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# Socio-Psychological and Health Problems of Left Behind Parents of Immigrants in Rural Punjab

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#### **ABSTRACT**

Punjab has become a hub of student migration as well as labour migration to the developed countries. When this migration took place, it tore families across the borders. Old-aged parents have to spend a significant portion of their life alone when their children migrate overseas and set up their families in their destination countries. The parents who stay at home may feel more emotionally stressed and burdened with household responsibilities due to the absence of their children. So, this study was undertaken with specific objective of knowing the socio-psycho and others problems faced by left behind parents in rural Punjab. A total sample of 120 households was selected with help of snowball sampling technique. The results revealed that about one fifth (22.53 %) of the total sample respondents belonged to the age group in 71-80 years and had high average income i.e., between Rs. 2-3 Lakh/annum. The respondents had various social problems among which social isolation was major social issue. People have lot of psychological problems such as, no one care at this stage, loneliness after migration of children coupled with over thinking and insecurities were there. Along with this, about 48 per cent of the total respondents faced tension and anxiety which was mainly related to their children and about their settlement and future. The respondents called their homes as "empty nests". As far as suggestions to overcome the issue, a large number i.e., 71.66 per cent of respondents said that recreational activities must be there for parents such as social clubs, reading rooms with congenial atmosphere. Recreational activities as well as support and care must be there so that old aged parents can lead a comfortable life. Proper health care program should be paid by government for old aged person. Government should provide better health facilities, job opportunities, etc. to youth for curbing migration.

Key Words: Health problems, Migration, Old Aged, Remittances.

### INTRODUCTION

Punjab has become a hub of student migration as well as labour migration to the developed countries. When this migration took place, it tore families across the borders. These migrants have to leave their homes and families that separate them from their parents and other family members. It becomes stressful and chaotic for the left behind family members who will look after the elders. Old-aged parents have to spend a significant portion of their life alone when their children migrate overseas and set up their families in their destination countries. In such cases, parents depend on extended family members and neighbours for their necessities. On the one hand, parents who stay at home may feel more emotionally stressed and burdened with household responsibilities due to the absence of their children. Conversely, migrant children send back

remittances to show their care and love for their parents (Tuccio and Wahba, 2020). Thus, the impact of migration on the parents who stayed behind has been both positive and detrimental. Adverse effects include increased chronic stress, greater social isolation, various health issues, reduced daily activity, and many more (Xiang et al, 2016). The positive side is that migrant children send remittances to their elder parents so that they can live comfortable life and afford nutritious food. If migrant member continuously sends remittances to their left behind family members, they have good mental and physical health, and if they discontinue sending remittances, they have a negative impact on their health because of the shortage of money as they discontinue taking their medicine etc. In case of old-aged parents, migrants continuously send remittances to their relatives so they can take care of their elderly parents. But sometimes, when migrant does not send remittances to their relatives, they stop caring for their parents. The caregiving of old-age parents in the absence of their family members becomes a big issue and creates a long-distance relationship. Sometimes these parents become dependent on others for their small needs and are also emotionally sick due to the non-availability of their children. They feel lonely and isolated after staying behind. In the case of the Punjabi migration, various studies were conducted on caste migration, country of migration, remittances flow and Punjabis migration in the colonial period (Kaur, 2022). Left behind parents had higher depressive symptoms, higher levels of loneliness, lower life satisfaction, lower cognitive ability and poorer psychological health. A number of risk factors were identified for mental health disorders among the left behind parents, which included living arrangements, gender, education, income, physical health status, physical activity, family and social support, age, rural residence and frequency of children's visit (Kaur et al. 2023). However, few research have looked into the link between adult children's migration and the health of parents who are left behind in rural areas to fend for themselves. The consequences of adult offspring migrating on the health of the elderly left behind have given conflicting outcomes in the literature. (Abas et a, 12009, Arif 2009, Kuhn 2005, Xiang et al, 2016 and Taylor, 2013). The major objective of this study was to identify the psychological and health problems of the left behind old aged parents and suggest possible measures to overcome these problems.

