

SPECIAL CARE FOR ‘ELDERLY WOMEN’ IN INDIA: REALITIES, RESPONSE AND THE WAY FORWARD

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Abstract: An increasing proportion of ‘Senior citizen’ or ‘Elderly’ as a person who is of age 60 years or above, combined with a myriad of elderly women in comparison to elderly men will pose a greatest challenges in coming decades. The present paper is an attempt to highlight the demographic transition in particular of elderly women. It reviews the legislative and other responses in the form of government policies and programmes to address elderly women. Additionally, it will offer a way for both policy makers & development practitioners in terms of recommendations to acknowledge women in particular. The paper will try to fix the argument around that elderly women and their problems need special care as their numbers are likely to increase in the future and given the multiple disadvantages they face in life. The findings and recommendations in this paper are based on literature review of secondary sources like global ageing reports, India Census 2011, government reports/ records to understand the legislative response to elderly population etc. The paper is organized as follows- Section 1 Introduction with facts and figures on demographic transition of elderly women population in India. Section 2 Critical look on initiatives by GOI for elderly population (eyes on elderly women). Section 3 Why do elderly women need special care? Section 4 Recommendations and Conclusion.

Introduction: The present scenerio regarding the elderly population clearly shows that the number of elderly in India is rapidly rising. Their proportion in the total population have increased over the last few decades and tend to be so in the coming years also. Like most other developing countries like China, the population growth of elderly in India is seen similar to world’s trend. According to Annual Report (2011-12) of Ministry of Social Justice and Empowerment, the population of senior citizen in age 60+ has increased from 77 million in 2001 to 96 million in 2011 and projected to increase to 301 million in 2051 i.e. 17.3% to the total population in that year. Similarly, population of age 70+ was 29 million in 2001, increased to 36 million in 2011 to 51 million in 2021 to 73 million in 2031 and then 132 million will be in 2051. The same trend is seen in age 80+ population that was 8 million in 2001 will increase to 23 million in 2041 to 32 million in 2051.

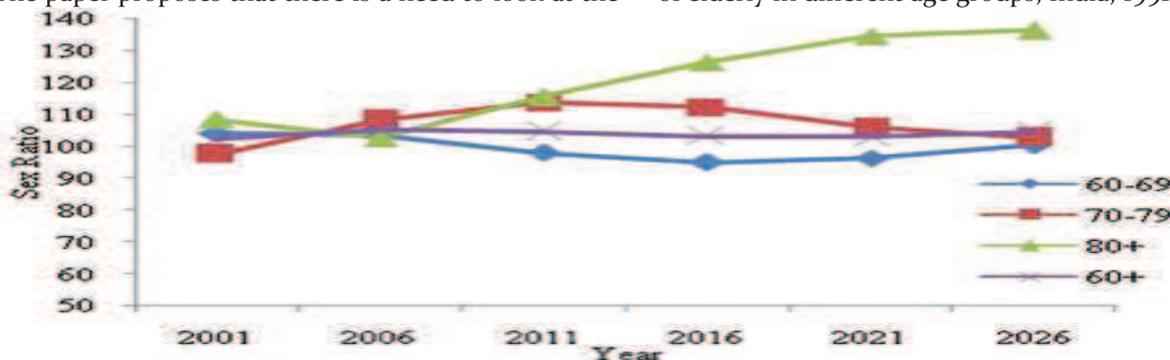
It is shocking to know that in a country where we are concern about female child sex ratio, the number of women elderly is showing an upward moving graph. The paper proposes that there is a need to look at the

elderly women with respect to their unique needs than just associating them a mere part of population. The paper is divided as follows: Section I focuses on facts & figures on demographic transition of elderly women in India. Section II critically examine the initiatives taken by Government of India for elderly population. Section III answer to Why do elderly women need special care? While Section IV recommend and concludes the discussion.

