



Deprivation Consequences among the Rural Oldest Old

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ABSTRACT

'Deprivation' the term commonly used in social sciences that refers to a situation in which people feel themselves deprived, either in comparison to other people or in comparison to own previous condition. On the other hand, the term 'oldest old', generally used to refer to the population aged 85 and older, was coined for a 1984 session on this population in the annual meeting of the American Association for the Advancement of Science (AAAS). However, in India the term 'Super Senior Citizen' is used to designate the elderly people above 80 years of age in case of income tax assessment. 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. Therefore, the 'oldest-old' or 'super senior citizen' is that group of people who are the sufferer of deprivation. The author of the present paper aims to highlight the deprivation consequence among the oldest old population residing in the rural areas of Medinipur Sadar Block under Paschim Medinipur District. The deprivation consequence has been described on the basis of the first hand data collected by the author on the 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 area.

Keywords: Deprivation, Oldest-old, AAAS, Super Senior Citizen, Deprivation Consequence.

"Oldest Old" the word refers that the population who have aged 80 years and above. However, the term 'oldest-old' was coined in 1984 in a session at the annual meeting of the American Association for the Advancement of Science (AAAS)^[22].

However, in India, 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)^[21].

Moreover, In the year, 1974, L. Neugarten's develop the perception of old age; therefore he characterized the old age view with the "young old" (60-70 years of old) and "old old" (70-80 years of old)^[20]. But, unlike

Neugarten's concept, which joined age, health, and social characteristics, the term oldest-old, in its basic usage, simply defined the chronological age group of those age 80 and older, without implying that all, or most, of the oldest old were necessarily frail.

A person with reduced functional backup 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)^[23].

In 2001, the population of the 80+ age group increased to over 8 million who are of major concern to our society. The volume of supportive socio-economic and emotional infrastructure needed for this fast growing population is huge and it's a big challenge of the planners in the years to come. 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).

Deprivation and exclusion are one of the 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)^[16].

The belief that 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)^[9]. In the nuclear family regime, the position of the aged becomes more vulnerable and is treated as a burden to the family (Nayar, 1992)^[19].

The elderly in India often end up in a state of deprivation and negligence as there is no proper social security system as in the West (OASIS, 1999)^[11]. 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)^[16]. 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)^[21]. The occurrence of economic, health and social insecurities are becoming common (Dey, 2000; World Bank, 2001; Priya, 2003; Alam, 2007)^[21]. So here, author of the present paper try to consequences picture of deprivation among the rural oldest-old population through measuring the Financial Support, Living Arrangement, House-hold

Chores, Physical Mobility, Main Source of Care and Measurement of Activities of Daily Living (ADL), which together culminate in deprivation scenario.

MATERIALS AND METHODS

The present study was conducted among the oldest old (80 years and above) populations across both the sexes distributed over seventy villages under five Gram Panchayet of Sadar Block in the district of Paschim Medinipur, West Bengal, India. The Gram Panchayets are namely Pathra, Shiromoni, Chaandra, Monidah, Kankaboti.

For the purpose of locating and sampling the oldest-old population residing in the villages mentioned above the present researcher at the first stage downloaded the voter list of the Assembly Constituency no 236 uploaded in their official website by the Election Commission of India in the year 2015. This list, under its different part number, bears the name, age, sex and address of the voters residing in the villages under above referred five Gram Panchayets.

It appears from the said voter lists that there are altogether 585 'oldest old' people residing in the above referred villages among whom 287 are male and 298 are female. However, for the present study the researchers selected 100 oldest-old (equal number of male and female) elderly from each of the five Gram Panchayets respectively using Systematic random sampling table which formed the sample size of 500 respondents. After the sampling of the respondents a door to door survey was made to locate the specific address and/or resident of each sampled person. A few of my study participants expressed concern that their responses to questions/interview may create misunderstanding within the family. However, such difficulties have been over cum.

Data on ADL assessments of the individual respondent have been collected by interview technique and observation method with the help of structured questionnaire schedules based on the international standard of Katz's ADL index (e.g., Katz *et al.*, 1970)^[25]. Data on Physical Mobility was evaluated using by five levels such as bed ridden, slightly mobile, fairly mobile, mobility with wheel chair, and mobility with stick.

RESULTS AND DISCUSSION

Table – 1 deals with the financial dependency and livelihood components of oldest-old respondents under study. From this table it is revealed that in case of 'Financial/ Economic Dependency' wise distribution of the oldest old respondents only 4.20% are male oldest-old respondents where, 6.40% are female oldest-old respondents out of the total number of the respondents are economically independent. While, in the category of partially dependent 22.20% are male respondents and 28.20% are female oldest-old respondents. Whereas, out of the total population 23.60% male and 15.40% female oldest-old are fully dependent. Therefore the numbers indicates that majority of the female oldest-old respondents are economically dependent compared to the male counterpart under study area.

