

AWARENESS AND UTILIZATION OF GERIATRIC WELFARE SERVICES AMONG ELDERLY IN NAINITAL DISTRICT OF UTTARAKHAND

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ABSTRACT

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INTRODUCTION

Rapidly ageing Indian population has led to increase in old age dependency ratio. Currently, where every 8 working individuals look after one elderly, by 2050 there will be 3 care givers for one elderly. 70% of elderly women and 30% elderly men are totally dependent on others financially. ¹

Large work force in India works in an unorganized sector, therefore during twilight years of their life when an elderly most needs the support of their loved ones for health, emotional and financial issues; they face abuse at their hand.

The social security schemes like Indira Gandhi National Old Age Pension Scheme (IGNOAPS), Indira Gandhi National Widow Pension Scheme (IGNWPS) and Annapurna scheme are specifically

Introduction: Population ageing is an important emerging demographic phenomenon in India. The wide gamuts of social, psychoemotional and financial correlates determine the medical problems in elderly which need to be addressed. Thus this study was undertaken to know the awareness and utilization of geriatric welfare services among elderly in Nainital district of Uttarakhand.

Methods: A community based cross-sectional study was conducted in the rural areas of Haldwani, Nainital district of Uttarakhand. 440 elderly populations were selected by two stage sampling technique. Data was collected using interview method and analysis was done using SPSS v 16. Chi square test was used and p value < 0.05 was considered significant.

Results: Majority of the elderly were in 60-69 years of age group, female elderly outnumbered male. Most of the elderly were illiterate, not working, married, belongs to class III and were financially dependent on their family. The awareness for old age pension scheme was seen in 97.3% while19.7% was utilizing it. The awareness and utilization of other services was poor.

Conclusion: The awareness about geriatric welfare services was low. Also the utilization of these services among elderly was very poor. The rural setting might be one of the causes for it.

Key words: Awareness, Utilization, Elderly, Rural, Geriatric welfare services

targeted at below poverty line (BPL) elderly.² The other schemes/services targeted for elderly under various ministries like income tax benefits, higher interest on deposits in banks/post offices, Maintenance and welfare of Parents and Senior citizens Act 2007 are to name a few.²

Though to maintain the respect and dignified life which an elderly deserves, the Government of India has made many initiatives but mere the existence of various policies, schemes and services will not solve the problem to all the woes of an elder. There is a need to make them accessible to each and every elderly.

Thus an attempt was made by this study to know that whether our elderly population are aware of these services and are able to utilize them. With this objective, the study was conducted to know the socio demographic profile of the rural elderly and awareness and utilization of geriatric welfare services among them.

MATERIALS AND METHODS

A community based, cross-sectional study was conducted over a period of one year, from November 2013- Oct 2014 at Primary Health Centre (PHC) Motahaldu which is the rural field practice area of the Department of Community Medicine of Government Medical College, Haldwani in district Nainital of Uttarakhand.

Since prior to this, no study was done on elderly in this area default prevalence (p) of 50% with an absolute precision of 5% was taken. Using formula, $n=4pq/d^2$; sample size came out to be 400 and taking 10% non response rate final sample was fixed at 440.

Two stage sampling technique was used to collect data by house to house survey. Under PHC Motahaldu, there were 22 subcentres (SCs), out of which 11 were selected randomly by lottery method in first stage. In the second stage, 40 elderly were selected from each of these 11 SCs to get the adequate sample size of 440. Considering, 8% of elderly (as per census India 2011) and 5,000 population of one sub centre. $8/100 \times 5000 = 400$ (each SC would have 400 elderly). 400/40 = 10 i.e. every 10th elderly had to be taken from each of the 11 SCs. To achieve the desired target, a list of all the elderly was made from the SC's survey register maintaining the order of the families as per the survey done. Then every 10th elderly was selected from the list. If some elderly did not consent for the interview or could not be contacted then the next name was selected from the list. The data was collected by administering pretested questionnaire, after taking informed consent from the elderly and ensuring the confidentiality. It was entered into Microsoft Office Excel 2007, coded and analyzed using SPSS v 16. Chi square test was used and p value < 0.05 was considered significant.

The permission for conducting the study was taken from Institutional Ethics Committee before the commencement of the study.

Operational Definition: Economic Dependence ³

Independent - A participant was considered financially independent, if his/her source of personal income or any monetary benefit from social scheme was perceived to be sufficient to maintain himself/herself.

Partially dependent - The participant was considered partially dependent if he/she had some personal income or any monetary benefit from social scheme, but which was not perceived to be sufficient to maintain him/her.

