

CHAPTER - ONE

INTRODUCTION

1.1 Background

Among the various stages of human life ageing is the last stage. It plays very important role in demographic study. Ageing is not only the critical stage of human life but also global issue. Since few decades, this phenomena is accepted as a critical and serious problem in both developed and developing countries as the elderly share is increasing in total population and social scientists and demographers are motivated towards phenomena.

Ageing 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 form civil service, 60 years for UN member of constitutional bodies and after 75 years only the elderly people get social security benefit form government i.e. old age allowance.

The definition of ageing also varies, yet a single definition of old age cannot be found. Ageing is the ultimate manifestation of biological and demographical activities in individual human being and population at large (Singh, 2003). For some ageing is progressive attainment of ages of last state of maximum life span of human being, 100 to 110 years as general. For others, ageing is growing old or maturing; progressive changes related to the passage of time (Taber's cyclopedia medical dictionary; 1999).

The population ageing is primarily a result of decrease in the proportion at younger ages, as a result of falling fertility rates, in the

developing countries. When the fertility and mortality levels continue to descend to much lower levels, the life expectancy increases in the region and then the age distributions resemble very close to those of more developed regions in 1950 (Bisht, 2005). With the demographic transition the fertility rate and mortality rates are gradually decreasing but share of the elderly population is increasing in total population. The demographic situation in the years to come is very critical. Beginning of this problem has already seen in Japan as it is known as the country of the elderly people for last few years (Chaulagain, 2004).

In Nepal ageing is new issue but is quite challenging. The study on the elderly population is at embryonic stage (Subedi, 1999). Due to lack of sufficient information on ageing collected nationwide, studies on the elderly has to depend on limited information. According to the 2001 census, there are 15 million elderly people in Nepal, which constitutes 6.5 percentage of the total population. The growth rate between 1991 and 2001 was 3.5 percent per year.

Traditionally, the prime responsibility to rare and care the elderly people were of family in Nepal. With the fast modernization and attraction of people towards nuclear family system the elderly problems are increasing day by day. There is no doubt the family society and nation can get good advantage from the wisdom, skill, decision making and judgment capacity of the elderly.

1.2 Statement of the Problem

Ageing is the natural phenomena of human life cycle. It brings many changes in life of people such as mental, physical, economic social cultural etc. Recently, the global eyesight is concentrated upon both the problems

and importance of the elderly people. The UN General Assembly declared the year 1999 as the International year of older person. In the same way 1st October is declared as ‘The International Day’ for the elderly since 1990 by the UN. Almost all the member countries have legal provision for the elderly but the efforts of government are limited in comparison to growth rate of elderly (UN, 1999).

From the ancient time the elderly people have significant value especially in joint family system of Nepal. Naturally the rearing and caring responsibility of the elderly goes to their off-springs as well as family members. The contribution of them for transmitting cultural norms, values, maintaining discipline in family, economical contributions etc. can’t be under estimated in present context. The family, society and whole nation can get lots of benefits from past experience, wisdom, skill and decision making capacity of the elderly people.

Influence of modernization, urbanization and western effect can be observed in every field of our society now a day, in one hand the elderly has to suffer from physiological and mental problems with passage of time on the other they have to suffer from social, psychological and economical problems due to different reasons.

The huge gap has been observed between the people of urban area and rural areas of Nepal. Almost 40 percent people of Nepal are below the poverty line (NPC, 2003). It is very difficult for many rural people even for solving hand to month problem hence the good care and sufficient nutritious food can’t be imagined for the elderly in such families. The case of middle class and high class families is different. Adults of such type of families are

motivated towards nuclear families. Migration towards facilitate areas by younger generation leaving their parents alone is also the serious problem.

Ageing is seen as one of the serious problem for Nepal with increasing life expectancy. But the government focus is not more on policy formulation and effective implementation of existing rules and regulation. The elderly allowance is very less i.e. only 150, it is also neither timely distributed nor reaches in the hands of targeted persons. In comparison to increasing market price and economical needs of aged persons its very small. There is no any special provision of security, traveling facility, health care etc for the elderly people.

In this context this study is focused to find out the facts of aged people related to family and society, economy, health status and psychological status and the study is focused on Siddhapur VDC Baitadi which is one of the least developed area of Nepal. The main focus of the study will be on the following topics:

- The actual situation of the elderly in family, society.
- The elderly people's educational, occupational, livelihood strategies and contributions of them in family and society.
- Difficulties of older people with basic needs, economic problems and support of family members.
- Health status of the elderly mainly the diseases, availability of food, personal hygiene, their health care needs.
- View towards family members, society and government in the eyes of the elderly people.

- Exploring the actual demands of the elderly from family members, society and concerned authorities.

1.3 Objectives of Study

Although the number of the elderly people and their problems are increasing day by day the focus of concerned authority is not more to solve them. Even the nation wide study is not done is large extent to find out the actual situation of the elderly people. The general objective of this study is to analyze the actual situation of aged people. But the specific objectives of the study are given below:

1. To analyze the demographic characteristics of the elderly (such as education, occupation, age, sex, marital status, religion, ethnicity) in study area.
2. To identify the social and economic condition of the aged people.
3. To find out and analyze the health status of the aged people in Siddhapur VDC.
4. To find out the intra-family support to the aged people.
5. To analyze the psychological status of the elderly and their basic demands from concerned people agencies.

1.4 Significance of the Study

Nepal is multi-religious, Multi-ethnic, multi-lingual country and it has very specific geo-physical condition. Population has a dynamic nature. It always changes and brings changes in socio-economic conditions of people. The percentage of aged people (60+) has increased from 4.28 percent in 1911 to 7.46 by 2001 (Singh, 2003). Increasing ageing population is one of the challenging subject which is related to age that is declining social and economic status of the elderly people left behind from family isolation,

disrespect by younger, lack of social and economic security system. (Regmi, 2006)

Number of the elderly is increasing rapidly in the country. It is sure that in coming days the elderly problems also will be increasing. It is necessary to discuss and interaction should be done regarding such a emerging issue. Gradual improvement is seen in study sector but the systematic study should be done nationwide including both urban and rural settings. It will help to identify the various problems of the elderly and take necessary steps to solve them.

Although this study is limited in small geographical area but it is very important to know the over all status of the elderly. This study is especially focused to identify the familial, social, health, economic and psychological status of the elderly in study area. The significances of the study are listed below:-

- 1) This study plays very important role in sector of ageing because it aims to collect the information of one of the least developed and remote village.
- 2) This study explores the problem faced by the elderly people in family and society.
- 3) This study aims to identify the economic contributions and problems in family and for whole nation by the elderly as well as the health needs & problems of them.
- 4) This study also will be mile-stone to suggest the needs, wants and desirers of the elderly and strongly suggest the concerned authority to implement them.

- 5) This study will be helpful to make proper plans & policies including the elderly issues for the fulfillment of various needs of the elderly people.
- 6) It will be useful to further researcher & help local people to develop awareness about the elderly socio-economic and demographic condition.
- 7) This study report will be helpful for GO's NGO's to implement welfare programs for the elderly people in study area.

1.5 Limitations of the Study

This study report is prepared for partial fulfillment of paper 510 in masters of arts in population studies. Due to various factors viz. availability of time, economic constraints and human resources every study has its own limitations. The study area of this study is limited in the Siddhapur village development committee of Baitadi District.

Other limitations of the study are listed below:-

- 1) This study is focused in only the elderly people i.e. 60 and above and people below 60 will not be included.
- 2) This study is limited to collect information on family, social, health, economic and psychological status of the elderly people living in Siddhapur VDC Baitadi.
- 3) Both primary and secondary data are used for study.
- 4) Mentally disordered and dumb people are excluded.
- 5) The main tool for collecting data is a already scheduled questionnaire set.

CHAPTER - TWO

LITERATURE REIVIEW

2.1 Need and Important of Literature Review

It 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 & 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.

It also helps to form an objectives, sample size, and proper planning about the research work. New terminology, ideas can be obtained form literature review. It is the foundation of new study. Literature review ensures the research hasn't been done before. It helps to illustrate how the subject has been studied previously.

A literature review is an evaluative report of information found in the literature related to selected area of study.

2.2 Definition of Old Age

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 20th century was increasing longevity and decrease in birth and death rate. On the basis of countries 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 time which the capacity to do work 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).

Ageing is growing old or maturing. Progressive changes related to the passage of time (Tiber’s encyclopedia medical dictionary, 1999).

Despite its universality, ageing is difficult to define. Shakespeare probably characterized it best in his elegant description of the seven stages of man. It begins at the moment of conception, involves the differentiations and maturation of the organism and its cells at some variable point in time, leads to the progressive loss of functional capacity characteristics of senescence and ends in death (Robbins, 1998).

Ageing involves an endogenous molecular program of cellular senescence as well as continuous exposure throughout life to adverse exogenous influences, leading to progressive encroachment on the cell’s survivability (Gannon, 1999).

In Nepalese context ageing is not a new concept. “AAGO TAPNU MUDHAKO, KURA SUNNU BUDHA KO” is the famous proverb in Nepalese societies. There are many terms to indicate old age in our societies “Baje/Bajai” (Grand parents), Bridha (old person), Budhyouli (old-age) etc.

2.3 Ageing in the World

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 some countries 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 the 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).

According to UN estimates in 1950 there were approximately 200 million persons 60 years of age and over throughout the world. It was increased 350 million in 1975 with the increase of 2.24 percent the world aged population will reach 1,100 million. Majority of the elderly people (55%) are women. Majority of the worlds older persons (51%) live in urban areas. In developed countries (74%) live in urban areas where as (37%) of developing countries live in urban areas (UN, 1999).

The proportion of older persons differs from region to region. In the developed regions the proportion of ageing population increased from 7.9 in 1940 to 13.5 percent in 1950 and expected to reach 24.7 by 2050. The most rapidly ageing countries including Japan, Germany and Italy will approach or exceed 40 percent of their populations at older ages by 2050 (UNFPA, 1998).

Currently, the Asian and Pacific region contains more than 300 million the elderly persons aged 60 years and older. In China, there are more than 114 million elderly. Japan contains 25.1 million elderly persons, the largest proportion of the elderly in its population and among all of the countries in this region (Bisht, 2000). One out of every 10 persons is now 60 years or older. One out of every five Europeans, but one out of 20 Africans is 60 years or older. By the year 2050, one out of five will be 60 years or older by 2150. It has been estimated that one out of three persons will be 60 years or older. It indicates that ageing will have an extensive effect on the social economic and health conditions of the people (Bisht, 2005).

2.4 Ageing and World Eyesight

Ageing 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 20th century. The tempo 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 often assumed that in developing countries, ageing proceeds faster in urban areas where fertility and mortality declines are typically more advanced than in rural settings. In reality, ageing in rural communities usually manifests itself earlier and advances more rapidly than in the cities (Marcoux, 2001). In the Majority of poorer countries, ageing is

predominantly a rural phenomenon and it is in the villages where the consequences of ageing are most felt (Stloukal, 2001).

Many of the elderly are left in the villages by their adult children leaving the caring and rearing responsibilities for grand children. In the same way the traditional occupations also should be carried out by them. Agricultural activities, cattle rearing may not be possible to carry on by themselves and they can't afford for labour and mechanizes as well. Hence, there are some positive aspects of rural urban migration, increasing strain on older rural population that can have negative consequences for their well beings as well as for their participation in rural development.

