.0
Total	150	100.0

*Source: Field survey, 2015*

Table 5.7 table shows that 54.6 percent of elderly people are going on health post/hospital for their treatment. Such a way 16.7 percent elderly people are reported that they go to Dhami/Jhakri home during sickness. Respectively, 8.7 percent and 20.0 percent of respondents go to the Baidhya and others place for their treatment during a sickness.

**Table 5.8 Elderly People and Who Care During Sickness**

<b>Care during sickness</b>	<b>Number</b>	<b>Percent</b>
Spouse	68	45.3
Son/Daughter in law	54	36.0
Daughter /Son in law	7	4.7
Grandson	15	10.0
Others	6	4.0
Total	150	100.0

*Source: Field survey, 2015*

The table 5.8 represent that 45.3 percent of elderly people are manage during sickness of their spouse and 36 percent of respondents are cared by son/daughter in law. Similarly, 4.7 percent of elderly people take cared by daughter/son in law, 10 percent and 4.0 percent elderly people are cared by grandson and others respectively.

### **5.1.3 Smoking and drinking problem in community**

Most of the people know that smoking and drinking habits is not good for health although they are involve in that type of habits. This habits is also one of the cause of disease. When elderly people fall in the health problem they need better health care and easy access to health facilities provided by the state, community and family. They

need mobile camp, free health check up, free treatment, transportation, separate bed and ward in hospital and others service from state.

### 5.9 Elderly People Smoking and drinking

Habit of smoking and drinking	Number	Percent
Yes	104	69.3
No	46	30.7
Total	150	100.0

Source: Field survey, 2015

According to this table 69.3 percent of respondents have smoking and drinking habit. And 30.7 percent have not this type of habit.

**Table 5.10 Elderly People by Type of Smoking and Drinking Habits**

Type of smoking and drinking	Number	Percent
Smoke, Cigarette/Bidi/Thambakhu	55	52.9
Drink alcohol	40	38.5
Chew tobacco	9	8.6
total	104	100.0

Source: Field survey, 2015

Table 5.10 shows that 52.9 percent respondent have habits of smoke, cigarette/bidi/thambakhu. Similarly, 38.5 and 8.6 percent of respondents having habits of drink alcohol and chew tobacco respectively

**Table 5.11 The Elderly People and Main Problem in Community**

Main problem in community	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Disease	38	50.7	41	54.6	79	52.7
Mental torture	3	4.0	5	6.7	8	5.3
Loneliness	15	20.0	17	22.7	32	21.3
Food insecurity	2	2.7	3	4.0	5	3.3
Isolation	7	9.3	2	2.7	9	6.0
Not care by family	4	5.3	3	4.0	7	4.7
Others	6	8.0	4	5.3	10	6.7
Total	75	100.0	75	100.0	150	100.0

Source: Field survey, 2015

Table 5.11 shows that 52.7 percent elderly people reported that disease is a main problem of them i.e.50.7 percent male and 54.6 percent female among the total respondent. Same as 5.3 percent respondent getting mental torture where 4.0 percent in male and 6.7 percent in female. Similarly, 21.3 percent respondents fell loneliness, 3.3 percent food insecurity ,6.0 percent isolation, 4.7 percent not care by family and 6.7 percent have others problems respectively.

**Table 5.12 Elderly People by Health Facilities Needed From State**

Facilities	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Mobile camp	3	4.0	4	5.3	7	4.7
Free health checkup	9	12.0	6	8.0	15	10.0
Free treatment	49	65.3	56	74.7	105	70.0
Free transportation	4	5.3	2	2.7	6	4.0
Separate bed and wad in hospital	8	10.7	6	8.0	14	9.3
Others	2	2.7	1	1.3	3	2.0
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 5.12 represent 4.7 percent elderly people reported that state must provide mobile camp i.e. 4.0 percent male and 5.3 percent female. Likewise 10 percent respondent reported that state should provide freehealth checkup where 12.0 percent male and 8.0 percent female. Similarly,70 percent needed free treatment i.e. 65.3 percent male and 74.7 percent female, 4.0 percent needed free transportation i.e. 5.3 percent male and 2.7 percent female, 9.3 percent want separate bed and wad in hospital i.e.10.7 percent male and 8.0 percent female and 2.0 percent needed others health facilities from state.

## **5.2 Psychological status of the elderly**

Psychological part also one of the important part in this study so it analyses the fact on psychological views of elderly people in study area. Naturally reason and memory power of old people decrease with passage time. Cause of weakness and disability elderly people towards dependency in family members. They feel domination and to

torture in the family and society. Feeling of loneliness and lack of love and affection is another problem of elderly and psychological characteristics differ with different elderly people.

### 5.2.1 Feel old and domination

Each and every human being has feeling that they become mature and old when they drive their life. This is an interesting part of personal felling of elderly people in the study area. When men become older than before their felling obviously changed by the time, his or her mental, physical also become poor.