#### MATERIALS AND METHODS

Punjab state has been divided into three regional zones: Majha, Malwa and Doaba. Two of three zones i.e., Doaba and Malwa zone were selected to know difference between Malwa and Doaba area's migration. Multistage random sampling technique was used for collection of data. At the first stage, two districts i.e., Sri Muktsar Sahib and Jalandhar were randomly selected to make the study representative of Malwa and Doaba region of Punjab. From each selected district one block was selected randomly. From Sri Muktsar Sahib the block namely Kot-Bhai was selected whereas, from Jalandhar district the block Jalandhar-West was taken into consideration for the study. From two blocks, six villages were selected randomly at final stage of sampling. From each village a total of twenty left behind old aged parents (males and females) were selected randomly for collection of data. In all the sample comprised of 120 respondents i.e. 60 respondents from each Doaba and Malwa of Punjab were taken up for the study. Descriptive statistics used for to achieves the requirement of study.

## RESULTS AND DISCUSSION

The age of the respondents has been divided into four categories viz. 60-70 years, 71-80 years, 81-90 years, 91 years and above. The data, indicated that most of the old aged people belonged to age group 60-70 years in *Doaba* and *Malwa* region. About one fifth (22.53 %) of the total sample respondents belonged to the age group in 71-80 years in both regions. On the other side only 3.33% of total respondents lies in age group 81- 90 years in Jalandhar district while questioning to female respondent. A very few 3.33 per cent of respondents belonged to 91 years and above and only in *Doaba* region (Table 1).

Table 1.	Distribution	of respondents	according to	their age
Table 1.	DISHIDUHUH	or respondents	according to	unch age

Age (years)	Doaba (n <sub>1</sub> =60)	Malwa (n <sub>2</sub> =60)	Total (N=120)
60-70	38 (63.33)	46 (76.66)	84 (70.00)
71-80	13 (21.67)	14 (23.34)	27 (22.53)
81-90	4 (6.66)	-	4 (3.33)
91 and above	5 (8.34)	-	5 (4.14)
Total	60 (100.00)	60 (100.00)	120 (100.00)

Note- Figures in parentheses indicate percentage

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Family income is one of the major indicators to access the economic conditions of family. The data indicated that 45.83 per cent of respondent had income level between Rs. 2 to 3 lakh per annum. Only 5.84 per cent earned less than Rs.1 lakh per year. It was seen that 20.00 per cent of the respondents had income above

three lakh. Further, nearly half of the respondents in *Doaba* region had income between Rs. 2-3 lakh. And in *Malwa* region 30.00 per cent had income above 3 lakh. So, in the total sample majority of elderly had high average income i.e., between Rs. 2-3 Lakh/annum.

Table 2. Distribution of respondents according to their annual income of family (Lakh/ annum)

Income of family (Lakh/ annum)	Doaba(n <sub>1</sub> =60)	Malwa(n <sub>2</sub> =60)	Total(N=120)
Up to 1	3(5.00)	4(6.66)	7(5.84)
1-2	20(33.34)	14(23.34)	34(28.33)
2 -3	31(51.66)	24(40.00)	55(45.83)
3 and above	6(10.00)	18(30.00)	24(20.00)
Total	60(100.00)	60(100.00)	120(100.00)

Note- Figures in parentheses indicate percentage

## Social problems

Social problems faced by the left behind respondents. Around 84.16 percent of respondents stated that due to age they are notable to independently manage and they find lost sense of purpose. Also 62.50 per cent revealed the dependency on neighbours and relatives as they do

not have their own children with them. In all, 80.00 per cent of respondents also found ageism as major issue. Overall, the respondents hadvarious social problems among which social isolation children are abroad and busy in their own lives was major social issue.

Table3. Distribution of respondents according to the social problems

Social problem	Doaba (n <sub>1</sub> =60)	Malwa (n <sub>2</sub> =60)	Total (N=120)
Increased dependency on neighbour's and relatives	33(55.00)	42(70.00)	75(62.50)
Mobility issues	44(62.85)	37(61.66)	81(67.5)
Ageism and loss of sense ofpurpose	45(64.28)	51(85.00)	96(80.00)
Social isolation as children are outandengaged intheir ownlives	60(100.00)	60(100.00)	120(100.00)
Inability to independently manage regular activities	52(86.67)	49(81.67)	101(84.16)

*Note-Figures in parenthesis indicates percentage* (Multiple responses)

It was found that people from both areas were under the pressure of debt. It was because people took (rank 1) debts from commission agents and banks for their children's migration. In *Doaba*, the major economic problem was that children took money from parents for settlement in abroad. In *Malwa* region,

parents were facing more monetary problems (rank 3) as compared to *Doaba* where the problem was less identified. The major reasons for the economic problems were taking away of money by children. Few parents even told their children want them to see property and give money to them

