



A Study on Health, Social and Economic Problems of Elderly Population in An Urban Setting Kerala

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ABSTRACT

Background: *The present study was conducted to estimate the health, social and economic problems of elderly population in an urban setting in Kerala and also the utilization of primary health care services by them.*

Methods: *This study was done as a cross sectional study in an urban population. 152 people aged above 60 years was selected from the community using two stage cluster sampling technique. Data was collected using a structured pretested questionnaire by one to one interview technique. Data entry was done in SPSS version 15 and the results were expressed in percentages*

Results: *Regarding the health problems 35.5% was having acute health problems for the last one month. About chronic problems 81 % was having any one chronic problems and on treatment. 72 % is having more than one chronic problem. The self reported economic problems are, 42.2 % having a monthly income below 1000 rupees but 69 % said their income is inadequate to meet their expenses and 50 % is depending on family members for their expenses. The main social problems identified are abuse by the family members (32 %) quarrel with Family members and neighbours (27 %) .*

Conclusions: *The estimated acute and chronic morbidities and the social and economic problems are high among the elderly population and it is very relevant in a state like Kerala having the largest share o elderly population among the Indian states.*

Keywords: *Health problems, economic problems, social problems, utilization of primary health care services by elderly.*

Introduction

Ageing is a natural process that begins at birth and progress throughout one's life and ends at death. The world population is rapidly ageing. The UN defines a country as ageing when the proportion of people above 60 reaches 7%. But currently in India 8.% of population are elderly and it is expected that

this will reach 19 % in 2050¹. The increasing proportion of elderly people in the population puts welfare and health care systems as well as families under pressure .Many people living longer with chronic diseases put additional strain. The Government of India adopted National policy on older people in January 1999 to reaffirm the

commitment to ensure the well being of older persons Kerala has maximum proportion of elderly people in its population. 12.6 % of population is above 60 years of age². Kerala also got the highest life expectancy at birth among all the Indian states. Because of the advanced stage of demographic transition, the share of elderly population is higher in Kerala. The large elderly population coupled with higher prevalence of chronic illness among them contributing high burden of morbidities among them. Along with all these factors the society norms and family structure in Kerala are changing and the elderly are suffering due to the impact of this changing social scenario.

In this background a study was undertaken to estimate the health, social and economic problems among the elderly people and also the primary health care utilization by these people.

Objectives

1. To study the health, social and economic problems among the elderly population in an urban setting.
2. To study the primary health care service utilization by this elderly population.

Methods

Study design

This study was done as a community based cross sectional study to estimate the prevalence of health, social and economic problems of elderly population.

Study setting and study subjects

The study was conducted from 1st July to August 31st 2015 at field practicing area of Pangappara PHC, which is the urban health training centre attached to the Community medicine department of government medical college Thiruvananthapuram. Study subjects were all persons above 60 years of age and who are residing in the area for more than one year.

Sample size

Sample size was fixed according to a study done by Rakesh Kumar and Mohammed Shafee³ in Tamil Nadu, nearby state to Kerala, they got a prevalence of any one chronic morbidity among the elderly population a 65.2 %. so keeping the prevalence as

65 % and allowable error 12% of the prevalence (7.80) the sample size calculated as 149 and it was decided to study 150 people .

Sampling technique

A total of 152 participants were recruited from the field practice area of Govt Medical College Thiruvananthapuram by multi stage cluster sampling technique. Two wards were selected randomly and from each ward three Anganwadi areas were identified by random technique. From each selected anganwadi area, 25 eligible participants were recruited for the study in consecutive manner.

Ethical consideration

Informed consent was translated into the regional language Malayalam and a written informed consent was obtained from all the participants after explaining the purpose of research. Institutional ethical committee approval was obtained from Government Medical college Thiruvananthapuram

Data collection

Information was collected from the participants using the pre-tested interview schedule through one to one interview technique .

Definition of main study variables

1. Socio Demographic Variables as Age, Marital Status, Educational Status, Occupation stated by the patient .
2. Acute health problems –Any health problem needed treatment from a doctor or a health facility as outpatient or inpatient during last one month.
3. Chronic health problems- Any diagnosed health problem for which the person is on continuous treatment.
4. Social and economic problems-Self reported by the participants

Data analysis

The data entry and analysis were done using statistical package for social sciences (SPSS) version 15. The results were expressed in percentages

Table 1 Age distribution of study population

Age	Number	Percentage
60-64	63	41.4
65-69	36	23.7
70-74	21	13.8
>75	32	21.1
Total	152	100

41.4 % of study population is in the age group 60 to 64 and 23.7 % is between 65 to 69 13.8 % between 70 to 74 and 21.1 % above the age of 75 years

Health problems of elderly population

Table 2 a Acute Health problems of study population

Health problems	Number	Percentage
Any acute health problems	54	35.5
Types of acute problems (N=54)		
Fever	22	40.7
A RI	22	40.7
Injury	5	9.2
Diarrhoea	1	1.8
Others(UTI etc)	4	7.4

Table 2 b Chronic health problems of elderly population

Chronic health problems	no	percentage
Any one chronic health problems	122	80.2
More than one chronic problem	109	71.7
Hypertension	83	54.5
Diabetes	55	36.2
Arthritis	55	36.2
Cataract	23	35.1
CAD	19	12.5
Renal diseases	8	5.3
Others	23	15.1

Table 1 a and b showing the acute and chronic problems of the elderly population. About the acute health problems 35.5 % got any one acute health problems for the last one month that need treatment from a health facility or a doctor. Among this acute health problems Fever and Acute respiratory illness were the most common ailments reported by the elderly.

