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## **LIST OF ABBREVIATIONS/ACRONYMS**

CHC	:	Community Health Centre
Cs-Pro	:	Census Survey and Processing
CWE	:	Chief Wage Earner
NSS	:	National Sample Survey
PHC	:	Primary Health Centre
RMP	:	Registered Medical Practitioner
RSBY	:	Rashtriya Sawsthya Bima Yojana
SC	:	Sub Centre
SD	:	Standard Deviation
SEC	:	Socio-economic Classification
SPSS	:	Statistical Package for Social Sciences
UHC	:	Urban Health Centre

## **ABSTRACT**

**INTRODUCTION:** Ageing is a multidimensional process and it is said that old age is the closing period of the life of an individual. A person's activities, attitude towards life, a relationship to the family and work, biological capacities and physical fitness are all conditioned by the position in the age structure of the particular society in which he lives.

**OBJECTIVE:** The main objective of the study is to analyze health and social problems of elderly as well as their family and community support systems in West Delhi.

**Setting:** The study was conducted at West Delhi.

**Sample Size:** The total sample includes 242 elders, who were in the age group of 60+ years.

### **RESULTS:**

**CONCLUSION:** Special geriatric services should be started in the hospitals as the majority of the aged have one or more health-related problems.

The aged persons should be involved in social activities to avoid loneliness among them.

## **SALIENT FINDINGS**

I felt the need to carry out a study among elders of West Delhi to understand their problems, needs and the support system available at household and community level. I carry out a study among the West Delhi population aged 60 years and above. In total 242 elders (104 men and 138 women) were covered in this study. The salient findings of the study are presented below.

### **SOCIO-DEMOGRAPHIC PROFILE**

- The mean age of the Elders covered in the study is 66.58 years.
- More than two-thirds of the Elders (68.2 years) are widows/ widower or Divorced/ Un-married/ Separate. Only one third (31.2 years) of elders are currently married.
- Majority of the Elders covered in the study (87.6 percent) are illiterate.
- Majority of the Elders covered in the study (87.6 percent) are Hindus.
- Majority of the Elders covered in the study are scheduled caste/ scheduled tribe (43.4 percent) and other backward caste (39.7 percent).
- The mean number of children of the Elders is more than 4.46, with 2.33 sons and 2.12 daughters.
- Nearly two third of the Elders stay with sons, while one in five stay alone.
- Children working/living in another place is the major reason for the Elders staying alone with other reasons being 'no support from children' and 'having no children'
- Most of the Elders live in own house, with one third living in *semi-Pucca* house and nearby one half living in *kuchcha* house
- One third (36%) of the Elders has a monthly household income of less than Rs 2,500.
- Remittance from children and non contributory pension are the main sources of income of the Elders.

### **DEPENDENCY OF ELDERS**

- Nearly two third i.e. 64.9 percent of the Elders are financially dependent on others, mostly on son reported by 77.7 percent.
- The Elders depend on children to take care of them during ill health or any health related problems. However, the children don't always take care of them as half of the Elders also reported managing health problems on their own or with the help of spouse
- Around 53.3 percent Elders depend on daughter-in-law or children for daily routine chores

### **Experience of Abuse**

- One sixth of the Elders reported to have experienced any type of abuse, with verbal abuse and neglect being the most common form of abuse.
- The Elders also feel neglected, which further creates a psychological pressure on them.
- Among the abused Elders, more than three fourth reported to have faced health problem due to physical and economical abuse

### **HEALTH STATUS**

- More than half (53.3 percent) of the Elders interviewed consider their health status either to be poor or very poor
- The major health problems faced by the Elders include body pain, eyesight, hypertension, arthritis and asthma
- More than two third and half of the Elders reported respectively availability of Primary and private doctor/clinic respectively in their area.
- Government health facility is the top health facilities being utilized by the Elders for treatment of common ailments
- The health care expenses are met by children (69.8 percent) and their own savings of the elder.

### **SUPPORT SYSTEM**

- As regards the support system, if both husband and wife are alive, they give support to each other. But, if the Elders are alone then he/she faces a lot of problem in terms of health care facility and financial problems.
- One half of respondents reported that they need support from community but Non availability of support system at community level also emerges as an issue as 80% of the Elders reported so
- NGO involvement in work related to Elders seems to be low (3%)

### **WELFARE SCHEMES AND HEALTH INSURANCE**

- Awareness about the government health related welfare schemes and health insurance schemes for the Elders is also an issue as only one tenth and one fourth of the Elders reported awareness of the same respectively
- Awareness of Rashtriya Sawsthya Bima Yojana (RSBY) is low as 18.6 percent of the Elders being aware of the same out of which only 17.8 percent of elder covered under RSBU scheme.
- Only 5% of Elders covered under health insurance schemes

### **NEEDS OF ELDERS**

- Various needs and requirements reported by the Elders include ‘free treatment’, ‘health care’, ‘financial aid’, ‘pension scheme’ and ‘separate hospital for Elders’.
- Health care provider strongly recommended that, people aged 60+ years need respect in family, security, emotional, mental and family support which is desirable for providing them a healthy life.
- They also suggested that, actual benefit of governmental schemes is not reaching up to them, and hence there is a need for great effort to resolve this problem so as to ensure that everyone can benefited.
- Government should initiate some good health related schemes especially for 60+ people and all new and existing schemes should be available at each and every hospital.



## **RECOMMENDATIONS**

- As the findings indicate, the main concern of the elders is regarding health facilities/services. Therefore, more geriatric facilities need to be provided in hospitals and dispensaries.
- Outreach services should also be provided to the elders. Houses with elder's population should be identified and registered with their health status, issues/ concerns; this can be done by the local health functionaries.
- Since financial dependence on family members and others is a primary issue at this age, the elders should be provided free treatment and medicines or universal health insurance coverage that covers all types of health problems of the elders.
- Mobilization and community based support towards the elders also needs to be emphasized and worked upon. Efforts need to be made to sensitize the people especially the young generation towards the needs and concerns of the elders
- Abuse at family level is also an issue and the family members need to be educated about the harms of the elder abuse.