DEPRIVATION SCENARIO AMONG THE URBAN OLDEST OLD: A STUDY IN MEDINIPUR MUNICIPAL TOWN, WEST BENGAL

PARIKSHIT CHAKRABORTY

Abstract

The term 'Super Senior Citizen' is used to designate the elderly people above 80 years of age categorized by Department of Finance, Government of India for income tax assessment. However, the word 'oldest old' was coined in the annual meeting of the American Association for the Advancement of Science (AAAS) in 1984. The oldest old subpopulation in India is growing much faster than any other age group and due to their physical incapability they fall in peril situation which make them more dependent on others for their needs of financial support, medical assistance and social services etc. The present paper aims at highlighting the deprivation scenario found among the oldest old population residing in the urban areas of Medinipur Municipal Town. The scenario has been depicted on the basis of the first hand data collected by the author of the present paper on the aspects of financial support, living arrangement, house-hold chores, physical mobility, main source of care and measurement of activities of daily living (ADL)

of the oldest old population under study. Data has been collected from about 500 oldest old population (across both the sexes) living in urban areas of Medinipur Municipal Town in Paschim Medinipur district. Respondents were selected by random sampling method using random sampling table from 10 Municipal wards of Medinipur Municipal Town. The study demonstrates that deprivation depended on financial status where relationship does not matter for the oldest old individuals in studied area. In addition, on average, the female oldest olds under study are more deprived compared to the male counterparts.

Key Words: Oldest Old, Super Senior Citizen, Deprivation, Financial support, Living arrangement, Mobility, ADL

Introduction

In the year 2011, the Department of Finance, Government of India categorized such population as 'Super Senior Citizen' who are Indian citizens belonging to 80 years and above age for the purpose of income tax assessment (ENS Economic Bureau, The India Express, New Delhi, March 01, 2011). Before that, Government of India adopted 'National Policy on Older Persons' in January, 1999 (OASIS, 1999). The policy defines 'senior citizen' or 'elderly' as a person who is of age 60 years or above. Where, old age refers the ages nearing or surpassing the average life span of human beings.

However, the aged scenario in India, according to 2001 census, Super Senior population (80+ age group) increased to over 8 million who are of major concern to our society. The dimensions of supportive socio-economic and emotional infrastructure needed for this fast growing population is huge and it's a big challenge for the planners in the years to come (Prasad, 2011). As per 2011 Census, there were 104 million elderly (60+) in India, as compared to 70.6 million in 2001 and they are expected to cross 173 million by 2026. Out of 104 million elderly in 2011, 64 million are young-old i.e. in the age group 60-69, 28.4 million in the old-old age group 70-80 while 11.4 million are oldest-old i.e. above 80, of which 0.6 million are 100+ (Registrar

General, Government of India, 2013).

However, the term 'oldest-old' was coined in 1984 in a session at the annual meeting of the (AAAS) American Association for the Advancement of Science (Suzanne and Riley, 1985). On the other hand Neugarten (1974) developed the perception of old age. He characterized the old age view with the "young old" (60-70 years of old) and "old old" (70-80 years of old) [16]. But, unlike Neugarten's concept, which joined age with health, and social characteristics. The term oldest-old, in its basic usage, simply defined the chronological age group of those aged 80 and older, without implying that all or most of the oldest old were necessarily frail.

A person with reduced functional capability will have much more trouble in maintaining independence in the face of a disease than another of the same chronological age but with much greater functional reserve capacity. Material developments recommend that levels of serious ill health and disability are declining, resulting in increased life expectancy free of severe disability, although less severe ill-health and disability appear to be increasing (Suzman, Willis and Manton 1992; Manton, Corder and Stallard 1993; Manton, Stallard and Corder 1995; Kelly and Baker 2000; Dunnell and Dix 2000; Wanless 2002).