Poverty is another main enemy for the elderly especially residing in developing countries. Older women are suffering more from it. There are less chances for the elderly to be involved in income generating activities. Decreasing physical strength, low level of education, social exclusion, results poverty and they have to suffer from malnutrition, poor housing, clothing and personal security. They might have the adjustment problems also as many of them have to be busy with household activities only the elderly females mainly depends up on male. In case of loss of male partner, it create trouble for the elderly women.

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. 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).

2.5 Ageing Scenario of the SAARC Countries

In SAARC countries there is no similarity in categorizing the aged people. Maldivs has 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, some times depending on the official national ages of retirement (Achraya, 2001).

The projection of the older population in the SAARC Region by sex shows that females will have greater share of the population than males in all the countries through out the projection period the projection also shows the increasing proportion of female population as we further observe in the projection period (Achraya, 2001).

Sri-Lanka will have 12.4 percent of the total population as ‘old’ by the year 2025. Total share of the older population in India will be around 8

percent, Bangladesh and Pakistan will have just over 5 percent of the older population. Bhutan, Nepal and Maldives will have 4-5 percent of the older population (UN, 1999).

Table No. 2.5.1

Indices of SAARC Countries

SAARC countries	65 ⁺ years	Life-expectancy	Indices of Ageing
Sri-Lanka	6	72	22.22
Bhutan	5	66	12.82
India	4	63	11.11
Nepal	4	58	9.76
Pakistan	4	63	9.52
Bangladesh	3	59	7.5

Source: UN's world population data sheet, 2002

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 at age 65⁺ is observed as 9.76 percent.

2.6 Ageing in 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 the elderly population in 2001 census implies that the number of the elderly will double in less than 20 years (Bisht, 2004).

Nepal has started taking census since 1911 A.D. But prior to 1952/054 the age groups in the census reports are given only by broad groups 0-15, 16-49 and 50+ years ages. After 1952/054 census has been taken in 10 years interval the latest census was held in 2001. Following table shows the size and percentage of the elderly people of different census years.

Table No. 2.5.2

Population Ageing in Nepal; 1952-2001

Year	Number of the elderly people	Percent the elderly people
1952/054	403961	5
1961	489,346	5.2
1971	621,597	5.4
1981	857,061	5.7
1991	1,071,234	5.8
2001	1,474,379	6.5

Source : CBS and MOPE, 2004

Presently, decrease in fertility and mortality rates 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 people of 1474379 (6.5% to total population) in 2001 is expected to be 2,037,309 (6.94% to total population) by the end of 2011 which shows an increasing trend. Similarly the increasing old age dependency ratio (present dependency ratio of 11.19%) is projected to be 12.50 percent in 2016 has the potential to increase the existing vulnerability of the elderly people with weakening social support system (Bhattarai, 2003).

2.6.1 The Elderly People's Contributions

Older men and women in Nepal provide valuable contributions to well being and livelihood of the family by taking responsibility for household activities, freeing younger family members to seek work outside the home and by providing income. Older people in Nepal are not a burden to families, nor helpless or passive. The failure to recognize and understand to contributions of the elderly people not only marginalizes older people, it also discounts valuable resources (Bisht, 2004).

Other very important roles of the elderly people are the counseling off-springs, transmitting the older cultural norms and values, and teaching the traditional skills and occupations to their children. Under the good supervision of older parents the family life is spent easily and quality of life can be obtained. There is no doubt many youngsters go to abroad and far from their houses giving caring and raring responsibilities of their children to the elderly people. It is important to know that family disputes and misunderstandings are easily solved by the elderly people. By stepping on the base and foundation formed already by older people, children young and even youth's career development takes place.

Elderly, who are capable, are found involved in various income generating activities like shopping, cottage industry and so on. And those who cannot participate directly, in income generating activities are found making indirect contribution by assuming household work such as looking after house, cooking food so that younger family members can go out for productive work (Humagain, 2006).

Not only the family, the society but a whole nation is also benefited by the elderly people. The past experience of the elderly in making plans, policies and their implementation by involving them in such sectors is very effective. A matured decision is needed to solve some diplomatic matters that can be expected from the elderly people. There for senior citizens are not only the supervisor of family they are guardians of society and nation.

2.6.2 Social Status and Attitudes

In Nepal, though only recently, ageing is considered as an economic problem socially it is considered, since ancient time, the continued upgrading in social status. Higher the age of a person, more is his/her social status. Eldest male member of the family or the community automatically takes the role of head-ship in the family/community. Almost all social and religious activities are guided as well as performed by him/her. His/her views and words are taken as the rules and regulations to be followed by the community/family members (Singh, 2003). After attending certain ages as 75 years 84 years, 90 years the elderly people are respected more. Cultural and religious activities are performed showing respect towards them. Understanding the value of past experience and skill of the elderly after certain age the elderly people is only eligible to hold some vital governmental posts. Such as constitutional bodies, planning commission etc.

the the elderly people are compared with the god. “MATRI DEO BHAVA” “PITRI DEO BHAVA” is the common tongue in Nepalese culture. (Bisht, 2001)

2.6.3 Major Problems of the Elderly People

In the process of modernization, shifting from the agriculture to industrial society, rapidly shifting in age structure and shifting form old traditional norms of paying respect to the elderly people from all younger members of household particularly daughters in law children and grandchildren. It is time now to restore time honored tradition in one hand and to provide all the possible modern social security on the other. (Bisht, 2001). Physiological and mental problems are natural enemy of the elderly people. In addition social insecurity, mental torture, malnutrition, economical problem etc are an artificial enemy of older people in Nepalese context. Gender discrimination, violence, abuse and sexual harassment to the elderly people are also increasing with increase in the elderly share. More then the common problems of the elderly people, some other can be grouped in the following headings.

Physical Problems	Mental Problems	Social Problems
Loss of immunity power.	Feeling of loneliness.	Poverty.
Prevalence of diseases.	Decrease in mental ability.	Isolation from society.
Poor eyesight, hearing power disability.	Difficulty to adjust with daily routine.	Insecurity.
Loss of physical strength.	Lack of self-satisfaction and joy.	Lack of opportunities to implement past experience
Digestive problems.	Lack of entertaining facilities.	
Food scarcity.	Torture form family and society.	Helpless ness

2.6.4 Social Security of the Elderly People

Pension and provident fund are two main forms of old age benefits. The pension is applicable to government services, some public bodies and institutions as public sector (civil service, army and police, public enterprises, school teachers, Tribhuvan University). There is no provision for pensions under the labour Act. The provident fund is another benefit to employees. A part from the provident fund all other forms of benefits are non-contributory provident fund could be applicable to non-public sectors (manufacturing establishment cottage and small scale industries private campus) (Bisht, 2001).

Basically, since the ancient time family and society used to take responsibility of social security of the elderly people. Now a day, some efforts are also made by government and private sector. The allowances to old age people (75+ years), helpless widows (60+ years) and disabled persons are other forms of non-contributory old age benefits, which are applicable to all the citizens of Nepal. The elderly eligible people get this among in lump sum. The monthly allowance has been increased from 100 rupees to 150 from the 1999 (Bisht, 2001).

Beside Nepal government, various NGOs and INGOs are also motivated towards the welfare of elderly. The elderly houses are made in the support of private sector of Nepal. They distribute goods like clothes, medicine, food etc time to time to the elderly sitting in the elderly homes.

The efforts carried out by government and private sectors are good but not sufficient. It is questionable that country like Nepal where almost half percent people are below poverty line is the old age allowance and pension scheme sufficient to meet the needs of elderly? Next issue is, the life

expectancy of people of Nepal is around 60 but eligibility to get the elderly allowance is 75+. Due to lack of proper supervision and monitoring system of the elderly houses the elderly people in the elderly houses are exploited and harassed by many organizations and individuals (Chaulagain, 2004).

2.6.5 Government Policies and Programs for the Elderly People

The elderly issues were put forward only after the restoration of democracy in 1990. Nepal is actively taking part in various international conventions and declaring its solidarity. It was for the first time in Nepal, the Ninth five year plan (1997-2002) has unveiled special goals, policy and strategy for senior citizens. The plan also aims to utilize the capability, experience and knowledge of the senior citizens for national development by offering them appropriate care and protection (Bisht, 2004).

The Tenth plan (2002-2007) also formulated the objectives regarding senior citizens as to make the common, secured and respective live of the elderly people and to use the capabilities, experiences, knowledge and skills of senior citizens in social development task. Plan also assured some policies and strategies regarding senior citizen as, development of legal, structural network, providing right of the elderly and social security (NPC, 2003).

At the international level, following adoption of action-plan for the elderly by the “Vienna international convention” held in 1982. “The International conference on population” Mexico city, 1987 unanimously declared its solidarity in order to recognize the role of the elderly in nation building by mobilizing their rich knowledge, skills and experience. Besides, Nepal has adopted the “Macau plan of action” relating to ageing, the government has participated in “the regional workshop on National policies on Ageing 2001” (Manila, The Philippines). Nepal has also attended “The

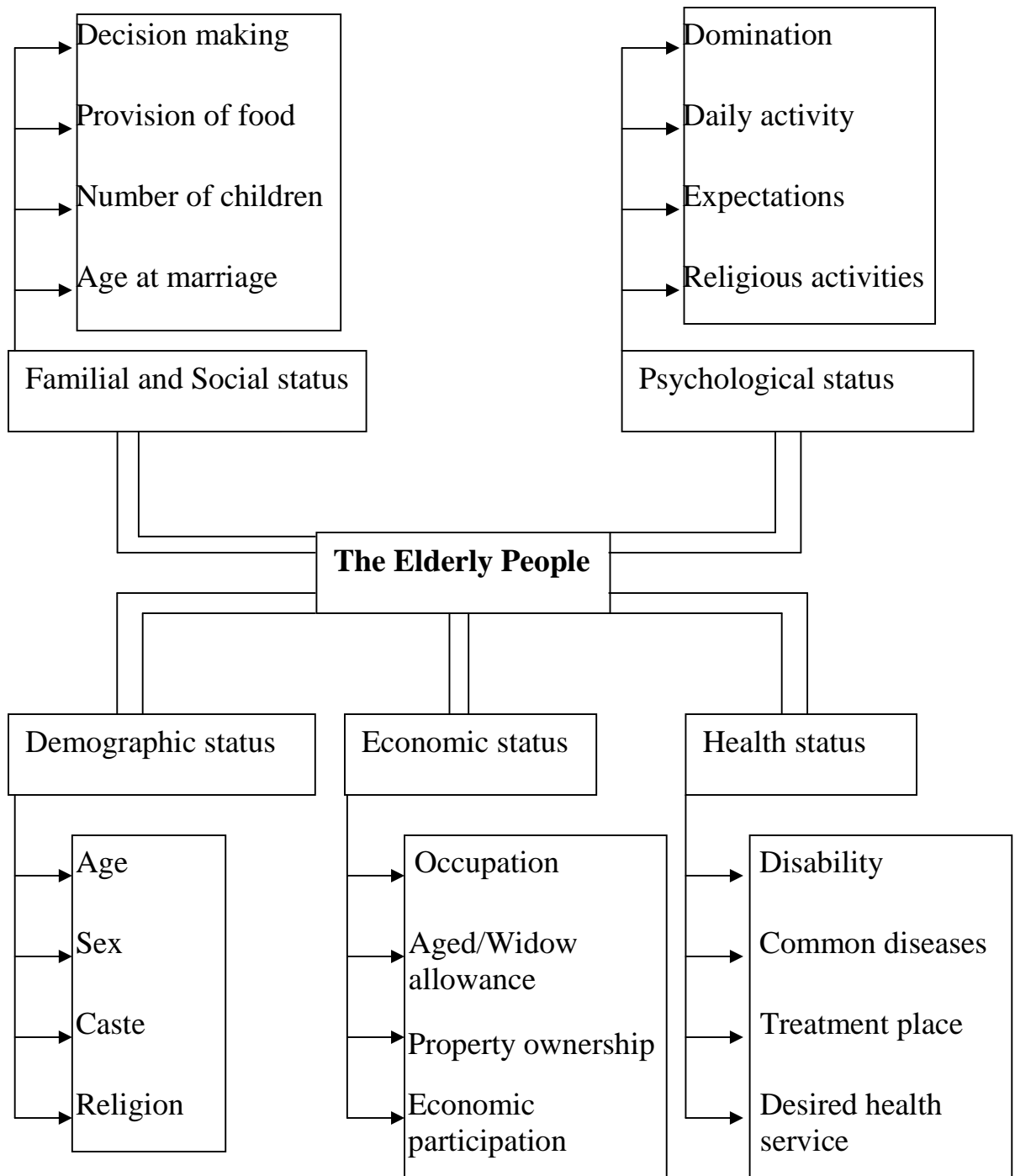
Second Asian Regional Preparatory Meeting for Second World Assembly on Ageing (Puna, India). Similarly “The second world Assembly on Ageing”, Madrid, April 2002 has ratified the political proclamation regarding the rights of senior citizens (MWCSW, 2001).

