SOCIO-ECONOMIC PROBLEMS OF PERSONS WITH OLD AGE IN DISTRICT DIR LOWER KHYBER PAKHTUNKHWA PAKISTAN

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ABSTRACT

The purpose of this study is to analyze the increasing adversity of old age which has emerged as a global phenomenon. Number of person with old age worldwide is estimated to be around 605 million today. This aging population is posing insurmountable challenges both for the developed as well as developing countries. Pakistan being a developing country is also among countries that accumulate a plethora of aged persons and which are also speculated to be multiplied in the coming years. Pakistani Society, which is traditionally recognized as an aged honoring society, has also undergone considerable changes in its social structure during the course of the broader modernization process. This change, in one way or the other, has affected the overall status and role of the elderly within the domain of social affairs. In this context, the current study identifies the socio-economic problems as well as factors responsible for the problems of persons with old age. For the present study 45 respondents were selected through convenience sampling because sampling frame of the persons with old age was not available in the universe. Samples were selected from three villages of Union Council Khungi, District Dir (lower). The quantitative approach has been used in order to analyze the data with the help of frequency and percentage. The quantitative analysis illustrate that persons with old age are facing problems in decision making, denial and verbal abuse, separation from spouse as well as married sons. They have low social status in the community as well as in their families. The persons with old age are facing problems in health due to expensive medicines and lack of personal money to spend for their health. It has been suggested that proper role of family members, revival of religious values, media and government intervention will promote the status of persons with old age in Pakhtun society.

Keywords: Aging, old age, deprivation, Dir lower, denial.

INTRODUCTION

Aging has been defined as the total constellation of social, biological and psychological changes that occur in last stage of life (Richard, 1962). Ageing of the population is one of the most important demographic factors that have emerged in the 21st century. The number of elderly has steadily multiplied since 1948, due to the decreased fertility and increased life expectancy rates worldwide (World Bank, 2011). Moreover, the world's elderly population (60 years and older) had already marked the figure of 251 million in 1950 and 488 million in 1990.

Based upon the data as mentioned earlier, a more alarming number i.e. 1,250 million is estimated to be added to this bulk of ageing populous by the year 2025 which shows a startling increase of 146 per cent (Global Statistics, 2012). Most of the current and future increase will take place in the developing world, particularly Asian and South Asian countries. Further, it is expected that South Asia will experience a dramatic increase in its

elderly population by nearly nine times between 2010 and 2025, when life expectancy will increase to 75 years for men and 82 years for women (Rehmatullah, 2011).

A worldwide transition is coming in the aging as literature shows an increase in life expectancy due to medical facilities. Like other countries of the world, the demographic transition in Pakistan has begun since 1990s. The major causes of increasing aged population in Pakistan is due to consistent decline in mortality with a resultant rise in life expectancy and a reduction in total fertility rate in recent years. As a result, the proportion of elderly population is expected to increase in the years to come. Based on U.N. (2002) estimates, the proportion of population (60 years and above) in Pakistan will increase from 5.8 percent in the year 2000 to 7.3 percent in 2025 and 12.4 percent in 2050 (Saeed et al., 2011). The following table shows the statistics regarding old age population in Pakistan.

Table 1. Total Population and Persons with old age (Persons with old age +60) in Pakistan: 1961–2030 Elderly Population (Million) (60+ Years)

Census Year	Total	Male	Female	Sex Ratio(M/F)
1961	2.92	1.68	1.24	135
1972	4.57	2.63	1.94	135
1981	5.88	3.40	2.48	137
1998	7.34	3.99	3.35	119
Projected Estimates				
2013	11.19	5.69	5.50	103
2030	22.07	11.09	11.09	99

Source: Pakistan (2002) Ageing in Pakistan: A Situation Analysis, Ministry of Social Welfare and Special Education, Islamabad.

Besides, the varying effects of ageing on some major aspects of the society such as health, social security, education, business opportunities, socio-cultural activities and family relations (Kocaman, 2007), there are, however, factors which create problems for persons with old age. Among them the most important factor is the changing functions of family institution. Although family has still a central position in addressing emotional and socio economic needs of them. The ability of persons with old age to cope with the changes of health, income and social activities depend to a great extent on the support the person gets from his/ her family members (Sivamurthy & Wadakannavar, 2001).

Meanwhile, values concerning the respect and honor of the old people have been changing and the status of old parents has been affected. Traditional family structure is also getting weaker due to breakdown of joint families to nuclear family and thereby creating more and more problems for the elder members of the family as in joint family, loving atmosphere of house and friendly relationships among the members gave security and recognition to the older members of the family whereas in nuclear family structure elderly parents have little or no authority and their care and support is neglected. (Gulzar et al., 2008)

In addition to personal factors, such as low contribution to family finances and meager pension (Muhammad et. al, 2009), changes in family structures have necessarily brought about a considerable transition in the status and role of the elderly within the domain of domestic affairs. These factors jointly act to marginalize them to the edge of society in terms of limited access to their relatives or neighbors, diminished decision making role, limited facilities, excursion and use of an abusive language by family members against them. Consequently they feel discomfort and sense of frustration prevails upon them. Needs of the elderly are hardly met when the total economic dependency of the elderly upon the family is accompanied by the lack of a holistic socio-economic developmental strategy in the country that targets the welfare of its ageing population (Ali & Kiani, 2003). In this age of severe inflation, where a single source of income can hardly fulfill needs of even a single person, the situation of aged pensioners is pitiable. The total population of persons with old age in 1998 was 7.34 million while pension fulfill the economic needs of only 383,101 persons. The following table shows the economic needs fulfillment through of the elderly through meager pension allowances.