Section I: Elderly women population in India:

Elderly women refers to women above the age of 60 years. Most of the literatures have used term ‘Feminisation of elderly’ to increasing number of women in older ages as compared to men. According to the data in Graph1, the sex ratio (number of females per 100 males) of elderly above age 60 has grown up from 94 women per 100 men in 1991 to 105 in 2011 and projected 105 in 2026. This trend is likely to be challenging to women in age group 80+ which is projected to be 136 in 2026 because over 50% of women are widows in this age group.

Graph 1: Sex ratio (number of females per 100 males) of elderly in different age groups, India, 1991- 2026.



Source: Demographics of population ageing in India: Trends and Differentials, 2011.

Apart from the concern from a demographic point of view, the increase in numbers of Socio- economic,

health, shelter issues among the elderly women demands attention from the family and government too. Unlike previously, in recent times, the role of family as primary care giver to the elderly has undergone change due to nuclearisation of family, migration of younger generation to urban areas in search of jobs etc and hence, one find the shift of caring responsibility of elderly on government in the form of various social and economic security programmes.

In India, such benefits are lacking for women in particular and are forced to live with insecurity, dependence and ignorant from various rights.

Section II: Government Initiatives for the Elderly population: The idea behind this section is simply to get aware about policy/ programmes, schemes, benefits, concessions in areas such as pension, social security, health care etc. by Government of India. Generally, no possible information is available on the programmes that highlight women elderly. Therefore, it is felt necessary to critically study and find out short- comings and loopholes of the initiatives and suggest measures to improve programme planning and implementation.

To make sure that elderly live longer and lead healthy, secured, productive & dignified life, Article 41 & 47 of the Constitution provide the State to take appropriate steps in its capacity. Further, Section 125-128 in chapter IX of the Code of Criminal Procedure 1973 laid down procedures for the provision of maintenance to children, wife and parents while section 125 (1) (d) the Code of Criminal Procedure and Section 20 (1&3) of the Hindu Adoption and Maintenance Act, 1956 respectively has recognized the rights of parents, without any means, to be supported by their children having sufficient means. Under Muslim law, son in particular has been assigned duty toward parents. This liability varies from one community to another. Since 1992 Government has taken following initiatives:

1. Integrated Program for Older Person (IPOP), 1992.
2. Non- plan scheme of assistance to panchayati raj institution/ voluntary organizations/ self help groups for construction of old age homes/ multi service centres for older persons, 1996- 97. Discontinued at the end of the X plan (2006- 07).
3. National Policy on Older Person (NPOP), 1999.
4. National Council for Older Person (NCOP), 1999. Reconstituted in 2005.
5. Unorganized Sector Worker’s Social Security Act (UWSSA), 2009 and thereby constituted National Social Security Board on 18 august 2009.
6. International day for older persons, 2009.
7. National Social Assistance Programme (NSAP) since 2002- 03 comprises five schemes: Annapurna scheme, indira gandhi national ool age pension

scheme (IGNOAPS), indira Gandhi national widow pension scheme (IGNWPS), national family befit scheme (NFBS) and indira Gandhi national disability pension scheme (IGNDPS).

8. National Programme for the Health Care for the Elderly (NPHCE), 2010- 11.
9. Maintenance and Welfare of Parents and Senior Citizens Act, 2007.
10. National Policy for Senior Citizens, 2011.

Apart from these legislative measures, the individual ministries like Ministry of civil aviation, railways and Departments of Government of India provide facilities to elderly citizen to make their life comfortable, safe, hassle free.

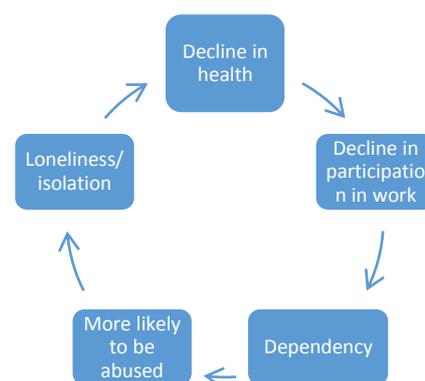
The reality in all the above mentioned legislative provisions is that they take the problem of all the elderly whether men or women in a same category. They failed to point out the difference in issues, circumstances of elderly women to that of elderly men. Women in particular was focused for the first time in National policy on Senior Citizen, 2011 and XII plan period that focuses on mainstreaming of all the senior citizens, especially the older women.