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Economic problem	Doaba (n <sub>1</sub> =60)	Malwa (n <sub>2</sub> =60)	Total(N=120)
Debts	29(48.34)	24(40.00)	53(44.16)
Monetary issues	22(36.66)	13(21.66)	35(29.16)
Not proper investment	14(23.34)	20(33.34)	34(28.33)
Children took money	32(53.34)	20(33.34)	29(24.16)

Note- Figures in parentheses indicate percentage

There are a number of health problems in the old age such as cold and cough, joint and knee pain, tension or anxiety, heart disease, diabetes etc. Almost all the respondents faced one ailment or the other at this stage. Around 70.00 per cent of the respondents from both *Malwa* and *Doaba* respondent faced joint and knee pain problems. About 48 per cent of the total respondents faced tension and anxiety which was mainly related to their children and about their settlement and future. Least number of respondents (10.00%) suffered with heart. Surjit Kaur, 90 years old, from village Dhaliwal, Qadian, Jalandhar (*Doaba*) reported that her son Yoga Singh 60 years old, is currently living in England from last 40 years. She also told that it was just Rs. 232 only spent for the migration

and he migrated at the time when migration was rare. Being a widow, Surjit Kaur, regularly visit to see his son with his family in England. She she holds good relationship with her daughter in law and grand-children. Being a heart patient, Surjit Kaur is currently living alone and her nephew take care of her at difficult times. She reported that she doesn't need any money from her son because she owns 35 acres of land but still his son sends her remittances on regular basis. She had already done property on the name of his son but still have fear in mind that her relatives might not create dispute for property. She also feared who will take care of her if she is become ill as her health is deteriorate nowadays.

Table 5. Distribution of respondents according to the health problems.

Health problem	Doaba (n1=60)	Malwa (n2=60)	<b>Total(N=120)</b>
Cough and cold	19(31.66)	25(41.67)	44(36.67)
Joint and knee pain	42(70.00)	42(70.00)	84(70.00)
Tension or anxiety	29(48.34)	29(48.34)	58(48.34)
Heart disease	7(11.66)	5(8.34)	12(10.00)
Diabetes	9(15.00)	26(43.34)	35(58.34)

Note- Figures in parentheses indicate percentage

In *Doaba* and *Malwa* region, joint and knee pain were recognized as the major health problem in old age parents rank 1 followed by tension and anxiety (rank 2) whereas heart disease is affecting the old aged parents the least. On the other hand, the least score was given to heart disease in both regions.

Parents also faced emotional breakdown after children's migration. In *Doaba*, 43.34 per cent and *Malwa* half of the parents were feel burdened after children's migration and a very little number of respondents had feared that they have no one at their home for care and love. They called their homes as

#### **Psychological problems**

Psychological problems are bound to sprout up among left behind old aged people such as ,no one care at this stage, loneliness after migration of children burdened ,over thinking and insecurities. In *Doaba*, 55.00 per cent of respondents were insecure as children moved away of respondents in *Malwa* had this feeling.

"empty nests" In the total sample, mostly left behind were missing their children. Almost 40.00 percent of the respondents were worried what they will do after death of spouse as they will be alone. One of the female respondents said that, "they felt if children are not there than spouse must be there to take care of them."

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Table 6. Distribution of respondents according to the psychological problems.

Psychological problem	Doaba (n <sub>2</sub> =60)	Malwa (n <sub>2</sub> =60)	Total(N=120)
No one care at this stage	4(6.67)	5(8.33)	9(7.50)
Loneliness after the death of spouse	29(48.33)	17(28.33)	46(38.33)
Feel burdened after being left alone	26(43.34)	30(50.00)	56(46.66)
Overthinking and missing children	32(53.33)	27(45.00)	59(49.16)
Insecure	33(55.00)	32(53.33)	65(54.16)

Note: Figures in parenthesis indicates percentage (Multiple responses)

