

THE EMERGING NEED OF ELDER'S INSTITUTIONAL CARE IN PAKISTAN

Dr. Muhammad Abrar, Dr. Sakina Riaz, and Hamid Alam

ABSTRACT

In Pakistani society, care for elders is considered as the responsibility of the family members. However, Pakistani society is in a transitory stage regarding the care of senior citizens, due to the increasing ratio of family nuclearization, attitudinal change toward elders, weaker social relations, industrialization, generation gap, the brain drain and participation of women in employment. These changes have adversely affected the status of senior citizens, particularly the oldest old predominantly in the urban areas. For the present study, data was collected from Gulbahar town, Peshawar, where thirty (30) respondents were selected from the target families, through purposive/convenience sampling. The collected data were analyzed thematically. According to the data most of the respondents supported the idea of institutional care for the senior citizens. Institutional care for elders is realized due to poverty, busy schedule of the family members and women empowerment.

Keywords: *Elders' Institutional Care; Social Relations; Family Nuclearization.*

INTRODUCTION

Due to the emerging improvement in the health technology, life expectancy at birth has increased and simultaneously, the world fertility rate has declined from 5 to 3 children per women from 1950 to 2000 (United Nations, 2003). In the context of Pakistani society, the demographic transition started in 1990s. According to Arif and Ahmed (2010), this demographic transition is the result of decreased mortality and fertility rate. According to the population census of Pkaistan in 1998, the numeral quantity of elderly who age 60 years and above, as numbered, was about 7.34 million, which constitute approximately 6 percent of the whole population, while 40% of households contain atleast one elderly person (GOP, 2002). As per the United Nation's estimations, the existing population of Pakistan is about 191,326,717, which represent

the 2.57% of the total world's population (United Nations, 2002). Amongst these, there are 18 million people who fall in the age group of 60 and above. (Hasan, 2016). However, recent data show that the total number of senior citizens in Pakistan is 12 % of the total 86,132,751 registered voters in the country. These figures indicate an increasing trend in the population of older people in Pakistan. The number of senior citizens is growing in the country, while the socio-cultural and religious values of the society regarding respect and support of elder population are gradually eroding. It is observed that the attitudes of the young generation are changing towards the elder, due to increased urbanization, industrialization, mass education, materialistic thinking, decline of religious values, generation gap, youth migration from rural to urban areas, erosion of morality in the economy, women's participation in employment, brain drain and financial pressures. As a result of these changes, the older people are labeled as outdated, rigid and an economic liability on the family and society (Verry, 2000). Moreover, majority of the elders have to face severe health and security related problems due to inadequate financial resources. (Yaseen & Zaman, 2017).

In traditional societies, aging of the population is not considered as a problem, because there is a strong social proximity within the social structures, which provides social security to its members including the senior citizens (Kumar Vijay, 1999). In this era of modernization, the traditional network of family relationships, respect, and care, is seriously disturbed, as the fast variations in social systems have affected the social institutions directly. Yet, older people have been facing many psychosocial problems like social isolation, loneliness, shortage of economic resources, financial and physical dependency, social mobility, authoritative problems, and even social and family adjustment problems in the country (Rehman & Mohyuddin, 2015). In this regard, Javed and Mustafa (2013) stated that the prevalence of depression among the elderly in Pakistan is as high as 66% of total elderly population, which is an alarming situation.

Nevertheless, the Pakistani society is still considered as a traditional society, but due to the gradual introduction of modernization, the status of senior citizens has changed considerably in different spheres of life. The family members of the senior citizens are now willing to transfer the responsibility of elderly care to the government due to multifaceted reasons. However, due to the prevailing norms and values of the society, majority of elders are still cared by the family institutions (Maqbool, 2012; Kujur

& Ekka, 2010). This change in the deliberations of the family members has affected the status of the elders directly as well as indirectly. For example, the elders today are marked as idle, conservative and orthodox by the young family members. As a result of such thinking, an age based discrimination and stereotyping regarding older people is manifesting. Although ageism is found both in developed and developing countries, but it is considered as a critical social problem in the developed countries (World Health Organization, 2002).

However, aging is rapidly becoming a social problem for the Asian countries as well (Cliquet & Nizamuddin, 1999). In the Asian cultures, including Pakistan, the practice of ageism is growing, particularly in urban areas. Ageism is considered as a result of different factors, including the breakdown of traditional social structures, emergence of new trends, overburdened familial networks in the face of poverty, and limited man power in nuclear families to take care of the oldest old. Such changes push the family members toward the institutional care of the oldest old family members. (Sulman, 2008). Therefore, there is a growing need to establish an alternative care or support mechanism for the welfare of these socially vulnerable inhabitants in the country.