Section III: Why do Elderly Women need Special Care?

According to National Policy for Senior Citizen, 2011 discrimination (stemmed from deep- rooted cultural and social bias, class, caste, disability, illiteracy, unemployment and marital status), less access to property, less leisure time, higher chronic illness, lower social status are some among many other factors, call for special attention to older women.

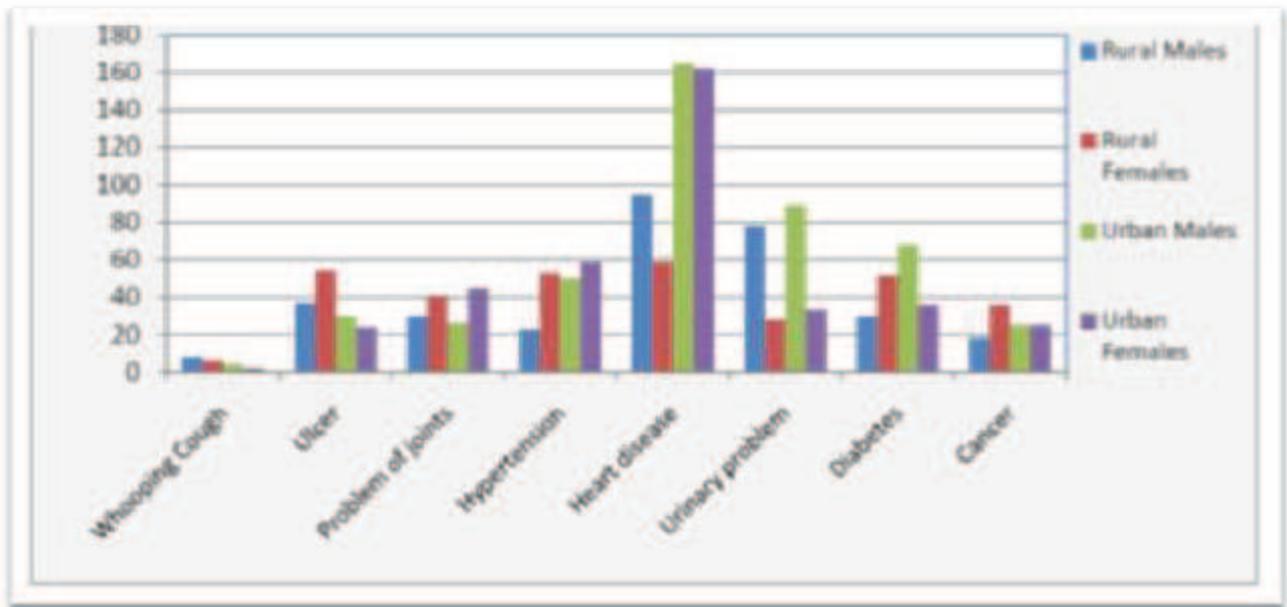
.....In a society, where being a women is in itself considered a disability, think of the plight of those who are women & that too old.....

Ageing is a natural process that shows its first impact on health and hence, create a vicious circle.



