
Butwal Campus Journal, Vol. 4, No. 1-2: 37-48, July-December 2021

Research Management Cell, Butwal Multiple Campus, Tribhuvan University, Nepal

DOI: <https://doi.org/10.3126/bcj.v4i1-2.44985>

TREATMENT DECISION: PREFERENCE OF HOUSEHOLD HEAD ELDERLY AMID SOURCE OF LIVELIHOOD IN NEPAL

Durga Bhusal

Assistant Professor, Department of Population Studies, Butwal Multiple Campus, T.U.

Article History: Received 12 August 2021; Reviewed 29 September 2021; Revised 05 December 2021; Accepted 14 December 2021

ABSTRACT

A burden considered elderly people in our work life-related society are in a situation that their potential is not sufficiently recognized for active management. Building and utilization of their abilities is an essential basis for the well-being of senior citizens. The aim of this study is to highlight and discuss the relation between treatment decision, and livelihood sectors of household headship of senior citizens and to explore their anticipation in the context of changing society of Nepal. 565 household head senior citizens as the respondents were taken into account to collect the information about independent and dependent variables. The study used reported source of livelihood as independent and preference to treatment decision as dependent variables based on the data of Nepal Social Inclusion Survey 2018. The study showed source of livelihood favoring traditional healer. Favoring the belief based rather than the facts treatment way is the challenge of society that should be considered seriously. Unprecedented but needy segment of development for the ultimate social and economic progress of Nepal is to modernize the society. However, household head senior citizens have not understood this as the needy matter of change being in a particular source of livelihood.

Keywords: inclusion – materialist - senior citizens - source of livelihood - treatment decision.

INTRODUCTION

The simple understanding of livelihood is just the means of securing a living. How the being is working on the available work with the gained capability matters to decorate the livelihood. Over the last four decades the Nepal has witnessed a significant decline in

mortality and a moderate decline in fertility especially in the later part. As a result, not only the absolute size of aged population increased but its share in total population has also increased. The population of senior citizens is increasing faster is the announcement of Table 1 which is even the notification to raise the concern of elderly people as an issue should be considered taking no more time ahead. The population growth rate of Nepal calculated on the basis of population obtained from the census years 2001 and 2011 is 1.35 but the value for population of senior citizens using exponential growth model for the population of census years 2001 and 2011 is 3.8. This shows that the growth rate of elderly population in Nepal is higher than that of total population. Increasing later lives in rapid rate should be considered for the proper management to get rid of alleged elderly dependency in Nepal by transforming skill, knowledge and experience of elderly towards elderly followers as well as new generation.

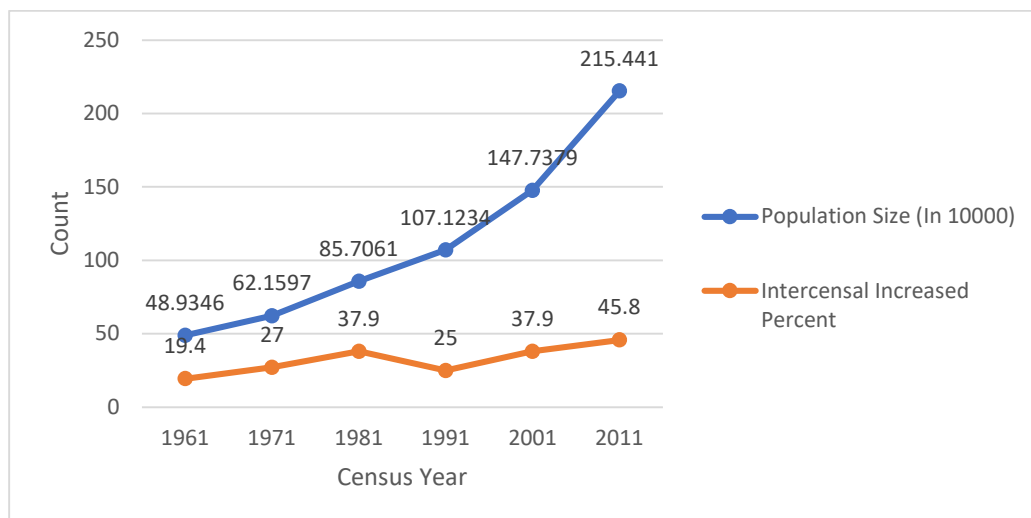


Figure 1: Changing Size of Senior Citizens 1961-2011, Nepal

Note. Information shown in Figure 1 regarding census years 1961, 1971, 1981, and 1991 are taken from the Table 1 of Subedi (2004) and as such census years 2001 and 2011 are adapted from Singh (2014) Table 3.1 of population monograph of Nepal volume II (Social Demography).