NUMBER OF EMPLOYEES COVERED BY THE PENSION SCHEMES

Table 2. Number of Employees

Organization	BPS 17-22	BPS 12-16	BPS 1-11	Total
Total Federal Divisions	2,027	2,261	6,886	11,174
Total Attached Departments	8,671	21,759	25,1193	281,623
Total Autonomous Bodies	14,696	6,586	69,022	90,304
Grand Total	25,394	30,606	327,101	383,101

Source: (Employees old age benefit institution, 2010)

Another important change that has taken place over the last couple of decades is the significant brain drain of this country. This has led to the departure of an age group of younger individuals leaving behind parents with no one to look after them. In case of migrating with children, proper adjustments often fail, as adaptation to a new social environment or lifestyle are hard for such elders. This often results in such elderly living alone. By observation alone it appears that at least 6-7% of elderly visiting geriatric clinics at the Aga Khan University Hospital are living alone with little assistance. About 12% of the elderly men live alone in rural India. Our numbers are very likely to be comparable to India which has a similar socioeconomic and cultural background. The changing social milieu is compounded by the fact that economic independence after retirement is only enjoyed by a select few; retirement funds are scarce and government pension plans are only present for those employed in government sector jobs. The retirement age in Pakistan is 60 years after which most elders are unable to find alternative sources of income and thus become largely dependent on their families for financial support; all of this occurring in an environment where official inflation rates have been cited to be higher than 20%. When this gets compounded by illness; care options become very limited as no government system exists that subsidizes health or treatment for its elderly population (Sabzwari & Azhar, 2010). State of health is another factor influencing the employment rate of older people. Deterioration in health is one of the natural consequences of physiological ageing. People who have had to give up their career because of health concerns often suffer from stress and psychological problems (Strandh, 2000).

OBJECTIVES OF THE STUDY

- 1. To investigate the Socio-economic problems faced by persons with old age in Pakhtun society.
- 2. To identify various health problems associated with old age persons in the area.

METHODS AND PROCEDURES

The study deals with finding the various socio-economic and health related problems of persons with old age in *pukhtun* society. A household survey of three villages, i.e. *Rehankote, Sado and Shekawlai* of Union Council *Khungi*, District Dir (lower) has been conducted. The number of person with old age (60 years and above) was found to be 175. Within this Targeted population, a sample size of 45 was obtained through purposive sampling technique. The data was collected by means of semi-structured interview schedule as well as observation method. The collected information has been processed through SPSS and simple frequency designed tables.

RESULTS AND DISCUSSIONS

A quantitative approach has been utilized in order to analyze the data and figure out various problems of the target population. The data has been discussed with the help of frequency and percentage in order to accomplish the mentioned objectives.

 Category
 Frequency
 Percentage

 60-70
 25
 55.55%

 71-80
 13
 29%

 81 & Above
 07
 15.55%

 Total
 45
 100%

Table 3. Demographic Characteristics of the Respondents

Demography is the scientific study of population which deals with fertility, motility, migration and composition of population (Alam, 2008). Age is one of the important factor that represent demographic qualities. In the same context the tables express the demographic qualities focusing age along with frequency and percentage. As the issue is related to the socio-economic problems concerning the elderly; the quantitative analysis illustrates that among the total respondents i.e.45 (100%), major portion of respondents 25 (56%) belongs to age category 60 to 70. It has been discussed that old people are the pillar of society but are deprived of their basics rights at the old stage of their life. In this scenario 13 (29%) respondent favor the category (71-80). However, low segment of the respondents i.e. 07 (15%) belong to age group category 81 and above. In a nutshell, it has been concluded that high portion of respondent belonged to the age category of 60-70 years. According to the data collected for this study, majority of the respondents i.e. 25 (55.55 %) were in the initial stage of old age and 13(29%) belonged to age group 71-80 while 07(15.55) respondents were in the oldest age group.

Table 4. Living Arrangement of the Respondents

Living Status	Frequency	Percentage
Alone	00	00%
With spouse	06	13%
With daughter	03	07%
With married sons	25	56%
With unmarried sons	10	22%
With relatives	01	02%
Total	45	100%

The above table shows the living status of the respondents. As the universe of the study is a rural area, hence, none of the respondents were living alone, because in rural areas, if parents live alone, it is considered as a social stigma for children. After marriage sons get separation from parents due to various reasons. It is obvious from the data that out of 45, 06 (13%) respondents i.e. we're living with their spouses. In a rural and traditional society parents like to live with their sons not with daughters but according to the collected data 03(07%) respondents were living with their daughters. However in rural areas the cultural values are still strong enough as justified by the data. Moreover, 25(56%) respondents were living with their married sons. 10(22%) respondents were living with their unmarried sons in spite of having married sons. Only 1(2%) of respondents was living with relatives.