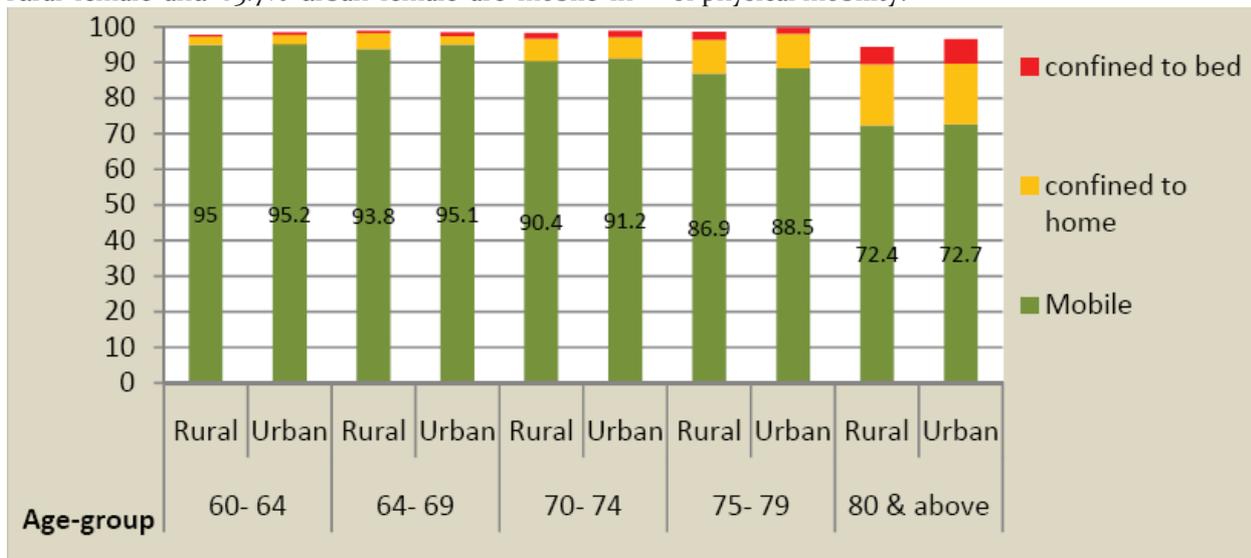
Elderly women in rural areas are more prone to chronic diseases than women in urban areas (graph 2) that likely due to poverty, less health care facility in villages etc. This in turn result into

Graph 2: Chronic diseases among the elderly in India



Source: Situational Analysis of Elderly India, 2011, pp. 31.
 More elderly women are less mobile and confined to home than elderly men. It's a fact that mobility decreases with increase in age and therefore 63.2% rural female and 65.7% urban female are mobile in

comparison to 72.4% rural males and 72.7% urban males in age group 80 years and above (graph 3). This variation is seen more in rural areas than urban residence.
 Graph 3: Percent distribution of aged persons by state of physical mobility.



Source: Situational Analysis of Elderly India, 2011, pp. 30.
 Elderly women (table 1) demonstrated disability more in comparison to elderly men. With increase in

age, the problem in seeing, hearing, speech has also increased.
 Table 1: Disabled population by type of disability, age & sex

AGE	SEEING		HEARING		SPEECH		MENTAL ILLNESS		MENTAL RETARDATION	
	male	female	male	female	male	female	male	Female	Male	female
60-69	318137	350313	245411	246365	70033	55643	28187	28214	30562	26830
70-79	218203	247259	171327	171635	31195	24556	11720	13344	11610	11105
80-89	79695	97385	70212	74239	8507	7831	3321	4516	3344	3709
90+	20301	27292	19879	23362	3010	2839	979	1296	1436	1429

Source: Census of India, 2011

Retardation in physical health accompanied with age decreases the participation in work. Elderly females in all age group are more demonstrated in informal sector (table 2). This might be due to

Table 2: Labour Force Participation and Type of work among older men and women.

	Within the Preceding Year, Per cent Engaged in:						Per cent Doing Any Other Work
	Salaried	Business	Cultivation	Farm Labour	Non-Farm Labour	Animal Care	
Rural Males							
60-9 Years	3.7	7.7	38.5	13.9	8	41.1	72.3
70-9 Years	2.8	5.3	24.6	5.6	3.1	30.9	49.6
80+ Years	0.7	2.3	10.5	3.8	1.3	14.4	25.1
Rural Females							
60-9 Years	1.1	1.7	14.5	7.9	1.4	26.4	39.8
70-9 Years	0.1	1.1	4.1	2.9	1	12.6	19.1
80+ Years	0.2	1.1	1.7	0.2	0.5	5.1	8.5
Urban Males							
60-9 Years	10.4	16.5	3.9	3.8	8.5	4.8	43.4
70-9 Years	8	11	3.2	2	4.6	5.6	30.7
80+ Years	2.9	4.8	0.6	1.5	1.3	1	10.9
Urban Females							
60-9 Years	3	2.2	1.1	1.7	2.3	3.8	13
70-9 Years	1.9	1.9	0.4	0.5	1.6	2.4	7.8
80+ Years	1.7	1	0	0	0.2	0.9	3.4