2.7 Conceptual Framework

It has been already clear from the above mentioned literatures that the elderly people are the valuable assets not only for the family and society but also for whole nation. They supervise and give good guardianship to their children, society & nation. It is the natural law that each and every living creature of this earth get older becomes physically & mentally week, but as a supreme living creature old people should not be used as useless substances. Their past contribution should be evaluated in the family society and nation.

Nepal is multi-religious, multi-cultural and multi-ethnic country. Cultural inheritance and its preservation is almost impossible without the elderly people. The elderly people during adulthood keep a dream towards off-springs that they will take care of the elderly when they get old and become unable to perform different activities. In many societies of Nepal it is still in practice that the elderly people are regarded as a symbol of god. This tradition should be carried on.

Another important aspect of the elderly people is their past experience, knowledge and skill must be properly utilized. In policy making level the elderly people’s guidance, supervision, knowledge is necessary. Though they might be physically week their counseling for economical development can’t be under estimated. In this regard, following conceptual framework is put forward to analyze the status of the elderly people in study area.



CHAPTER - THREE

RESEARCH METHODOLOGY

3.1 Selection of Study Area

This study was conducted in Siddhapur VDC of Baitadi district, which is one of remote village. The study area lies in far-western development region of Mahakali zone.

According to 2001 A.D. census 85.8 percent people of Nepal are living in rural areas (CBS, 2002). Out of them socio-economic and health condition of people residing in mid and far-western development region is Miserable. In this regard the study aims to collect the information on family, social, economic, health and psychological status of the elderly.

The study area has the specific demographic and geographical characteristics. It is far behind from the main stream of development. Infrastructural developments such as health, education, communication and transportation facilities are not adequate. In addition people of the study area spent the pitiful life during around ten years Maoist revolution.

Almost all the people communicate in their own mother tongue. Traditional way of life and superstition is practiced at large extinct yet in the village. Although the area is small, it consist people of different cast, but the similar religion i.e. Hindu. There is a sub-health post but lacking medicine and health worker, 5 schools (2 primary, 2 lower secondary and one secondary) are there but no qualified teachers. Even few teachers are only managed by government almost teachers depend up on donations from parents and VDC.

Qualified young generation does not return to village. People having sound economical condition generally migrate to Terai region i.e. Kailali or Kanchanpur. Maximum economically active males go to India for Job or seasonal migration is done by them. All these above mentioned points were the spot light for selecting Siddhapur VDC as the study area.

3.2 Nature and Source of Data

This is descriptive type of study. Village development population profile and voter list are the main secondary sources of data. Primary data are collected through field survey by researcher himself. Information on Various characteristics such as demographic, social, economic, health, psychological status of the elderly people are explored from study area.

3.3 Sampling Size

The Siddhapur VDC is situated at far-western hill. Population density is not very high in study area. According to VDC vital registration system 2006 the total population is 3748 and total population of aged people 60 and above is 254 including 132 males and 122 females. The total number of sample size of this study is 125 out of them 65 are male and 60 are female. Hence, the proportion of sample size is 49.21 (i.e. $n/N = 125/254$).

3.4 Sampling Procedure

Out of the 254 elderly 125 were selected for the purpose of the study. The sampling frames were constructed for males and females with the help of recent voter list collected for election purpose. In the same way old age and widow allowance distribution list is also used to verify the data. Simple random sampling method to choose sample was used in this study. Firstly a random number was selected and the sample was taken at the interval of K.

3.5 Data Collection Procedures

A structured interview schedule is the fundamental instrument of data collection of this study. The questionnaire was designed with the help of previous dissertation, other survey questionnaire and guidance of respected supervisor, Mr. Prem Singh Bisht. Data were collected by researcher through field visit.

3.6 Analysis of Data

3.6.1 Tabulation and Classification of the Data

As per the guidance and supervision of respected guide the questionnaire form was prepared. Questionnaire form was filled in field survey. After collecting data raw data were analyzed carefully and different type of dummy tables were designed that could present data in different way.

While constructing dummy tables assistance of Uncle Ramesh Bhatta is unforgettable. First few dummy tables were constructed by the help of traditionally used tally bars but it was too time consuming and boring. Later on computer was used for effective and easy construction of dummy tables.

3.6.2 Method of Data Processing

Raw data were first of all checked seriously before inputting in Microsoft excels worksheet from the surveyed questionnaire. Then the entered data were edited in order to tap the entry errors to maintain data accuracy. Total number of the elderly in different aspects and in different socio-economic and other categories was calculated and then noted down in the approved tables.

3.6.3 Data Analysis

According to objective of the study collected data through personal interview are presented in suitable tables. The data are analyzed based on frequency table and percentage composition in necessary places. Data are displayed through figures. The method of data analysis is descriptive.

CHAPTER - FOUR

ANALYSIS AND INTERPRETATION OF DEMOGRAPHIC, SOCIO-ECONOMIC HEALTH AND PSYCHOLOGICAL CHARACTERISTICS OF THE ELDERLY PEOPLE

This chapter especially deals with the various characteristics of the elderly people in study area the whole chapter has been divided into 5 parts to analyze and interpret data. Demographic characteristics include the age, sex, cast, religion, literacy distribution. In the same way family status of elderly, social status, economic, health and psychological status are analyzed on it.

4.1 Information on Demographic Characteristics of the Elderly

4.1.1 Sex and the Elderly People

Life expectancy of male and female is not similar in our country. Some people die in early ages where as some survive up to late age. The number of the elderly people is increasing day by day. But the number of male and female is different. In study area sex composition of the elderly is given below.

Table No. 4.1.1

Distribution of The elderly by Sex

Sex	Number	Percent
Male	65	52.0
Female	60	48.0
Total	125	100.0

Source: Field survey, 2007

Table No. 4.1.1 shows the more number of males elderly (i.e. 52%) compared to female elderly (i.e. 48%) in study area.

4.1.2 Five Years Age-Sex Groups and the Elderly

Age-sex composition of population plays significant role in demography. It is an important aspect of data analysis. Age composition can be analyzed either in one year or five years age interval. The elderly population of study area according to 5 year age group is given in following table.

Table No. 4.1.2

Distribution of the Elderly Population by Five-Year Age-Sex Groups

Age group	Male	Female	Total number	Percent
60-64	23	19	42	33.6
65-69	13	17	30	24.0
70-74	15	13	28	22.4
75-79	10	9	19	15.2
80+	4	2	6	4.8
Total	65	60	125	100.0

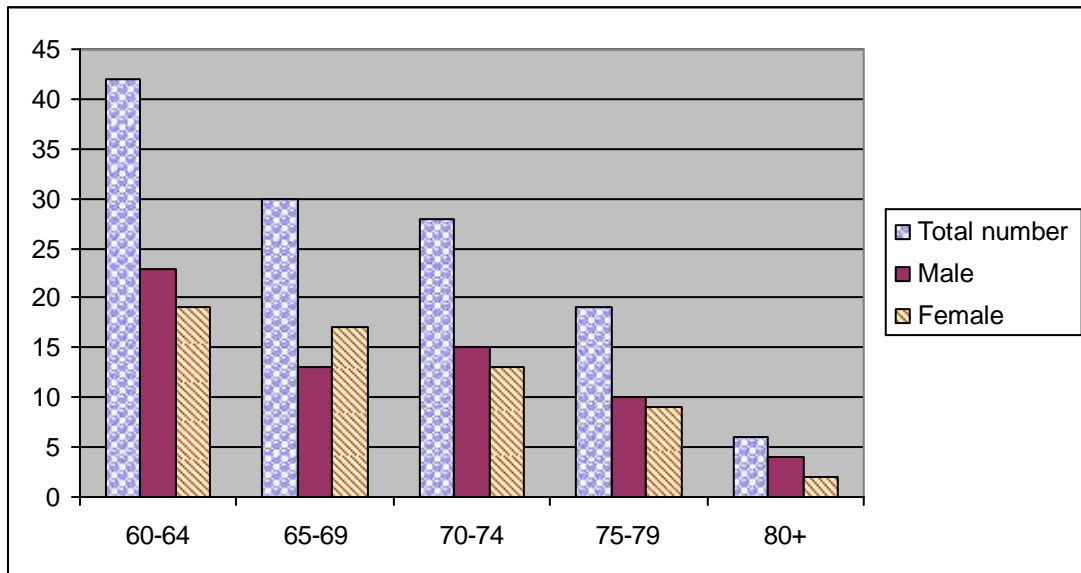
Source: Field survey, 2007.

Table 4.1.2 shows the decrease in the elderly share with increase in the age. The highest (33.6%) of the elderly respondents are in 60-64 years age group followed by 65-69 years age group (24.0%) and the lowest percentage is in 80+ year age group (i.e. 4.8%).

This number can be presented in following bar-diagram.

Figure No. 1

Distribution of the Elderly Population by Five Years Age Groups



4.1.3 Caste/Ethnicity and the Elderly

Nepal is a multi-ethnic country. According to 2001 A.D. census 103 castes were recorded in different geographical and administrative settings (CBS, 2002). As superstition is still in practice in Nepal, caste ethnicity determines the attitude and standard of people. In Siddhapure VDC there are also people of different caste/ethnicity although the population is less. Different castes of the elderly people and their number are presented in following table.