**Table 5.13 The Elderly People and Feel Getting Old**

Age	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
40-49	3	4.0	5	6.7	8	5.3
50-59	8	10.7	11	14.7	19	12.7
60-69	58	77.3	55	73.3	113	75.3
70+	6	8.0	4	5.3	10	6.7
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 5.13 shows that 5.3 percent respondents are feel geeing old age 40-49 years i.e. 4.0 percent male and 6.7 percent female. Similarly,12.7 percent feel getting old age 50-59 years i.e. 10.7 percent male and 14.7 percent female. Largest number of respondents 75.3 percent feel getting old age 60-69 years where 77.3 percent male and 73.3 percent female. Likewise, 6.7 percent feel getting old age 70+ years i.e. 8.0 percent male and 5.3 percent female.

**Table 5.14 Elderly People by Feeling Domination**

Feeling domination	Number	Percent
Yes	51	34.0
No	99	66.0
Total	150	100.0

*Source: Field survey, 2015*

Table 5.14 shows that 34percent elderly people feeling domination. And 66 percent elderly people are not feeling domination.

**Table 5.15 Distribution of the Elderly People and Types of Domination**

<b>Types of domination</b>	<b>Number</b>	<b>Percent</b>
Food discrimination	9	17.6
Verbal abuse	26	51.0
Mental torture	8	15.7
Violence	5	9.8
Others	3	5.9
Total	51	100.0

*Source: Field survey, 2015*

According to this table 17.6 percent elderly people are feeling food discrimination. Similarly, 51.0 percent feeling verbal abuse, 15.7 percent feeling mental torture, 9.8 percent feeling violence and 5.9 percent elderly people dominated from others activities.

**Table 5.16 Distribution of the Elderly People by DominatingMember in Family**

<b>Dominating family member</b>	<b>Number</b>	<b>Percent</b>
Son /Daughter in law	33	64.7
Grand children	4	7.8
Own spouse	11	21.6
Others	3	5.9
Total	51	100.0

*Source: Field survey, 2015*

Table 5.16 shows that 64.7 percent elderly people are felling dominating from son/daughter in law. Similarly, 7.8 percent elderly people are dominated by grand children, 21.6 and 5.9 percent elderly people are dominated by own spouse and others persons respectively.

### **5.2.2 Social andculturalactivities**

It is very difficult for the elderly people to adjust with their daily routine. Many elderlypeople are retired from their past professions. They have to adjust with long

leisure time. Some of them becomes physically and mentally weak. Which affects them to adjust with daily activities some is isolated from the family members as well losing life partner and friends make sad to them. By social system and culture also daily activities of the elderly are affected. The information types of daily activities of elderly people in this study area's as describe following table.

**Table 5.17 Elderly People by Their Daily Activities**

Daily activities	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Doing household works	27	36.0	36	48.0	63	42.0
Reading books	6	8.0	0	-	6	4.0
Caring grand children	4	5.3	15	20.0	19	12.7
Performing religious activities	12	16.0	7	9.3	19	12.7
Meeting and Talking with mates	15	20.0	11	14.7	26	17.3
Listening radio	5	6.7	1	1.3	6	4.0
Others	6	8.0	5	6.7	11	7.3
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 5.17 shows that 42percent of elderly respondents reported their daily activity is to perform doing household work as cooking food, helping family members in agriculture i.e. 36percent male and 48 percent female. Similarly, 4.0 percent elderly people reported that the reading books where 8.0 percent male and no one in female, 12.7 percent elderly people reported in caring grand children and performing religious activities, 17.3 percent elderly people meeting and talking with mates, 4.0 percent elderly people reported listening radio i.e. 6.7 percent male and 1.3 percent female and 7.3 percent elderly people reported others activities in their daily life.



**Table 5.18 Elderly People Visiting Temples and Religious Activities**

<b>Performing religious activities</b>	<b>Number</b>	<b>Percent</b>
Yes	115	76.7
No	35	23.3
Total	150	100.0

*Source: Field survey, 2015*

According to table 5.18 76.7 percent respondents are visiting temples and religious activities. And 23.3 percent elderly people are not performing their religious activities in total respondents of study area.

**Table 5.19 The Elderly People Performing Types of Religious Activities**

<b>Performing religious types</b>	<b>Number</b>	<b>Percent</b>
Prosperity of offspring	61	53.0
To be free from sin	3	2.7
Mental satisfaction	38	33.0
Protect and follow traditional	9	7.9
Others	4	3.4
Total	115	100.0

*Source: Field survey, 2015*

Table 5.19 represent that the 53 percent of elderly people go to temple or religious place prosperity of offspring in their life, 2.7 percent to be free from sin and 33 percent of respondents do religious activities for mental satisfaction. Similarly, 7.9 percent of elderly people performing religious activities for protect and follow tradition and 3.4 percent respondents are performing religious activities for others causes.

**Table 5.20 Distribution of Elderly People by Their Involvement**

<b>Any type of clubs/group</b>	<b>Male</b>		<b>Female</b>		<b>Total</b>	
	<b>Number</b>	<b>Percent</b>	<b>Number</b>	<b>Percent</b>	<b>Number</b>	<b>Percent</b>
Yes	26	34.7	14	18.7	40	26.7
No	49	65.3	61	81.3	110	73.3
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

Table 5.20 shows that 26.7 percent elderly people are involve in any type of clubs/groups i.e. 34.7 percent male and 18.7 percent female. And 73.3 percent elderly people are not involve any type of clubs/group.