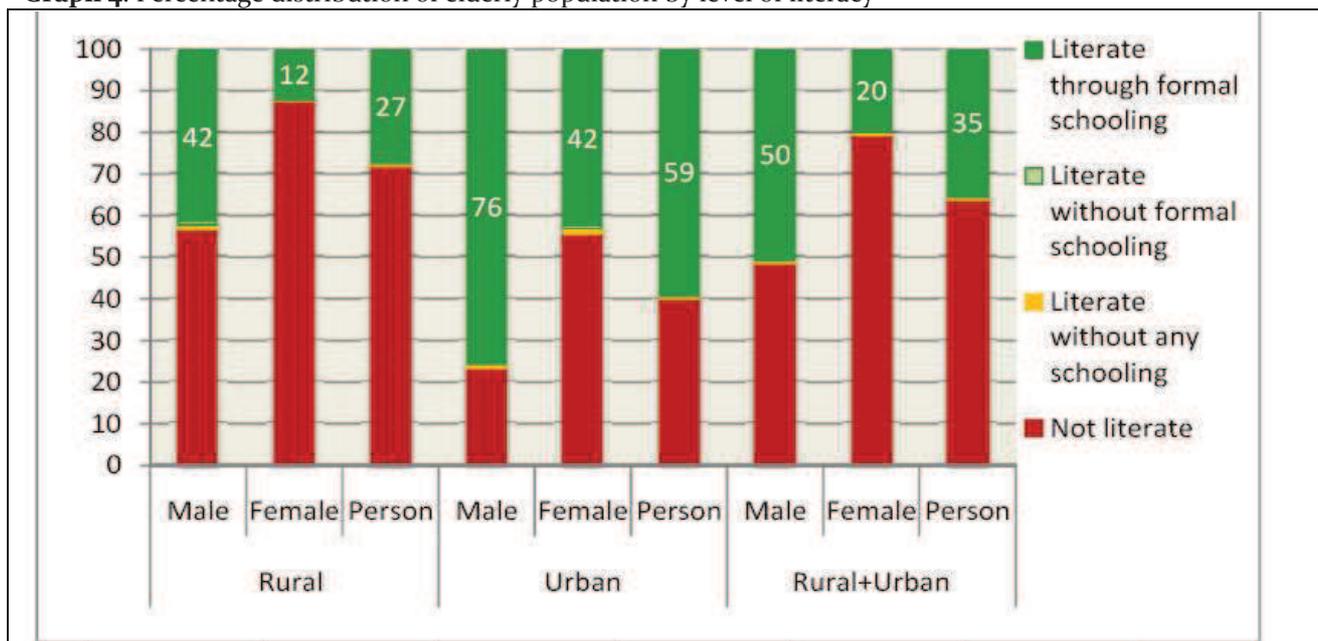
Note: Multiple activities counted separately so the total may exceed 100 per cent.

Source: well- being of the older population, HDI

a huge gap between male and female literacy rate that vary from rural to urban part of the country. 87% female aged 60 years and above are not literate in rural India than 56% female in urban India. Both in

total make out 79% not literate female population than only 48% not literate population overall (graph 4).

Graph 4: Percentage distribution of elderly population by level of literacy



Source: Situational Analysis of Elderly India, 2011, pp. 28.