The aged persons are habitually depressed because of the social and economic insecurity that accompany demographic and development process (World Bank, 1994). Increase of selfishness and need for liberation and self-sufficiency of the young generation may be accused as guilty for the distress status of the aged population (Serow, 2001). Another study demonstrates that socio economic condition of older women is more deprived in the context of the demographic and socio cultural change (Tout, 1993).

Deprivation and exclusion are common phenomena in almost all ageing societies. The elderly in the developing countries also suffer from chronic deprivation and poverty as socio-economic relations change. Studies on the livelihood pattern of the aged in Africa show that poverty among the elderly is one of the challenges in the new millennium (Williams, 2003).

However, one of the social customs that in future children will take care of

the parents in the old age, is eroding in India, where the family size has been cut down as a result of the demographic process (Dandelkar, 1996). The situation in the urban areas shows a rejection of older people by the next generation and this is spreading to rural areas (Desai, 1985). In the nuclear family regime, the position of the aged becomes more vulnerable and is treated as a burden to the family (Nayar, 1992). The social negligence of the aged occurs due to cultural, social and economic relations within the society and its coexistence with demographic development (Achenbaum, 1978).

The elderly in India often end up in a state of deprivation and negligence since there is no proper social security system as in the Western world (OASIS, 1999). The majority of the elderly work in the informal sector with low levels of wages and deficient working conditions and this has also put the aged in a state of deprivation, vulnerability and distress in old age in terms of both health and economic security (Help age International, 2002). Empirical studies by different researchers have shown a gradual decline in the standard of life of the aged with high rates of dependency and lack of basic needs (Rajan, Mishra and Sarma, 1999; Rajan, 2004; Alam, 2007). The occurrence of economic, health and social insecurities are becoming common (Dey, 2000; World Bank, 2001; Priya, 2003; Alam, 2007).

However, deprivation and negligence of the aged person are burning issue in day to day life at contemporary stage. Anthropological perspective on aging study is based on evolution of the human aging, as well as livelihood differences in terms of deprivation of each individual. Since aging is a shadowy process during the course life. Therefore here, author of the present paper tries to capture deprivation scenario among the urban oldest old population.

Objectives of the Study

In the above background the present researcher aims to measure the financial support, living arrangement, house-hold chores, physical mobility, main source of care and measurement of Activities of Daily Living

(ADL), which taken together may lead to the understanding of consequence of deprivation among the urban oldest-old population across both the sexes residing in Midnapore Municipal Town.

Materials and Method

The present study was conducted among the oldest-old (80 years and above) population across both the sexes distributed over ten Municipal wards under Midnapore Municipal Town in the district of Paschim Medinipur, West Bengal, India. The wards selected are namely Ward Nos. 3, 4, 6, 7, 8, 9, 10, 14, 15 and 16.

For the purpose of locating and sampling the oldest-old population residing in the above mentioned municipal wards the present researcher downloaded the voters list of the Assembly Constituency no. 236, which is uploaded in the official website by the Election Commission of India in the year 2015. These lists, under its different part number, bear the names, age, sex and addresses of the voters residing in the different Municipal wards under Midnapore Municipal Town.

It appears from the said voter lists that there are altogether 566 'oldest old' people residing in the above referred municipal wards among whom 272 are male and 294 are female. However, for the present study the researcher selected 50 oldest-old across both the sexes from each of the ten Municipal wards under Midnapore Municipal Town respectively using systematic random sampling table which formed the sample size of 500 respondents.

In case of sampling of respondents the provisions were made for one substitutes from each municipal wards so as to replace the same in case of the originally sampled respondent were not available, unwilling or physically unfit to respond during the field survey.

After the sampling of the respondents a door to door survey was made to locate the specific address and/or residence of each sampled person. A few of our study participants expressed concern that their responses to our questions/interview may create misunderstanding within the family.

However, such difficulties were superseded.