Table No. 4.1.3
Distribution of the Elderly by Caste/Ethnicity

Caste/Ethnicity	Number	Percent
Bhatta	22	17.6
Kunwar	17	13.6
Panta	16	12.8
Mahara	14	11.2
Bisht	12	9.6
Awasthi	11	8.8
Chand	10	8.0
Lohar	10	8.0
Sharki	9	7.2
Dhant	4	3.2
Total	125	100.0

Source: Field survey, 2007.

According to table 4.1.3 the largest ethnic group is of Bhatta (i.e. 17.6 %) and Kunwar (13.6 %) Panta (12.8 %), Mahara (11.2 %), Bisht (9.6 %) are top five castes respectively. The lowest (3.2 %) is of Dhant. In study area Bhatta, Panta and awasthi belongs to Bramhin where as Kunwar, Mahara, Bisht, Chand and Dhant belongs to Chhetries and Luhar and Sharki belongs to Kami ethnicity.

4.1.4 Marital Status and the Elderly

Marriage is widely practiced according to social and cultural tradition in almost communities of Nepal. Very less people due to specific reasons as

disability only they are unable to get marriage. Marriage has the relation with longevity. It is proved from the studies that married people survive longer than unmarried (Regmi, 2006). The marital status of the elderly in study area is given in following table.

Table No. 4.1.4.1
Distribution of The elderly People by Marital Status

Marital status	Male	Female	Total number	Percent
Ever married	62	59	121	96.8
Never married	3	1	4	3.2
Total	65	60	125	100.0

Source: Field survey, 2007.

According to above table 4.1.4.1, 96.80 percent of the elderly are married and only 3.20 percent of the elderly Never Married.

Ever married elderly people are further asked about the type of marital status. The marital type of respondents is presented in following table.

Table No. 4.1.4.2
Distribution of the Elderly by Their Type of Marital Status

Marital status	Number	Percent
Currently married	51	42.2
Widow/widower	22	23.1
Re-married	20	16.5
Multiple Spouse	12	9.9
Separated	10	8.3
Total	121	100.0

Source: Field survey, 2007.

Table 4.1.4.2 shows that majority of the elderly respondents (42.2 %) are currently married, 23.1 percent are either widow or widower. More widows are found in the study area. About 16.5 percent were found remarried and 9.9 percent of the elderly have multiple spouses and all of them are males. Likewise 8.3 percent the elderly are separated or they are not found staying together with spouse but they are not legally separated. They are staying in different house.

4.1.5 Educational Status and the Elderly

Education is the light of life. Educated people are supposed to spend better quality of life than uneducated. Educated people can have better employment opportunities and their economical condition becomes good. They have the better knowledge of healthy way of life and life expectancy of people also becomes higher if they are educated. The literacy level and educational attainment of the elderly in Siddhapur VDC is presented below

Table No. 4.1.5.1

Distribution of the Elderly People by Their Literacy Status

Literacy status	Male	Female	Total number	Percent
Literate	22	13	35	28.0
Illiterate	43	47	90	72.0
Total	65	60	125	100.0

Source: Field survey, 2007.

Table 4.1.5.1 shows the very poor literacy level of the elderly in study area. Only 28.0 percent elderly are literate where as the large mass of the elderly i.e. (72.0%) are illiterate. Likewise 34.0 percent male and 22.0 percent female are only literate in Siddhapur VDC.

Table No. 4.1.5.2

Distribution of The elderly People by Their Educational Attainment

Educational Attainment	Number	Percent
Primary	12	34.3
Lower secondary	8	22.9
Secondary	7	20.0
Higher secondary	6	17.1
Diploma and above	2	5.7
Total	35	100.0

Source: Field survey, 2007

Table 4.1.5.2 clears that the largest (34.3%) number of the elderly has attended primary education. There was no any school during the childhood of the elderly. Female's condition is more miserable because there was no any opportunity to study for them. Only 5.7 percent of the elderly have attended diploma level.

4.1.6 Religion and the Elderly

Although Nepal is a multi-religious and secular state, all the respondents of the study area belongs to Hindu religion. They go to temple to worship and perform various religious activities according to Hinduism.

4.1.7 Age at Marriage and the Elderly

In Nepal, marriage takes place at an early ages and it is almost universal. It has been already mentioned that the marriage has effect in socio-economic and quality of life of people. In rural areas of Nepal marriage is regarded as important event and practiced by almost all the

people. Table 4.1.7 shows the age at marriage of the elderly respondents in the study area.

Table No. 4.1.7
Distribution of the Elderly by Their Age at Marriage

Age group	Number	Percent
<10	30	24.0
10-14	48	38.40
15-19	26	20.80
20-24	9	7.20
25-29	6	4.80
30+	2	1.60
Unmarried	4	3.20
Total	125	100.0

Source: Field Survey, 2007.

Table 4.1.7 shows the childhood marriage practice in study area. Most of the respondents (38.4 %) got married between the age of 10-14. and 24 percent of the elderly got marriage below the age of 10 years. Almost of them are females only 1.6 percent aged people got married at the age 30 years and above.

4.1.8 The Elderly and Number of Children

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

Table No.4.1.8

Distribution of the Elderly People by Number of Children

Number of children	The elderly population	Percent
1-2	18	14.4
3-4	32	25.6
5-6	48	38.4
7+	12	9.6
Unmarried	14	3.2
No children	11	8.8
Total	125	100.0

Source: Field Survey, 2007.

Table 4.1.8 shows the highest number of respondents have 5-6 children which occupies 38.4 percent second position 25.6 percent is of the elderly respondents having 3-4 children and 9.6 percent have 7 and above only 14.4 percent of the elderly have 1-2 number of children. The elderly who are unmarried (3.2%), and elderly not having any children is (8.8%) in study area.

4.2 Information on Familial and Social Background of the Elderly

A family is defined as the group of people living together under the same roof, sharing a common kitchen and related by blood marriage or adoption. And “a society is group of those families who share a common tradition or culture”. Life in old ages is greatly influenced by family and society. The elderly are regarded as dependent in one hand and respected persons in other. Family type, occupation, rules and regulation has effect on

multidimensional development of every person from birth to death. Familial and social background of the elderly is described below.

4.2.1 Family Type and the Elderly

On the basis of number of people of different generations in the family, generally there are two types of families practiced in Nepalese community. The tradition of joint family is gradually changing in nuclear family in our societies. The distribution of the elderly people on the basis of family nature is presented below.

Table No. 4.2.1

Distribution of the Elderly People by Their Nature of Family

Nature of family	Number	Percent
Joint	88	70.4
Nuclear	37	29.6
Total	125	100.0

Source: Field survey, 2007

Table 4.2.1 shows that joint family system is practiced in large extent in study area. About 70.4 percent of the elderly are having joint family where as only 29.6 percent of the elderly people are living in nuclear family.

4.2.2 The Elderly and Living Arrangement

Living arrangement of the elderly has effect in their life. If the family members 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 table.

Table No.4.2.2.1

Distribution of the Elderly by Their Living Arrangement

With whom are you living?	Number	Percent
Son/daughter in law	72	57.6
Spouse	27	21.6
Grand children	10	8.0
Self-alone	6	4.8
Brother	4	3.2
Daughter/son in law	3	2.4
Other relatives	3	2.4
Total	125	100.0

Source: Field Survey, 2007.

Table 4.2.2.1 shows most of the elderly respondents (57.6 %) are living with their son/daughter in law. Similarly, 21.6 percent are living with their spouse. Other 8 percent are found living with their grand children and 2.4 percent are found living with their daughter/son in law and other relatives.

Table No. 4.2.2.2

Distribution of the Elderly by Satisfaction with Current Living

Living Satisfaction	Number	Percent
Yes	80	64.0
No	25	20.0
not response	20	16.0
Total	125	100.0

Source: Field Survey, 2007

Table 4.2.2.2 shows that out of 125 respondents of study area 64 percent are satisfied with their current living. About 20 percent of the elderly are not satisfied with their current living and 16 percent of the elderly didn't response.

Out of total, 25 unsatisfied elderly respondents were further asked about their desire to stay with other. Their response is presented in given table.

Table No.4.2.2.3
Distribution of the Elderly by Their Desire to Stay With

Desire to stay with	Number	Percent
Son/daughter in law	10	40.0
With husband/wife	6	24.0
Other relatives	3	12.0
Self/alone	2	8.0
Daughter/son-in law	2	8.0
Grand children	2	8.0
Total	25	100.0

Source: Field Survey, 2007.

From table 4.2.2.3, it is known that 40 percent of the elderly want to live with their son/daughter-in law. About 24 percent want to stay with their spouse. Similarly 12 percent want to stay with other relative and rest 8 percent want to stay alone, daughter/son-in law and grand children respectively.

4.2.3 Decision Making and the Elderly

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 way. Following table presents the facts about the decision making process of the elderly in study area.

Table No. 4.2.3

Distribution of the Elderly People by Their Role in Decision Making

Field of decision making	Male	Female	Total	Percent
Division of household labor	20	12	32	25.6
Marriage of off-springs	12	6	18	14.4
Selling/buying valuable things	8	2	10	8.0
Religious functions	8	4	12	9.6
Family ceremonies	10	6	16	12.8
None	7	30	37	29.6
Total	65	60	125	100.0

Source: Field Survey, 2007.

From table 4.2.5 it seems that most of females (50 %) do not have any responsibility in decision making. It is due to male dominated family pattern in study area. Most of the males play vital role in different aspect of decision making of the family. About 25.6 percent of the elderly made decision on

marriage of offspring, 8 percent decide selling and buying valuable things, 9.6 percent decide religious functions and 12.8 percent of the elderly decide about the family ceremonies in the family.

4.2.4 Provision of Food and the Elderly

In many rural communities children and the elderly are regarded as having same habits in case of food taking system. Naturally the elderly people need more nutritious food and they need more help in food preparation system. They suffer from different health problems. They cannot digest and consume a lot of food at one time neither they can bare hunger. The food provider in the family according to respondents is presented in following table.

Table No. 4.2.4.1

Distribution of the Elderly on the Basis of Food Provider

Food provider	Number	Percent
Self	36	28.8
Husband/wife	32	25.6
son/daughter-in law	42	33.6
Daughter/son-in law	2	1.6
Grand children	6	11.8
Other	7	5.6
Total	125	100.0

Source: Field Survey, 2007

Table 4.2.4.1 shows that 28.8 percent of the elderly prepare their food themselves, 25.6 percent of the elderly consume food prepared by their

husband or wife. In case of 33.6 percent of the elderly their son or daughter-in law provides them food. Only 1.6 percent of the elderly consume the food prepared by their grand children.

It is already mentioned that, the elderly people cannot consume sufficient food at one time only in a day as young people. They need food time to time. The study aims at finding the food taking system of the elderly in study area, which is presented in table given below.

Table No. 4.2.4.2
Distribution of the Elderly People by Food Taking System

Food taking per day	Number	Percent
Once	10	8.0
Twice	74	59.2
Thrice	20	16.0
Four times	18	14.4
Five and above	3	2.4
Total	125	100.0

Source: Field Survey, 2007.

From table 4.2.4.2 it is known that 59.2 percent of the elderly take food twice a day 16 percent of the elderly take food three times in a day. Similarly 14.4 percent of the elderly take food four times in a day. 8.0 percent of the elderly take food only once a day. Only 2.4 percent of the elderly take food above five times in a day.

