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6. PERCEPTION OF ELDERLY PEOPLE REGARDING THE QUALITY OF LIFE AND WAY FORWARD

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ABSTRACT

To assess the perception regarding the quality of life, a qualitative study was conducted on 20 old people of balance gender in Dhaka, Bangladesh. Most of the participants of our study were upper poor class and literate. Male participants were a little higher than females. The majority were between 60 and 65 years. They were significantly more active, independent, and took part in productive work contributing in the country's economy, and had significantly greater decision power than other age group. Quality of life of the elderly is related to physical and, economical wellbeing and coping mechanism during old age. The government of Bangladesh has taken varying degrees of initiative to improve the elder condition, but that was not publicized well. Old age Allowance should be increased to BDT 5000/ (\$50). Family attachment and emotional support is also related to the self-assurance, self-respect, and self-drive of the elderly. Parent's Care Act 2013 should be implemented for retrospective care of seniors.

Key word: Perception, elderly, senior citizen, older people, aging, quality of life

INTRODUCTION

Elderly are the people whose age is 60 or above (Rahman 2022a). Currently, there are about 15 million people aged 60 years and above in Bangladesh. By 2050, number will increase to 36 million (22 percent of the total population (Rahman 2022b). Declining fertility rate, reduction in infantile mortality and increase in solvability at older ages are three main cause for increasing elderly population in Bangladesh (UNFPA 2017).

However, aged population faces more challenges than any other age group. Every day government of Bangladesh is taking new steps to provide care to aged population, still its difficult to provide door to door care for this vulnerable age group (Ahmed et al 2020). So we can clearly understand the burden we are facing and how much its going to affect the country, if well-formed structure is not there to provide care to this vulnerable group. Regarding elderly People and Human Rights Munira Jahan (2014) said that about 40% of elder people live below the national poverty line and most of them live in rural areas with limited access to health, water, sanitation and other services. A study showed that 50% of older people in rural Bangladesh suffered chronic energy deficiency and 62% were at risk of malnutrition (Kabir et al 2016).

Financial constrain is another main cause of vulnerability for the aged population (Siddiqui, 2013). The underlying causes for economic instability are unfit to work of elderly, less education, no support from the descendants, no son want to pay loan (Barikdar, Tahera and Lasker 2016). To provide monthly financial aid to the elderly population in the year 1997-98 government of Bangladesh started paying an aged allowance of 100 taka (\$1) per month and initially, 4.03 (half million approx) lac of the aged people were registered. Currently, its being increased to 500 (\$5) taka per month and distributed among 57.01 lac (5.701 milion) elderly people (Department of Social Services, Ministry of Social Welfare Bangladesh 2021). The problem is the amount provided is too small and the biggest challenge is to get registered for it. Though the ministry of information and technology is doing there level best to collect all data through the support of the IT sector still most of the elderly population having low educational background is still unaware of this service (Rahman, 2012). At the same time corruption causes more problem to make this service available for exactly elderly vulnerable group. This financial constrain sometimes leads to psychological problems (Roy 2002).

A large proportion of the elderly people suffer from emotional stress. Death of spouse, family members living away from them and unfriendly society being the underlying cause for the emotional stress. Yet, no law being established to ensure emotional support or making children responsible for taking care of their parents. The problem is more pronounced now a day in the urban elderly population. As their children having good educational background, they try to migrate to foreign countries keeping the parents alone at home. So they suffer from loneliness and feel neglected (Ferdousi 2020). To combat this problem, 'Parents care act 2013' being formulated. The law states that, to ensure social security of the senior citizens, compels the children to take good care of their parents. According to the law, the children will have to take necessary steps to look after their parents and provide them with food and shelter. Each of the children will have to pay 10% of their total income regularly to their parents if they do not live with their parents (Database of national labour, social security and related human rights legislation, 2013). The biggest drawback of this law is only the aggrieved parents can complain. If the parents are illiterate and or not in a condition to raise the complaint, then the law can't act. To add to the dilemma, the law has a lengthy procedure to come to a judgement so most of the cases filed by the parents stops in the midway and justice is denied.

Elderly people are still considered to be a burden for the family as they are unfit to work, need special care, which increases financial cost and more the modern busy life style children

are more materialistic, so they like to concentrate on their life forgetting the need of their parents. So generation gap becomes a key issue for old age vulnerability (Rahman 2005). One big problem for this is lac of mental adjustment between daughter in law and mother in law and daughter in law. If a couple has only one daughter, then by social norms the daughter goes to her husband's house and the old parents remain alone. And the law does not give that support to the daughter where she can take care of her parents. This is another big pit fall of the Parents Care Act.

However, what is perception of elderly regarding old age? How are they? Are they good with their life? How they cope up the with their present situation? What is their acceptation toward their family? is a big question. This article documented the current perceptions and hopes of senior citizens of Bangladesh. These answer may also understand their quality of life to policy initiatives.

