



Problems of the Elderly People in India: An overview

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Abstract

Ageing which is a natural process brings a lot of challenges for elderly people, where over time an individual not only experiences a decline in performance but also in productivity and health. Population ageing is an inevitable and irreversible process and along with it brings many economic, health and psychological problems and issues. With increasing age the process of aging is often associated with declining health, loss of independence, shrinking of social roles, seclusion and feeling of loneliness, economic hardship, being labelled or stigmatized as a burden on the family and society, intergenerational conflicts, ill-treatment & abuse, desertion and need of shelter through institutionalized arrangements. Globally, there are an estimated 605 million people aged 60 years and above. Improvements in health care facilities have brought longevity, which is considered to be one of the greatest achievements of the 20th century. Many health and psychological problems arose only after the age of seventy. Proportion of elderly suffering with different chronic diseases was significantly more among male than female. Due to poverty, lack of mobility, inadequate and in accessible health care services and lack of familial and societal support, the elderly were vulnerable to many health and psychological problems at older ages. Old age presents its special and unique problems but these have been aggravated due to the unprecedented speed of socioeconomic transformation leading to a number of changes in different aspects of living conditions. Urbanisation, industrialisation and the ongoing phenomenon of globalisation have cast their shadow on traditional values and norms within society. Gradual nuclearisation of the joint family, erosion of morality in economy, changes in the value system, migration of youth to urban areas for jobs or work and increasing participation of women in the workforce are important factors responsible for the marginalisation of older people in rural India. This paper emphasis on the issues and concerns of elderly people in rural areas.

Keywords: Ageing, longevity, Psychosocial, Health problems.

Introduction:

Ageing of the global is one of the biggest challenges facing the world in the **21st** century. Ageing is a natural, inevitable biological phenomenon. Community must learn to respect their grand elderly, understand them and treat them with honour, dignity and abundant love .From a demographic point of view; population ageing is a result of both mortality and fertility. Fewer children are born and more people reach old age. With increasing age, the process of aging is often associated with declining health, loss of independence, shrinking of social roles, isolation and feeling of loneliness, economic hardship, being labelled or stigmatized as a burden on the family and society, intergenerational conflicts, ill-treatment and abuse, desertion and need of shelter through institutionalized arrangements. If old is not nurtured and given adequate care and support, then it is very difficult to redeem them from their miserable plight.

The improvement in mortality and reduction in fertility have made the population age structure much older than before and by 2025, the elderly are expected to reach 15 per cent of the world total population. So far the issues related to ageing have figured mainly in the context of developed countries. However of late the demographic scenario of more and more developing countries is changing from high fertility to low fertility besides the demographic transition in the developing countries has proceeded at a much faster pace than it did in the developed ones involving large absolute numbers. This is resulting in a much faster pace of ageing and large absolute size of the elderly population in many of the developing countries.

Ageing in India is described as a process of change in human roles throughout life. Culture is transmitted between generations. Social changes in India have impacted on the elderly through shifts in lifestyles, housing shortages, migration of youth, increasing female employment, high cost of living and changed priorities in the distribution of income within families and the breakdown of the system of common ownership of land. The net demographic result of change is increased longevity and an increased proportion of elderly among total population. The Indian Constitution assures the protection of the elderly with public assistance. Children are obliged to care for elderly or infirm parents according to the 1973 criminal code and a 1956 Hindu act. The Indian approach to the care of the elderly has been guided by religious beliefs and philanthropic ideals. Economic support is provided by states to some extent for the destitute and the uncared-for aged. The trend in the size and growth of elderly population in the country indicates that ageing will become a major social challenge in the future when vast resources will need to be directed towards the supported care and treatment of the elderly people.

Population Ageing - Global Perspective:

Ageing is an inevitable phenomenon in all biological species. It is a rent-less process in life, leading to its extinction. One of the upcoming issues in the global demographic situation is the population ageing. By the sheer magnitude of their number, the next century society can be rightfully termed as the society of aged. Virtually all nations are experiencing growth in the numbers of elderly residents. Comparatively, there is a great increase of elderly populations in lesser developed countries than in more developed ones. Even in nations where the elderly percentage of the total population remains small, absolute numbers may be rising steeply. Such growth poses challenges to social institutions that must adapt to changing age structures (Kinsella, 2000).

The rise in the proportion of the ageing population represents one of the most significant demographic shifts in history. In 1950, there were 205 million people who were over 60, in 2000, there were 606 million and by 2050, there will be two billion. The number of elderly trebled over the last 50 years and an encore is expected in the next 50 years. As a proportion of the total world population, the number of elderly will double in the next 50 years. This demographic change is fast turning the hair of policymakers prematurely grey throughout the world, especially in developing countries, where the growth of the aged population is happening at a more rapid pace (Ashakrishnakumar, 2004).

Living Arrangements:

Living arrangement is very important in terms of providing support for the elderly and can, in general, guarantee their well-being. In India, where the family has an obligation to care for

the elderly, the consequences of rapid declines in fertility and mortality on elderly living arrangements are an interesting issue in the field of population and development.

Populations are ageing, with changes in the living arrangements of the elderly occurring in most countries, as a result of lower fertility, higher mobility, changing attitudes about family structure and function and increasing life expectancy, especially mortality declines in later life. The population of China, which consists of more than two fifths of the world total, is ageing at an extraordinarily rapid pace. There are important interactions between population ageing, changes in the living arrangements of the elderly and the need for longterm- care service. Such interactions are directly related to community and family support systems and public policies (Yi et al., 2002).