**Table 5.21 The Elderly People Involvement Type of Clubs /Groups**

<b>Clubs/Groups</b>	<b>Number</b>	<b>Percent</b>
Senior citizens clubs	0	0
Religious groups	17	42.5
Co-operative institute	9	22.5
School comities	4	10.0
Others	10	25.0
Total	40	100.0

*Source: Field survey, 2015*

According to this table there are nobody has involve in senior citizens clubs. Highest number of elderly people 42.5 percent are involved in religious groups. Similarly, 22.5 percent elderly people are involved in co-operative institute, 10.0 and 25.0 percent elderly people are involve in school comities and others groups like: Aama Samuha, Krishak Samuha, micro-finance group etc.

## CHAPTER SIX

### SOCIAL WELFARE AND ELDERLY PEOPLE

#### 6.1 Social welfare process and use of aged /widow allowance

Access to social welfare is internationally acknowledged as a human right issue. Countries throughout the world have endeavored to ensure the social security to the most vulnerable sections of the society. Besides pension systems, both contributory and noncontributory pensions systems are in practice as a means of social protection in their later life for aging population. Social welfare helps to make old age more secure and easier. It is another important aspect of the socio-economic and demographic status of the elderly people. Each person is a unit of any family, societies and the nation. From the social welfare provided by the society or nation the following table shows the status of the elderly people in study area.

**Table 6.1 Distribution of the Elderly People by Knowledge of Old Age Allowance**

Knowledge	Number	Percent
Yes	135	90.0
No	15	10.0
Total	150	100.0

*Source: Field survey, 2015*

Table 6.1 shows that 90 percent elderly people have knowledge of old age allowance. And 10 percent respondents have not knowledge of old age allowance.

**Table 6.2 Distribution of the Elderly by Getting Old Age/Widow Allowance**

Getting old age /widow allowance	Male		Female		Total	
	Number	Percent	Number	Percent	Number	Percent
Yes	44	58.7	58	77.3	102	68.0
No	31	41.3	17	22.7	48	32.0
Total	75	100.0	75	100.0	150	100.0

*Source: Field survey, 2015*

According to this table 68 percent elderly people are getting old age/widow allowance i.e. 58.7 percent male and 77.3 percent female. Same as 32 percent elderly people are not getting old age/widow allowance i.e. 41.3 percent male and 22.7 percent female.

**Table 6.3 The Process of Receiving Aged /Widow Allowance**

<b>Process</b>	<b>Number</b>	<b>Percent</b>
From Govs – office	79	77.5
NGO's	-	-
In house	-	-
Bank	-	-
family member	23	22.5
Total	102	100.0

*Source: Field survey, 2015*

Table 6.3 present most of the respondents 77.5 percent are receiving aged/widow allowance from Govs-office and 22.5 percent receiving from family member.

**Table 6.4 The Elderly People by not Receiving Aged/ Widow Allowance**

<b>Process</b>	<b>Number</b>	<b>Percent</b>
Lack of citizenship certificate	1	2.1
Bounded by age	41	85.4
Not necessary	1	2.1
Others	5	10.4
Total	48	100.0

*Source: Field survey, 2015*

Table 6.4 shows that 2.1 percent elderly people are not receiving aged/widow allowance because of lack of citizenship certificate. Similarly, 85.4 percent elderly people are not receiving aged/widow allowance because of bounded by age, 2.1 percent is cause of not necessary and 10.4 percent elderly people are not receiving aged/widow allowance because of others cause like: lack of knowledge etc.

**Table 6.5 Elderly People by Using Their Allowance**

<b>Person using allowance</b>	<b>Number</b>	<b>Percent</b>
Self	83	81.4
Spouse	11	10.8
Son/daughter in law	4	3.9
Grand children	3	2.9
Others	1	1.0
Total	102	100.0

*Source: Field survey, 2015*

According to this table highest number of respondents 81.4 percent are using their allowance themselves. Same as 10.8 percent elderly people use their spouse, 3.9 percent of respondent allowance use for son/daughter in law, 2.9 and 1percent of elderly people using their allowance by grand children and others person.

**Table 6.6 Distribution of the Elderly People and Allowance use for**

<b>Allowance used for</b>	<b>Number</b>	<b>Percent</b>
Clothing	5	4.9
Medicine	13	12.7
Eating food	56	54.9
Gift for others	22	21.6
Others	6	5.9
Total	102	100.0

*Source: Field survey, 2015*

This table shows that 4.9 percent of the elderly people use their allowance for clothing. Similarly, 12.7 percent of the elderly people use their allowance for medicine, 54.9 percent use for eating food, 21.6 and 5.9 percent of the elderly people use their allowance for gift for others and others propose.

## **6.2 Perception, management and welfare of the state and society**

Social welfare helps to make old age more secure and easier. For the welfare of all elderly people old age allowance and other related allowance distribution process should be made equal, simple, easy and regular. State must create a situation to ownership of property right, decision-making power and change the attitude of family

members in the community toward elderly people. Nowadays Nepalese life style from traditional ways to western ways many pose serious problem in Nepal in decade to come. Therefore it is being an urgent need to make concrete plan and policy to change to attitude of family member, policy makers, planners and professional in the community towards elderly people from state. Those information shows following table.