METHODOLOGY

A qualitative study was done on 20 elderly people to understand their perceptions regarding thier life at Bangladesh Bioethics Society in January–June 2022 to assess their perception regarding quality of life. Participants have been selected purposively from three care homes of Dhaka Bangladesh. 60 and over 60 aged population living in Dhaka city and signed the informed consent were included in the study However, severe illnesses, mentally disabled participants were excluded from this study.

Ethical clearance was obtained from the Ethics Review Committee of the Bangladesh Bioethics Society. Before beginning the survey, respondents signed or thumped the informed consent agreement. **The statistical** groundwork was done by SPSS version 22.0 software. Distributions of frequency and percentages were used to evaluate socioeconomic characteristics.

Limitation: The results depended on only the given responses of the attended. Participants are not reflective of the whole population of Bangladesh because participants were only from three centers in particular areas of Dhaka city. However, not all the issues had been fully investigated. Therefore, in the coming years, more research throughout Bangladesh using a larger number of subjects might be verified.

RESULT & DISCUSSION

There were 57.1% male and 42.9% female, age range between 60 and 90 years, mean age \pm SD was 69.12 \pm 7.82. Majority (65%) had age between 60 and 65. More than half (59.5%) were married. There was significantly higher married male (37.66%) than married female (21.82%) ($p < 0.001$). One third was widow (33.5%). The male/female widow ratio was 15.58% vs 17.92%. Most were Muslim (94.0%). Education status of a three quarter had a bachelor degree (27.0%) and one-tenth had no education (12.7%). A little more than half (56.1%) of the participants were selected from a Government Shelter Home, Mirpur-1 and a quarter (26.5%) from Child and Old Age Care Centre, Kalayanpur, a private shelter home and a less than quarter (17.4%) were from Bangladesh Institute of Health Sciences (BUHS), a private hospital at Mirpur, Dhaka. More than half (57.9%) were dependent on family members. However, less than half were still self-dependent (41.3, 159). More than half could take part in family decisions (59.5%).

What is ageing? When asked what aging is, many older people expressed the following functional declines: Altered mobility, increased pain, altered short-term memory. However, they perceived physical health as part of the aging process. This was especially noticeable among participants who were 65 years of age or older, who shared a sense of acceptance of this 'slowdown' process. Metaphorically illuminated insights revealing this participant's perception of aging.

“Loss of physical capacity, loss of mental capacity, known capacity, gradual relinquishment of social roles, economic status, dependence is aging: very painful” (Male, 65 years)

However, elderly people under 65 perceive the life differently than those above 65. They were in good health and thought positively. They maintain their health and ward off age-related disorders through physical activity. Physical activity was viewed by older individuals as a component of a healthy lifestyle that they connected to the preservation of independence and the prevention of disease.

“At 60 I never feel old and feel active and healthy. However, my income has drastically reduced after retirement and I am looking for a suitable job or gainful engagement opportunity. I think I can work for another 10-15 years.” (Male, 60 years).

Older below 65 reasonably were quite active and less functional dependence, which may be reflected in their daily life activity and quality of life. The age between 60 and 65 are less vulnerable to health and socioeconomic risks (Salam et al 2021). Therefore, Government can

think to increase the retirement age to 65 years to create opportunities and they can utilize their productive years for the benefit of society and can establish a positive image in the country (Barikdar et al 2016).

How are you? Traditionally Bangladesh is a agro-based society, composed of joint family. The older people are respected by all and enjoyed important social positions (Rahman 2017), often asked for advice, especially during major events like marriage, name-giving ceremonies, etc, and take care of grandchildren with friendly relations (Begum and Islam 2019). The cultural and religious traditions of Bangladesh is expected that families specially son will care for their own elderly members (Islam and Nath 2012). Still in Bangladesh older persons are respected and valued in society. In this day in rural and urban areas especially urban areas, both males and female are now employed. In those families where parents are employed, grandparents are taking care of the family (Barikdar et al 2016). Older people resolve family as well as community-level problems (Barikdar et al 2016; Islam and Nath, 2012).

In our study, more or less a quarter of participants had 2, 3, and 4 living children respectively (23.9%, 28.8%, and 19.5%). Actually, fertility rates in the mid-twentieth century were higher in many parts of Africa, Asia and Latin America, and the Caribbean, had above five children per woman, on average but the fertility rate has decreased now a days (Salam at al 2021). Older adults expressed the desire to achieve relationship harmony not only in their relationships but also amongst individuals in their social network.