4.2.5 The Elderly and Help in Personal Hygiene

Family members play very important role to maintain hygienic environment for the elderly. Many weak and disable aged people are unable to clean their body and clothes. They need support and care for their personal hygiene. Some information on help to the elderly to maintain personal hygiene is given in following table.

Table No. 4.2.5

Distribution of the Elderly by help to them in Personal Hygiene

Helped by	Number	Percent
Self	35	28.0
Husband/wife	26	20.8
Son/daughter-in law	46	36.8
Daughter son-in law	2	1.6
Grand children	12	9.6
Other	4	3.2
Total	125	100.0

Source: Field Survey, 2007

According to table 4.2.5, 36.8 percent of the elderly are helped by their son or daughter in law, 28.0 percent of the elderly take care of personal hygiene themselves, 20.8 percent are supported by their grand children and 3.2 percent are helped by other peoples as relatives.

4.3 Information on Economic Status of the Elderly

Income and expenditure are very important components in analyzing the status of the elderly people. People above 60 years are called dependent population, occupation, income source, involvement of the elderly in income generating activities influence the quality of life. In one hand the elderly are dependent. In other they directly and indirectly involve in income generating activities. Family can take lots of advantages/ benefits from the past skill, knowledge and experience. In this section occupation, land ownership, property ownership, income source, aged allowance, etc of the elderly are analyzed in different heads.

4.3.1 Occupation and the Elderly

Occupation of the elderly is directly indirectly related to health, economic and social aspect. The past occupation influence the present living condition and quality of life of people. The comparison of past occupation and current occupation of the elderly people in study area is given in following table.

Table No. 4.3.1
Distribution of the Elderly by their Occupation

Past Occupation	Number	Percent
Agriculture	62	49.6
Animal raring	14	11.2
Business	12	9.6
Service	11	8.8
Carpentry	10	8.0
Daily wages	10	8.0
Other	6	4.8
Total	125	100.0
Current Occupation		
Agriculture	45	36.0
Service retired	9	7.2
Daily wages/carpentry	10	8.0
Animal raring	8	6.4
Household work	28	22.4
Child caring	20	16.0
Other	5	4.0
Total	125	100.0

Source: Field survey, 2007

Table 4.3.1 shows that most of the elderly people's past occupation was agriculture. It was found that from the study area even the elderly were involved in other occupation they had the land they used to do agricultural activities. The elderly having animal raring occupation is in second position. The percentage of them is 11.2. Similarly other occupations of the elderly in study area are Business (9.6%), service (8.8%), carpentry

(8.0%), daily wage (8.0%), respectively. Other category includes seasonal migration to India, metal works and making Doko, Dalo, Namlo.

Due to different reasons they have changed their occupation, currently 36.0 percent of the elderly people's occupation is agriculture and 22.4 percent of the elderly are engaged in household work. Likewise 16.0 percent are involved in child caring, 6.4 percent of the elderly are involved in animal rearing and only 4 percent are involved in other occupations like making Doko, Dalo, Namlo, metal work, bee-keeping.

4.3.2 Ownership of Land & the Elderly

In country like Nepal where more than 80 percent people's occupation is agriculture, ownership of the land plays significant role in people life. Land is the main property of people. The elderly who have the land ownership are comparatively more economically strong by using land in different way. So ownership of land is an important indicator that determines the economic status of the elderly people. Following table shows the number of the elderly and ownership of land.

Table No.4.3.2

Distribution of the Elderly by Ownership of Land

Ownership of land	Number	Percent
Yes	75	60.0
No	50	40.0
Total	125	100.0

Source: Field Survey, 2007

Table 4.3.2 shows the 60 percent of the elderly have ownership of land and 40 percent of the elderly reported they do not have.

4.3.3 The Elderly and Ownership of Pewa/Daijo/Jeuni

Pewa/Daijo/Jeuni etc are valuable property for elderly. Which support them to meet the economical needs. It is the traditional practice in Nepalese communities which is economical security especially in old age. Their offsprings also take care of them with the hope of getting the property after their death. Following table shows the ownership situation of Pewa/Daijo/Jeuni by the elderly.

Table No.4.3.3

Distribution of the Elderly by Ownership of Pewa/Daijo/Jeuni

Ownership of Pewa/ Daijo/Jeuni	Number		Total	percent
	Male	Female		
Yes	58	29	87	69.6
No	7	31	38	30.4
Total	65	60	125	100.0
Ownership type				
Land only	33	18	51	58.6
House only	8	2	10	11.5
Land and house	12	2	14	16.1
Livestock	5	3	8	9.2
Pewa	0	4	4	4.6
Total	58	29	87	100.0

Source: Field Survey, 2007

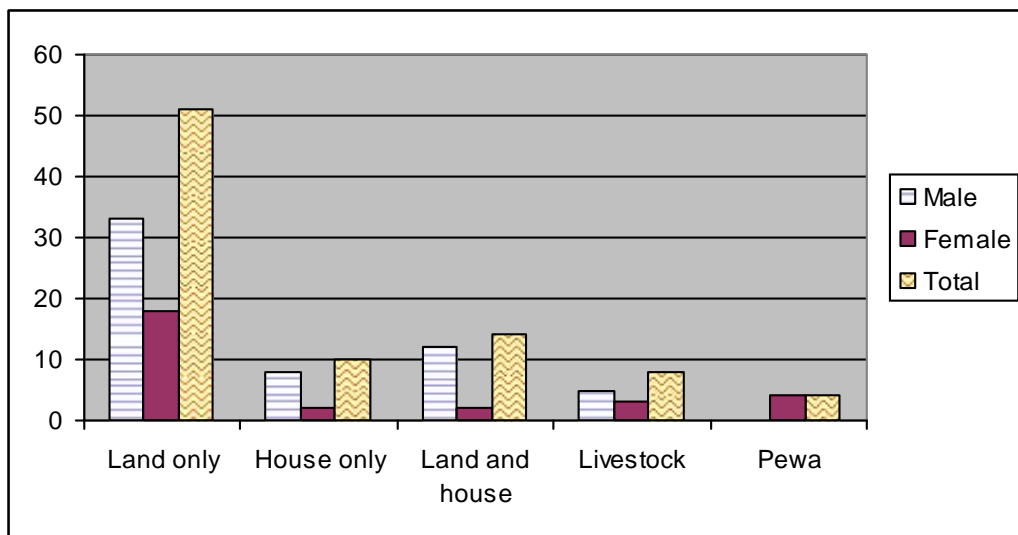
Table 4.3.3 shows that 69.6 percent of the elderly have ownership of Pewa/Daijo/Jeuni and 30.4 percent of them do not have. Similarly 89.2 percent male and 48.3 percent of the female elderly have ownership and

10.77 percent male and 51.67 percent of the female elderly do not have the ownership.

Majority (58.6%) of the elderly have ownership of land only. Other 16.1 percent of the elderly have ownership of land and house and 11.5 percent of the elderly have ownership of house only. In the same way 9.2 percent of the elderly have ownership of live stocks and 4.6 percent of the elderly females have ownership of ornaments and Pewa.

The following figure presents the above situation.

Figure No. 2
Distribution of the Elderly by Ownership Type of Property



4.3.4 Source of Income and the Elderly

Nepal government do not provide any special economical facilities except pension, aged and widow allowance, insurance in some cases to the elderly people. But there are limitations to get these as service retired from Nepal government (job) get pension, above 75 years old age allowance. Moreover, the major source of income of the elderly in study area is presented below.

Table No.4.3.4

Distribution of the Elderly by Their Source of Income

Source of Income	Number	Percent
Pension	9	7.2
Old age/widow allowance	25	20.0
Assets (land, gold, silver etc)	59	47.2
Bank balance	8	6.4
Nothing	22	17.6
Other (dan/chanda)	2	1.6
Total	125	100.0

Source: Field Survey, 2007.

Table 4.3.4, shows that 47.2 percent of the elderly people have assets (land, gold, silver, live stocks etc) as a main source of income. They fulfill their economic needs earned from this property. Likewise, 20.0 percent of the elderly main income source is old age or widow allowance. And 17.6 percent of them do not have any source of income. Pension, Bank Balance and Dan Chanda is the main source of income of 7.2, 6.4 and 1.6 percent of the elderly respectively. Among the assets land is the main source of income for elderly. Most of the female elderly do not have any source of income.

4.3.5 Aged/Widow Allowance and the Elderly

Nepal government has participated in many international conferences and signed in declarations for the welfare of the elderly people. Aged people above 75 and widows above 60 get old age and widow allowance under the social welfare program. Although it's effectiveness and accountability is

questionable. This programme is regarded as milestone in the field of social welfare of elderly. It is necessary to evaluate the pros and cons of programme and take necessary steps to provide it in the hands of targeted group. Following table shows the knowledge among the elderly about the old age or widow allowance

Table No.4.3.5.1

Distribution of the Elderly by Knowledge of old Age/Widow Allowance

Knowledge	Number	Percent
Yes	115	92.0
No	10	8.0
Total	125	100.0

Source: Field Survey, 2007

According to table 4.3.5.1, 92.0 percent of the elderly of study area have known about old age/widow allowance and 8.0 percent of them do not have any idea about it. As the economical status of the elderly is not good, they are found having keen interest about it.

Table No.4.3.5.2

Distribution of the Elderly by Getting Old Age/Widow Allowance

Getting old age/widow allowance	Male	Female	Total	Percent
Yes	19	16	35	28.0
No	46	44	90	72.0
Total	65	60	125	100.0

Source: Field Survey, 2007

But only 35 elderly people (28.0%) are getting the elderly/widow allowance and 90 elderly people (72.0 %) do not get aged/widow allowance. The study is also focused on the process of receiving allowance by the elderly that is distributed in following table.

Table No. 4.3.5.3

Distribution of the Elderly People by the Process of Receiving Aged/Widow Allowance

Process	Number	Percent
From office	12	34.3
NGO's	0	0
In house	5	14.3
Security institution	0	0
Family members	18	51.4
Total	35	100.0

Source: Field Survey, 2007

Table 4.3.5.3 shows that 51.4 percent of the elderly get old age/widow allowance by the help of family members. Likewise 32.3 percent get it directly from office and rest 14.3 percent are paid in their own house by office staffs.

This study also aims at identifying the reason for not receiving aged allowance by the elderly which is presented in following table.

Table No.4.3.5.4

Distribution of the Elderly People by Reasons for not Receiving Aged / Widow Allowance

Reason	Number	Percent
Lack of citizenship certificate	5	5.5
No one helps	6	6.7
Not necessary	0	-
Age limit	69	76.7
Don't know	10	11.1
Total	90	100.0

Source: Field Survey, 2007

Table 4.3.5.4 shows that 76.7 percent of the elderly reported the age limit as a main reason for not receiving the aged allowance followed by 6.7 percent no one helped them to receive it. Likewise, 11.1 percent of the elderly don't know about it and 5.5 percent replied they do not have citizenship certificate.

Similarly following table gives information about the use of allowance by the elderly for different purposes.

Table No.4.3.5.5

Distribution of the Elderly by Use of Allowance

Allowance used for	Number	Percent
Shoes/sandal/clothing	10	28.6
Medicine	8	22.8
Tea/smoking/pocket money	7	20.0
Gift for grand children	5	14.3
Other	5	14.3
Total	35	100.0

Source: Field Survey, 2007

Table 4.3.5.5 clears that 28.6 percent of the elderly use allowance for buying shoes, sandals, clothes, 22.8 percent use it for medicinal purpose 20 percent for tea, smoking and as pocket money and 14.3 percent use it for buying gift for grand children and other purpose.