**Table 6.7 Elderly People by Management of Adequate Care from Society**

Manage system	Number	Percent
Club organization	33	22
Day care center	23	15.3
Entertainment	7	4.7
Prayer/ Worshipping	70	46.7
Meditation center	14	9.3
Others	3	2
Total	150	100

*Source: Field survey, 2015*

This table present that 22 percent of elderly people reported that society must manage for the elderly people by club organization. Similarly, 15.3 percent of elderly people wish to manage by day care center, 4.7 percent said that managing entertainment, 46.7 percent reported that society must manage the adequate care of elderly by prayer/worshipping and 9.3 and 2 percent elderly people said that society should make meditation center for elderly and others system to manage of elderly people.

**Table 6.8 The Elderly and Welfare of State in Study Area**

State welfare/aged people	Number	Percent
State should do well treatment and take care	56	37.3
Providing more aged /widow allowance	41	27.3
Building a VDC level elderly care center	10	6.7
Well manage for good food as well as place to live	36	24
No idea	7	4.7
Total	150	100

*Source: Field survey, 2015*

Table 6.8 shows that 37.3 percent of respondent said state should do well treatment and take care. Among total elderly people 27.3 percent of elderly agreed that state have to providing more aged/widow allowance. Similarly, 6.7 percent of elderly people reported in the building a VDC level elderly care center, 24 percent said well manage for good food as well as place to live and 4.7 percent reported no idea in the total respondent respectively.

## CHAPTER SEVEN

### SUMMARY, CONCLUSION AND RECOMMENDATIONS

#### 7.1 Summary of findings

This study is based on the elderly population of Amchowk VDC of Ilam district. The data are analyzed and presented according to the objective of the study. The data which is collected from the selected respondent to find out the demographic, socio-economic, health and social welfare status of elderly population. The study area purpose, primary information based on lottery (probability) and purposive sampling method. From the Amchowk VDC one fourth wards 3,5,8 and 9 was selected by lottery system. The total population was listed and 150 respondents was identified by calculating sample interval among total elderly population from each ward. The purpose of study of the demographic, socio-economic, health and social welfare status of elderly people in 150 respondents. Among them 50 percent male and 50 percent are female.

##### 7.1.1 Demographic status

Demographic characteristic include age, sex, marital status, age of first birth of elderly people to obtain the information about the demographic characteristic. The major findings of the study are as follows.

- ❖ In this study 50 percent respondents are male and 50 percent are female.
- ❖ The higher percentage of elderly people 33.3 percent belongs to age group 60-64 years and lower percentage of the elderly people 12.7 percent belongs to age group 75-79 years.
- ❖ It was found that 50 percent respondents are currently married. Similarly, 41.3 percent are widow/widower, 6.7 percent had divorce/separation and 2.0 percent have others marital status like: lost etc.
- ❖ In this study was found that higher percentage of respondents 35.3 percent have 3-4 children and lower percentage of respondents 8.7 percent have 7 and above children.



### 7.1.2 Social status

- ❖ Among the total respondents higher proportion is found in Limbu caste 28 percent and than 24 percent are Brahmin, 20.7 percent Rai, 10 percent Dalit, 7.3 percent Chhetri, 6.7 percent Magar and 3.3 percent are Bhujel respectively.
- ❖ In this study higher number of respondents 46.7 are beliefs in Kirat religious, and secondary Hindu, than 5.3 percent are Christian and 4.7 percent are Buddhist respectively.
- ❖ Literacy status among these respondents is seems 50.7 percent illiterate i.e. 32 percent male and 66.7 percent female. Among the literate respondents higher proportion of elderly 19.3 percent have informal education i.e. 17.3 percent male and 24 percent female, and only 14.7 percent male have SLC and above educational level.
- ❖ Majority of respondents have joint family which is 67.3 percent and 32.7 percent have nuclear family. Among them higher number of respondents 59.3 percent are living with their son/daughter in law. And 18 percent of respondents are living with their spouse, 8.7 percent with grand children, 6 percent living self/alone, 4.7 percent with their daughter/son in law and 2 and 1.3 percent respondents are living with brother and others relatives respectively.
- ❖ This study shows that 72.7 percent respondents are satisfy with their family 27.3 percent are not satisfy with family. Among them higher number 39.1 percent respondents dissatisfy their currently living because of lack of respect. And lower percent 9.7 is feel alone.
- ❖ Most of the elderly people desire to live with their spouse which is 38 percent and then son/daughter in law.
- ❖ Decision making role reported that 40.7 percent of respondent decided by their son/daughter in law. Among those respondents 26 percent with their husband/wife, 22.7 percent decided self and 4 percent by daughter/son in law as followed.

- ❖ Basic daily food, whereas 3.3 percent of elderly people have food once a day, large percent 52.7 percent have twice a day and 34 percent have thrice a day. Among the total respondents 10 percent elderly people consume food four times a day in this study area.
- ❖ Majority of 52 percent of elderly people take care self for their personal hygiene. Similarly, 22.7 percent of respondents help their personal hygiene by husband and wife and 19.3 percent by their son/daughter in law respectively.