“As an old man many of my relatives visit me from my village. They bring me fruit of the palm tree. And they respect me.” (Male, 70 years)

or

“Since I could not get admission in school, my childhood and youth were very difficult. I had to work under someone's orders since I had no formal educational background. I worked hard thinking that this could be the case with my children and I enrolled all my children in school. I am with the children. Today I am happy.” (Male, 77 years)

However, one tenth participants had bad relation with other family members. In case of the son and brother family participants had significantly higher bad relation. Actually, abuse rose to 13% among the urban elderly. Of 86.9% in urban participants felt that they never assaulted. The occurrence appears to be more often among women. In urban areas children and other and relatives were involved in inflicting physical abuse (Begum and Islam 2019). Those who were living with their offspring house suffered from abuse including family violence, verbal assault,

isolation, threat, reduction of personal freedom, hazardous living conditions, lack of supervision, want of medicine and money, withholding of good food, etc. (Hossain 2016). But they forget that their parents have finished all their strength and property for their education as well as their better livelihood (Rahman 2017).

I am totally dependent on my elder son for everything. As a 69 years old I cook all day at home, wash dishes, take care of small children. I have to endure harassment and even torture because of my old age. There is no one to listen to me. (Female, 69 years)

This exemplified the tension between older individuals' expectations and those of their financial providers, who were frequently their offspring. The psychological health of older persons was said to be significantly impacted by these sources of financial conflict, frequently leading to departure from the family network. Older persons who believed they were having financial difficulties saw themselves as a burden and felt excessive guilt and shame. Their elevated levels of psychological anguish were a result of this. Family disagreements and/or a family illness were consistently reported to have a negative emotional impact

I have been bedridden for almost 2 years and need regular care. My daughter-in-law and grandchildren do not allow me to go to the hospital/clinic. Never takes proper care of my food, hygiene, and medicine. (Female, 75 years)

What should be the Old age allowance: Of 1% had bedridden and depressed. More than half (53.0%) of the participants needed 2000 to 5000 /= for monthly treatment costs. A less than a quarter needed 5000-10,000/= The cost of treatment was born by son for a little more than half of cases and the treatment of one third cases was maintained by themselves.

Bangladesh Government introduced Old Age Allowance (OAA) in 1998. The age of 65 years for male and 62 years for female whose yearly average income not exceeding 10,000 BDT are considered eligible for the old age allowance. Initially Allocation was for 100 takas per person latter amount increased to 400 BDT. However, in 2010, this changed when the Government of Bangladesh increased the eligibility age to 65 thereby excluding all those between the ages of 60-64.

In our study three quarter of the respondents (73.2%) did not get any government allowance. Only a quarter did get the (26.8%) government allowance. Maximum (92.5%) did not get any non-government support. Only few (7.5%) got the help of non-government support. Most of the participant expect the allowance should increase in 5000/=

I have worked throughout my active life. Now I am unable to work. Can't rely on old age allowance, because old age allowance is very small compared to my food, medicine and daily needs. Cost is high in this inflation. Old Age Allowance should be 5 thousand (Male, 67 years).

How to cope with the old age challenge: It can be extremely difficult, especially when become older, to adapt to and manage emotional issues when psychological stress is at an all-time high. Respondents psychological well-being is positively impacted by their capacity for adapting.

"I read the Koran. God bless me every second. I seek help from Him and He responds as He always does (Male, 69 years)

or

"In the Bible it was written that your brothers and sisters will leave you but I will not. After that I was very satisfied and prayed to God and thanked Him". (Male, 70 years)

A deeper understanding of Allah/God can help the elderly stay healthy and possibly live a fruitful life. Participants emphasized that the power of prayer was used as a common coping mechanism and stimulated feelings like optimism and hope. Participants' faith in a higher power not only helped them get through challenging circumstances, but it also gave them a positive outlook on aging.

However, female participants acknowledged that they frequently endured verbal abuse from their relatives, particularly their daughter-in-laws, but due to their cultural or religious ties, they opted to "remain silent" in order to avoid social.

"I think my husband died is my big sin. But what can I do? I'm already old, already disabled, so I have to keep quiet". (Female, 75 years)

or

"I don't talk to my kids much, I don't joke with my kids, talk very little. I don't want to pressure them. (Female, 68 years)

Again

"Don't be sad, don't be angry, you must comfort yourself"(Male, 64 years)

What do accept from family: Most of the respondent feels as below.

"Elderly members of the family should not be neglected but should be respected should be found and made to feel that they are still useful and they want family."

In our study, some of the respondent thought that children should act what they did in their childhood. Parent Care Act 2013 of Bangladesh tried to ensure that the children have to take necessary steps to look after their parents and provide them with maintenance. But it is not in fully functioning yet (Barikdar et al 2016).

CONCLUSION

The study's findings, taken together, shed light on how people view aging in various family circumstances and showed a diversity of strategies for managing these social, physical, and emotional challenges through adaptation. Understanding the fundamentals of how older people interpret the aging process and how they adapt to such changes may aid in the future development of better assessment instruments for the aging population. Understanding of older people's perceptions can be used to develop more targeted intervention programs that can address the problem of global aging. Although the Bangladeshi government has made some efforts to improve the situation of the elderly, those efforts have not received enough attention. Old age allowance should be increase to BDT 5000/ (\$50). Family attachment and emotional support is related to quality of life of elderly. The government should execute the Parent's Care Act of 2013 to improve the quality of life for seniors.

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