4.3.6. Economic Participation and the Elderly

The elderly in the family are regarded as manager in the offices. They supervise and control the economy of the family. Mostly the elderly are found involving in small and cottage industries like making “Doko, Dalo, Namlo etc. which plays significant role to fulfill the economical needs of family. They also teach traditional skills of metal work, wood work, to their children. By helping family member in household works as caring grand children, cooking food, raring cattle they make free to economically active members of family. Following table provides us information on pattern of the elderly in household activities and economy of family.

Table No.4.3.6

Distribution of the Elderly People by their Pattern of Participation in Household Activities

Pattern of participation	Number		Total	percent
	Male	Female		
Advising	19	11	30	24.0
Teaching the skills	8	4	12	9.6
Physical labour	10	5	15	12.0
Providing money	8	2	10	8.0
Technical knowledge	4	3	7	5.6
Help in house hold work	12	34	46	36.8
Other	4	1	5	4.0
Total	65	60	125	100.0

Source: Field Survey, 2007

According to table 4.3.6 the highest (36.8%) of the elderly respondents are found involving in household activities as guarding house caring grand children. Female number is remarkable in this category, 24.0 percent of the elderly advise in different activities for smooth running of family. Similarly the percentage of the elderly teaching the skill, providing physical labor, teaching technical knowledge and other is 9.6, 12.0, 8.0, 5.6 and 4.0 respectively.

4.4 Information on Health Status of the Elderly

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 diseases, 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.

4.4.1. Disability and the Elderly

When the people get older naturally their physiology and mental capacity gradually decrease which creates problems for them. That is known as disability. The following table provides some information about the disability of the elderly in study area.

Table No. 4.4.1.

Distribution of the Elderly by Disability

Type of disability	Number	Percent
Physical disability	37	29.6
Poor eyesight	23	18.4
Poor hearing power	19	15.2
Mental disability	7	5.6
Toothache	21	16.8
Nothing	18	14.4
Total	125	100.0

Source: Field Survey, 2007

Table 4.4.1 shows that 14.4 percent of the elderly do not have any disability. But 65.6 percent of the elderly are suffering from different disabilities. Out of them 18.4 percent have poor eyesight, 16.8 percent of the elderly respondents reported they are suffering from toothache. 15.2 percent reported they are suffering from poor hearing power 29.6 percent are suffering from mental disability as loss of memory power and reasoning power.

4.4.2. Common Suffering/ Diseases and the Elderly

Above mentioned in table 4.4.1 are the specific types of health problem of the elderly. Again following table gives us information on the general physical problems of elderly.

Table No. 4.4.2

Distribution of the Elderly by the Types of Common Suffering Disease

Common Diseases	Number	Percent
Diabetes	3	2.4
Blood pressure	14	11.2
Back bone pain	26	20.8
Swelling of muscles	16	12.8
Joint pain	28	22.4
Other (fever, headache)	20	14.4
Nothing	18	16.0
Total	125	100.0

Source: Field Survey, 2007

Table.4.4.2 shows 22.4 percent of the elderly are suffering from joint pain. Likewise 20.8 percent of the elderly are suffering from backbone pain. Similarly swelling of muscles is for 12.8 percent of the elderly. About 11.2 percent reported blood pressure, 2.4 reported Diabetes. Similarly 14.4 percent are suffering from other problems like fever, Gastro-intestinal diseases, headache etc.

4.4.3 Place for Treatment During Suffering and the Elderly

In study area variety of traditions are followed. System of visiting Dhami/Jhankri is still in practice. A health post and some clinics are there in study area. District hospital and a Mission Hospital (Team Hospital) are fully equipped modern hospitals. Availability of modern hospital is not every thing. People must have belief and positive thinking towards these hospitals and must utilize the facilities. Following table shows the practice of the elderly visiting different places during sufferings.

Table No. 4.4.3

Distribution of the Elderly by Treatment Place During Suffering

Treatment place/system	Number	Percent
Health post	25	20.1
Dhami/Jhankri	44	35.2
Baidhya	24	19.2
Modern hospitals	15	12.0
Clinics	17	13.6
Total	125	100.0

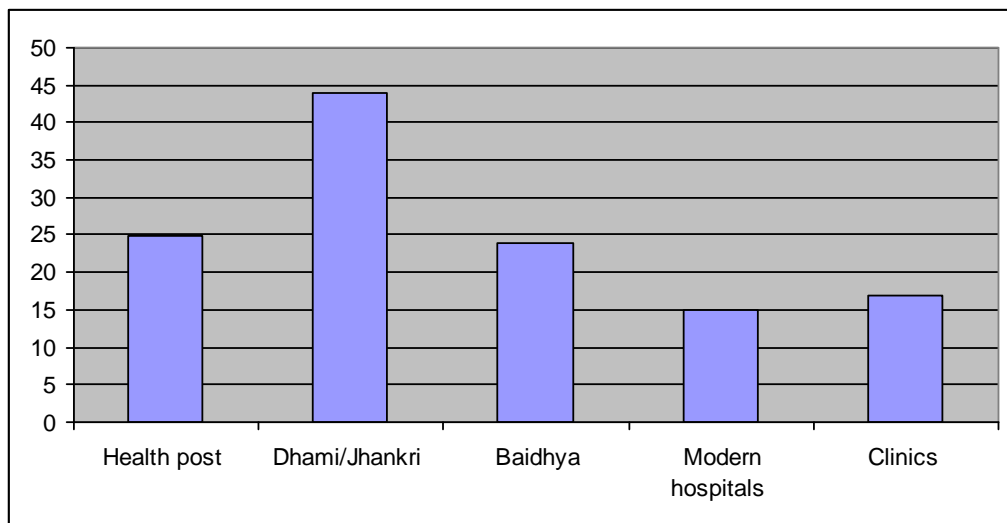
Source: Field Survey, 2007

Table 4.4.3 shows the highest (35.2%) number of the elderly reported that they go to Dhami and Jhankri at first if they suffer from any health related problems. About 20 percent of the elderly go to health post, 19.2 percent take help of Baidhya, 13.6 percent of the elderly reported they go to clinics during sufferings and only 12.0 percent go to modern hospitals.

The following figure can help to analyze the above situation

Figure No. 3

Distribution of the Elderly by Treatment Place During Suffering



4.4.4 Desired Health Services and the Elderly

There are different reasons of the elderly for not utilizing the modern health services. The elderly people may have physical weakness. They may not travel long distance. Due to lack of education they might be going to traditional healers. Economically also they are not sound. Some of the elderly may not have helped by other during need. It is the prime responsibility of government to provide affordable health services to its people. In this regard the elderly people have also some expectations from government about their health care. The desire and demand of health service according to respondents is given below.

Table No. 4.4.4

Distribution of the Elderly According to Their Desired Health Services

Desired Health Service	Number	Percent
Mobile health camp	38	30.4
Free health check-up	25	20.0
Free treatment	28	22.4
Discounts	16	12.8
Free transportation	10	8.0
Separate bed and wards in hospital	8	6.4
Total	125	100.0

Source: Field Survey, 2007

Table 4.4.4 shows that 30.4 percent of the elderly expect mobile health camp in their locality time to time. Likewise 22.4 percent of the elderly expect free treatment system for the elderly people. Other 20 percent

of the elderly desired for free health check ups and only 6.4 percent reported they need separate bed and wards in modern hospitals.

4.5 Information on Psychological Status of the Elderly

This section of data analysis explores the facts on thinking, feelings, views, expectations of the elderly in study area. Naturally reasoning and memory power of old people decreases with passage of time. Weakness and disability leads them towards dependency in family members. They may feel domination and torture in the family and society. Feeling of loneliness and lack of love and affection is another mental problem of elderly. Different psychological characteristics of the elderly are described in different heads.

4.5.1 Feeling of Domination/Torture and the Elderly

With the increase in the elderly share, their problems are also increasing. Mainly due to modernization, behaviors of the people towards the elderly are also changing. Traditional practice of respecting the elderly is gradually decreasing. In this context following table gives information about the elderly feelings.

Table No. 4.5.1

Distribution of the Elderly by Feeling of Domination/Torture

Feeling of domination	Number	Percent
Yes	80	64.0
No	45	36.0
Total	125	100.0

Source: Field Survey, 2007.

Table 4.5.1 shows that 64.0 percent of the elderly of study area feel domination and torture in family where as 36.0 percent of the elderly of

study area do not feel any type of domination. They reported being satisfied with the behavior of family members.

4.5.2 Type of Domination/Torture and the Elderly

The elderly people become more vulnerable in the society by the torture from their family members and they feel isolated from family. The additional question was also asked among those old people who were tortured in the family to find the types of torture.

Table No. 4.5.2

Distribution of the Elderly by Type of Domination/Torture

Type of domination/torture	Number	Percent
Food discrimination	12	15.0
Scolding, verbal abuse	42	52.5
Mental torture	18	22.5
Physical torture	6	7.5
Violence	2	2.5
Total	80	100.0

Source: Field Survey, 2007

Table 4.5.2 shows that 52.5 percent of the elderly reported that they are feeling domination by scolding and verbal abuse of family members. Likewise, 22.5 percent are mentally tortured. And 15.0 percent felt the food discrimination, 7.5 percent are physically tortured and 2.5 percent of the elderly felt the violence in the family. The elderly people were very sad while replying this answer. Even some the elderly women started crying. It is due to unexpected happenings in their family.

4.5.3 Daily Activities and the Elderly

It is very difficult for the elderly people to adjust with their daily routine. Many old people 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 are isolated from the family members. Loss of life partner and friends makes them very sad and it creates adjustment problem. By the social systems and culture also daily activities of the elderly are affected. The statistical fact that is found in study area about daily activities of the elderly people is given below.

Table No. 4.5.3
Distribution of the Elderly by Their Daily Activities

Daily activities	Number	Percent
Household works (including agriculture)	60	48.0
Reading books & Newspaper	2	1.6
Caring grand children	20	16.0
Performing religious activities	7	5.6
Meeting talking with mats	10	8.0
Listening radio	5	4.0
Other (Daily wages, cattle raring)	21	16.8
Total	125	100.0

Source: Field Survey, 2007.

Table 4.5.3 tells that the highest (48.0%) of the elderly respondents reported their daily activity is to perform household works as cooking food,

helping family members in agriculture etc. Likewise, 16 percent of the elderly pass their time taking care of grand children. And 8 percent of the elderly meet their mats and pass time sharing the talking. Similarly 4.6 percent of the elderly take help of radio to pass time and only 1.6 percent of the elderly are fond of reading books to pass their time. Other category includes the elderly passing a day involving in daily wages, collecting fodder for cattle, cattle rearing etc.

4.5.4 The Elderly People and Their Expectations from Family

Family members are most hopeful persons for elderly. For the expectation of love and care during the elderly ages they give birth to babies. They sacrifice their happiness of life for the welfare of their children so that they will care them in retired ages. The question was asked to the elderly about their expectations from the family. The response is given below.