### **7.1.3 Economic status**

People above 60 years are called dependent population, occupation, income source and involvement of the elderly income generating activities influence the quality of life and maintain living standard along the occupation of elderly people.

- ❖ Among the total respondent 80 percent of hung elderly people were engaged in agriculture. Similarly, 2.7 percent was daily wage, 5.3 percent Business, 10 percent service other and 2 percent had others occupation respectively. Among them most of the elderly people 74.7 percent manage their income source by agriculture.
- ❖ Majority of elderly people have own land where as 76 percent and 24 percent elderly does not have own land due to several reasons such as transfer to the son and daughter.
- ❖ Quite high percentage of elderly people is having Pewa/Daijo and Jeuni 56 percent but 44 percent is not having such a price. Among the having elderly people 48.9 percent have land , 19 percent have house, 22.6 percent have money, 5.9 percent have livestock and 3.6 percent have others type of properties.
- ❖ 80.7 percent of respondents are current involve in economy activity. Among them 47.9 percent are involve in animal raring, 43.0 percent involve in others agriculture activities.
- ❖ About the personal expenses most of the elderly people helped by their son/daughter in law. Same as, their personal expenses 32 percent by self, 18.7

percent by their spouse, 4 percent by their daughter/son in law, 2.7 percent by grand children and 1.3 percent of elderly people manage their personal expenses by others person.

- ❖ This study shows that most of the elderly people 82.7 percent supporting their family as a household work, providing some money and others etc but 17.3 percent of elderly people not supporting to their family present time.

#### **7.1.4 Health status**

Generally elderly people loss the disease protection capacity with the physical weakness and disable to do any work. Mainly suffer from such a disease heart, respiratory, eyes ear and diabetes and weakness in different organs.

- ❖ Large number 82 percent of elderly people reported that they have health problem i.e. 78.7 percent male and 85.3 percent female but 18 percent of respondent does not have any health problem.
- ❖ Health problem of elderly people,15.5 percent physical problem/disability. Among that 32.5 percent elderly poor eye sight, 21.1 percent are poor hearing power and 2.4 percent mental disability in total elderly. Similarly, 22.8 percent elderly people are suffering from toothache and 5.7 percent are suffering from other problem.
- ❖ Most of the elderly people 53.3 percent check their health i.e. 52 percent male and 54.7 percent female respectively. Among that 46.7 percent of respondent do not check their health whereas 48.0 percent male and 45.3 percent female.
- ❖ It seems that majority of the respondents 65.3 percent have chronic disease. And 34.7 percent of respondents have not chronic disease. Among them most of the respondents 19.4 percent have problem of diabetes. And lower percent 8.1 have problem of swelling of muscle.
- ❖ Most of the respondents 54.6 percent go to health post/hospital for the treatment. Among them 16.7 percent go to Dhama/Jhakri, 8.7 percent go to

Baidhya and 20.0 percent are go to others place like clinic etc. for the treatment while they being sickness.

- ❖ Large number 69.3 percent of elderly people have habit of smoking and drinking. Among them largest number 52.9 percent elderly people have habit of smoke, Cigarette/Bidi/Thambakhu. similarly, 38.5 and 8.6 percent elderly people have habit of drink alcohol and chew tobacco respectively.
- ❖ Most of the elderly people 52.7 percent told thatdisease is a main problem in community. And then 21.3 percent said loneliness is a problem in community.
- ❖ Among the elderly people 70 percent needed free treatment from the state. Similarly, 10 percent needed free health check-up, 9.3 percent needed separate bed and wad in hospital, 4.7 percent needed mobile camp, 4 and 2 percent needed free transportation and others facilities from the state.

#### **7.1.5 Psychological status**

- ❖ It is seems that most of the elderly people 75.3 percent feel getting old when they are age of 60-69 years i.e. 77.3 percent male and 73.3 percent female. Likewise, 12.7 percent of elderly people feel old aged 50-59 years, 6.7 percent feel old aged 70+ and 5.3 percent feel old aged 40-49 years.
- ❖ In this higher number of respondents does not feel domination from their family. And 34 percent feel domination from their family. Among them most of the respondents 51 percent feel verbal abuse, and then 17.6 percent feel food discrimination from their family. Similarly, 15.7 percent elderly people feel mental torture, 9.8 and 5.9 percent respondents feel violence and others domination from their family. And more then respondents 64.7 percent are dominating by their son/daughter in law.
- ❖ Daily activities of elderly people, large number 42percent doing household works i.e. 36 percent male and 48 percent female. Similarly, 17.3 percent do meeting and talking with mates, 12.7 percent do caring grand children and

performing religious activities, 4 percent do reading book and listening radio and 7.0 percent respondents do others activities in their daily life.