Living arrangements are influenced by a variety of factors, including marital status, financial well-being, health status and family size and structure, as well as cultural traditions such as kinship patterns, the value placed on living independently or with family members, the availability of social services and social support and the physical features of housing stock and local communities. In-turn, living arrangements affect life satisfaction, health and most importantly for those living in the community, the chances of institutionalization. One's living arrangements are dynamic and they change over the life course, adapting to changing life circumstances. Some significant observations emerge from a cross national comparison of living arrangements of the older population. First, women in developed countries are much more likely than men to live alone as they age; older men are likely to live in family settings, typically with a spouse. Secondly, there has been an increase in the proportion of the older population that is living alone in developed countries. Thirdly, both older men and women in developing countries usually live with adult children. Fourthly, the use of non-family institutions for care of the frail elderly varies widely around the world but is relatively low everywhere (Velkoff, 2001).

Social Problems:

The position and status of senior citizen have been seriously undermined by factors such as changing values, growing individualism and rising aspirations for consumer goods as a result of the impact of education, urbanization, westernization and Industrialization, lesser number of children due to acceptance of small family norm and hence greater vulnerability in the matter of dependence, migration of younger members to cities for alternative source of livelihood, acute paucity of accommodation in urban areas and the exorbitant rents which act as a strong disincentive for bringing old parents to live with the children (B.N. Chattoraj2002).Older people suffer social losses greatly with age. Their social life is narrowed down by loss of work associated, death of relatives, friends and spouse and weak health which restricts their participation in social activities. The home becomes the centre of their social life which gets confined to the interpersonal relationship with the family members. Due to loss of most of the social roles they once performed, they are likely to be lonely and isolated severe chronic health problem enable them to become socially isolated which results in loneliness and depression.

Physiological problems:

With growing age, senior citizens experience various anatomical and psychological changes. The physiological decline refers to the physical changes an individual experiences because of the decline in the normal functioning of the body resulting in poor mobility, vision, hearing, inability to eat and digest food properly, a decline in memory, the inability to control certain physiological functions and various chronic health problems. Rapid urbanization and changes, breakdown of the joint family system, migration of youth to the cities and abroad,

inadequate living space and generation gap have had a particularly telling effect on the elderly who get marginalized and sadly neglected, falling an easy prey to a host of illnesses, including depression and mental problems. At times, depression in old people is associated with serious physical illness and may show a blend of depression, anxiety, irritability and attention seeking behaviour.

Health Problems

In India, the elderly people suffer from dual medical problems, i.e. both communicable as well as non communicable diseases. This is further compounded by impairment of special sensory functions like vision and hearing. A decline in immunity as well as age-related physiologic changes leads to an increased burden of communicable diseases in the elderly. The prevalence of tuberculosis (TB) is higher among the elderly than younger individuals. Elderly people suffer from type 2 diabetes, coronary heart disease, hypertension, stroke, chronic obstructive pulmonary disease, Alzheimer's disease, osteoarthritis, osteoporosis, prostatic hypertrophy, cataracts, macular degeneration, cancer, etc. and at the same time, they are vulnerable to infections involving respiratory (including TB), urinary and digestive tract.

Elderly Abuse:

Elder abuse is defined as any ill treatment to an older person. Each year thousands of elders silently face abuse. Sadly, in most cases, the abuse begins at home by a person who is the part of family or closed to the person. As elderly are relatively weak, they are prone to physical abuse. They are abused financially, emotionally, and mentally as well for various reasons and in various ways. There are various types of abuse, which are faced by elderly people. In 2013, Disrespect (79%) was the most common type of abuse faced by elderly followed by verbal abuse (76%) and neglect (69%). Economic exploitation (53%), beating (39%) and unwelcome sexual contact (3.01%) were also prevailing abuse in the society. In 2015, according to the youth abusive language or talking rudely (72.4%) is the most common type of abuse faced by elderly followed by "being isolated/silent treatment/ emotional abuse" (43.1%) and "denial of basics/medicines/material abuse" (30.1%). Physical abuse or beating (29.1%), financial abuse (24.7%) and unwelcome sexual contact (1.8%) are also prevailing abuse in the society. (Govil Punita and Gupta Swati, 2016).

Conclusion

To face the challenges of ageing population, the country needs to be well prepared. It is essential to devise models and mechanisms to help the elderly face the impending challenges in present day context. Appropriate social and economic policies need to be made to mitigate its ill effects. Social policy development and suitable redistributive policies are required for the elderly to adapt to ageing as well as for older population to adapt to a changing society. New priorities must be added to the scarce resources for social programs for elderly, while still having to deal with the problems of the younger populations. . In conclusion, increased life expectancy, rapid urbanization and lifestyle changes have led to an emergence of varied problems for the elderly in India. Although this chapter has mainly focused on the health issues of the elderly, it must be remembered that complete health care to the elderly is possible only by comprehensive and multidisciplinary approach. Elderly in India needs the protection of an integrated national policy for the aged. Policies should identify needs, recognize rights to the benefits of development, provide the framework for the development of appropriate social security and social services and have sufficient funding. Policy must be adapted to meet the diverse needs of subgroups based on

residence, sex, education and employment or income. There is a need for a high level organization, which would protect and promote the needs of the elderly particularly in rural India.

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