However, the 'Living arrangement' wise distribution of the rural oldest-old population shows that 16.40% male and 7.60% female oldest-old respondents living with his/ her spouse whereas, 19.60% male and 23.40% female oldest-old respondents are living with their married sons however noticeable aspect is that 6% (where 3.60% are male oldest-old respondents and

2.40% are female oldest-old respondents) respondents out of the total number of respondents are living alone. Therefore, the living arrangement wise distribution of the respondents specifies that second highest male oldest old respondents are living with his spouses whereas, maximum female living their livelihood with their married sons. Therefore, the scenario states that after attending 80 years of above age numbers of oldest-old people (across both the sexes) under study area has been deprived from their own family members that's why they are living alone and or living only spouses.

The table – 1 also demonstrate that 'Nature of Household Chores' wise distribution of the respondents. Out of the total number of respondents 3.20% male and 17.60% female oldest-old respondents are engaged as helping hands during cooking time whereas, 5% are male oldest-old respondents and 10.40% female oldest-old respondents are engaged into cooking making of food. However, 13% male and 3.60% are female oldest-old 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

Table 1.

Variables	Male		Female		Total	
	No.	(%)	No.	(%)	No.	(%)
Financial/ Economic Dependency:						
Independent	21	4.20	32	6.40	53	10.60
Partially Dependent	111	22.20	141	28.20	252	50.40
Fully Dependent	118	23.60	77	15.40	195	39.00
Living Arrangement:						
Only with Spouse	82	16.40	38	7.60	120	24.00
With married Sons	98	19.60	117	23.40	215	43.00
With unmarried Sons	33	6.60	28	5.60	61	12.20
With married daughter	14	2.80	48	9.60	62	12.40
With unmarried daughter	5	1.00	7	1.40	12	2.40
Living alone	18	3.60	12	2.40	30	6.00
Nature of House-hold Chores:						
Helping hands during cooking	16	3.20	88	17.60	104	20.80
Cooking food	25	5.00	52	10.40	77	15.40
Gardening and Farming	65	13.00	18	3.60	83	16.60
Daily marketing of House hold necessities	58	11.60	43	8.60	101	20.20
Miscellaneous light task	86	17.20	49	9.80	135	27.00

maximum engagement of female respondents compared to male counter parts whereas, maximum engagement of male respondents in three category such as Gardening and Farming, Daily marketing and Miscellaneous light task of House hold necessities compared to female counter parts under study area. Therefore, the numbers also displays that male engagement in the category of helping hands during cooking time and cooking food that refers that somehow, somewhere the oldest old respondents has been deprived and it is the reflection of that deprivation. That's why numbers of oldest-old people at the present age are engaged into such types of different work for living their life and it also means that majority of the male respondents under involvement in house hold chores of the respondents are directly or indirectly engaged into different types of household chores that is not a good picture of living a fruitful life for oldest-old people.

Table – 2 deals with the health status of the oldest-old respondents under study whereas the measuring health status of the oldest-old people includes 'Nature of Mobility', 'Main Source of Care' and 'Activities of Daily Living'. From the table in case of 'nature of mobility' wise distribution of the oldest-old respondents demonstrate that minimum percentages of respondents are belongs

into the category of bed ridden i.e. 8% across both the sexes. Whereas, maximum percentages of oldest-old respondents are belongs into the category of fairly mobile i.e. 36.20% across both the sexes and slightly mobile i.e. 33.60% across both the sexes. Therefore, it is revealed from the case of nature of mobility of the respondents that majority of the female respondents are living with almost good mobility status compared to the male counter parts under studied area.

Thus the table also shows the case of main source of care during the illness time of the studied respondents. It exhibits that out of the total number of respondents 17% male and 3.60% female respondents are cared by their respective spouses whereas, 25.40% male and 35.60% female respondents are cared by their respective children however, 6.40% male and 9% female respondents are cared by their kin relatives but it is also noticeable that 3% respondents across both the sexes are cared by the non kin relatives for the cause of that those oldest old respondents are ignored and or deprived by their respective family members. It is found during the studied time.

From this table the case of Activities of Daily Living (ADL) Status wise distribution of the respondents, it

Table 2.