However, we may in a way conclude that illiteracy and less participation in formal sector that provides pension facility to senior citizens retired at the age of 60 years may result into dependency. As India's population ages, the country will face a shrink in working-age people to support the elderly population. Old dependency ratio in India has risen from 122 million in the year 1991 to 131 million in the year 2001 to 142 million in 2011. The belief pertaining

to elderly population is their dependency on family especially on spouses and on children for monetary and non-monetary needs. Table 3 demonstrate that women are highly dependent as compared to men both in rural and urban areas due to socio- structural system, lack of economic security, health etc.

Table 3: State of economic independence, 2004 (in percentage)

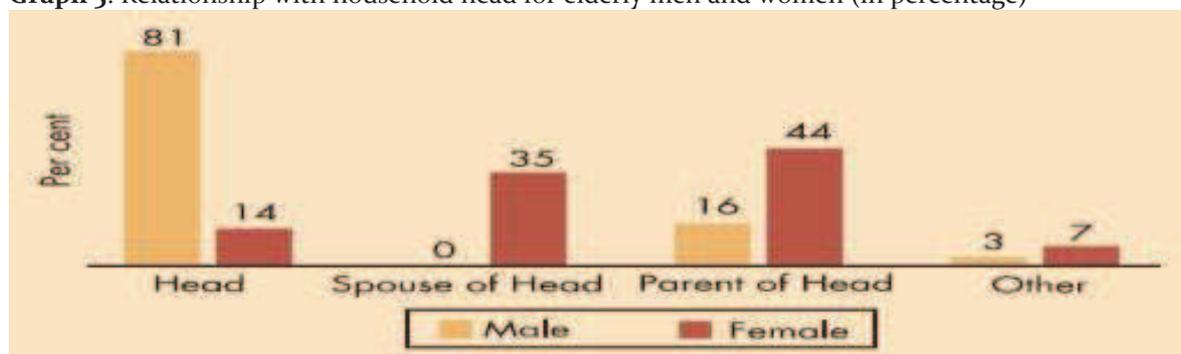
India	Place of Residence	Male			Female		
		Not dependent on others	Partially dependent on others	Fully dependent on others	Not dependent on others	Partially dependent on others	Fully dependent on others
	Rural	51	15	32	14	12	72
	Urban	56	13	30	17	9	72

Source: Ageing in India: Need for a comprehensive policy, 2013

The dependency of elder women likely be more due to gender differentiation in relative status of the elderly within a household. More elderly men occupy position of power in household than women. 81%

elderly men are accorded the status of head of household whereas are more commonly found as either mother of head (44%) or wife of the head (35%). (graph)

Graph 5: Relationship with household head for elderly men and women (in percentage)

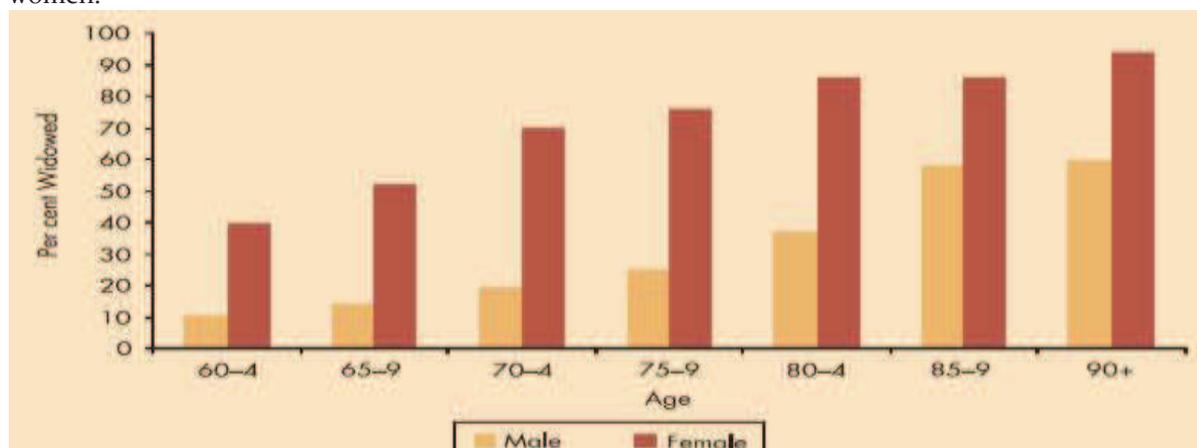


Source: Well- being of the older population, HDI, 2010.

