

## A Study of Social and Health Issues of Urban Elderly Women

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### Abstract

The contemporary Indian society is passing through a phase of demographic transition where the proportion of elderly population is increasing. The process of ageing is a multidimensional phenomenon which is associated with physical, social, psychological, and economic dimensions. Due to patriarchal structures in society, ageing becomes gendered and the experience of ageing is different for men and women. The women suffer from multiple social, financial and health problems which makes old age a difficult transition for them. This study is empirical in nature and is based on primary sources of data. The study has been undertaken to understand the social and health issues of elderly women. An attempt has been made to gather information about social and economic problems of elderly women and the factors responsible for these problems.

**Keywords:** Ageing, Patriarchy, Social, Health,

### Introduction

Population ageing is one of the most significant demographic transition taking place in Indian society. "According to the census report of 2011 approximately eight percent Indian population is above 60 years of age. Declining fertility rates and increasing life expectancy have contributed to this demographic shift in population of India. It is expected to increase its share to 12.5 percent and 20 percent by 2026 and 2050 respectively. The ageing population above 60 is going to increase from about 83.58 million in 2006 to 173 million in 2026 (comprising 84.62% million males and 88.56% million females). Thus current demographic situation and future projections indicate a rapid increase in the number of elderly. The data related to old age dependency ratio (OADR) in India has been published in the report, *Situation Analysis of Elderly in India, 2011* (Government of India, 2011). According to this report "over 50% men are economically independent whereas only 15% women are economically independent. The old age dependency ratio reveals that 85% elderly women are dependent on others.". Gender is one of the major factors which should be considered while analyzing the dynamics of ageing. The elderly women need more care and attention in the later years of life. Traditionally, in Indian society the care of elderly women is vested with the family but in contemporary times the social structure and values are undergoing transformation from a traditional to modern industrialized and urbanized social order which has adversely affected the condition of elderly women. The problems of elderly women are not limited to their rising numbers but encompass certain forms of alienation, isolation, abuse, financial insecurity, emotional trauma, health problems etc. tend to rise with advancing age. These

problems are compounded by illiteracy, economic and social dependency which deprive elderly women of the skills and personal resources to cope with the various changing economic, social, and physical conditions. Thus there are various personal and social factors which influence the quality of life of urban elderly women. The purpose of present study is to investigate the quality of life of urban elderly women. The specific objectives are:

- To explore the nature of social problems of elderly women
- To study the health problems of elderly women
- To identify the factors responsible for the problems of elderly women

### **Significance of Study**

The elderly population will continue to grow due to increasing life expectancy. The population data reveals that feminization of ageing is taking place since women have more longevity than men. The priority for this population is to live a productive life by adapting to the changing social and economic conditions. There are certain life course events which increase the vulnerability of women in old age. These are gender discrimination, lack of education, financial dependence, caregiving responsibilities, domestic violence, widowhood etc. It is essential to analyze the living conditions of elderly women so that proper interventional strategies can be developed and transition to old age becomes a better experience for women.

### **Review of literature**

Dillon (1992) has highlighted several problems of the elderly people in his study. He states that "rapid urbanization, necessity of dual income (couple working) and high inflation is resulting in the breakdown of the joint family system, disruption of the tradition relationships and reordering of the family norms". Jayashree (2000) examined the difficulties faced by elderly due to the process of economic liberalization. She states that "despite living in the joint family, the elderly face complications due to the urban living conditions and intra generational differences. Shukla (2008) compared adjustment difficulties of institutionalized and non-institutionalized aged and concluded that institutionalized males and females have poor adjustment in social, health, financial and emotional aspects as compared to non-institutionalized aged". Srivastava (2010) conducted an empirical study on urban aged women and reported that "deterioration in health is the most prominent factor of dissatisfaction in old age followed by lack of friends, household worries, lack of amenities, excess of leisure time, morbid anxiety, isolation and little respect in the family." Rabindranathan (2016) examined the socio-demographic characteristics of elderly living in middle class urban Indian families in Janakpuri, in West New Delhi. He argued that "changing structure of families, because of modern trending lifestyle, has resulted in various kinds of conflict in urban Indian families and it has wide reaching negative effect on ageing population". He concluded that there is a need to strengthen or protect the institution of family and deliver such

