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A Study on Health Problems and its Economic Burden on Old Age Women in Colachel Town

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Abstract

The population of older persons in India is increasing at a much faster rate than the developed countries. Those aged 60 years and above constitute 7.4 per cent of the country's population at present. The population explosion is a great concern as it leads to poverty, neglect, abuse, violence, crime, and more importantly overcrowding, all of which have direct relation with health and economic status of the older persons. Aged comprises one of the important vulnerable groups having health problems mostly due to degenerative changes. Thus social, physical and economic well-being of this group has become challenging issues. In lower middle-income countries, like India, population ageing will play a more important role than population growth due to increasing deaths from Non-Communicable Diseases. However, empirical evidences suggest that the disability and adverse consequences of Non-Communicable Diseases can be prevented or postponed by investment in health throughout life.

Introduction:

A man's life is normally divided into five main stages namely infancy, childhood, adolescence, adulthood and old age. In each of these stages an individual has to find himself in different situations and face different problems. The old age is not without problems. In old age physical strength deteriorates, mental stability diminishes; money power becomes bleak coupled with negligence from the younger generation. One of the major features of demographic transition in the world has been the considerable increase in the absolute and relative numbers of elderly people. This has been especially true in the case of developing countries like India, where ageing is occurring more rapidly due to the decline in fertility rates combined by increase in life expectancy of people

achieved through medical interventions. About 60 percent of the elderly live in the developing world, and this will rise to 70 percent by 2010.

Ageing in India:

The proportion of elderly population in India is also increasing rapidly. In 2001 census, 7.4 per cent of total population in India was 60 years and over. The decadal growth rate for the elderly population in India during 1991-2001 was 40 per cent, i.e. almost double the growth rate of general population (21 per cent). The phenomenon of 'Feminisation of Ageing' is evident in India and is clearly reflected by Census 2001 data. There were only 7.1 per cent elderly males as compared to 7.8 per cent female elderly when the data on elderly was disaggregated by gender. The decadal growth rate of female elderly is 42.2 as compared to only 28.6 for elderly males, which points towards the rapidly increasing proportion of elderly women in India. Women therefore comprise by far the greater proportions of older populations at any advanced age, and although the proportion of elderly women is largest in developed countries, larger women are located in less developed countries, if we consider their absolute number. The population of senior citizens has crossed 100 million in India. As women tend to live longer than men, there are 1,600 women per 1,000 men in the age group of 70. As per the 2011 census, while the overall sex ratio favours the male population (940 females per 1,000 males) however, for the elderly population, at 60 plus, it favours elderly women.

Health Problems of Old Age Population:

Alzheimer's Disease: Alzheimer's disease is a brain disorder and a slow and gradual disease that begins in the part of the brain that controls the memory. As it spreads to other parts of the brain, it affects a greater number of intellectual, emotional and behavioral abilities. There is no known cause for this disease. As a person grows older, he is at greater risk of developing Alzheimer's. The best way to prevent these conditions from occurring is to keep mentally busy.

Mental Illnesses: According to World Health Organization, 25% of the world population is suffering from Mental illnesses. But only 40% of these cases are diagnosed and treated. One million annual suicides are the result of these undiagnosed or missed cases. Most common causes for these suicides are depression, dementia, anxiety and Schizophrenia. Elderly are susceptible to a variety of mental illnesses. Depression is the most common of these.

Blood Pressure: Blood Pressure is actually the pressure of blood against the walls of your arteries. Hypertension has been called the "silent killer" because it usually produces no symptoms. Untreated hypertension increases slowly over the years. Hypertension can cause certain organs, including the kidney, eyes, and heart, to deteriorate over time.

Heart Problems and Heart Attack: With age the heart and blood vessels become less efficient even in the absence of obvious diseases. The heart tends to get enlarged and the pumping

action decreases. The blood vessels become less pliable and elastic. This can result in the swelling of feet, high blood pressure and heart failure.

Stroke: There are 15 million people who have a stroke each year. Stroke is the second leading cause of death for people above the age of 60.

Cancer: Cancer is a generic term for a group of more than a hundred diseases that affect different parts of the body. Among elderly men, cancers of the prostate and colon are the most common while for women it is breast cancer.

Diabetes: Diabetes is a metabolic disorder characterized by high blood sugar. Diabetes is a disease that affects the body's ability to produce or respond to insulin, a hormone that allows blood glucose (blood sugar) to enter the cells of the body and be used for energy. Most of the elderly are affected diabetes.

Kidney disease: Kidney disease is disorder that affects the functioning of the kidneys. It can be characterized as hereditary, congenital or acquired. Chronic kidney disease is known to affect the elderly and is associated with a high risk of kidney failure, cardiovascular disease and death.

Eye Diseases: Eye diseases like cataracts and age related macular degeneration, loss of vision etc. are major eye problems in old age.