Data on ADL assessments of the individual respondent have been collected by interview technique and observation method with the help of structured schedules based on the international standard of Katz's ADL index (Katz et al. 1970). Data on Physical Mobility was evaluated by using five levels, such as, bed ridden, slightly mobile, fairly mobile, mobility with wheel chair, and mobility with stick.

Data analysis is done with the help of SPSS 16.0 through paired simple t-test between discontinuous variables. Formula of paired simple t-test is given below which has been used for analysis.

The formula of t-test

$$t = \frac{\Sigma d}{\sqrt{\frac{n\left(\Sigma d^2\right) - \left(\Sigma d\right)^2}{n-1}}}$$

Tables and Discussions

Table: 1

Variables	Male		Female		Total	
	No.	(%)	No.	(%)	No.	(%)
Financial/ Economic Dependency:						
Independent	17	3.40	28	5.60	45	9.0
Partially Dependent	107	21.40	147	29.40	254	50.8
Fully Dependent	126	25.20	75	15.00	201	40.2
Living Arrangement:						
Only with Spouse	79	15.80	39	7.80	118	23.60
With married Sons	96	19.20	106	21.20	202	40.40
With unmarried Sons	28	5.60	37	7.40	65	13.00
With married daughter	17	3.40	58	11.60	75	15.00
With unmarried daughter	7	1.40	3	0.60	10	2.00

Living alone	**23**	**4.60**	**7**	**1.40**	**30**
6.00					
Nature of House-hold Chores:					
Helping hands during cooking	**7**	**1.40**	**78**	**15.60**	**85**
17.00					
Cooking food	**23**	**4.60**	**39**	**7.80**	**62**
12.40					
Gardening and Farming	**47**	**9.40**	**5**	**1.00**	**52**
10.40					
Sweeping	**33**	**6.60**	**12**	**2.40**	**45**
9.00					
Daily marketing of House hold necessities	**89**	**17.80**	**57**	**11.40**	**146**
29.20					
Miscellaneous light task	**51**	**10.20**	**59**	**11.80**	**110**
22.00					

Table – 1 deals with the financial dependency and livelihood components of respondents under study. The table reveals that with respect to 'Financial/ Economic Dependency' only 9% (where 3.40% are male oldest-old respondents and 5.60% are female oldest-old respondents) respondents out of the total number of the respondents are economically independent whereas, majority of the oldest-old respondents i.e. 50.8% (where 21.40% are male and 29.40% are female respondents) are partially dependent. 40.2% (where 25.20% are male and 15% are female oldest-old respondents) respondents are fully dependent. Therefore the records indicate that majority of the female oldest-old respondents are economically dependent compared to their male counterpart.

In case of 'Living arrangement' 23.6% of the respondents (where 15.80% are male and 7.80% are female respondents) are living with his/ her spouse

whereas, 40.4% (where 19.20% are male and 21.20% are female) respondents are living with their married sons but noticeable factor is that 6% (where 4.60% are male and 01.40% are female) respondents out of the total number of respondents are living alone. Therefore, the living arrangement wise distribution of the respondents indicates that most of the female oldest old respondents living in better condition compared to male counter parts under study.

'Nature of House-hold Chores' wise distribution shows 17% (where 1.40% are male oldest-old respondents and 15.60% are female oldest-old respondents) respondents are engaged as helping hands during cooking time whereas, 12.40% (where 4.60% are male and 7.80% are female) respondents are engaged into cooking of food and 10.40% (where 9.40% are male and 01% are female) respondents are engaged in gardening and farming. Therefore, involvement in house hold chores of the respondents indicates that under the category of helping hands during cooking time and cooking food have maximum engagement of female respondents compared to male counter parts, whereas, in other three categories such as gardening and farming, sweeping and daily marketing of house hold necessities displays that maximum engagement of male respondents compared to female counter parts under study area. The finding shows that most of the male respondents are directly or indirectly engaged in different types of household chores. This may not be good if it is done against the ability of the people.