sustenance services as would enable the family to providing care to their elders. Minimol (2016) stated that “elderly women are more financially dependent, immobile and socially isolated, due to changing life situations and weakening family support”. Mane (2016) opines that “Elderly women living in institutional setting face difficulties in adjustment which are related to home, emotions, health and issues with family members such as changes in marriage trends, weakening family care giving responsibility, increasing women’s employment, reduction in the role in household chores, decline of the role of grandmother , lack of accommodation and intergenerational conflict”. Gupta (2017) has highlighted the living conditions of urban elderly widows in his study conducted in Jharkhand. He states that “widows are the most vulnerable and deprived segment among the elderly women in India. They have to face economic hardships, abuse, neglect, isolation and social stigma. The urban areas are characterized by intense competition in almost every sphere of life where job market favours the young who have educational background and technical skills. The knowledge and skills of elderly are regarded as out dated.” Thus in contemporary society structural and functional changes have taken place in family which has influenced the relationship of younger and the older generation.

#### **Theoretical Framework**

The study has been conducted within the framework of Modernization Theory propounded by Cowgill and Homes in 1972. The theory lies within the critical perspective. The conflict perspective is based on the premise that there is struggle for power and resources in the society. According to this theory “the most important causes of decreasing influence and power of elderly in contemporary society are the dual forces of industrialization and modernization. Modernization worsens the prestige and power of the old. As societies modernize there is decrease in status of elderly and they face social exclusion.” Prior to industrialization, there were strong social bonds between family members and extended family was bound by social norms of care for elderly. These families have now been replaced by nuclear families and rising cost of living has made the societies individualistic and competitive. The caregiving function of elderly has been abandoned by the younger generation and they are seen as non-productive economic liabilities. The loss of familial support results in compounding of problems faced by the elderly.

#### **Methodology**

The study is exploratory in nature and attempts to understand the problems of urban elderly women and the underlying causes responsible for these problems. The area for present study is Jaipur city. Purposive sampling method has been used. Data has been collected from 200 elderly women. Interview schedule has been used for the purpose of collecting data. The respondents were personally contacted at their home and informed about the purpose of research. Informal discussions were also held in order to have a better understanding of their problems. The data was tabulated and percentage analysis of data was done.

### Sample Characteristics

All respondents were Hindus, living either in joint families or nuclear families in the age group of 65-75. The median age was 68. The respondents belonged to middle class families. Out of 200 respondents, 48 percent were widows, 47 percent were married and 4 percent were divorced. The average number of children is 3 (Range 1-5). 22 percent respondents were illiterate, 65 percent respondents were literate, 9 percent had primary level education, 2.5 percent had studied till secondary level and 1.5 percent till higher secondary level. The average number of family members living with the respondents was 4. 80 percent of the respondents did not have any source of personal income, 9 percent were dependent on their children, 8 percent were dependent on husband's pension and 3 percent derived income from rent. 60 percent were residing in the house owned by husband, 22 percent had joint ownership with their husband, 14 percent were residing in house owned by son and 4 percent were residing in rented accommodation. Only 5 percent had taken up jobs during their young age and 95 percent had been homemakers.

### Findings

**Table1: Perception towards Old Age**

Particulars	Frequency	Percentage(%)
Old people are burden on society	27	13.5%
Old people do not get due respect	58	29%
Old people are neglected by society	21	10.5%
Old age is associated with financial and social insecurity	69	34.5%
Old age is peaceful and happy with lot of leisure	9	4.5%
Can't say	16	8%
Total	200	100%

Table 1 shows that 13.5 % (27) respondents believe that they are burden on society, 29 % (58) feel that they do not get proper respect. According to them present generation does not give them respect and honor which was enjoyed by the elderly in previous times. 10.5% (21) believe that they are neglected by society, 34.5% (69) believe that financial and social insecurity are the main problems of old age. Lack of economic resources and dependency on the family become a problem in their old age. 4.5% (9) respondents believe that old age is peaceful and happy with lot of leisure. They would relax after having put in scores of years in bringing up the members of the family and 8% (16) respondents did not say anything about their perception towards old age.