RESEARCH QUESTIONS

- What is the response of family members toward the institutional care of oldest old family members?
- What is the role of poverty in the emergence of institutional care of oldest old family members?
- What is the contribution of women's employment in the institutional care of oldest old family members?
- What is the role of busy schedule of family members in the emerging trend of institutional care of senior family members?

RESEARCH METHODOLOGY

This study is qualitative in nature, thus, data was collected through semi structured interview for the collection of in-depth information. It is asserted that the sample size in qualitative research must not be too large or too small as it is problematic to extract thick, rich data from large sample size while small sample size also cannot produce a detailed information (Mason, 2010).

Before conducting the research study a pilot study, for identification of the respondents in Gulbahar town, Peshawar city, was conducted, to know about those families having the oldest-old (85+ years) family members. Gulbahar town was selected as the universe because the problems of senior citizens are more severe in the urban areas than in rural areas. The category of the oldest old was selected, because the care of such people is a tougher task as compared to the young-old (65-75 years), and the older-old (75-85 years). After using the door to door survey strategy in the universe, seventy (70) family units in the target area, having the oldest old family members, were identified at the initial stage. Out of the seventy (70) family units, the researcher selected thirty (30) respondents on the basis of convenience/ purpose sampling. Besides this, the researchers have used the field observation method for in-depth evaluation of the research. This technique was quite helpful, especially when the respondents were unable to address the issues in a proper manner. Furthermore, the researchers have used the oldest-old category as a strategy and have obtained the data from older-old and oldest-old (75-85 years) people. Hence, thirty (30) respondents from the family units in the target area who were meeting the criteria of having the oldest-old family members, were identified after taking the ethical considerations. The health status of the older people was another important consideration of the small sample size. Because of the health status of the older people and their dependency, both physically and financially on others, it was very difficult for the research team to conduct the interviews with the physically weak older people. Thus, under this social scenario, the researchers only approached those older people, who were able to spend time and were willing to participate in the present study. Five key themes were identified from the data obtained from the field survey. Furthermore, thematic analysis were carried out and are narrated separately in the discussion section of this paper.

DATA ANALYSIS AND DISCUSSION

Theme I: Elderly Care a Tough Job

Elderly care is considered as a staggering task. Due to such thinking, the attitudes of family members have changed towards the senior citizens, particularly the oldest old (85+ years), who are almost entirely dependent upon their family members. According to Dildar and Saeed (2012), it is considered difficult by the family members to take care of the elderly members for longer period of time, particularly in the case of their prolonged

medical and psychological illness such as dementia. According to Aneshensel et al. (1997), this situation pushes the caregivers towards physical, emotional, and financial problems. Provision of care for elders, particularly for the oldest-old is very difficult for the family members, because it often restricts them to maintain their individual and public life, besides fulfilling the occupational performance simultaneously. They have to provide the physical assistance to the elderly in their daily functioning in addition to fulfil the financial, social and spiritual needs (Qidwai & Ashfaq, 2011). These obligations and provision of necessities often create an extra burden on their family members or caregivers, unpleasantly imposing an additional psychological as well as domestic responsibility. This condition ultimately turns into more negligence in the health of the elderly (Qidwai & Ashfaq, 2011). In such families, the members have little time to spend with their group of friends and to pursue any leisure activity. This situation precedes the caregivers toward verbal abuse, physical aggression, and behavioral problems against elders (Teri et al., 1992). The care of oldest-old is difficult in the sense that the care givers are uncertain about the time period of their physical disabilities, thus, are reluctant to continue this job for a longer period, as they cannot manage to spare time for their personal wellbeing (Poulshock & Deimling, 1984). The task of elders' care may also manifest different kind of abuse such as verbal, physical, psychological, financial, material, sexual and negligence (World Health Organization, 2002). Any older man or woman may experience these abuses, however, the elders with medical and psychological problem may face more abuses than others (Glasgow & Fanslow, 2007). Dildar and Saeed (2012), in a research study conducted in Punjab found that the majority of the respondents (90%) of their study faced financial abuse which include theft of their money or seizure of their property. Their study further indicates that women face more threatening situation when they refuse to give money to their deviant children. The study further documents that 85% of the respondents reported psychological abuse such as humiliation, use of harsh behavior and calling with bad names, while 60% of the study respondents mentioned that they have experienced physical abuse.