Table: 2

Variables	**Male**		**Female**		**Total**	
	No.	**(%)**	**No.**	**(%)**	**No.**	**(%)**
Nature of Mobility:						
Bed Ridden	18	3.60	22	4.40	40	8.00
Slightly Mobile	82	16.40	94	18.80	176	35.20
Fairly Mobile	67	13.40	78	15.60	145	29.00
Mobility with a Stick	51	10.20	44	8.80	95	19.00
Wheel Chair	32	6.40	12	2.40	44	8.80
Main Source of Care:						
Spouse	89	17.80	5	1.00	94	18.8
Children	113	22.60	184	36.80	297	59.4

Kin Relatives	39	7.80	47	9.40	86	17.2	
Non kin relatives	9	1.80	14	2.80	23	4.6	
Activities of Daily Living Status:							
Active	62	12.40	76	15.20	1	3	8
27.60							
Mildly Disabled	88	17.60	82	16.40	1	7	0
34.00							
Severely Disabled	100	20.00	92	18.40	1	9	2
38.40							

Table – 2 deals with the health status of the oldest-old respondents under study. In this table in the category of 'nature of mobility' the oldest-old respondents demonstrate that minimum percentages of respondents belong to the status of bed ridden (8%) and mobile with wheel chair (8.80%). Maximum percentages of oldest-old respondents belongs to the status of slightly mobile (35.20%) and fairly mobile (29%). It appears from the table that majority of the female respondents are living with almost good mobility status compared to the male counter parts.

In case of caregivers main source of care at the time of illness is provided by respective spouses (18.8%). Children provide care for 59.8% respondents and 17.2% respondents are looked after by their kin relatives but it is also noticeable that 4.6% respondents are cared by the persons who are neither kin nor relatives. This may be due to the fact that either they are neglected by their respective family members or there is no one to look after them. However, the study showed that they were mostly neglected.

In case of Activities of Daily Living (ADL) it is found that across both the sexes 27.6% are active, 34% are mildly disabled and 38.4% are severely disabled as per the parameters mentioned in materials and methods of the present paper.

The ADL Status further shows that among the total number of male respondents 24.8% are active, 35.2% are mildly disabled and 40% are severely disabled. Similarly, among the total number of female respondents 30.4% are active, 32.8% are mildly disabled and 36.8% are severely disabled. ADL status is more or less similar for the studied people.

Finally, out of the total number of 138 'active oldest-old persons' 44.93% are male and 55.07% are female. The table also shows that among the total number of 170 'mildly disabled persons' 51.76% are male and 48.24% are female. Similarly, it is observed that among the total number 192 'severely disabled persons' 52.08% are male and 47.92% are female.
Following are two cases reported for better understanding of the oldest-old people under study.

Case Study – 1 :

Geeta Mandal (Name changed), is one of the female informants, aged 86 years, widow and has two Sons. She is presently living with her younger son's family at Tanti Geria in Ward No 4. Her son Tamal Mandal (Name changed) is a shop keeper and is 55 years old. In the year 2010 Geeta Mandal lost her husband who also was a shopkeeper. After the death of her husband Geeta Mandal stayed with her elder son in his house for the first six months and for the last six months she is staying with her younger son's family. Geeta Mandal is recipient of widow pension. In his sons house she did house hold chores, such as cooking, cutting of the vegetables, cleaning of the house floor. However, her son and his wife think that her mother-in-law is capable of doing such types of work. Geeta Mandal had no idea of her actual age. The author asked for her voter ID and came to know of her age. She told the author that her grandsons and granddaughter never paid any attention to her. She received Rs. 500 as widow pension. Her daughter in law never took care of her instead she took the money as part of her food and lodging. Geeta Mondal owned the homestead but she is afraid that if she did not give up her pension money to her daughter in law, she will be turned out of the homestead. She was very ill for sometimes last year and no one looked after her. Her sister's daughter lives about one kilometer away from her house, even she did not visit her. She felt that if she was not a widow pension holder and owner of the homestead, she would have been turned out any time.