**Table 2 : Nature of Social Problems Faced by Respondents**

Particulars	Frequency	Percentage (%)
Isolation	42	21%
Neglect by children	58	29%
Loss of status	26	13%
Loneliness	48	24%
No problem	21	10.5%
Can't say	5	2.5%
Total	200	100%

Table 2 depicts that 21% (42) respondents face isolation, 29% (58) suffer from negligence. Some of them reported that their children are so busy in their schedule that they hardly interact with them, 13% respondents (26) feel that they have low social status, 19% (38) face loneliness. 10.5% respondents reported that they do not have any social problems. 2.5% preferred to remain silent on the issue of problems.

**Table 3: Role in family decision**

Particulars	Frequency	Percentage (%)
Yes	59	29.5%
No	141	70.5%
Total	200	100%

Table 3 shows that 29.5% (59) respondents are involved in family decisions while 70.5% (141) elderly women are not involved in family decisions which involves buying or selling property, education and profession of their children and grandchildren and various other financial matters.

**Table 4: Support from Children**

Particulars	Frequency	Percentage (%)
Yes	78	39%
No	122	61%
Total	200	100%

Table 4 depicts that 38% (78) respondents get support from their children while 61% (122) respondents do not get any support. Elderly women need more care and support in their later life by assisting and helping them in varieties of physical task on daily basis. The respondents disclosed that their daughters are married and their sons and daughter in laws are employed. They are busy with their day to day schedule and taking time off from work is difficult. Due to lack of care and support the respondents suffer from common issues such as boredom, loneliness, isolation and familial adjustment. The conditions are worse in case of widows.

**Table 5: Leisure time activities**

Particulars	Frequency	Percentage (%)
Interaction with family and neighbors	44	22%
Religious activities	88	44%
Watching TV	48	24%
Sitting alone	20	10%
Total	200	100%

Table 8 reflects that 44% (88) respondents spend their leisure time in religious activities by visiting temples, observing fasts, attending satsangs, and performing religious rituals to cope up with isolation, 10% (20) feel very lonely and do not have anything to do, 22% (44) spend their time with neighbours and 24% (48) respondents watch television serials and other religious channels.

**Table 6: Reasons for Social Problems of elderly**

Particulars	Frequency	Percentage (%)
Change in Values	62	31%
Lack of bonding between family members	42	21%
Increasing Consumerism and Individualism	24	12%
Disintegration of joint families	38	19%
Self- centered younger generation	30	15%
Cannot say	4	2%
Total	200	100%

Table 6 shows that 31% (62) respondents consider changing values as the main reason for problems of elderly. According to them imitating western culture is an ultimate perpetrator which is reflected in children's behavior as they have forgotten their traditional values, 21% (42) have intergenerational conflict with their family members which has resulted in lack of bonding between them, 12% (24) believe that rising consumerism and individualism does not provide proper care and support to them, 19% (38) respondents believe disintegration of joint families are the reason for their social problems, 15% (30) believe that young generation is self-centered and 2% (4) could not point the reasons for the problems.

**Table 7: Type of Financial Problems faced by Respondents**

Particulars	Frequency	Percentage(%)
Lack of income for daily expenditure	72	36%
Insufficient money for health problems	82	41%
Pending Debts	22	11%
No major problem	24	12%
Total	200	100%

Table 7 reflects that 36% (72) respondents have lack of money for daily expenditure, 41% (82) have insufficient money for health problems, 11% (22) have pending debts and 12% (24) respondents reported that they do not have any major financial problem.

**Table 8: Reasons for Financial Problems**

Particulars	Frequency	Percentage (%)
Lack of planning	40	20%
Spent all savings for career of children	45	22.5%
Gender discrimination regarding ownership of assests	15	7.5%
Dependent status through life course	32	16%
Money is spent on health care	18	9%
Total	200	100%

Table 8 shows that 20% (40) did not plan for later life and had this notion that their children will take care of their financial needs, 22.5% (45) spent all their life's saving for career and higher education of their children, 7.5% (15) have faced gender discrimination regarding ownership of assets while 16% (32) have been dependent throughout life course either on spouse or children and 9% (18) reported that a large part of their savings is spent on their health care.

