

## FISCAL ROLE AND SOCIAL PARTICIPATION OF OLDER PERSONS': EMPIRICAL EVIDENCE FROM RAWALPINDI

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**ABSTRACT:** *It is very obvious that when you have money in your pocket, your participation rate in social gathering and event is higher as compared to the situation when you have empty pockets. The scenario get more crucial when this happens in old age. This study is an effort to explore the percentiles of social participation of OPs with regards to their financial contribution in Household expenses. The study was conducted in Rawalpindi city and collected data was based on the responses of 384 randomly selected OPs. For data collection a structured tool was implemented which further converted into code plan for data entry and analysis. The results represent the significant relationship exists among financial contribution of OPs and their involvement in household decision making in everyday life. The situation clearly states that those elders who are participating in their family financial issue have more value/respect from their family, especially in term of their involvement in family related issues and matters.*

**Key Words:** *Financial role, Social participation, Older persons and Social roles, OPs and Rawalpindi*

### INTRODUCTION

Older persons, simply defines in Pakistani context, a person who entered the age 60 [a biological definition], reducing social participation [sociological point of view], and in the monetary definition this really meant less contribution in household expenses. The data reported in many of the existing studies which show that the worldwide expected population of older persons in 2050 will increase two billion as compared to the population in 2000 that was 606 billion. In Pakistan, the elderly population will 42.6 million in 2050 as statistically calculated [1-4].

In sociology, ageing is a charming wonder due to its basically a communal awareness and contribution – if we haven't met with death in early age, we positively experience old age, it occurs within very numerous and complicated social and power dynamic settings, encompassing with socio-economic and cultural grouping, well-being and health position, and, contact to monetary and commercial resources, culture, gender, ethnicity and geographic location [1,5-10].

The Pakistani ageing population situation is not much different from rest of the world, as the ageing population of Pakistan is growing rapidly as experienced by other countries. Previous researches show that after passing the year 1950 the mortality rates has been dropped at the graph and an early fertility decline has been reported in late 1990s [11,12], due to increased life expectancy after day by day improvement in medical facilities ageing population line is at upward status. One of the UN report shows that by 2050, Pakistan's ageing population is projected about 42.8 million, making up 12.4% of the population, and the elderly population will be growing much faster than the rest not only in Pakistan but also rest of the world [13].

Ageing with all its definitions and explanations presents the time of increased dependency (social and economically/financially), reduced social involvement, and poor physical and mental health. It is patent reality of life that every born faces the exploitation, segregation, abuse or discrimination with its different forms in the elder age. It can be suitably said that older age is the age of exploitation, discrimination, sickness/disease and dependency [14].

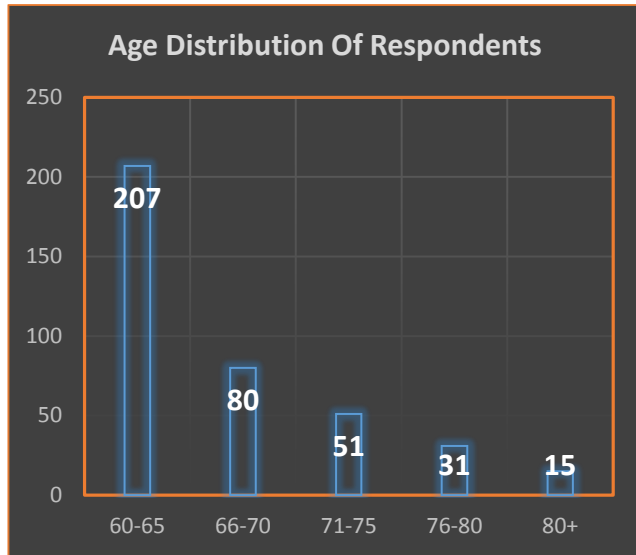
In traditional Pakistani society, the significant role of elders is recognized and it is confirmed not only in our everyday life, but also in social concerns that the advantage should be taken from their valuable experiences based on the learning of their entire lives. But the scenario is now getting changed with the passage of time, though speed of this turn is not comparable with western society's culture as presented in the western media that promotes nuclear family structure with less or no disturbance from elders of their family [as they depicted]. Even they feel comfortable to admit their elders in old care homes. This situation also points out an alarming condition in Pakistan, where the role and involvement of "**WHITE HEADED**" elders with their remarkable experience is lessened as reported in above results [1].