**Table 7. Suggestions.** 

Suggestionsregarding economic aspects	Doaba	Malwa	Total	
Renumeration for left behind parents	49 (81.66)	57 (95.07)	110 (88.33)	
Bank facilities in village	47 (78.33)	11 (18.33)	58 (48.33)	
Monetary help from government	60 (100.00)	60 (100.00)	120 (100.00)	
Suggestions regarding health aspects				
Regular checkups at homes	29 (48.33)	33 (55.00)	62 (51.66)	
Better medical facilities in villages	48 (80.00)	54 (90.00)	102 (85.00)	
Organize free medical camps	50 (83.34)	52 (86.66)	102 (85.00)	
Free medicines and treatments for old aged	60 (100.00)	60 (100.00)	120 (100.00)	
Suggestions regarding sociological and psychological aspects				
Providing security and freedom	9 (15.00)	17 (28.33)	26 (21.66)	
Emotional support by family members	28 (46.66)	40 (66.66)	68 (56.66)	
Developing age friendly services and settings	16 (26.66)	31 (51.66)	47 (39.16)	
Training for health professional in proudly lane	5 (8.33)	8 (13.33)	13 (10.80)	
for old aged				
Recreational activities for old aged	43 (71.66)	43 (71.66)	86 (71.66)	
Counselling of elder person and encouragement	41 (68.33)	33 (55.00)	74 (61.66)	
of self-care				
Social and health care programmes for elderly	9 (15.00)	9 (15.00)	18 (15.00)	

*Note-Figures in parenthesis indicates percentage* (Multiple responses)

# Suggestions regarding socio-psychological aspects

The suggestions regarding overcoming the socio-psychological problems were asked from the respondents. A large number *i.e.*, 71.66 per cent of respondents said that recreational activities must be there for parents such as social clubs, reading rooms with congenial atmosphere. Also16.66 percent revealed that counseling of elder person and thus encouragement of self-care must be uncalculated in elderly persons. Further, emotional support by emigrant (56.66%) and other family members must

be there. Few (10.80%) of therespondents also quoted trainings for health professionals in promoting care for old personshould be there for old person. Also 15.00 per cent of old aged talked about social and healthcare programmes to be started for elderly. In *Doaba* region, mainly of elderly quoted aboutrecreational activities of old aged followed by counselling of elder person i.e., 71.66 per centand 68.33 per cent especially. In *Malwa* region, about 29.00 per cent of respondents asked for providingsecurityandfreedomelderlyandmorethanha lfalso startedneed for developing.

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## Suggestions regarding economic aspects

It was observed that all of the respondents from *Doaba* and *Malwa*, suggested to have monetary help from government. Also respondents suggested that bank facilities like international bank should be in villages. The respondents demanded monetary help from government in face of "*karja-mafi, bjurag Bhatta*" etc. Respondents stated that government should help the left behind old aged parents of emigrants as they send their children as well as their finances went with them. So renumeration must be given to them.

## Suggestions regarding health aspects

The suggestions regarding health aspect were asked. All the respondents were stated that free medicines and treatment for them. Large number of respondents suggested that there should be better medical facilities in villages like better governmenthospitals and proper educated staff. Government should organise free medical camps such as eye check-up camps, blood-sugar check-up camps, etc. Narinder Singh (79 years old) narrated that, he is the patient of heart. Many times he needs doctor near to him but he is unbale to visit to doctor because doctors are very far from them and he is unable to to go be himself. They said they are aware about health issues but unable to control because some of them living alone and are very old. Also parents from Doaba and Malwa suggested for having regular home check-up by good doctors and teams. Overall, all respondents were desired to free medicines and treatments for old aged parents by providing medical camps.

#### **CONCLUSION**

Migration is an age old and universal phenomenon. Historical accounts vividly indicate the migration of individuals, tribes and communities from one place to another to hunt for food, shelter, trade and economic activities. The study was an attempt to know light on knowing "economic and health problems of left behind parents and suggestions to overcome these problems In Punjabi diaspora" Most of the old aged respondents belonged to the age group of 60-70 years in the total sample. As regard to economic problems 44.16 per cent of respondents felt come under debt while sending children abroad and told they faced economic crunches. Also, in health problem 70.00 per cent had joint and knee problems. They suggested free medical camps and treatments must be there for all the old aged

persons. Recreational activities as well as support and care must be there so that old aged parents can lead a comfortable life. Proper health care program should be paid by government for old aged person. Government should provide better health facilities, job opportunities, etc. to youth for curbing migration. Punjab is one of the largest agriculture states. For those who are engaged in agriculture, rural youth should be trained for better adoption of technology and imparted skill development trainings so that they can earn well for their livelihoods.

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