Moreover, all the State Government has the social welfare Department to reach out large number of elderly. The role of NGOs, religious institutions, private sector can also be helpful. Though they are actively engaged in old age care activities but very few are dedicated only for women. Out of total 728 old age homes in India only 101 homes are exclusively for women.

According to the below graph 6, widow exceed widower in all age group. Due to improvement in medical facility, more life expectancy in female after age 80 years, widowhood has exceeded.

Graph 6: widowhood by age for men and women aged 60 and older.



Source: well- being of the older population, HDI, 2010.

As widow women are increasing the dependency of them on family and relatives is also growing. According to HelpAge India report (2014), 50% of the

elderly reported personal experience of abuse, 48% males and 53% females. In 2014, the percentage of elders abuse went up drastically from 23% in 2013 to

50%. Verbal abuse (41%), Disrespect (33%) and Neglect (29%) are ranked as the most common type of abuse. Daughter- in- law (61%) and son (59%) emerged as the topmost perpetrators. The reason for abuses being cited were emotional, economic dependency of the elderly victim. Sadly, the number of people who admitted to suffer abuse for 3- 5 years has jumped to 46% as against 28% in the year 2013. Abuse along with busy life of youngsters, increasing female working population, technology advancement, have a larger share in isolation, neglect, loneliness of elderly. Although the level of isolation is more in cases of elderly living alone or with their respective spouses only. In the age group 80+, over 93% were found in complete isolation while 77.7% in age group 60- 70 years reported that they are going through phase of isolation. Thus, isolation has caught its speed over the past few decades.

Section IV: Recommendations & Conclusion

Being old doesn't discriminate between caste, class, gender etc. However, the cultural values, social structure & the availability of economic and social resources make an immense impact on the conception & management of elderly. Thus, elderly women in our society are poor, unemployed, illiterate, has less access to health services, faces physical, psychological and verbal violence, lives in insecure and unsafe housing.

Although various measures have been taken up by the centre, state government and NGOs to address the issue of elderly, but none of it has earned the desired results till date and thus Government need to consider a focused policy for the elderly women in terms of their significance to society, requirement of healthy life that is possible through proper shelter, medical facility, food, love and care to overcome loneliness and isolation and given the changing life style, urbanization, nuclearization of family structure etc.

As it is shown in the paper that elderly women have to face twice the amount of discrimination that faced

by elderly men, therefore its double amount of struggle which disabled elderly women have to face in the society. Thus, the government should also consider the difference in requirement of a urban women, a rural women, a disabled women, a BPL/ Non- BPL women and on. This will help to enhance welfare of every kind of elderly women in our society. In view of the rising elderly women population in the country there is a need to prepare a focused policy for them. The most important aspect is to ensure economic support to the elderly and their family too. Economic benefit must be granted to people engaged in informal sector too as 'financial Security' is important at this stage of life. NGOs as powerful organization in terms of human resource must make the use of schemes and programmes and ensure that each and every person living under their roof is enrolled to them as this may strengthen their financial base.

There is also a need to sensitize the community to bridge inter- generational gap. Modernization and development has brought changes in life style of people that impact the old member of the family the most. Educational institution where children spend half of their day should include activities where grand- parents can take healthy participation.

Media that seems to be active in every sphere from politics to mother- child welfare to protection of girls, must provide an appropriate attention to this section of society also. It can help in awareness generation and attitude change training though home- based education to senior citizens.

Population ageing that is a world- wide phenomenon has posed challenges from developed countries to developing and less developed economies. The increase in elderly women population, representing the direct relationship of age and gender, has significant implications for policy makers. It is time for older women to be made visible in government acts and laws.

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