It is fact that in traditional societies of south Asia, including Pakistan that shows when an earning hand becomes dependent on other financial sources to survive his values and participation for social events reduce at both ends, [1] society give him less importance to participate and [2] he personally feel less comfortable in a situation where he is fully dependent on others. In this study, the objective was to explore the comparative relationship between financial contribution by the elderly in their household expenses and their contribution in household decision making and their participation in family events.

### MATERIALS AND METHODS

For data collection on set objectives of the study, a structured tool was designed with the help of existing literature and indicators. The tool was further refined after pre-test exercise. A sample of 384 respondents was statistically drawn at the 5 % level of significance, 50% response distribution, confidence interval was 95% and estimated population was 2million [projected population on 1998 census]. This sample was randomly interviewed from different location of Rawalpindi City that includes two towns, Potohar Town and Rawal Town. After the data collection tool was converted into a code plan and entered in EpiData. SPSS was the data analysis software in this study.

## RESULTS



**Figure.1: Age Distribution of the Respondents**

Figure 1 represents the older person's participation with respect to their age group that started from 60-65 years and ends at 80 year to onward. The figure shows that in the age group of 60-65 years 207 (53.9%) respondents were interviewed, 80 (20.8%) OPs belongs to the age group 66-70 years, 71-75 years participation was 51 (13.3%), 31 (8.1%) participants belong to the age group 76-80 years and 15 (3.9%) interviewed respondents were 80 or above years of age. This also shows that our study objective that tries to explore the OPs financial contribution and their participation in social life if fully covered from relevant sample.

**Table.1: Financial Input and Household Decision Making**

Financial contribution in HHdExpenses?	Involve in HHds Decision Making?		Total
	Yes	No	
Yes	61.9%	30.5%	55.2%
No	38.1%	69.5%	44.8%
Total	100.0%	100.0%	100.0%

**Chi-square value: 0.000 ( $p < .05$ )**

Table 1 explains the comparative relationship between participants financial contribution in their Household expenses Vs their involvement in their household decision making activities. If we look at the results, figures shows that total 55.2% of the study respondents were currently financially contributing in their HHds expenses and 44.8% have no financial role. Those who are financially contributing, among them 61.9% were said "Yes" to the involvement in the HHds decision making process and while the other category of 38.1% who were not contributing in financial terms.

## DISCUSSION

In traditional societies of Pakistan, financial contribution in family expenses is matters along with passing calendar years. When a person is growing older day by day and financial/monetary contribution from his end getting reduced

with the passage of time; it's very certain that his role in social events will reduce either society withdraw him from there or he voluntarily leave the situation [exception exists]. Results of the present study shows that our 207 respondents were belongs to the age group 60-65 years and the representation of the group of 80 years and above was only 15. Above 80 years respondents were nominal in field areas and those who were able were not easy to be interviewed. Among 384 study respondents, 55.2% were those who were financially giving their contribution in household expenses and at the same time they are involved in household decision making. One of the existing study shows that with increasing age the role of elder persons in household decision making is getting reduced [1], may be due to their decreasing mental health or maybe their families consider that their inputs are as old as they are.

Another existing research finding shows that with every passing calendar year after 60, the capacity to complete daily activities were (including social roles, mental, physical, psycho-social and cultural) getting reduced in order with varying extent in almost every older person. Interestingly, their social roles and participation only found in their homes and then after the home he/she will not be able to take decisions for their own as considered by their family personals. Older Persons commonly a point of discussion, reported more mental & physical complaints and disabilities as compared to younger people. But the changes that started with increased ageing are not only changes in health status, but also many others like social roles, participation, financial contribution, culture sharing etc. [1, 15]. No empirical evidences are available that show quality of decision-making is essentially poorer for elderly people, compared to their younger counterparts. A common, though largely unconfirmed belief that decision making ability declines with ageing [16].

Chi-square test value of the first cross table is less than .05 that shows a significant relationship exists among OPs financial contribution and their involvement in household decision making. The results also depicts that many of the OPs who were not contributing in monetary terms to their families were still participating in decision making, the reason is our culture, religion and respect given to the OPs by their families and they still looks at their opinion for family matters. This also means that in our societies moral, social, ethical and religious values are still followed/respected by the families of the elderly population of Rawalpindi.

