

**PHYSICAL HEALTH PROBLEMS OF ELDERLY WOMEN IN GAINDAKOT VDC**

**By**

**Puspa Parajuli**

**Symbol No.: 2410022 (2066)**

**T.U Regd. No.: 9-2-241-382-2004**

**A Thesis**

**Submitted to Health, Physical and Population Education Department**

**For the Partial Fulfillment in the requirements for Master Degree in Health Education**

**TRIBHUVAN UNIVERSITY  
FACULTY OF EDUCATION  
BALKUMARI COLLEGE  
NARAYANGARH, CHITWAN  
2011**

## RECOMMENDATION LETTER

This study certify that **Miss. Puspa Parajuli** has prepared this thesis entitled “**Physical Health Problems of Elderly Women in Gaindakot VDC**” under my guidance and supervision.

I recommend this thesis for acceptance.

Date: 2068/06/05

.....

Mr. Thakur Prasad Dhakal

Supervisor

Health, Physical and Population Education

Department, FOE, Balkumari College

Narayangarh ,Chitwan

## APPROVAL SHEET

The dissertation entitled “**Physical Health Problems of Elderly Women in Gaiindakot VDC**” prepared by **Miss. Puspa Parajuli** in partial fulfillment of the requirement for the Master Degree in Health Education in health Education has been approved.

### Thesis Evaluation Community

### Signature

**Mr. Shyam Prasad Sedai, Lecturer**  
Health, physical and Population Education  
Dept, Balkumari College  
Narayangarh ,Chitwan

.....  
Programme Coordinator

**Mr. Thakur Prasad Dhakal, Lecturer**  
Health, physical and Population Education  
Dept, Balkumari College  
Narayangarh ,Chitwan

.....  
Supervisor

**Mr. Dr. Ashok Kumar Jha, Reader**  
Health, Physical and Population Education  
Dept, P.N Campus, Pokhara

.....  
External

Viva Date: 2068/06/07

## **ACKNOWLEDGEMENT**

This thesis entitled "Physical Health Problems of Elderly Women in Gaidakot VDC" to the Tribhuvan University faculty of education (M.Ed.) at Balkumari College. I am glad to take this opportunity to thank my sincere gratitude goes to thesis supervisor Mr. Thakur Prasad Dhakal for his guidance, valuable suggestions and irremovable and unforgettable contribution and feedback.

I would like to express my sincere thanks also goes to Mr. Shayam Prasad Sedai (M.Ed. Program coordinator) and Committee of Dissertation Paper of Master Program of Health Education, Balkumari College.

Likewise, I would like to thank to my sister Miss. Jharana Parajuli and my Mother Mrs. Chandra Shova Sharma for their kind help in field operation during this study and analyzing the data that enabled me to complete it.

Last but not least, I would like to thank Mr. C. M. Adhikari (Classic Computer) for attractive design and printing in this dissertation.

**Puspa Parajuli**

## ABSTRACT

There are many health problems in old age. Elderly people are vulnerable to physical, social, emotional and socioeconomic problems. In comparison to elder females are suffered by many types of physical problems. Along with this, elderly women are facing with several problems day by day. So the entitle "Physical Health Problems of Elderly Women in Gaindakot VDC" was selected for study is based on the primary data collected from the door to door visit.

The main objectives of this study are to find out the physical health problems of elderly women in Gaindakot VDC of Nawalparasi District.

In the context of elderly people, the researcher intended to identify the main physical problems of elderly women in Gaindakot VDC of Nawalparasi District. This is a new kind of study in it's nature. The result of the study is hoped to be useful as a guideline for the policy markers, teachers, experts, students, researchers and planners as it had been carried out with the sincere norms of dissertation writing.

In the study area, total populations of elderly women aged 60 years and above were 117. All of them were selected by purposive sampling method. An interview schedule, observation sheet were used for the collection of necessary information.

Almost all the respondents were found to be suffering from different kinds of the health problems. The major health problems, which were found 17.09 % of total were poor eye sighted, 15.38% were heart diseased, 8.55% had backache, others health problems such as headache, swelling of legs (Odema), gastritis problems, joint ache etc. were also found in some respondents. It was found that age group 65-69, 70-74, 75-79 were suffered from different kinds of health problems. Blindness, respiratory diseases were present more in Brahmin and Chhetri respondents.