Elder abuse could be the result of violence in the family, economic stress of the care givers or a history of long term poor relationship between the abused and abuser (Glasgow & Fanslow, 2007). In this regard, an Indian district court in the Barmeter, Rajhistan exemplified one of the cases, where three sons of a person were sent to jail on account of ignoring

the parent's needs. On the petition of the father, the court directed his six sons to take care of their father. Three of them obeyed the court order, but the remaining three argued that "during their early childhood their father did not fulfill their needs properly so now in his old age we are not ready to take care of him" (BBC, 2012). Thus, situations like this lead to the need of establishment of institutional care of elders.

Besides attitudinal change, the structure of family institution also plays a dominant role in elders care. In this connection Zeng et al. (2006), reported that in the last few decades in the developing countries, significant transformations are viewed in family structures and living arrangements of elderly people. Research studies show that the structure and environment of the family in the context of elderly care, is changing in Pakistan. Reduced family size with fewer children, smaller housing components, detachment from parents due to work and migration, and other poverty intergenerational disputes are considered responsible for the emergence of the concept of institutional care in Pakistani society (IFA, 2006). It is examined that many elderly people are not sustained by their respective families, regarding their elementary needs. Under these circumstances, majority of the elderly are confronting hardships to get the respect and care they deserve; and they become socially isolated; suffer depriving health and physical abuse. Currently, in many Asian countries including Pakistan, numerous factors including modernization and rapid urbanization has made it challenging or even unmanageable for many families to provide care or support to their grownup kinsfolks.

Theme II: Women Employment and Elderly Care

During this study, it was found that in addition to the societal and social factors, the trend of women's employment outside of the house is also creating problems regarding elderly care. During the working hours in employment, nobody is there to take care of the oldest-old family members. In this regard Ahmad (2011), argues that despite of the availability of social linkages of most family members, numerous elderly people do not acquire the support from their families and close relatives due to their earning engagements and domestic responsibilities. This alarming condition specifies the inferior life and value of older people in Pakistan. Yet it is further expected to be decline more due to current socio-economic conditions in the society provoking the government to establish state sponsored social security shelters or networks for the welfare of the needy older people in the country, as it is the need of the hour.

In addition to the contribution of socio-economic and demographic factors regarding ageism, the attitudinal transition also contributes to the increasing problems of old age people. The attitude of younger generation towards senior citizens has considerably changed because of abatement in their activities, decline in income and social position in the family or society, which exacerbate the lives of elderly (Ali & Kiani, 2003).

It is worth mentioning, that the attitudes of the family members, specifically children, are changing towards the senior family members. As a result of such attitudes, older people are often neglected, humiliated and abused directly and indirectly, which create psychological problems in them (Punia, Punia, Singh & Balda, 2007). In a research, Takamura (2001), observed that in the entire process of aging, older persons also face stressors that may generate both suitable reactions or inaccurate emotional responses.

Theme III: Poverty and the Oldest-Old

The problems of elderly people are very complex in nature. Hence, it is much associated with socio-economic development, the financial relegation of older people greatly impacts and results in spiralling consequences in their lives. In this connection, Ali and Kiani (2003), argued that poverty adversely affects the network of social relations and the status of the senior citizens. This situation indicates that the care and support of family, relatives and friends is gradually decreasing and a trend of institutional care is gradually increasing. Victor (1994), observed that the ageing experience of older people is generally influenced by the amount they are engrained in social support networks. Social support becomes an important source of assistance for older people, primarily for those living with chronic illnesses (Shippy & Karpiak, 2005).

In addition to the social factors, the status of the senior citizens also depends upon their economic dependency over the family members. The dependency ratio (a ratio of population under 15 and of 65 years or above), to the working age population (15-64 years), shows an increasing trend in Pakistan, from a value of 6.7 for the year 2000 to 7.9 in the next quarter and 12.1 by 2050 (United Nations, 2002). Economic independence after retirement is enjoyed by a limited number of senior citizens as the retirement funds are limited and government pension schemes are only for those who were employed in government sector jobs (Afzal, 1997). The retirement age in Pakistan is sixty years, after which most elders are unable to find alternative sources of income and thus, become largely dependent

on their families for financial support (Sabzwari & Azhar, 2011). Recently, the government has also realized the changing status and economic problems of the senior citizens. Hence, the provincial government of Khyber Pakhtunkhwa has approved a bill with the title “Senior Citizens Bill 2014”. According to the bill, retirement homes will be set up for the older citizens who do not have financial and family support (Express Tribune, 2014). However, it is difficult for the government of Pakistan to address the economic problems of the entire senior population. On one hand, the government is unable to provide financial support to senior citizens and on the other hand, the values of the society regarding senior citizens are also changing. This situation further intensifies the problems of senior citizens (Sabzwari & Azhar, 2011).