Fall-related Injury in Old Age: In old age changes in vision, hearing, muscle strength, coordination and reflexes make older people vulnerable to falls. In addition, diseases of the heart, brain, bones and joints, thyroid and diabetes may affect the balance and gait.

Objectives of the Study:

- To study the economic condition of the ageing population.
- To analyse the health problems faced by the ageing population.
- To find out the healthcare expenditure of the ageing population.

Methodology:

This study mainly depends on primary and secondary data. A suitable questionnaire is constructed to collect the primary data. The study is carried out on the basis of convenient random sampling method. Data have been collected from 50 old age women in Colachal Town. The secondary data is obtained from the materials published in journals, magazines books and reports.

Analysis of Data:

Age wise classification:

The respondents are unevenly divided among different age groups. The table 1 shows the age wise classification of the respondents.

Table 1**Age Wise Classification of the Respondents**

Age (in years)	No. of Respondents	Percentage
60 – 70	28	56
71 – 80	15	30
Above 80	7	14
Total	50	100

Source: Primary Data

The table 1 depicts that 56 per cent of the respondents are between the age group of 60-70 years and 14 per cent of respondents are above 90 years.

Measures Taken to Maintain Good Health:

Good health plays a substantial role in economic development. Good health increases productivity, income and standard of living. Table 2 shows the measures taken to maintain good health for the respondents. The measures taken are boiled drinking water, diet and intake of natural medicine.

Table 2**Measures Taken to Maintain Good Health of the Respondents**

Measures	No. of Respondents	Percentage
Boiled Drinking Water	32	64
Diet	16	32
Natural Medicine	2	4
Total	50	100

Source: Primary Data

Table 2 shows that 64 per cent of the respondents intake only boiled drinking water and only four per cent of the respondents intake natural medicine to maintain good health. It clearly shows that the respondents take effort to maintain good health.

Health Problems:

Sickness is expected to decrease work productivity and life expectancy to reduce economic development. Table 3 shows the health problems of the respondents.

Table 3**Health Problems of the Respondents**

Health Problems	No. of Respondents	Percentage
Joint Pain	10	20
Diabetes	23	46
Hypertension	12	24
Heart Problem	5	10
Total	50	100

Source: Primary Data

Table 3 shows 46 per cent of the respondents have diabetes and 10 per cent of them have heart problem.

Expenses for Treatment:

Medical expense is the major expense of the households. Following table 4 will shows the amount incurred by the respondents for treatment.

Table 4**Expenses for Treatment of the Respondents**

Amount (in Rs)	No. of Respondents	Percentage
Below 250	19	38
250 – 500	18	36
Above 500	13	26
Total	28	100

Source: Primary Data

Table 4 shows that 38 per cent of the respondents spend below Rs.250 and 26 per cent of them spend above Rs.500. It reveals that respondents spend higher costs for their health problems because of more frequent medical visits.

Special Diet:

Good health is useful maintained through special diet. It includes health drinks, wheat, ragi, oats, fruits and vegetables. Table 5 shows the special diet of the respondents.

Table 5

Special Diet of the Respondents

Food	No. of Respondents	Percentage
Health Drinks	5	10
Wheat	22	44
Ragi	12	24
Others	11	22
Total	50	100

Source: Primary Data

Table 5 shows that 44 per cent of the respondents intake wheat and 10 per cent of the respondents intake health drinks for special diet. It reveals that people are now a days highly concentrated on their diet. They are interested to intake special diet.

Expenses for Special Diet:

When people go for a special diet they wish to spend more for it. Mostly it depends on their income. The following table 6 shows the expenses for special diet of the respondents.

Table 6

Expenses for Special Diet of the Respondents

Amount (in Rs.)	No. of Respondents	Percentage
Below 250	26	52
250 – 500	17	34
Above 500	7	14
Total	50	100

Source: Primary Data

Table 6 shows that 52 per cent of the respondents spend for special diet which ranges between Rs.250-500 and 14 per cent of the respondents spend above Rs.500 for special diet.

Findings:

1. Fifty six per cent of the respondents are between the age group of 60-70 years.
2. Sixty four per cent of the respondents intake only boiled drinking water.
3. Forty six per cent of the respondents have diabetes.
4. Thirty eight per cent of the respondents spend below Rs. 250.
5. Forty four per cent of the respondents intake wheat.
6. Fifty two per cent of the respondents spend for special diet which ranges between Rs.250-500

Suggestions:

- Steps should be taken by the Government to increase economic support to aged persons.
- NGOs can give counselling to encourage the aged women to overcome emotional disturbances in the family and society.
- The increasing number of proportion of aged will have a direct impact on the demand for health services. So more health centres to give the treatment for the aged persons may be established by the government.
- Aged persons can be educated to perform Yoga and meditation to improve their health status.

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