They study also found that 17.09% respondents had eye diseases, 15.38% had respiratory diseases, 5.13% had joint diseases, 6.84% have Gastric and 4.27% had uterus prolapsed.

A part from these diabetes was also present in some respondents It was also found that 12.82% percent respondents had bad body posture, 34.19% had poor condition of teeth, 10.26% had poor condition of skin, 11.11% respondents had poor condition of hair and 35.88% respondents had poor/bad personal hygiene.

According to study, there is no provision of regular check up of elderly women in sub-health post and clinics. The existing health practices of elderly women regarding food and nutrition, personal hygiene, use of safe drinking water, bathing, smoking and health check up is not satisfactory.

From this study the researcher gave suggestions to the policy level, VDC and to the further researchers that the government and non-government sector should support such people ensuring adequate nursing care. Further more, such type of studies should be conducted at the national as well as local level.

## TABLE OF CONTENTS

	<b>Page No.</b>
APPROVAL SHEET	
RECOMMENDATION	
ACKNOWLEDGEMENT	I
ABSTRACT	II-III
TABLE OF CONTENTS	IV-VI
LIST OF TABLES	VII
LIST OF FIGURES	VIII
ABBREVIATIONS	IX
<b>CHAPTER I: INTRODUCTION</b>	<b>1-6</b>
1.1 Background of the Study	1
1.2 Statement of the Problem	3
1.3 Objectives of the Study	5
1.4 Significance of the Study	5
1.5 Delimitation of the Study	6
1.6 Definition of the Terms Used	6
<b>CHAPTER II: REVIEW OF LITERATURE</b>	<b>7-11</b>
2.1. Theoretical Background	7
2.2. Empirical	8
<b>CHAPTER III: RESEARCH METHODOLOGY</b>	<b>12-13</b>
3.1 Research Design	12
3.2 Selection of Study Area	12
3.3 Sample Size and Sampling Procedure	12
3.4 Validation of Tools	12
3.5 Data Collection	13
3.6 Method of Analysis and Interpretation of Data	13
<b>CHAPTER IV: ANALYSIS AND INTERPRETATION OF DATA</b>	<b>14-22</b>
4.1 Elderly Population by Socio-economic Categories	14
4.1.1 Elderly Women Population by Age	14

4.1.2 Elderly Women by Caste/Ethnic	15
4.1.3 Elderly Women by Religion	16
4.1.4 Status of Ethnic Groups and Literacy	17
4.1.5 Land Ownership of Respondents	17
4.1.6 Annual Income of Respondent Family	18
4.1.7 Family Type of the Respondents	19
4.1.8 Marital Status of Respondents	20
4.1.9 Sources of Income of Respondent Family	21
4.2 Physical Problems and Disease of the Respondents	21
4.2.1 Health Problem of the Respondents	22
4.2.1.1 Health Problems of the Respondents by Age Group	23
4.2.1.2 Health Problems of Respondents by Castle/Ethnic Group	24
4.2.1.3 Health Problems of the Responder by Marital Status	24
4.2.2 Duration of Health Problems of Respondents	25
4.2.3 Frequency of Health Problems of the Respondents	25
4.2.4 Seeking Treatment for the Health Problem	26
4.2.5 Daily Using Foods and their Frequency	26
4.2.6 Description of Disease	27
4.2.6.1 Distribution of Respondents of Eye Disease According	28
4.2.6.2 Distribution of Eye Disease Respondent by Ethnic Group	28
4.2.6.3 Distribution of Respiratory Disease by Age Group	29
4.2.6.4 Respiratory disease by Ethnic Group	29
4.2.6.5 Joint Disease by Age Group	30
4.2.6.7 Uterus Prolaps by Age Group	30
4.2.7 Physical Observation of Respondents	31
4.2.7.1 Body Posture	31
4.2.7.2 Condition of Teeth Capacity of Chewing	32
4.2.7.3 Capacity of Hearing	32
4.2.7.4 Capacity of Seeing/Vision Capacity	32
4.2.7.5 Condition of Skin	32
4.2.7.6 Condition of Hair	32