- ❖ 76.7 percent of respondents visiting temples and religious place. Among them most of the respondents 53 percent visiting for prosperity of offspring. And then 33 percent visiting for mental satisfaction. And among the total number of respondents 23.3 percent are not visiting temple and religious place.
- ❖ Among the total respondents only 26.7 percent are involve in different types of club/group. And 73.3 percent are not involved in this type of activities. Among them highest number of respondents are involve in religious group and 22.5 percent are involve in co-operative institute. Similarly, 10 and 25 percent respondents are involved in school comities and others like Ama Samuha etc.

#### **7.1.6 Social welfare**

Social welfare helps to make elderly people more secure and easier. It is another important aspect of the socio-economic and demographic status of the elderly people. Each people are unit of any family societies and then the nation.

- ❖ Majority of these survey study area 90 percent elderly people have knowledge about old age allowance and 10 percent have not knowledge about old age allowance. Among them 68.0 percent elderly people are getting old/widow allowance i.e. 58.7 percent male and 77.3 percent female. Among them 32.0 percent elderly people not getting old/widow allowance.
- ❖ Among the elderly people who getting old/widow allowance 77.5 percent receiving from Govs-office and 22.5 percent elderly people are receiving through family member. And most of elderly people 85.4 percent not receiving old/widow allowance because of bounded by age.
- ❖ It seems that 81.4 percent of elderly people using their allowance them self. Majority the elderly people 54.9 percent used old/widow allowance for eating food, and then 21.6 percent used gift for others. Similarly, 12.7

percent elderly people used their old/widow allowance for medicine, 4.9 and 5.9 percent elderly people used their old/widow allowance for clothing and others propose.

- ❖ This study shows that most of the elderly people 46.7 percent wish to prayer/worshipping from the society and then 22.0 percent said manage the club organization for senior citizen.
- ❖ Elderly people wish to have such a thing from state where as 37.3 percent said well treatment and take care, 27.3 percent reported more aged/widow allowance 24.0 percent said manage for good as well as place to live, 6.7 percent said building a VDC level elderly care center and 4.7 percent reported no idea about this.

## **7.2 Conclusions**

It is obviously matter of concern for all the people from family to national level that the elderly share is increasing in total population day by day. Either in the cities or in the rural areas life expectancy of the people is increasing due to public awareness about their health and hygiene and modern facilities. Naturally problems of the elderly people are also increasing day by day with modernization. A clear picture on the various aspects of the elderly has been obtained from this study in study area.

Large number of Limbu elderly people are living in this study area compare to other cast/ethnicity and more respondents are believe in Kirat and Hindu religion. Number of married prevalence rate among the elderly is very high and they having more children in their life time. In this area most of the elderly people are illiterate. Higher number of elderly people is living in joint family with their son/daughter in law. More the elderly people are engaged in agriculture for their main occupation.

Most of the elderly people are suffering from poor eye sight, toothache, poor hearing and physical problem/disability. Most of the elderly people go to their health check-up twice a year. Higher number of elderly people is suffering from diabetes, back pain, joint pain, blood pressure and asthma of chronic disease. When they feel sick at that period most of the respondents go to health post/hospital and Dharmi/Jhakri for their treatment. Higher number of elderly have habit of smoke, cigarette/bidi/tobacco

and drink alcohol. Most of elderly people feel disease and loneliness is a main problem in their community. More Elderly people needed free treatment and free health check-up from the state.

Large number of elderly people feels getting old while they were age 60-69 years and spent a day doing house hold work, meeting and talking with mates, caring grand children and performing religious activities. Most of the elderly people are involve in religious groups. Among the elderly people visit temple or religious place for prosperity of offspring and mental satisfaction. Most of the elderly people have knowledge and getting old/widow allowance and they getting it from Govs- office and family member. Most of the respondents are using old/widow allowance them self and they are using for eating food, medicine and gift for others. Large number of elderly people wish to prayer/worshipping from side of society and most of the elderly people are wish to well treatment and take care, providing more aged/widow allowance, well manage for good food as well place to live and building a VDC level elderly care centre from the side state.

### **7.3 Recommendations**

The following recommendations are made on the basis of finding of the study.

- ❖ Elderly people should be provided with the facilities of regular health checks-up, health services and Health awareness Program for Elderly health insurance by Nepal government.
- ❖ It is need to give opportunity to utilize their knowledge, skill and experience in community as well as national level.
- ❖ It is necessary to create a social welfare fund to secure the life of elderly people who are in vulnerable condition and live in poor socio-economic condition.

## **7.4 Further Area for Future Research**

Based on the findings of this study, there are some areas highlighted for further research.

- ❖ There are found various health problem by elderly people so it will be essential area to conduct a comparative study among different cast/ethnic group about health status of elderly people of Amchok VDC, District and whole country.
- ❖ Feminization of senior citizens on developing in Nepal it may another critical area of the research study in future.



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# APPENDIX 1: QUESTIONNAIRE

“Situation of Elderly People in Nepal,- A case study of Amchowk VDC,Ilam”

**Tribhuvan University**  
**Central Department of Population Studies (CDPS)**  
**Kirtipur, Kathmandu**

## Part I: Household Information

Interviewer's Name :-..... Date .....