**Table 9: Health Problems**

Particulars	Frequency	Percentage(%)
Hypertension	25	12.5%
Diabetes	39	19.5%
Osteoporosis	82	41%
Poor vision	48	24%
Hearing Problem	12	6%
Heart Problem	4	2%
Depression	48	24%
Dementia	32	16%
Any other	10	5%
Total	200	100%

Table 9 reveals that 12.5% (25) respondents are suffering from hypertension, 19.5% (39) have diabetes, 41% (82) have osteoporosis, 24% (48) majority of respondents are facing poor vision problems which include cataract, glaucoma, macular degeneration etc.. 6% (12) have problem of hearing, 2% (4) have heart problems and 24% (48) suffer from depression, 16% (32) have dementia and 5% (10) have any other health problems such as arthritis, urinary infection and high cholesterol. Most of the respondents are suffering from multiple health problems. In this table the problem which troubles them the most has been indicated.

**Table 10: Reasons for Health Problems**

Particulars	Number of Respondent	Percentage(%)
Lack of awareness	22	11%
Lack of nutritious diet	45	22.5%
Lack of medical attention	75	37.5%
Hereditary reasons	12	6%
Health problems are integral component of old age	42	21%
Cannot say	4	2%
Total	200	100%

Table 10 shows that 11% (22) do not have proper awareness about their age specific health problems, 22.5% (45) are not taking adequate nutritional diet, 37.5% (75) are suffering because of lack of medical attention. They do not have enough money for expensive medical treatment. 6% (12) have hereditary reason for their poor health, 21% (42) believe that health issues are integral component of old age and 2% (4) could not specify the reasons.

**Table 11: Quality of life**

Particulars	Particulars	Percentage (%)
Satisfied	30	15%
Partially Satisfied	45	22.5%
Dis-satisfied	125	62.5%
Total	200	100%

Table 11 shows that 15% (40) respondents are satisfied with their life, 22.5% (45) are partially satisfied and 62.5% (125) respondents are dis-satisfied with their life.

### Discussion

The results reveal that majority of the elderly women feel that old age is associated with financial and social insecurity. They also feel isolated and are dissatisfied with the quality of their life. The children do not care for them and



most of them spent their time in religious activities. Majority of the women opined that change in values, lack of bonding and disintegration of joint families is responsible for deteriorating condition of elderly. Majority of the elderly women are also facing economic problems because they have always been dependent on others and have not done any financial planning for old age. Most of them suffer from multiple health problems, osteoporosis being the most common problem. This has been attributed to lack of medical attention and awareness. Due to financial and social issues confronting the elderly, most of them are dissatisfied with their life. The results of the study extend the findings of the studies conducted by Minimol (2016) and Mane (2016). The results build on the Modernization theory which postulates that industrialization and modernization are the factors responsible for changes in family structure and norms which in turn has resulted in social exclusion of elderly. The generalizability of the results is limited to urban areas.

### **Conclusion**

The present study was taken up to examine various social, economic and health problems of urban elderly women. The study provides evidence that the elderly women have to face many economic, social and financial challenges. Economic dependency is widespread among elderly women and the experiences of insecurity and exclusion from the mainstream society are common. The dependency status determines the position of an individual in society. The elderly women were not a part of the workforce when they were young and were dependent on either husband or other male members of the family. This trend has continued in the old age and most of them are totally dependent on others. They do not have enough resources to lead an independent life. They are trapped between the declining traditional systems on one hand and lack of adequate health and social security systems on the other hand. The restrictions on women's education, employment and consequences of gendered division of labour become more explicit during old age. The women become socially more vulnerable and health issues are also a matter of concern. There is a need to address this demographic transition through innovative policy measures. Further longitudinal research is required to have a better understanding of links between work, family structure and socio-economic problems of elderly women.

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