Dependent - The person was classified as fully dependent, if there was no personal income or monetary benefit from any social scheme and was totally dependent on other family members.

Modified B.G. Prasad classification for the year 2013 was used to assess the socioeconomic status.⁴

RESULTS

Out of 440 elderly, majority 262(59.6%) belongs to 60-69 years of age group. Females 253 (57.5%) were more than that of males. 264 (60.0%) of the elderly were illiterate, 346(78.6%) were not working, 263(59.8%) married and 260(59.1%) belongs to class III as per modified B.G. Prasad classification. 238 (54.1%) were living with their spouse, children and grand children. About 206 (46.8%) elderly were fully dependent on family members [Table 1].

Table 1:	Socio-demog	graphic r	profile of t	he elderly
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Variables	Frequency (%)		
Age group(years)			
60-69	262 (59.6)		
70-79	129 (29.3)		
≥80	49 (11.1)		
Sex	. ,		
Male	187 (42.5)		
Female	253 (57.5)		
Literacy status			
Illiterate	264 (60)		
Primary	56 (12.7)		
Middle	29 (6.6)		
High school	46 (10.5)		
Intermediate	26 (5.9)		
Graduation and above	19 (4.3)		
Employment status	~ /		
Currently working	94 (21.4)		
Not working	346 (78.6)		
Marital status	× ,		
Married	263 (59.8)		
Widowed	177 (40.2)		
Living arrangement			
Alone	10 (2.3)		
With spouse only	23 (5.2)		
With spouse, children & grandchildren	238 (54.1)		
With children & grandchildren	157 (35.7)		
Others	12 (2.7)		
Socioeconomic status			
Class I	1 (0.2)		
Class II	46 (10.5)		
Class III	260 (59.1)		
Class IV	95 (21.6)		
Class V	38 (8.6)		
Economic Dependence			
Dependent	206 (46.8)		
Partially dependent	122 (27.7)		
Independent	112 (25.5)		

Table 2: Awareness of geriatric welfare services among elderly

Services	Male	Female	Total	p value
	(n=187)(%)	(n=253)(%)	(N=440)(%)	
Old Age Pension	184(98.4)	244(96.4)	428(97.3)	0.343
Railway Fare Concession	51(27.3)	16(6.3)	67(15.2)	0.001*
Higher interest on deposits in bank/post office	43(22.9)	09(3.6)	52(11.8)	0.001*
Income Tax rebate	32(17.1)	06(2.4)	38(8.6)	0.001*
No Knowledge about any scheme	03(1.6)	09(3.6)	12(2.7)	0.343

* Significant at p<0.05

Table 3: Utilization of geriatric welfare services by elderly

Services	Male (n=187)(%)	Female (n=253)(%)	Total (N=440)(%)	P value
Old Age Pension	36(19.3)	51(20.2)	87(19.7)	0.090
Widow Pension	-	11(4.3)	-	
Railway Fare Concession	07(3.7)	06(2.4)	13(2.9)	0.578
Higher interest on deposits in bank/post office	01(0.5)	01(0.4)	02(0.4)	0.830
Income Tax rebate	01(0.5)	00(0.0)	01(0.2)	0.879
Not utilized any scheme	142(75.9)	184(72.7)	326(74.1)	0.516

Awareness regarding geriatric welfare services was majorly 428(97.3%) for IGNOAPS, followed by 67 (15.2%) for railway fare concession, 52 (11.8%) for higher interest on deposits in bank and post office while 38 (8.6%) had knowledge about rebate in income tax. 12 (2.7%) had not heard about any geriatric welfare scheme. There was statistically significant difference among male and female elderly regarding awareness for railway fare concession (p=0.001), higher interest on deposits in bank and post office (p=0.001), and about rebate in income tax (p=0.001) [Table 2].

Utilization of these services was poor as only 87 (19.7%) were availing old age pension, 11(4.3%) elderly female availing IGNWPS, 13 (2.9%) had availed railway concession, 2 (0.4%) had higher interest on deposits and 1 (0.2%) availed rebate in income tax. No significant difference was found between the male and female elderly regarding utilization of any services [Table 3].

DISCUSSION

In the present study awareness about IGNOAPS was very high (97.3%) but for others like concession in railway fare, higher interest on deposit in bank and post office and rebate in income tax was low i.e. 15.2%, 11.8% and 8.6% respectively.

The utilization rate was low in the present study as only 19.7% were utilizing IGNOAPS, though 4.3% of the female elderly were benefitted by IGNWPS. Very poor utilization rate was seen for concession in railway fare, high interest and income tax rebate, 2.9%, 0.4% and 0.2% respectively.