Generally, aging is considered wrongly as the elderly but is a process in a well-thought-out explanation that starts from the moment of conception and ends at death (Crandall,1991). Tasks, ethics, customs, and esteem are specific in different stages of

human life an individual is passing through. When an individual enters into elderly an upper stair in the ladder of life stages, he/she becomes more delicate and require more concern, although some of them are even active in the physical and mental activities as in younger. Age related behaviors in aging process are multidimensional because individuals age as biological (changes in cells), social (changes in engagement), mental (changes in cognition), and even spiritual beings (changes in perception) (Moschis, 2012). Senior citizens with unmet needs are more likely the sufferer of inferiority feelings which may get resulted in frustration, and then depression.

Gerontology is an area of both academic and policy interest. Three main perspectives towards the study of ageing, later life and old age within gerontology are the biological, the psychological and the social. Biologists refer to ageing as 'senescence' which describes decreases in the efficient functioning of an organism with age as a result of natural processes rather than abnormal processes which bring about pathology and disease. The psychologist is interested in both differences in behavior between individuals and changes within individuals with the passage of time. Social gerontology explains that ageing is not a homogeneous experience which affects every individual within the same society in a monolithic fashion (Victor, 2004).

LIVELIHOOD IN NEPALESE CONTEXT

Means of gaining a living is simply understood as a livelihood. Livelihood for enhancement of Capabilities as an end and capabilities enable the livelihood to be gained as means play around the circular path throughout the life. it is perhaps what Chambers and Conway (1992) implied when defining sustainable livelihoods as:

Management of and recovery from tensions and shocks make the livelihood justifiable, and enhance the competence and assets even in the future only on the respect of foundation of natural resource. A household may be enabled to gain sustainable livelihood security through ownership, rights, stable employment, varied repertoires of activities.

Defining livelihoods in the Nepalese context is not straightforward and it is thinkable to identify a number of different frameworks in operation in Nepal. A person or household may also choose a livelihood, especially through education and migration.

Those who are better off usually have a wider choice which is generated by economic growth. Traditional treatment ways even in urban sectors migrated from rural society are not able to change the concept embedded for years due to weak educational influence and inadequate trustworthy modern treatment ways available in Nepal.

A study carried out in Kaski and Sangja by Speck (2017) based on participatory method with 58 semi-structured problem centered interviews, 8 biographical interviews, and 2 group discussions mentions the feeling of respondents. One representative response of a 78-year-old man is that he had felt misunderstood and dominated by his children because of their rude behavior giving orders instead of expressing respect, and another representative response of an elderly woman is that she had showed a wound on her head due to been hit with a Gagri (water vessel) by a member of her family because of her old age inability of contribution to the household's income. These two examples clarify the importance of old age income to be happy in a family. This paper is trying to examine the involvement of senior citizens in respective source of livelihood, and their household headship.

METHODS AND MATERIALS

This country study contributes to research to provide an analysis and better understanding of the opportunities held by older people to income security and identify strengths relating livelihoods with regard to provision of economic support. This paper reports on data drawn from the cross-sectional survey study carried out during March-June, 2018 in Nepal Social Inclusion Survey (NSIS), Central Department of Anthropology (CDA), Tribhuvan University. The survey was intended to yield nationwide representative estimations. Structured questionnaire used by the survey in the sample of 17600 household head throughout the nation. Among 3842 respondents as the head of the household, senior citizens recorded were 2813 and only 565 household head senior citizens were asked about source of livelihood. The analysis is confined to the research questions "first preference for treatment of sick member of the family" as dependent variable and "main source of livelihood of the family" as independent variable used in this article. Household headship of senior citizens is used as the respondents for the purpose of this article in order to establish the relation. Source of livelihood was allowed to significant test regarding treatment decision. The hypothesis "source of livelihood affects the treatment decision" was tested using the model of one-way ANNOVA. The relevant

literatures regarding livelihood of the elderly are reviewed in order to contemporary up-to-date information.