4.2.7.7 Capacity of Memory	33
4.2.7.8 Attraction of Others	33
4.2.7.9 Personal Hygiene	33
4.2.8 Activities of Respondents	33
4.2.9 Care Taker of Respondents in Sickness	34
4.3 Health Habits and Health Practice of Respondents	34
4.3.1 Distribution of Respondents by Taking Food (Per Day)	35
4.3.2 Distribution of Respondents by Type of Drinking Water	36
4.3.3 Distribution of Respondents by Bathing Habits	36
4.3.4 Distribution of Respondents by Brushing Teeth Daily	37
4.3.5 Distribution of Respondents by Toilet Habit	38
4.3.6 Kinds of Material Used after Going to Toilet	38
4.3.7 Smoking Tobacco Practice of Respondents	38
4.3.8 Drinking Alcohol Practice of the Respondents	40
4.3.9 Health Checkup Practice of Respondents	41
4.3.10 Education Status of the Respondents	42
<b>CHAPTER V: SUMMARY, FINDINGS, CONCLUSIONS AND RECOMMENDATIONS</b>	<b>43-47</b>
5.1 Summary	43
5.2 Findings	44
5.3 Conclusion	46
5.4 Recommendations	47
5.4.1 Recommendations for Further Improvement	47
5.4.2 Recommendations for Further Study	47

## **BIBLIOGRAPHY**

## **APPENDIX**

## LIST OF TABLES

	Page No.
Table No. 1: Elderly Women Population by Age	14
Table No. 2 : Respondent by Caste/Ethnic Group	15
Table No. 3: Elderly Women by Religion	16
Table No. 4: Status of Ethnic Groups and Literacy	17
Table No. 5 : Land Ownership of Respondents by Ethnic Groups	18
Table No. 6 : Annual Income of Respondent Family	18
Table No. 7 : Family Type of the Respondents	19
Table No. 8 : Marital Status of the Respondents	20
Table No. 9 : Sources of Income Concerning Case of Respondents	21
Table No. 10 : Health Problem of the Respondents	22
Table No. 11 : Health Problems of the Respondents by Age Group	23
Table No. 12 : Health Problems of Respondents by Caste/Ethnic Group	24
Table No. 13 : Health Problems of the Responder by Marital Status	24
Table No. 14 : Duration of Health Problems of the Respondents	25
Table No. 15 : Frequency of Health Problems of the Respondents	25
Table No. 16: Treatment Patterns of the Respondents	26
Table No. 17 : Daily Using Foods and their Frequency	26
Table No. 18 : Description of Disease	27
Table No. 19 : Distribution of Eye Disease by Age Group	28
Table No. 20 : Distribution of Eye Disease by Caste/Ethnic Group	28
Table No. 21 : Distribution of Respiratory Disease by Age Group	29
Table No. 22 : Respiratory disease by Ethnic Group	29
Table No. 23 : Joint Disease by Age Group	30
Table No. 24 : Uterus Prolaps by Age Group	30
Table No. 25 : Physical Observation of Respondents	31
Table No. 26 : Activities of Respondents	33
Table No. 27 : Care Taker of Respondents in Sickness	34
Table No. 28 : Frequency of Taking Food (Per Day)	35
Table No. 29 : Type of Drinking Water	36
Table No. 30 : Bathing Habit	37
Table No. 31: Brushing Teeth Daily	37
Table No. 32 : Toilet Habit of Respondents	38
Table No. 33 : Material Used after Going to Toilet	38

Table No. 34 : Smoking Tobacco Use Practice of the Respondents	39
Table No. 35 : Drinking Alcohol Practice of the Respondents	40
Table No. 36 : Health Checkup Practice of Respondents	41

## **LIST OF FIGURES**

	<b>Page No.</b>
Figure No. 1: Elderly Women Population by Age	15
Figure No. 2: Elderly Women by Religion	16
Figure No. 3: Status of Ethnic Groups and Literacy	17
Figure No. 4 : Family Type of the Respondents	19
Figure No. 5 : Marital Status of the Respondents	20
Figure No. 6 : Sources of Income Concerning Case of Respondents	21
Figure No. 7 : Frequency of Taking Food (Per Day)	35
Figure No. 8 : Type of Drinking Water	36
Figure No. 9 : Smoking Tobacco Use Practice of the Respondents	39
Figure No. 10: Alcohol Practice of Respondents	40
Figure No. 11 : Health Checkup Practice of Respondents	41

## **ABBREVIATIONS**

FOE	:	Faculty of Education
HAI	:	Health Age International
INGOs	:	International Non-governmental Organizations
NEPAN	:	Nepal Participatory Action Network
NGOs	:	Non-governmental Organizations
T.U.	:	Tribhuvan University
UN	:	United Nations
VDC	:	Village Development Committee
WHO	:	World Health Organization