- 1) Name of District-.....
- 2) Village /Municipality:.....
- 3) Ward Number:.....
- 4) Tole Name:.....
- 5) Name of the Household Head:.....
- 6) Name of the Respondent:.....
- 7) Age of Respondent:.....
- 8) Cast /Ethnicity:.....
- 9) Religion:.....
- 10) Type of Family: Nuclear 1  
 Joint 2

S.N	Name (Household Head first)	Relation to household -head	sex		Age	Education		Marital Status	Occupation	
			M	F		Literate				Class (passed)
						Yes	No			
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

## Coding

Male.....1 Agriculture.....1Others.....5

Female.....2 Business.....2

Literate.....99 Wage labor.....3

Illiterate.....98 Job.....4

**If literate** Others.....5

Primary.....1Married..... 1

Secondary.....2Unmarried.....2

Higher Secondary.....3 Widow/Widower.....3

Diploma and Above...4Separated.....4

## Part II: Background Characteristics of Respondent

S.N	Questions	Coding	Go to Next No
11	What is your relationship with Household head?	Self..... Spouse..... Son/Daughter in law.... Daughter/Son in law.... Other.....	1 2 3 4 5
12	sex?	Male ..... Female.....	1 2
13	How old are you ?	Completed Age.....	
14	What is your marital status?	Unmarried ..... Currently Married ... Widow/Widower..... Divorce/Separations.... Other .....	1 2 3 4 5
15	What is your age at marriage?	Below 15 years..... 15-19..... 20-25..... Above 25..... Unmarried .....	1 2 3 4. 5
16	How many son and Daughters do you have?	Sons..... Daughters..... Total.....	

17	How many of them are currently living with you?	.....		
18	What is your religion?	Hindu.....	1	
		Buddha.....	2	
		Christian.....	3	
		Islam.....	4	
		Other.....	5	

19	What is your educational status?	Illiterate.....	98	<b>21</b>
		Literate.....	99	
20	If literate, passed class.....?	Informal	1	
		Primary....	2	
		Secondary.....	3	
		SLC and Above.....	4	
21	What is your family type?	Nuclear.....	1	
		Joint.....	2	

### Part III: Current Living Arrangement

22	With whom are you staying?	Self/Alone	1	
		Spouse .....	2	
		Son/DaughterIn- law.....	3	
		Daughter/Son In-low.....	4	
		Grand children.....	5	
		Brother.....	6	
		Other.....	7	
23	Are you satisfied with your current living/arrangement?	Yes	1	<b>25</b>
		No	2	
24	If no, why not?	Lackof respect.....	1	
		Lack of food.....	2	
		Lack of caring.....	3	
		Family disputes.....	4	
		Feel lonely.....	5	
25	To whom do you wish to livewith?	Self/alone.....	1	
		Spouse.....	2	
		Son/daughter in law.....	3	
		Daughter/son in law....	4	

		Grand children .....	5	
		Brother.....	6	
		Other relatives.....	7	
		Other.....	8	
26	Who makes decision in your family?	Self.....	1	
		Husband/wife.....	2	
		Son/daughter in law.....	3	
		Daughter/son in law....	4	
		Grand children .....	5	
		Brother.....	6	
		Other relatives.....	7	
		Other.....	8	
27	Who prepares food for you?	Self.....	1	
		Husband/wife.....	2	
		Son/daughter in law.....	3	
		Daughter/son in law....	4	
		Grand children .....	5	
		Other.....	6	
28	Are you getting enough food according to your desire?	Yes	1	
		No	2	
29	How many times in a day you get food ?	Once.....	1	
		Twice.....	2	
		Thrice.....	3	
		Four time.....	4	
		Others .....	5	
30	Who helps you in your personal hygiene?	Self.....	1	
		Husband/wife.....	2	
		Son/daughter in law.....	3	
		Daughter/son in law....	4	
		Grand children .....	5	
		Other.....	6	

## PartIV: Information on Economic Status

31	What was your past occupation?	Agriculture..... Daily wage..... Business..... Service..... Other.....	1 2 3 4 5	
32	What is your main source of income, now?	Agriculture..... Pension..... Aged allowance..... Trade..... Other..... No Income.....	1 2 3 4 5 6	
33	Did you ever have own land ?	Yes..... No.....	1 2	36
34	Do you currently own land?	Yes..... No.....	1 2	36
35	If no, what happened to the land?	Transferred in son's name..... Transferred in daughter's name..... Taken by others..... Others.....	1 2 3 4	
36	Do you have any pewa/jeuni and other property ?	Yes..... No.....	1 2	37
37	If yes, what type ofpewa/jeuni /other property?	Land..... House..... Livestock..... Money ..... Others.....	1 2 3 4 5	
38	Are you currently involved in any economic activity?	Yes..... No.....	1 2	41
39	If yes, what type of economic activity?	Govt./organizational job..... Agriculture..... Trade..... Animal raring..... Others.....	1 2 3 4 5	

40	Who takes responsibility of your special expenses?	Self..... Spouse ..... Son/daughter in law..... Daughter/son in law.... Grand children ..... Brother..... Other relatives..... Others.....	1 2 3 4 5 6 7 8	
41	Do you give economic support to your family currently?	Yes ..... No.....	1 2	Part V
42	If yes how do you help in your family occupation?	Providing physical labor in farm... Providing money..... Helping in household work.... Caring children..... Others.....	1 2 3 4 5	