About the chronic health problems 80.2 % was having any one chronic health problems but 71.7 % was having more than one chronic health problem. Among the chronic health problems hypertension was most common problem among the elderly 54.5% was having hypertension. The second important chronic problems reported were diabetes and

arthritis 36.2 % respectively. The other chronic problems reported were Cataract Coronary artery disease and renal problems and they were 35.5%, 12.5 % and 5.3 % respectively.

Social problems of elderly population

Table 3 a Social problem reported by the study subjects

Self reported problem	Number	%
Attending social function	129	84.8
Not meeting family members and friends	85	55.9
Self reported abuse from family members	38	25
Quarrel with family members & neighbours	55	36.1
Time for watching TV	100	65.7
Right to choose the TV programmes	48	31.5
Spending free time alone	11	7.2
Time for reading books	8	5.2

Table 3 b Care takers of elderly population

Care taker	no	percentage
Daughter/sun	122	80.3
Relative/Home nurse	6	8.9
None	24	15.8
Satisfied with the care taker	128	84.2

Table 3c Habits among elderly population

Habits	No	Percentage
Smoking	24	15.8
Alcoholism	25	16.4
Pan chewing	23	15.1
Others	4	2.6

Regarding the social problems reported by the study population 84.8 % of population is attending social functions but 55.9% said they are not meeting family members and friends .Other social issues reported are abuse from family members and some quarrel with family members and neighbours, 25 % and 36.1 % respectively. 65.7 % said they get time to watch TV programmes but only 31.5% got the right to choose the TV programme. 7.2 % spending free time alone and only 5.2 % spending time for reading. Regarding the care taker 80.3 % look after by their daughter or sun but 15.8 % not looked after by anyone. 84.2 % is satisfied with the care takers. The self reported habits by the study population are smoking, alcoholism, panchewing and some other habits like tobacco powder use etc are 15.8 %, 16.4% , 15.1 % and 2.6 % respectively .

Self reported economic problems of elderly population

Table 4 Self reported economic problems by study population

Economic problems	Number	Percentage
Monthly income below Rs 1000	87	57.2
Source of income		
Employment	51	33.6
Social pension	21	13.6
Family members	76	50
Govt. service pension	25	16.4
Income inadequate to meet the expenses	105	69.1
Borrowed money for health care expenditure	40	26.3
Sold earning like land/ornaments for health care	28	18.4

The main economic problem reported by the elderly people was a low monthly income below Rs 1000 by 57.2 % and 69.1 % said the monthly income is inadequate for meet the expenses. The main source of income was from family members followed by employment .33 % of elderly are now also doing some work to earn money. social pension was source of income for 13.6 % and 16.4 % getting pension as the benefit for their government service . Economic problems due to health expenditures was about 26.3 % have borrowed money for health care expenditure and 18.4 % sold their earning for meeting the health care expenditure .

Health care utilisation by the elderly people

Table 5 Health care utilization by the study population

Health care utilization	No	%
Having regular health check up	92	60.5
Utilizing PHC services	44	28.9
Service from JPHN/ASHA worker	16	10.5
Having health insurance	22	14.5
Utilizing any community based palliative care services	7	4.6

Only 60.5 % of elderly got regular health check up from any health care facility. Only 28.9 % have utilized services from the PHC and 10.5 % have received any care from the JPHN/ASHA worker. Only 14.5 % got health insurance coverage and 4.6 %

is utilising the community based palliative care services an initiative by Government of Kerala.

Discussion

The study was a population based cross sectional study done using two stage cluster sampling method which ensures generalizability of the results to the study population. The present study high lights the health, social and economic problems of elderly population in an urban setting and their health seeking behaviour.

About the age distribution of the elderly population about 65,1 % of population is between 60-69 years of age. A study done by Madhu T et al in 2013⁴ in Kurnool they got 56.33 % of population was between 60-69 age group in the urban area which is less than in our study. This can be due to the larger proportion of elderly among the Kerala population. Regarding the morbidity profile reported by the study population the overall chronic morbidity among them was about 80.2 % and 71.7 % was having more than one chronic morbidity .A studies done in other parts of India got some varying results compared to this. A study done in Karnataka by Shahul Hameed⁵

Etal got only 3.7 % is having no morbidity and 25.3% got more than one morbidity. In both studies hypertension, impaired vision and arthritis were the important morbidities identified. But the diabetes prevalence was very less compared to Kerala. (19.7 and 36.2) Another outpatient based study done by DR Cynthia Subhaprada S at Andhra Pradesh⁶ the main morbidities present were hypertension (61.22) osteoarthritis (44.9 %) and among the acute problems Respiratory disease was most common ailment almost similar to our study.

The important social problems identified are low income an abuse from family members and quarrels and out of pocket expenditure for health care .But majority of the elders are taken care by the family members and 84.2 % were satisfied with the care takers. Another important finding was the habits among the elderly population .Even though we are giving awareness about healthy ageing the habits

still remains as important risk factors for various diseases.

Regarding the health seeking behaviour, in our study only 60.5 % is having regular health checkups. The health seeking behaviour of elderly population depends on many factors mainly economic status. A study done in Kerala by Subrata Mukherjee et al⁷ based on population based survey it was found that there is a significant difference between the health seeking behaviour of rich and poor elderly.

Only a very small percentage is using the palliative care services but in Kerala government is the major provider of palliative care⁸ The utilisation of PHC services by the population is also very poor only 28.9 %. About health insurance coverage only 14.5% got medical insurance. A study done by A Lena, K Ashok et al⁹ at Udipi Taluk Karnataka also got some similar finding that the elderly not aware of the services and the health care utilisation is only 14.6 %

Conclusions

The elderly in Kerala suffering from acute and chronic health problems along with economic and social problems. Kerala suggest that ageing of the population is going to impose severe challenges to the public health sector.

Acknowledgement

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