Variables	Male		Female		Total	
	No.	(%)	No.	(%)	No.	(%)
Nature of Mobility:						
Bed Ridden	22	4.40	14	2.80	36	7.20
Slightly Mobile	72	14.40	96	19.20	168	33.60
Fairly Mobile	89	17.80	92	18.40	181	36.20
Mobility with a Stick	59	11.80	45	9.00	104	20.80
Wheel Chair	8	1.60	3	0.60	11	2.20
Main Source of Care:						
Spouse	85	17.00	18	3.60	103	20.60
Children	127	25.40	178	35.60	305	61.00
Kin Relatives	32	6.40	45	9.00	77	15.40
Non kin relatives	6	1.20	9	1.80	15	3.00
Activities of Daily Living Status:						
Active	62	12.40	76	15.20	138	27.60
Mildly Disabled	110	22.00	106	21.20	216	43.20
Severely Disabled	78	15.60	68	13.60	146	29.20

is found that across both the sexes 27.60% are active, 43.20% are mildly disabled and 29.20% 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 12.40% are active, 22% are Mildly Disabled and 15.60% are Severely Disabled. Similarly, among the total number of female respondents 15.20% are Active, 21.20% are Mildly Disabled and 13.60% are Severely Disabled. Finally, it is revealed from the case of Activities of Daily Living Status indicated that numbers of female respondents are living with better health status compared to male counterpart under study area.

Case 1: Name of the informant is Champa Mandal, who is 86 years old widow female. Presently she lives with her widow daughter at Neyapura village under Kankabati Gram Panchayet. Her daughter name is Tanima Mandal, 55 years old and she lost her husband last year, after that she came to his mother's house. Before that her mother lives alone since 2010 because in that time Mrs. Mandal lost her husband. Now a days her daughter Mrs. Tanima engaged as a daily labour. On the other hand, Mrs. Mandal all most done the house hold chores such as cooking, cutting of the vegetables, cleaning of the house floor, etc. when her daughter gone to the work. At this stage of her age, her daughter thinks that her mother is not very old person, her mother have all the capabilities for doing such types work. Even, Mrs. Mandal was not recognized her actual age when I gone her house and asking her age then she said that she don't know how old I am but at that time I want to see her voter Id and after that she may know her age.

However, she said that I have also a son who separated to me after his marriage. He never hear me always deprived me while last year when I was very sick, at that time he does not came to see me while he lived next hamlet of my house; approx. distance below to 1 K.M. However, I get widow pension monthly Rs. 500 therefore I still alive and my widow daughter care of me. Sometime I think that if I am not a Widow Pension holder then how could I alive? While, the pension amount I give to my daughter from point of fear that if

I don't give the amount then maybe my daughter also leaving me. That's why I give to her in every month.

Case 2: Name of the informant is Ramesh Mahato, 82 years old male who lives in a joint family with his wife, son, son's wife and son's children at Kankabati village. At this age of his life, he had done house hold chores such as Gardening and Farming and Daily marketing of House hold necessities for his family. Even he done all of the daily living activities of himself. The daily living activities such as feeding, bathing, dressing, grooming, work, homemaking which all of done by herself. Sometime he feels that nobody understand that he was getting old. Therefore, at his leisure nobody does not came to her, "nobody does not care to her except his wife, only his wife spent some time with him; always all of the family members ignored her especially grandchildren" said Mr. Mahato. However, his son and son's wife never discussed any types of family matter with them. Therefore, he understand that his value into his family as well as with his family members. He said, "I realize it, that me and my wife are becoming valueless person in our children day by day and also they always deprived us. He has a fear or skepticism for their existence into his family therefore he said that may be after some years later we have no identity in my family.

CONCLUSION

This study provides a deprivation consequence of the rural oldest old respondents of the Medinipur Sadar Block under Paschim Medinipur district in West Bengal who is likely to need assistance from programmes organized by the Government both at the State as well as at Central level.

However, despite some positive scenario mentioned above the oldest old respondents of Medinipur Sadar Block are seriously in disadvantageous position in many respects, which may be exemplified with the following facts: they are far less educated; economically more dependent; most of them are partially dependent; a very good number of them (about 39% respondents) are fully economically dependent. Moreover, about 50% respondents are partially dependent whereas, 10.60% respondents are independent economic life. However,

this fact may be considered as the one of the major factor of deprivation into their own family bondage between the oldest old respondent and their children.

The deprivation scenario of the rural oldest old people has been displayed into the above two tables (in results and discussion: table 1 and table 2) that after attending the 80 years of age the respondents are not happy and not living a fruitful life. For the reason of that the super senior citizens at present time they serving different types of workload after completing 80 years of above ages. They are deprived from different times into different spaces by their respective family members as well as kin relatives. Therefore, the noticeably fact is that the oldest-old people of our family as well as society living their life in a hazardous way because in that age where they should live in a fruitful life but the actual fact or scenario fully changed. It seems in the study that the 'super senior citizens' has been neglected, deprived and engaged into different works where their health status was not comfortable for work but they engaged for living their livelihood.

Finally, the present study may be helpful to the planners and administrators to address the above mentioned disadvantageous status of the oldest old population of Medinipur Sadar Block in particular and other parts of India in general.

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