The statistically significant difference was found among male and female for awareness but not for utilization rate. Among the earlier studies, done by Goel PK et al ⁵ in rural Meerut awareness about geriatric welfare schemes was 53.7% among elderly while utilization rate was very low (4%) and in a study conducted by Lena A et al ⁶ in rural South India 35.7% of the elderly population was aware of the geriatric welfare schemes while only 14.6% had utilized it.

A study conducted in urban setting of Gujarat by Chandwani HR et al ⁷ reports that 32.3% were aware of the government welfare schemes while 12.2% had utilized them.

The study by United Nation Population Fund (UNFPA) ⁸ in select states having geriatric population above the national average, mentioned that 70% were aware of IGNOAPS and IGNWPS, 40% Annapurna scheme, 30% Mahatma Gandhi National Rural Guarantee Act (MNREGA), 20% preference in phone connection and higher interest on bank and post office deposit while 13% about income tax benefits. 18% utilize IGNOAPS, 3.5% Annapurna scheme, 25% IGNWPS, 9% availing of concessions in train or bus reservations and negligible proportions utilizing the other benefits.

Srivastava AK et al ⁹ in his study in rural areas of Dehradun observed that awareness for IGNOAPS as 74.6%.The awareness about concession in railway ticket and higher interest rates on deposits in bank/post office respectively was 34.9% and 32.9%, while 2.3% were aware of income tax benefits. The utilization rate for IGNOAPS was 45.4%; railway ticket concession was 27.8% and 10.1% depositing money to get higher interest in bank/post office. Less than 1% elderly utilized income tax benefits.

Joseph N et al ¹⁰ found in Mangalore city that maximum (70.4%) elderly were aware about income tax rebate, followed by higher interest on fixed deposits in banks and post office as 67.5% & 60.2% respectively. IGNOAPS (47.6%), Annapurna scheme (18.4%), concessions and reserved seats in public transport services as 55.8% & 60.2% respectively, toll free helpline number (24.8%), right to claim maintenance from children (32.0%), right to claim back property from children/relatives (17.5%), special court for elderly in every district (34%). They also observed that awareness was significantly associated with male gender, higher literacy, upper middle class and those elderly who were currently working.

Nivedita BM et al ¹¹ reports that in rural areas of Bengaluru, 49.5% elderly were aware regarding social security scheme. 66.6% were utilizing social assistance schemes, 48.0% were using pension scheme, 47.6 % were taking social security benefits while 23.3% were getting income tax rebate, 22.3% were using travel concession and 13.8% utilizing insurance.

Maroof M et al ¹² observed in their study in rural Aligarh that the awareness for social security schemes like IGNOAPS, IGNWPS and Annapurna scheme among the elderly was 28.9%. The awareness of special govt. facilities like train ticket reservation, bus seat concession, preference for telephone connection, higher interest on deposits in banks/post offices, income tax benefits, MNREGA was found to be 84%. The awareness of health insurance schemes like Rashtriya Swasthya Bima Yojana (RSBY) or private scheme was 35.6% in the study population. The statistically significant difference in the awareness between male and female elderly for all these services was found.

Dhanasekaran G¹³ in his study in rural Tamil Nadu found that awareness for IGNOAPS, IGNWPS and Annapurna scheme was 76%, 68% and 40% respectively. Only about 25% of the elderly were aware of concessions in train tickets or bus reservations, preferences given for phone connections, higher interest rates for savings in banks and post office and income tax benefit. 7% of them were availing of concessions in train or bus reservations. No gender difference among elderly for various schemes was observed.

Murugan PB et al ¹⁴ observed that 73.2% were aware while 62% had utilized geriatric welfare schemes. Out of these 62%, utilization rate of old age pension (73.1%), ration from public distribution system (25.1%) and concession in train/bus (1.8%).

Limitations

The real needy elderly eligible for IGNOAPS could not be assessed as BPL cards of each family could

not be traced. The questions regarding awareness of Geriatric Welfare Service should have been rather asked close ended instead of open ended, because about many services they did not know that these were for elderly and they were eligible for it.

CONCLUSION

The awareness was high only for old age pension scheme while for others it was low. Also, the utilization rate for these geriatric welfare schemes was abysmally poor. The reason might be because this study was conducted in a rural area, majority of the elderly being illiterate, also number of elderly females were more than that of males.

RECOMMENDATIONS

The study reflects that mere availability of geriatric welfare services will not help our elderly, but they should be made aware of these services and rather made accessible to them with the help of health workers like ASHA, Anganwadi. Geriatrics should be given equal importance like Mother and Child health in our Health care delivery system.

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