Table No. 4.5.4

Distribution of the Elderly People by Their Expectation from Family

Expectation	Number	Percent
Love and affection	31	24.8
Physical care	19	15.2
Food in time	28	22.4
Support and care	16	12.8
Happiness	18	14.4
Other	13	10.4
Total	125	100.0

Source: Field Survey, 2007.

Table 4.5.4 clears that 24.8 percent of the elderly expect love and affection from their family members. About 22.4 percent of them expect food in time. 15.2 percent want physical care from family members. Likewise 10.4 percent of them expect taking them for tour like visiting Sacred/holy places, relatives, and some of them are happily spending their life in house and they expect the continuity.

4.5.5 Rational of Religious Activities and the Elderly

It is already mentioned that almost all the elderly people of study area follow Hindu religion. They blindly believe on god and worship to god and goddess. According to Hinduism after 75 it is the age of “Banaprasthan” (going to forest) for the peaceful departure of the soul in heaven after their death and to be away from the sins during their childhood and adulthood. Besides there may be various reasons for the elderly behind visiting the temples and worshipping god and goddess. The rational of religious activities for the elderly is given below.

Table No. 4.5.5

Distribution of the Elderly People by Rational of Religious Activity

Rational	Number	Percent
Prosperity of off springs	22	17.6
To be free from sins	29	23.2
Mental satisfaction	17	13.6
Protect and follow tradition	30	24.0
Achieve heaven	25	20.0
Recreation	2	1.6
Total	125	100.0

Source: Field Survey, 2007.

Table 4.5.5 depicts that 24 percent of the elderly respondents reported that they perform religious activities due to tradition. Likewise 23.2 percent of the elderly reported that they do it for being free from the sins committed knowingly and unknowingly. About 20.0 percent of them perform it for achieving heaven after the death and only 1.6 reported that they perform religious activities for recreational purpose.

CHAPTER - FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Summary of Findings

The study area Siddhapur VDC is situated at far-western Hill in Baitadi District. Which is far behind the main stream of development, the elderly in study area constitute 6.68 percent of its total population. The sex ratio of the elderly in study area is 108.20. Total number of Aged males above 60 is 132 and female population above 60 is 122. 65 males and 60 females are chosen by simple random sampling method for the study. The major findings obtained from the study are summarized below.

According to age sex composition of the elderly in study area, majority of the elderly respondents (33.6%) belongs to age group 60-64. except 65-69 age group in each age groups the male elderly people's number is higher. There are only 4.8 percent the elderly respondents belonging to above 80 years age group in study area. In the same way on the basis of ethnicity Bhatt (17.6%) are the largest ethnic group. The elderly belonging to Dhant is 3.2 percent that belongs to Chhetri is the lowest ethnic group. An overwhelming majority of respondents (96.8%) are ever married. And other (3.2%) were unmarried. Similarly (42.1%) percent of the elderly are currently married and having single spouse. The literacy level of the elderly seems very poor in study area, which constitutes 72 percent illiterate the elderly people. Out of 28 percent of the literate elderly almost of them have passed primary level only. Their percent is 34.3 and only 5.7 percent of the elderly have completed diploma and above. On the basis of past occupational distribution majority (49.6%) of them followed agriculture

followed by cattle rearing (11.2%) a supportive profession to agriculture. The least (8.0%) of the elderly people's occupation is carpentry and daily wages. An interesting fact is that all the elderly respondents follow Hindu religion in study area.

In second section of data analysis data on familial and social background of the elderly are included. The majority (70.4%) of the elderly has joint family and remaining (29.6%) have nuclear family. On the basis of age at marriage 38.4 percent of the elderly married in the age group 10-14 followed by 24.0 percent married below the age 9. Only 1.6 percent got married above the age 30 years. Majority (38.4%) of the elderly have 5-6 children followed by (25.6%) the elderly having 3-4 children. Remarkable 9.6 percent of the elderly have above 7 children. 57.6 percent aged people are living with their son and daughter in law. Similarly 21.6 percent are living with spouse and 2.4 percent stay with daughter/son in law and other relatives. In study area majority (64.0%) are satisfied with their present living. Out of 25 (16%) unsatisfied elderly most of them (40%) wanted to stay with their son and daughter in law. 29.6 percent of the elderly do not have any role in decision making process where as 25.6 percent of them decide about division of household labour followed by 12.8 percent deciding marriage of off springs. Very less females are found involving in decision making on family affairs. Only very few (8.0%) elderly decide about selling and buying valuable things. Son/daughter in law (33.6%) is as a food provider in the family to the elderly followed by their own (28.8%). Only for 1.6 percent of the elderly respondents their daughter/son in law provide them food with reference to food taking system 59.2 percent of the elderly take their food twice a day followed by 16 percent taking food thrice a day.

Majority of the elderly (36.8%) are helped by their son/daughter in law in family in hygiene and 28 percent manage it themselves.

The third part of the data analysis is related to economic status of the elderly in study area. According to occupational status of the elderly agriculture (36.0%) is main occupation. Some of them have changed their past occupation agriculture now, following household work (22.4%) and child caring (16.0%) respectively. Very less (7.2%) are retired from jobs. Rest others are involved in Daily wage, animal rearing etc. In study area 60.0 percent of the elderly have land ownership. Out of 125 elderly people 69.6 percent of the elderly have something property as Jeuni, Daijo. Comparatively more males have property ownership than females. Out of ownership holders majority of them (58.6%) have land as property. Livestock as a property is of 9.2 percent elderly. The major source of income for the elderly is assets (47.2%) like land, gold, silver. Likewise 20.0 percent reported old age/window allowance as major source of income. Some of the elderly (17.6%) do not have any source of income. Almost of the elderly of study area (92.0%) have something knowledge about old age/window allowance but 28 percent of them are only receiving it. Out of 35 elderly people getting old age allowance 51.4 percent get it by the help of family members where as 34.3 percent get it themselves from office. Out 90 the elderly people, majority (76.7) of them doesn't get it due to age limit. The 28.6 percent aged/window allowance receivers use it for shoes/sandal/clothing and 22.8 percent use it for medical purpose. Almost all the elderly are directly or indirectly involved in economical activities but majority (36.8%) help in household work only. Female's percent (56.7) is

remarkable in this category and other 24.0 percent of them advise their family members.

With reference to health status of the elderly people in study area 85.6 percent of the elderly have something disability where as 14.4 percent reported they are healthy. Joint pain as a major health problem of majority (22.4%) of the elderly. Likewise 20.8 percent suffer frequently from back bone pain. Diabetes is a problem for only 2.4 percent of the elderly. Most of the elderly (35.2%) take help of Dhami/Jhankri for treating diseases. Likewise 20.0 percent of them go to health post, 19.2 percent go to Baidhys. Very less (12.0%) elderly go to modern hospitals for treatment. In case of desired health service majority (30.4%) demanded for mobile health camp in locality and 22.4 percent wanted free treatments. Very few elderly people (6.4%) desired for separate bed and ward in hospital for them.

With regard to psychological characteristics of the elderly in the study area they have many expectations from family, society and nation. It is the negative aspect of study that the majority (64.0%) of the elderly reported they are feeling domination in their family. Most (52.5%) of them are dominated by scolding or verbal abuse. In case of 22.5 percent of the elderly they are mentally tortured. The worst form of domination violence is for 2.5 percent elderly. About 48.0 percent of the elderly people's daily activity is household work and 16.0 percent of the elderly involve themselves in caring grand children. Only very less (1.6%) elderly pass a day by reading religious and other books. Majority (24.8%) expect love and affection from their family. Similarly 22.4 percent expect food in time, 15.2 percent expect physical care from family members. Almost all the elderly people worship god and goddess for different purpose. Majority of them (24.0%) do it for

simply following the tradition and protect it. About 23.2 percent perform religious activity to be free from sins. Like wise 17.6 percent perform it for prosperity of their children. It shows the love and affection of old people towards their children up to the last stage of their life.

5.2 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 to day with modernization. A clear picture on the various aspects of the elderly has been obtained from this study in study area.

In Siddhapur VDC, Bhatta are the largest the elderly ethnic groups. Although the territory and population of study area is small it constitutes verity of ethnic groups. Marriage prevalence rate among the elderly is very high and the age at marriage is quite early. The literacy level of the elderly is very poor. Almost of the elderly women's of study area are illiterate. Agriculture is the main occupation of the elderly people. All the elderly people follow Hindu religion in study area.

Joint family system is followed by most of the elderly people. "Children as a gift of god" is proved by them. Discrimination between son and daughter and compulsion of son is prevalent in the elderly people of study area the elderly people mainly depend up on their son and daughter in law for care. Most of the elderly consume the food prepared by their son/daughter in law and some of them prepare it themselves & provide other members too. Taking food twice a day is mainly practiced by the elderly.

Most of the elderly people were found involving in household activities and caring grand children. Among them more females are in such activities. Almost of the elderly males have ownership of land which is main source of income and livelihood for them. Due to poverty among the elderly they keep the knowledge of old age and widow allowance which is as milestone to fulfill their economical needs. Family members also do better care of the elderly with the hope for allowance. Although the allowance is of vital importance almost of the elderly do not get it due to their age limit. The help provided to family members for economical benefit carry significant role.

Health status of the elderly in study area is not satisfactory. Most of them suffer from disability. Back bone pain, joint pain, poor eyesight and loss of hearing power are the main health problem for the elderly. Motivation towards modern health facilities is there but they are frustrated by insufficient and costly facilities. A large mass of the elderly still believe in Dhami/Jhankri. This reflects the ignorance of the elderly in study area. Due to the war, especially after 2055 B.S. most of them spent miserable life by the migration of their young family member to Terai or in India. They are hopeful now the long lasting peace and prosperity will be there in the country and the developmental process will be faster. They also hope the mobile health camp and other health facilities for them.

Most of the elderly people of study area felt domination in their family. Daughter in law, in absence of son and grand children do not behave with them properly. Many of them simply pass their time doing household activities. Most of the elderly expect love, affection, timely food and physical care from their family members and from society. The elderly

people are too spiritual but poverty is the main enemy which does not let them to visit Dhams. The purpose of doing religious activity is to follow tradition, to be free from sins achieve heaven and for prosperity of their children. Despite lot of physical & mental problem most of the elderly are still supporting their family members by providing physical labour, advising, supervising and helping to care grand children. Role of the elderly people is significant in non- beneficiary works as house hold labour division, marriage of off-springs but they are neglected when the income related matters to be decided. The respect they used to get from the juniors & young generations in the past time is gradually decreasing in study area.

5.3. Recommendations

The elderly people's life is affected mainly by the features of three levels namely family, society and nation. As a member of a state the elderly people are a lot of hopeful toward the government. In the same way they expect many things from their own community level where they have contributed a lot for its development during their adulthood. The lowest but most valuable place for the elderly is family for their happiness and survival. Keeping in mind the conclusions and finding of the study following points are recommended at family, community and national level to uplift the situation of the elderly.

5.3.1. At Family Level

Following are the recommendations at family level.

-) Food is basic need for all the living beings considering the degrading health condition of the elderly they must be provided nutritious food every day, in time.

-) In some cases, the elderly are feeling physical and mental torture and violence by family members. A secured environment should be developed in the family.
-) Both the positive and negative aspect of our culture are changing with the modernization. A respectable place of the the elderly is challenged by new generation. Positive attitude among family members towards the elderly should be developed.
-) The elderly should get love, affection, physical care and mental satisfaction from the family members.
-) Provision of the elderly consulting in important family affairs should be made.
-) Opportunity of full utilization of past knowledge skill and experience to the elderly is necessary to uplift the family condition.
-) Family members must play vital role to maintain the good health of elderly.