### Part V: Information on Health Status

43	Do you have any health problem/disability?	Yes No	1 2	45
44	If yes, what type of health problem/disability do you have?	Physical disability..... Poor eye sight..... Poor hearing power..... Mental disability..... Toothache..... Others.....	1 2 3 4 5 6	
45	Do you have regular health checkup?	Yes No	1 2	47
46	How many times a year do you go for health check up?	Once a year ..... Twice a year..... Thrice a year.....	1 2 3	
47	Why didn't you go for regular health checkup?	No knowledge regarding it..... No needed..... Nobody help..... Others.....	1 2 3 4	



48	Do you have any chronic diseases?	Yes..... No.....	1 2	
49	What type of chronic disease do you have?	Diabetes..... Blood pressure..... Back pain..... Swelling of muscles..... Joints pain..... Asthma..... Others.....	1 2 3 4 5 6 7	
50	Where do you go for treatment during sickens?	Health post/ Hospital..... Dhami/ Jhankri..... Baidhya..... Others.....	1 2 3 4	
51	Who helps you during sickness?	Spouse..... Son/daughter in law..... Daughter/ sonin law..... Grandson ..... Other.....	1 2 3 4 5	
52	Do you smoke or drink alcohol?	Yes..... No.....	1 2	54
53	If yes, what do you consume? (multiple response)	Smoke, Cigarette/Bindi, Tambakhu Drink alcohol..... Chew tobacco..... Others.....	1 2 3 4	
54	In your opinion what is the main problem of elderly people in your community?	Diseases..... Mental torture..... Loneliness..... Food insecurity..... Isolation..... Not cared by family..... Others.....	1 2 3 4 5 6 7	
55	In your opinion, what type of health service is needed to elderly from government side?	Mobile camp..... Free health checkup..... Free treatment..... Free transportation..... Separate bed and ward in hospital ... Other.....	1 2 3 4 5 6	

## Part VI: Information on Psychological Status

56	At what age did you felt getting old?	40-49 years 50-59 years 60-69 years 70+ years	1 2 3 4	
57	Do you feel domination/ torture in your family?	Yes No	1 2	60
58	If yes ,What type of discrimination /torture do they give?	Food discrimination..... Verbal abuse..... Mental torture..... Violence..... Others.....	1 2 3 4 5	
59	Who is the main dominating member in your family to you?	Son/ daughter in law..... Grand children..... Owns spouse..... Others.....	1 2 3 4	
60	How do you often spend your time?	Doing household works..... Reading books..... Caring grand children..... Performing religious activities..... Meeting, talking with mats..... Listening radio..... Others.....	1 2 3 4 5 6 7	
61	Are you satisfied and feel comfortable to stay with your family?	Yes No	1 2	63
62	If no, where do you want to go to live?	Son/daughter in law..... Daughter/son in law..... Neighbors house..... Relatives..... Elderly houses..... Religious place..... others .....	1 2 3 4 5 6 7	

## Part VII: Social/cultural activities

63	Do you visit temples and perform religious activities?	Yes No	1 2	67
64	If yes, how often?	Daily Weekly Monthly On religious occasions Others	1 2 3 4 5	
65	Who do you accompany with while visiting temples/religious places?	Alone ..... Son/daughter in law..... Daughter/son in law..... Neighbors house..... Relatives..... Others.....	1 2 3 4 5 6	
66	Why do you visit temples and perform religious activity?	Prosperity of off spring ..... To be free from sins..... Mental satisfaction..... Protect and follow traditions..... Others.....	1 2 3 4 5	
67	Are you a member of any clubs/group in your community?	Yes..... No.....	1 2	
68	If yes, what type of club/group are you a member of?	.....		
69	What role do you play in this club/group?	.....		
70	How frequently are you involved in club/group's activity?	Daily ... Weekly..... 15 a days..... Monthly.....	1 2 3 4	
71	Are you satisfied with your involvement in club/group?	Yes No	1 2	
72	Yes, Why	.....		
73	No, Why not?	.....		

## Part VIII: Information on Social Welfare Status

74	Have you ever heard about old age allowance?	Yes No	1 2	
75	Have you ever receive old aged allowance?	Yes No	1 2	66
76	If yes, what is your process of taking aged allowance?	From GOVs. office..... NGO's..... In house..... Bank..... Family member.....	1 2 3 4 5	
77	If no, why did you not received aged allowance?	Other person take out..... Lack of citizenship certificate..... Bounded by age..... Not necessary..... Others.....	1 2 3 4 5	
78	Who uses the allowance?	Self ..... Spouse..... Son/daughter in law..... Grand children..... Others .....	1 2 3 4 5	
79	If self, how do you spend it	Clothing..... Medicine..... Eating food..... Gift for others..... Others.....	1 2 3 4 5	
80	How can society manage for adequate care of the elderly people?	Club organization..... Day care center..... Entertainment..... Prayer/ worshipping..... Meditation center..... Others .....	1 2 3 4 5 6	
81	In your opinion what the state should do for the welfare of all old aged people?	.....		