## CONCLUSION

Study depicts that those OPs who are still financially contributing in their family expenses have also more actively involved in decision making as compared to those OPs who were financially not contributing in their household issues. Statistical results also show a significant relationship between OPs financial contributions and their involvement in the routine decision making of their family. The Study also conclude that the importance of elder's opinion is still exists even their contribution in household decision making is comparatively less as other counterpart who is financially being active in term of family expenses.

## REFERENCES

1. Ahmed, A., Chaudhry, A. G., & Khan, S. (2015). Declining Age and Social Roles: A Gerontological Perspective of Older Persons of Rawalpindi. *Science International*, 27(1), 719-721. Retrieved from <http://www.scint.com/pdf/46108610830%20Paper,%20Declinig%20Age--719-721++.pdf>
2. Government of Pakistan "Census of Pakistan."
3. Ahmed, A., Chaudhry, A. G., Fatima, Z., Anwar, S., & Saqib, A. (2015, May). Social Roles and Disease Pervasiveness: An Anthropological Perspective of Older Perosns' of Rawalpindi. *Science International*, 27(2), 1587-1590. Retrieved from <http://scint.com/pdf/20158220722%20Special%20issue%20%20Aftab%20Ahmed%20Social%20Roles%20and%20Disease%20Pervasiveness%20for%20Science%20international%202nd.pdf>
4. United Nations. 2002. World Population Ageing 1950-2050. United Nations Publication, E02XIII 3.
5. Chaudhry, A. G., Ahmed, A., Farooq, H., Bhatti, A. G., & Zeeshan, M. (2014). Health, Marital Status and Mode of Living: An Anthropological Study of Ageing Community in Rawalpindi. *Medical Forum*, 25(5), 46-50.
6. Australian Social Policy Research Centre Promoting. *Social networks for older people in community aged care*. Research to Practice Briefing 2. Benevolent Society: Social Policy Research Centre, February 2009.
7. Ahmed, A., Chaudhry, A. G., & Farooq, H. (2014, Dec). Older Persons and Ageing Phenomena: Exploratory Study Based on Perceptions of Elders about Old Age. *American Research Thoughts*, 1(2), 1029-1035. Retrieved from <http://researchthoughts.us/UploadedArticle/78.pdf>
8. Irshad, M. K., Chaudhry, A. G., & Afzal, M. I. (2015, May). Impact of Familial Care on Health Status of Older Adults. *Science International*, 27(2), 1599-1602. Retrieved from <http://scint.com/pdf/2086708205%20Special%20issue%20%20Muhammad%20Khurram%20IMPACT%20OF%20FAM>
9. Chaudhry, A. G., Fatima, Z., Ahmed, A., Gul, N., Gul, S., & Jabeen, S. (2015, May). Older Persons, Community Response and Governmental Responsibilities: A Pilot Study of Rawalpindi. *Science International*, 27(2), 1583-1586. Retrieved from <http://scint.com/pdf/9223546861%20may%20Anthropolgy.pdf>
10. Chaudhry, A. G., Ahmed, A., & Bhatti, A. G. (2015, Jan). Medical Care, Social Protection and United Nation Principles: An Anthro-gerontological Approach on Geriatric Health. *The Professional Medical Journal*, 22(1), 64-71. Retrieved from <http://www.theprofesional.com/article/vol.%2022%20no.%2001/Prof-2576.pdf>
11. Sathar, Z. and Casterline, J. B. (1998). The onset of fertility transition in Pakistan. *Population and Development Review*, 24(4), 773-796.
12. Sathar, Z. (1991). Changes in Mortality in Pakistan 1960-1988. *Pakistan Development Review*, 30(4), 669-679.
13. United Nations (2002). *World Population Ageing, 1950-2050*. New York, United Nations
14. Ahmed, A., & Chaudhry, A. G. (2015). Health and Social Exclusion: Comparative Analysis between Social Exclusion and Health Status of Older Persons. *The Professional Medical Journal* (In Process)
15. NCBI. Health and Social Problems of the Elderly: A Cross-Sectional Study in Udupi Taluk, Karnataka, <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2781120/> (1998).
16. Ellen Peters. *Choosing, Feeling, Thinking: How Do Older Adults Decide?* NIA Workshop on Decision Making and Ageing [DRAFT 10-17-04]. Bethesda, Maryland P6