

PERCEIVED HEALTH STATUS OF ELDERLY IN RURAL MAHARASHTRA: DO SOCIO-ECONOMIC DIFFERENTIALS EXPLAIN ANYTHING?

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Extended abstract

The ageing of populations is on the increase in recent times. Some of the reasons that could be attributed for this emerging global phenomenon are advancement in Medicare, improvement in living conditions and the general quality of life and effective measures for birth control. The ageing of population is of relatively recent origin and still needs further exploration. The present paper focuses on the socio-economic conditions and their effect on health status of the elderly in rural Maharashtra. Data for the present study was collected from the rural areas of Amravati district using semi structured interview schedule.

The survey collected information from 600 respondents in the fifteen (15) villages of the Amravati district. One block has been selected at random out of 14 blocks in Amravati district in the first stage; all the villages in the selected block were then stratified into three strata on the basis of population size as less than 500, 500 to 1000, and more than 1000. Fifteen villages were selected in the final stage from the three strata proportionate to total number of villages in the particular strata. A sampling frame of aged 60 and above was then prepared for the selected villages by house listing. This was followed by selection of aged respondents using systematic random sampling method. The data was collected using pre-tested, semi-structured interview schedule. Detailed information was collected regarding basic socio-economic variables; disability, perceived health status of elderly in general and perceived health status of elderly compared to other in the same age group. For perceived health status we have asked two questions:

- 1) At present how do you feel about your health?
 - a. Good
 - b. Average
 - c. Not good

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- 2) Compared with other of the same age elderly how do you rate your own health?
 - a. Better
 - b. About the same
 - c. Worse
 - d. Can't say

Issues like self perception of own health is explored under the domain of health status. Further the impact of various socio-economic characteristics on perceived health is discussed in detail.

For this analysis two independent variables namely standard of living index (SLI) and Disability were constructed based on certain sets of items.

Statistical Methods

The data was analyzed using SPSS software. For establishing associations chi-square test is used. Logistic regression is used to analyze determinants of perceived health status.

Results

This study reveals that socio-economic condition of the elderly has an impact on their perceived health status. It is found that more than 60 percent of the elderly, aged 80 years and above feel that their health is not good. It is observed that there is a significant relation between age and health status of the elderly. As age increases perceived poor health of the elderly also increases. Mainly widowed/widower elderly perceive their health as not good. It is obvious that in every society after the death of spouse a person feels lonely and also there may not be any one to look after. Elderly of low standard of living index, elderly living alone and economically dependent elderly are more likely to perceive poor health status. Elderly persons having any disability also are prone to perceive and report poor health status.