RESULTS AND DISCUSSION

Asset accumulation, asset diversification, and support are the ways to ensure livelihood of older persons. A regular and consistent economic safety for older persons is not guaranteed by friends, relatives and neighbors who are able to and ethical to provide only emergency backing. Some older persons have no access loan opportunities due to lack of land ownership documentation (Erb, 2011). General two considerations regarding livelihood are materialist and idealist understandings, where first one concerns about the access to land, poverty, development, vulnerability, coping strategy, and second pays the greater attention to analyze the identity and inclusion/exclusion of social group (Upreti et.al., 2012). It seems at present that every individual is engaging in self-regard and the existence of fake love has weakened philanthropy. The traditional thinking towards senior citizens has led them to get faced various economic problems. Therefore, senior citizens should be attentive to the situation of the probable lack of source of income and company of children (Mohyuddin & Rehman, 2015). The socio-economic problems they would be facing should be inferred at this time for their comfortable future. If the despondent situation is not handled in time, the quality of life would not better. Elderly people living with lack of proper resources could not improve their social status and accordingly they are suffering of deprivation in Nepal.

People, activity, asset, and gain are the four categories of livelihood according to Chambers & Conway (1991, p.7). They describe the relationship of livelihood components as:

Outcomes from the assets is only possible from the doing activities of people whatever their age using their capability. Claims as intangible asset are the requests at periods of stress to demand for substantial, ethical or other applied support, and Access is the chance to exercise for using resources or stores or services. Resources as tangible assets comprise terrestrial and aquatic objects, livestock, whereas Stores include nutriment, valuable metals like gold, and cash.

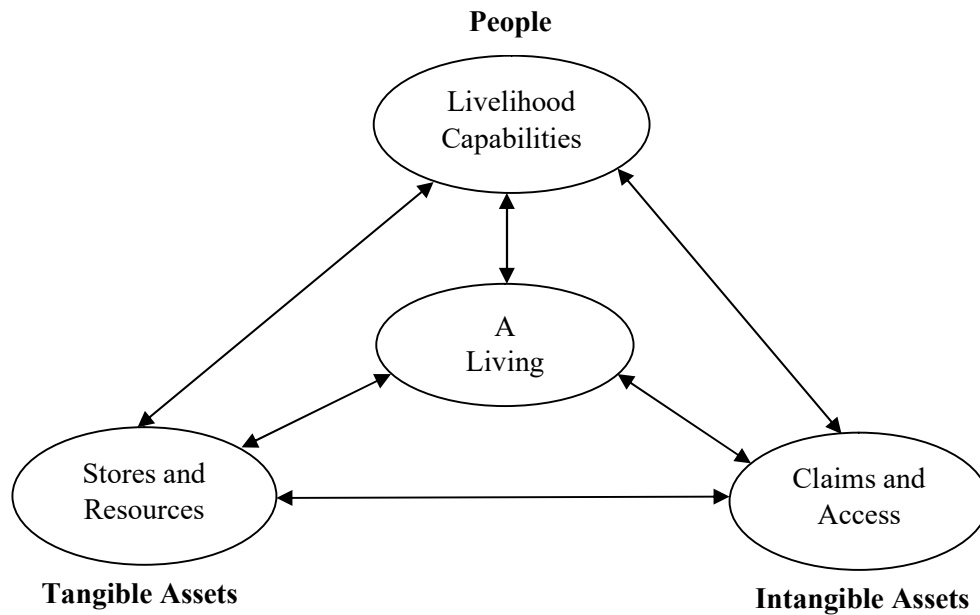


Figure 2: Relationship of Components for a Living

Note. Adaptable to 'Components and flows in a livelihood' given in an IDS discussion paper 296, December 1991 by Robert Chambers and Gordon R. Conway, in Figure 2.1, p.7.

Honest usage of above mentioned four categories of livelihood pushes the elderly people towards active aging which ultimately responds healthy aging and then longevity becomes inevitable which demands more and sustainable work for their livelihood. Figure 1 presents the relationship between the components of a living keeping it as the core of the livelihood.

Old age allowance introduced in 1994 by former Prime Minister Manmohan Adhikari was as helping material for deprived households to meet basic survival needs—we used to eat DHIDO but the nation has helped buy some rice which my grandchildren love to eat and we hear rice is nutritious too. But now it is well-thought-out as an essential pillar of the state's social protection system (KC et.al., 2014). Identification of source of livelihood and involvement of senior citizens for their meaningful later life keeps different meaning instead of the getting old age allowance from the government. The Pearson correlation value was -0.035 between main source of livelihood and age of 17600

participants is significant at 0.01 level where the negative relation shows that increasing value of age that is moving towards senior citizens lesser participation in main source of livelihood.