The government of Pakistan as well as the Non-Governmental organizations are working for the elimination of various problems of the elderly, particularly in urban areas and have established schemes and projects which have eased down their problems.

Theme IV: Individual Factors Responsible for Shift of Non-Institutional to Institutional Care.

Individual personality features such as aggression, materialistic attitudes, irritation, etc. of both the oldest old and the family members are responsible for elder abuse and the shift of care from non-institutional to institutional care. Likewise, studies limited to violence against older people in domestic backgrounds have found that the practice of abuse is usually found against the oldest old and physically impaired senior citizens. The situation of elder abuse if examine through the lens of gender, reveals that the older women more under compulsion and majority of them remain economically underprivileged in their entire lives. However, the older men are at a risk of abuse by their spouses, adult children and other relatives. Monetary problems on the account of the abuser did seem to be a significant risk factor (Gorman & Petersen, 1999). The practice of the elder abuse exists in families where mental health problems are reported. In addition, previous research also noticed that older abuse is not restricted to the home or to a community encounter, but also occur within institutional care, for instance in retirement homes and hospitals (Yaffe & Tazkarji, 2012).

Theme V: Relationship Factors

In earlier studies, regarding elder abuse, it was believed that the stress of

care givers is the causative factor of elder abuse and cause the shift of informal care to formal care. However, there is growing concern that the elder abuse and the shift in their care need to be looked in a bigger framework, in which the quality of the whole connection is a pivotal factor. However, now it is believed that stress may be a contributing factor in majority cases of abuse, but does not by itself account for the phenomenon (Yaffe & Tazkarji, 2012). Elder abuse could be the outcome of the interaction of numerous factors, which include stress, relationship between the care giver and the care receiver, existence of disruptive behaviour or aggression by the care recipient, and depression in the caregiver. In this regard, the living conditions also play a key role, especially the congested environments and lack of privacy, have been closely linked with family conflicts. Though, abuse can also occur while the abuser and the older person who suffers the abuse live apart, but the older person is more at risk when living with the care giver. The early theories on this topic also sought to associate dependency with increased risk of abuse. Initially, it was found that elder abuse is the result of their dependency on the care givers. But elder abuse was also found to be the result of different factors including prolonged medical problems, family background, history of the relationship between the care givers and the receivers. The qualitative data from this study revealed that the older people were less authoritative in handling family affairs as majority of the respondents of this study affirm that they feel helpless, as they have no authority in taking family decisions and that their children treat them as outdated persons.

RESEARCH RECOMMENDATIONS

Keeping in view the shifting social milieu, there is a dire need to understand the socio-economic problems of the older people. Thus, this study made several recommendations which are listed here under:

- It is strongly recommended that the national policy for the health of the elderly which was devised in 1999, need to be implemented immediately and the older people may be treated with social dignity.
- It is strongly recommended that subsidization in health care and public transportation fares may be granted to the older people across the country.
- There is a need to sensitize students in educational institutes. It is suggested to start volunteer services in schools and other educational institutes at the community level, for the older support and to connect them with a formal care system.

- It is further recommended that the government should establish a help line services and discouraged the social ostracism of the older people. A high priority should be given to their care needs from all stakeholders like family, community and state as well.
- It is recommended that the government should develop a comprehensive policy for the speedy settlement of pension, provident funds, gratuity, and other financial dues of the older employees on their retirement. Furthermore, it also suggested that the government may grant some sort of exemption in the taxation policies for older people and consider them as an asset for the nation.
- It is also recommended that at different levels of policy making, planning and programming are required to promote the involvement and participation of the women senior citizens in the socio-economic development process on a much larger scale. In this context media, civil society, politicians, and the government should play their role for the rights of older people in Pakistan.

CONCLUSION

Even though being a socially cohesive society at some level; the deterioration of extended family systems in Pakistani society, particularly the urban community is in a transitory stage, regarding the care of senior citizens. The family institution in urban community, do not intentionally violate the rights of the senior citizens. However, the socio-physical environment of the family as an institution in urban areas usually does not stand favorable for the senior citizens. In urban areas, the popular family institution is nuclear, where there is limited manpower, women employment, and weaker social support. Due to these changes, there is a growing concept of institutional care of senior citizens. The institutional care of the senior citizens is considered as a stigma for the family due to which the family members of the senior citizens feel hesitation regarding the mentioned services. However, the family members wish to shift the oldest-old to institutions reserved for the senior citizens to lesson their responsibilities.

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