5.3.2. At Community Level

Following are the recommendations at community level

-) Participation of the elderly people is to be ensured in all kind of developmental activities in society.
-) Wages equality for the elderly with others should be maintained in all kind of labour activities along with other facilities.
-) Opportunity to utilize their skill, knowledge and experience for over all social development should be given.

-) Construction of temples, libraries, yoga centers should be given for the entertainment of elderly.
-) NGO's established at local level should concentrate themselves to solve the elderly people's problems and provide facilities to them.
-) Seminars should be organized at community level related to the elderly welfare.
-) Establishment of some social institutions like the elderly homes day care centers for the disable, isolated and neglected the elderly peoples should be made.

5.3.3 At National Level

-) First of all a nation wide detailed study on the elderly situation should be conducted which will help to collect actual scenario of the elderly people.
-) To increase awareness level of children adults, each level of school curriculum and informal educational sector should include the elderly care and moral education.
-) Perfect need oriented policies should be made for the elderly with guarantee of implementation.
-) Mobilization of private sector and international community i.e. NGO's & INGO's in sector of the elderly welfare programs.
-) Immediate attention should be paid about the degrading health status of all the elderly in the country and some effective programs should be managed.

-) Aged allowance is largely accepted by elderly. But many are deprived from getting it due to criteria for getting it. It should be made more practicable and effective.
-) Poverty is the main enemy not only for the elderly but also for many Nepalese people. Evaluation of existing programs on poverty alleviation and some new programs should be launched in new changed context.

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Questionnaire

The main objective of this questionnaire is to collect the information's on socio-economic, demographic health and psychological characteristics of elderly living in Siddhapur VDC, Baitadi. It also focuses to find out the various problems and contributions of elderly in their family and society.

District: Baitadi

VDC: Siddhapur, ward No.

Name of Household head:

Part - I : Family Description

S.N	Name of the respondents & family members	Sex	Age	Caste/ Ethnicity	Marital status	Education	Occupation	Relation with H.H	Religion
	1	2	3	4	5	6	7	8	9
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

Codes for questions:

Q.2 i) Male ii) Female

Q.4 1) Bhatta 2) Bisht 3) Sharki 4) Panta 5) Dhant 6) Chand 7) Awasthi 8) other

Q.5 1) Never Married 2) Ever married : i) Multiple spouse ii) Re-married iii) Widow iv) Separated v) Other

Q.6 1) Illiterate 2) literate: i) Primary ii) Lower secondary iii) Secondary iv) Higher secondary v) Diploma and above vi) Other

Q.7 1) Agriculture 2) Service 3) Business 4) Carpentry 5) other

Q.8 1) Self 2) spouse 3) son/daughter in-law 4) Grand son/daughter/daughter in-law 5) Daughter /son in-low 6) Other

Q.9 1) Hindu 2) Buddhist 3) Christian 4) Islam 5) Kirat 6) Other

Part - II : Information on Family and Social Status

S.N	Questionnaire Description	Answer Keys (content)	Answer code
1	What was your age at marriage?		
2	How many son and daughters do you have	1. Sons 2. Daughters	
3	With whom are you living?	1. Self/alone 2. Spouse 3. Son/daughter-in-law 4. Daughter/son in-law 5. Grand children 6. Brother 7. Other relatives 8. Others	
4	Are you satisfied with your current living ?	1. Yes 2. No	
5	If no, to whom do you wish to live?	1. Self/alone 2. Spouse 3. Son/daughter-in-law 4. daughter/son in-law 5. Grand children 6. Brother 7. Other relatives 8. Others	
6	Is/Are your child/children out migrated? (except married daughters)	1. Yes 2. No	

7	If yes, where have they gone?	<ol style="list-style-type: none"> 1. Foreign country 2. Kathmandu 3. India 4. Terai 5. Others 	
8	Do they send money/cloths for you?	<ol style="list-style-type: none"> 1. Yes 2. No 	
9	Who decides the following in your family?		
	a) Division of household labor		
	b) Marriage of offspring		
	c) Selling and buying valuable things		
	d) Religious functions		
	e) Family ceremony		
	Code of the above questions	<ol style="list-style-type: none"> 1. Self 2. Husband/wife 3. Son/daughter-in-law 4. Daughter/son in-law 5. Grand children 6. Brother 7. Other relatives 8. Others 	
10.	Who prepares food for you?	<ol style="list-style-type: none"> 1. Self 2. Husband/wife 3. Son/daughter-in-law 4. daughter/son in-law 5. Grand children 6. Others 	

11	Are you getting enough food according to your desire?	1. Yes 2. No	
12	How many times in a day do you get food?	1. Once 2. Twice 3. Thrice 4. Four times 5. Five times 6. Others	
13	Who helps you in your personal hygiene?	1. Self 2. Husband/wife 3. Son/daughter-in-law 4. daughter/son in-law 5. Grand children 6. Others	

Part - III : Information on Economic Status

14	What was your past occupation?	1. Agriculture 2. Daily wage 3. Business 4. Service (India) 5. Service (NG) 6. Others	
15	If service do you get pension now?	1. Yes 2. No	
16	Do you have ownership of land?	1. Yes 2. No	

17	If no, what happened to the land?	<ol style="list-style-type: none"> 1. Transferred in son's name 2. Transferred in daughter's name 3. Taken by others 4. Others 	
18	Do you have any PEWA/JEUNI?	<ol style="list-style-type: none"> 1. Yes 2. No 	
19	If yes, what is the type?	<ol style="list-style-type: none"> 1. Land 2. House 3. Livestock 4. Others 	
20	Are you correctly working for any economic benefit?	<ol style="list-style-type: none"> 1. Yes 2. No 	
21	If yes what is your income generating activity?	<ol style="list-style-type: none"> 1. Govt./organizational job 2. Agriculture 3. Trade 4. Animal rearing 5. Others 	
22	What is your source of income?	<ol style="list-style-type: none"> 1. Pension 2. Old age allowance 3. Assets(land, gold silver) 4. Bank balance 5. Nothing 6. Others 	
23	Are your needs fulfilled by this income?	<ol style="list-style-type: none"> 1. Yes, fulfilled 2. Not fulfilled 3. Simple support 	

24	Do you know about old age allowance?	<ol style="list-style-type: none"> 1. Yes 2. No 	
25	Do you take it?	<ol style="list-style-type: none"> 1. Yes 2. No 	
26	If yes, what is your process of taking aged allowance?	<ol style="list-style-type: none"> 1. From office 2. NGO's 3. In house 4. Security institution 5. Family member 6. Others 	
27	If no, why do you not receive aged allowance?	<ol style="list-style-type: none"> 1. Lack of citizenship certificate 2. No one help 3. Not necessary 4. Others 	
28	Who uses the allowance?	<ol style="list-style-type: none"> 1. Self 2. Spouse 3. son/daughter in law 4. grand children 5. Others 	
29	If self, how do you spend it?	<ol style="list-style-type: none"> 1. Shoe/sandal/clothing 2. Medicine 3. Tea/smoking/pocket money 4. Gift for grand children 5. Others 	

30	Who takes responsibility on your special expenses?	<ol style="list-style-type: none"> 1. Self 2. Spouse 3. Son/daughter-in-law 4. Daughter/son-in-law 5. Grand children 6. Other relatives 7. Others 	
31	Do you give economic support to your family currently?	<ol style="list-style-type: none"> 1. Yes 2. No 	
32	If yes, How do you help in your family occupation?	<ol style="list-style-type: none"> 1. Advising 2. Teaching the skills 3. Providing physical labor 4. Providing money 5. Providing technical knowledge 6. Helping in household work 7. Others 	

Part - IV : Information on Health Status

33	Do you have any disability?	<ol style="list-style-type: none"> 1. Yes 2. No 	
34	If yes, what type of disability?	<ol style="list-style-type: none"> 1. Physical disability 2. Poor eye sight 3. Poor hearing power 4. Mental disability 5. Toothache 6. Others 	

35	Do you have any chronic diseases?	<ol style="list-style-type: none"> 1. Yes 2. No 	
36	What type of chronic disease is it?	<ol style="list-style-type: none"> 1. Diabetes 2. Blood pressure 3. Back bone pain 4. Swelling of muscles 5. Joints pain 6. Others 	
37	During the health problems who takes care for you?	<ol style="list-style-type: none"> 1. Self 2. Spouse 3. Son/daughter in-law 4. Daughter/son-in-law 5. Relatives 6. Organizations 7. Others 	
38	Where do you go for treatment during sickness?	<ol style="list-style-type: none"> 1. Health post 2. Dhami/Jhankri 3. Baidhya 4. Modern hospitals 5. Clinics 6. Others 	
39	Do you smoke or drink alcohol?	<ol style="list-style-type: none"> 1. Yes 2. No 	
40	If yes, what do you consume?	<ol style="list-style-type: none"> 1. Smoke cigarette/Bindi Tambakhu. 2. Drink alcohol 3. Chew tobacco 4. Others 	

41	In your opinion what is the main problem of elderly people?	<ol style="list-style-type: none"> 1. Diseases 2. Mental torture 3. Loneliness 4. Food insecurity 5. Isolation 6. Not cared by family 7. Others 	
42	In your opinion, what type of health service is needed to elderly from government side?	<ol style="list-style-type: none"> 1. Mobile camp 2. Free health check up 3. Free treatment 4. Free transportation 5. Discounts 6. Management of separate bed and ward in hospital 7. Others 	

Part- V : Information on Psychological Status

43	Do you feel domination/torture in your family?	<ol style="list-style-type: none"> 8. Yes 9. No 	
44	Who is the main dominating member in your family to you?	<ol style="list-style-type: none"> 1. Son/daughter in-law 2. Grand children 3. Owns spouse 4. Others 	
45	What type of discrimination torture do they give?	<ol style="list-style-type: none"> 1. Food discrimination 2. Scolding/verbal abuse 3. Mental torture 4. Physical torture 5. Violence 6. Others 	

46	How do you often spend your time?	<ol style="list-style-type: none"> 1. Doing household works 2. Reading books 3. Caring grand children 4. Performing religious activities 5. Meeting, talking with mats 6. Listening radio 7. Others 	
47	Are you satisfied and feeling comfortable to stay with your family?	<ol style="list-style-type: none"> 1. Yes 2. No 	
48	If no, where do you want to go to live?	<ol style="list-style-type: none"> 1. Son/daughter in-law 2. Daughter/son in-law 3. Neighbors house 4. relatives 5. Elderly houses 6. Religious place 7. Others 	
49	What do you expect from your family?	<ol style="list-style-type: none"> 1. Love & affection 2. Physical care 3. Food in time 4. Support & care 5. Happiness 6. Others 	
50	Do you visit temples and perform religious activities ?	<ol style="list-style-type: none"> 1. Yes 2. No 	

51	If yes, Why do you visit temples and perform religious activity?	<ol style="list-style-type: none"> 1. Prosperity of off spring 2. To be free from sins 3. Mental satisfaction 4. Protect & follow traditions 5. Best way of recreation 6. Others 	
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Thanks