Table 1: Population distribution by main source of livelihood of family & age group of household head senior citizens as respondent

Source of livelihood	Age group				Total
	60-64	65-69	70-74	75-99	
Agriculture/livestock	134	93	44	31	302
Cottage industry/ industry	1	1	0	0	2
Business - Retail, Wholesale, etc.	29	16	8	5	58
Casual labor (Agriculture)	6	7	3	1	17
Casual labor (non-Agriculture)	23	17	6	4	50
Service (GOs/NGOs/Corporate/etc.)	16	16	4	2	38
Foreign employment	10	19	7	4	40
Pension, allowance, interest, etc.	14	9	6	9	38
Indigenous/Traditional occupation	5	6	1	0	12
Other	5	2	1	0	8
Total	243	186	80	56	565

Table 1 tries to explain the attachment of the household head senior citizens to the main source of livelihood. The sex difference between those senior citizens who are household head as respondents of the household question—what is the main source of livelihood of your family? Only 51 females as household head among 565 household head senior citizens were asked to respond. One of the prime causes of women have no voice in representing themselves and their work is that almost surveys are engaged by men enumerators interviewing mainly men respondents (Joshi,2000) is justified in this study too. 565 household head senior citizens were responded about main source of livelihood which is mentioned in Table 1 below.

Table 1 shows that 302 households lead by senior citizens responded agriculture/livestock as the main source of livelihood among the 10 categories which is followed by business of retail or wholesale and service comprising 58 among 565. Casual labor (non-agriculture) was responded by 50 households in third position. Service, and pension,

allowance, interest are those sectors of involvement of senior citizens as their main source of livelihood where equal number of 38 senior citizens are pointing. 40 senior citizens were responded the research question for the foreign employment as the main source of livelihood in their family. This presentation shows the living arrangement of senior citizens were set in the household holding the agriculture/livestock as the main source of livelihood. Transformation of traditional occupation even was in low number points that indigenous skill can lead to address the need of modern generation to live. This is the beauty aspect of the agriculture led economy of Nepal. The main source of livelihood in non-agricultural sector in those families which were led by senior citizens points the weak presentation which may be because of their diminishing activeness. Least participation in cottage industries and industries as main source of livelihood in the elderly led family shows the need of leadership transformation, but it does not mean that the family does not involve in agriculture in the headship of younger generation.

The information obtained from Table 2 is that the respondents in agriculture source of livelihood are more likely to select treatment center of traditional healer, and governmental hospitals. From this it can be inferred that economic strength of the respondents associated with the agriculture as the source of livelihood has worked for the behavior of treatment decision. Large number of respondents in business sector preferring private hospitals for the first treatment of the sick family member adds the justification.

Senior citizens as headship of the household based on source of livelihood to treatment decision was tested through One-way ANOVA.

H1: Source of livelihood significantly affects the treatment decision in search of healing center for the sick family member.

The relationship of the sources of livelihood has significant impact on treatment decision, $F(9,555) = 5.168$, $p < 0.001$. The summary of the finding has been shown in Table 3.

The result of one-way ANOVA showed there is significant difference between the sources of livelihood regarding treatment decision. The test result favored the hypothesis that there is significant difference between sources of livelihood.

Table 2: *Distribution of the respondents in cross tabulation by main source of livelihood and treatment decision*

The main source of livelihood of the family	Treatment decision					Total
	Traditional healers	Baidya/Amchi	Government hospital/PHC/HP/CHU/UHC	Private hospital/clinic	Medical shops	
Agriculture/live stock	40	2	159	74	27	302
Cottage industry/industry	0	0	0	1	1	2
Business - Retail, Wholesale	0	1	20	34	3	58
Casual labor (Agriculture)	0	0	8	3	6	17
Casual labor (non-agriculture)	0	0	31	14	5	50
Service GOs/NGOs/Corporate	0	0	15	20	3	38
Foreign employment	0	1	20	16	3	40
Pension, allowance, interest	2	0	15	20	1	38
Indigenous/Traditional occupation	0	0	3	5	4	12
Other	0	0	5	3	0	8
Total	42	4	276	190	53	565

Table 3: One-way ANNOVA test result of source of livelihood regarding treatment decision

ANOVA	Sum of Squares	df	Mean Square	F-stat	Sig.	H ₁ Supported
Between Groups	38.462	9	4.274	5.168	0.000	Yes
Within Groups	458.965	555	0.827			
Total	497.427	564				

Nepal is experiencing and exercising patriarchal culture that the scholars having capability of explaining eastern literatures interpreted the rule of discipline concentrating

more towards the female. Accordingly, patriarchal culture tries to restrict women in household decision-making roles, and as such to strengthen their voice outside the household. Although women are engaging to productive work to provide the income as primary earner, this study presented an illustration of sex bias even in asking the question. Approximately equal number of participants are essential to provide the result of comparison. Sometimes the random selection of individuals strengthens the logic of study bias. It is understood as spontaneous that efficient female is accepting inefficient male as breed winner in the context of mainly patriarchal culturing bearing Nepal but vice versa is not understood as normal to accept.