Case Study – 2 :

Name of the informant is Rakesh Das (Name changed). He is 82 years old male who lives in a joint family with his wife, son, son's wife and son's children at Ashok Nagar under Ward No 4. Rakesh Das is a retired Indian rail way service man. He gets around Rs. 8,000/- (eight thousand rupees) per month as service pension. Rakesh Das pays Rs. 5000/- per month to his son to cover their cost of living. He also carries out some house hold chores like daily marketing for house hold necessities of family. He takes care of himself. Daily performance of personal care, such as, bathing, dressing, grooming, eating etc are done by himself. Sometime he feels that nobody takes notice of his age. He feels that his ability to work is diminishing everyday and he is advancing in his age everyday. Moreover, nobody excepting his wife gives him company. Everyone in the family including his grand children ignore him. His son and daughter in law never discuss any family matter with him. He feels that he is redundant in his own family. He appeared to be sad and much depressed and worried about his wife's future in his absence.

Conclusion

The above discussion and the two tables show that the oldest old people after reaching the age of 80 years are not leading a satisfied and happy life. It appears that the super senior citizens are still carrying workloads They are deprived at different times in different spaces by their respective family members.

After analyzing T-test into the different discontinuous variables such as financial/ economic dependency; living arrangement; nature of house-hold chores; nature of mobility; main source of care and activities of daily living status, where financial/ economic dependency is the control variables/ group in every t-test; the result shows that t-test between ADL status and economic dependency is 2.76 where p-value is .008118. Therefore the result is significant at $p < .05$. Afterward the t-test done on mobility and economic dependency shows that the t-value is 2.76 where the p-value is .016236.

Therefore the result is significant at $p < .05$. Thus, t-test done between main source of care and economic dependency, where t-value is 2.77 and the p-value is .007963. Therefore the result is significant at $p < .05$. Finally t-test is done between living arrangements and economic dependency and the t-value is 1.97, whereas, p-value is .034249 and the result is significant at $p < .05$.
However, every pair of t-test has significant value thus indicates that there exists a relation between economic dependency and other variables. That refers that economic dependency play key role for living a fruitful live. The study indicates that deprivation scenario depend on economic dependency, where relationship does not matter for the oldest-old respondents who served their families as well as relatives for a minimum of 80 years or more.

Concluding Remarks

Ageing is one of the foremost social challenges at present day, especially in the field of gerontological study in anthropology. Ageing study provides the fundamental key to understanding of a human life. Therefore, this study provides a deprivation scenario among the oldest-old respondents who are living in Medinipur Municipal town in West Bengal.
Deprivation among urban oldest-old population involves different aspects, namely, financial support, living arrangement, house-hold chores, physical mobility, main source of care and measurement of activities of daily living. The study also indicates that most of the female oldest-old individuals continued performing duties like helping hands during cooking and other activities to support their family.
However, despite some positive scenario mentioned above the oldest old respondents of Medinipur Municipal Town are seriously in disadvantageous position in many respects, which may be exemplified with the following facts: they were economically more dependent; most of them are partially dependent; a very good number of them (about 40% respondents) are fully economically dependent. Moreover, about 50% respondents were partially dependent, whereas, 9% of oldest-old were completely economically independent. However, this fact may be considered as one of the major factors

of deprivation in day to day life within their own family bondage. The study presents the consequences of deprivation among the urban oldest-old people in their daily life through an anthropological view point.

Since economic dependencies were found to have significant effects on the deprivation among the oldest-old people, the study raises the issue on deprivation and economic dependency. Finally, the present study may be helpful to raise the different issues like social dimension of aging in urban areas, successful aging in urban areas, problems of aging in urban areas and others in aged study especially in gerontological study for further researches.

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Bio-Profile of the Author

Junior Research Fellow
Anthropological Survey of India Field Station Ranchi
Kadru, Ranchi-834002
Email-parikshitchakraborty1@gmail.com