Table 5. Source of Income of the Persons with old age People

Main source of income	Frequency	Percentage
Pension	12	27
Dependent on children	20	45
Own laboring	02	04
Property	11	24
Total	45	100

Table 3 shows the source of income of the respondents. Most of the persons with old age are economically dependent upon others, which is a problem for the persons with old ages. According to (Saroj et al., 2007), poverty of persons with old ages leads them to an average, not a high status.

According to data collected, 12(27%) respondents were economically independent in the form of their pension. While 20 (45 %) respondents were economically dependents upon their children. 02 (4%) respondents are still bound to earn their livelihood through their laboring. As most of the parents are aware about the economic problems in old age therefore they

frequently possess property in their hands. Out of the collected data 11(24 %) respondents were dependent upon their personal property e.g. land, shops etc.

Table 6. Economic Problems Faced by Persons with old persons with old age

Problems faced	To some extent	To great extent
Medicines	11	34
%	24 %	76 %
Personal Purchase	20	25
%	44 %	56 %
Ceremonies	15	30
%	33%	67 %
Total	45	
%	100%	

In old, one of the most important problems is an economic dependency and other problems associated with it. The fear of poverty and outliving one's resources is an increasingly common experience and a justified fear among million persons with old ages today (Meschede, 2011).

In the very same context, respondents reported their concern on medical problems, personal purchase and the required amount of money for different ceremonies, which they were facing due to economic dependency. According to the data collected, 11(24%) respondents whined, they were facing problems in the purchase of medicines. While 34((76 %)) respondents were of the view that they faced sever medical problems. Regarding the purchase of personal items 20 (44%) respondents reported that they were facing problems to some extent to purchase personal items, while 25 (56%) respondents reported that they were facing financial problems up to a great extent in the purchase of personal items. 15 (33%) respondents were facing financial problems in the participation of ceremonies up to some extent, while 30 (67%) respondents reported that they were facing problems up to greater extent in the fulfillment of the financial responsibilities during ceremonies.

Table 7. Problems Facing due to Age Factor/Functional Disorder

Problem face due to age factor	Frequency	Percentage
Discrimination/denial	10	22%
Health discrimination	17	38%
Verbal abuse	08	18%
Separation of sons	10	22%
Total	45	100%

The table above explicates problems, faced by the elderly on the basis of age factor or functional disorder and disability. According to the collected data 10 (22%) respondents reported that due to age factors they are facing discrimination and denial in decision making regarding family. 17 (38%) respondents reported that they are facing problems in health as compared to the young members of the family. 08 (18%) respondents profess that they are facing verbal abuse in the family. 10 (22%) respondents are of the opinion that they are living alone and their sons have separated from them due to the physical and mental weakness.

CONCLUSIONS

Research studies on the issue of ageism disclose the facts that due to the growing age; multiple social issues encounter the individual. The current research study also support the argument as discussed by other researchers and scholars that in the society under study the same issues in regard of aged people occur. The collected information discloses the fact that aged people of above 60 years face the problems of discrimination along-with alienation in the target area, which on the other side make them isolated from the rest of population. Similarly, such people are considered as a burden on family members and they treat them with a complex of being the deprived of the rest of population. In the economic context, such people are non-productive in terms of economic productivity not only for the family members but also for the rest of community. In this regard, their position at the home and also in communal relations is not well adjusted and they fall in the feeling of anomie.

The data further elaborate that age is not only an economic and social factor but also leads to physical, medical and psychological disability to a larger extent. The information shows that majority of the respondents in the area feel weaknesses, non-comfort and physical weakness in their later age. Further, such factors not only affect the social, economic and physiological condition of the person but also weakened the social values of the community that leads to social stigma on the social fabric. Thus in a nut-shell, the problems of the senior citizens in increasing with the passage of time, and soon the society will witness a major shift towards the formation and establishment of old aged group house schemes.

SUGGESTIONS

The problems of senior citizens are the result of so many factors. Society, state, the senior citizens themselves and children have contributions regarding the problems of senior citizens. The following points are suggested for different stakeholders to minimize the problems of persons with old age.

- 1. Revival of Islamic values which teach its followers in the holy Quran and hadith to fulfill the needs of their parents and respect them.
- 2. Free/ concessional medical facilities as well as gerontologist need to be available at all government hospitals for the medical care of senior citizens.
- 3. Utilizations of the skills/wisdom of senior citizens through the method of social group work.
- 4. The parents when physically strong should treat all the children equally so that at the last stage all the children may equally shoulder the responsibility of their elder parents.
- 5. The parents should keep a portion of their property for their personal expenses.
- 6. The parents should socialize their children the respect of elders of parents
- 7. There is dire need to increase per capita income so that the violation of the rights of senior citizens occurring due to poverty may be minimized.

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