CONCLUSION

The number and proportion of senior citizens are increasing in contemporary society. So, we need to know and research much more about aging and old age which is a significantly important human life period. Although, psychologists, sociologists, medical, and nursing professionals are frequently examining the old age problems. Furthermore, universities are offering courses on aging, and governments are realizing the senior citizens as potentially powerful sections of social force. Abundant leadership of senior citizens in the political sector of Nepal is comfortable to make policy in order to consider the senior citizens as human resources having skill, knowledge, and experience as an inevitable component of development. I think the study of senior citizens regarding work is not common but critical thinking says that “doing differently the same thing can give the surprising result”. Social scientists believe that acceptance, affection, and attainment can manage the pleasure of senior citizens.

Household leadership of senior citizens in the source of livelihood of the agriculture sector seems to be traditional on their preference to select the healing center for the sick family members. The preference from the position of household headship of senior citizens being in a particular source of livelihood matters on the selection of treatment center. This can be inferred that the behavior on treatment decision is led by economic strength associated directly with the source of livelihood of the family. Source of

livelihood is directly proportional to the income level. Income level is concerned to the behavior of treatment decision. The senior citizens living in urban areas could not have run their households with their leadership which can be inferred with the help of their smaller number of engagements to the non-agricultural sector. This helps to conclude that the self-earned income of senior citizens may not have led as per their needs and helps to recommend further study regarding the effects of supported income to the urban inhabitant senior citizens.

REFERENCES

- Chambers, R., & Conway, G. (1991). *Sustainable rural livelihoods: practical concepts for the 21st century*. Discussion Paper 296. Institute of Development Studies (UK).
- Crandall, R. C. (1991). *Gerontology: A behavioral science approach*. McGraw-Hill.
- Erb, S. (2011). A study of older people's livelihoods in India. Help Age International and Cordaid. Unpublished report.
- Joshi, S. (2000). Counting women's work in the agricultural census of Nepal: a report. *Gender, Technology and Development*, 4(2), 255–270. doi:10.1080/09718524.2000.11909957
- KC, S.; Upreti, B.R., Paudel, S. B., Acharya, G., Tandukar A., & Babajanian, B. (2014). What does Nepal's Old Age Allowance mean for the elderly? Evidence from Rolpa. Briefing Paper 7, October 2014. Secure Livelihoods Research Consortium.
- Mehata, S., Baral, S.C., Chand, P.B., Singh, D.R., Poudel, P., Barnett S., (2013). *Nepal household survey 2012*. Kathmandu: Ministry of Health and Population, Government of Nepal.
- Mohyuddin, A., & Rehman, I. (2015). Economic issues of senior citizens. *European Academic Research*, 3(6), 7050-7064.
- Moschis, G. P. (2012). Consumer behavior in later life: Current knowledge, issues, and new directions for research. *Psychology and Marketing*, 29(2), 57–75. doi:10.1002/mar.20504
- Singh, M. (2014). Aspects of ageing. *Population Monograph of Nepal Volume II (Social Demography)*, 73-110.
- Speck, S. (2017). They moved to city areas, abroad: Views of the elderly on the implications of outmigration for the Middle Hills of Western Nepal. *Mountain Research and Development*, 37(4), 425-435.

- Subedi, B. P. (2004). The aged and the marginal: Social geography of older people in Nepal. *Himalayan Review*, 1-18.
- Upreti, B. R.; KC, S.; Mallett, R.; Babajanian, B.; Pyakuryal, K.; Ghimire, S.; Ghimire, A.; and Sharma, S. R. (2012). *Livelihoods, basic services and social protection in Nepal*. Working Paper 7, August 2012. Secure Livelihoods Research Consortium: Nepal Center of Contemporary Research.
- Victor, C. (2004). *The Social Context of Ageing: A Textbook of Gerontology*. Routledge.