



Issues Relating to Elderly in India

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ARTICLE INFO

Article history:

Received: 6 June 2019;

Received in revised form:

15 July 2019;

Accepted: 25 July 2019;

Keywords

Elderly,
Issues,
Assault and
Violence.

ABSTRACT

As the number of elderly is rising and the social environment is changing, the percentage of the needy among them is also increasing. These factors are also leading to the need for a large number of old-age homes where the elderly may enjoy the end part of their lives in a group of their specific. The effect of the above causes may be observed in the living arrangements of old age Indians. With the evolution of the rural population, the area of arable land is lessening to meet the increased plea for housing, leading to incremental and disguised unemployment. As a result, the rural commonalities are forced to voyage to the urban areas in search of a livelihood. According to the framework of economic development developed by Arthur Lewis, the movement of labour from the “traditional sector” involving agriculture and allied areas that produce traditional outputs for all societies, to the “modern sector” (industrial area, which produces manufactured items) is placed on the centre stage. The traditional sector may be assumed to supply an unconstrained number of labourers, but the absorption of the same critically depends on the supply of capital to the modern sector. The level of savings and investment funds are the determinants of the growth of the modern sector and, hence, the generation of employment as well as the process of urbanization. This paper deals with the issues of aged people in India.

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Introduction

The process of economic liberalization led to the rise of capitalism, division of labour and accessibility of profitable opportunities. The market relationships are stressed with greater prominence than emotional ones. Presently, everyone seeks to a rewarding career so they can have a well lifestyle, leaving the prior caste based familial professions as evidenced by the quick growth of the professionals in the Indian career market. Simultaneously, the flexibility of the people has increased to meet the rising areas of production and services sectors. Therefore, the traditional joint family system is shattering, resulting in the formation of nuclear families. On the other hand, double-income-no-kid (DINK) couples are gradually observed in Indian societies. Consequent to the above developments, the older people are undergoing remarkable changes in their physical and socio-economic situations. In smaller families, they are gradually marginalized in the decision-making process. Hence, the family that traditionally took care of the aged or sick, widows and orphans is beginning to rely on society as a whole.

Moreover, the advanced cost of living in urban areas and the lack of space for all members of a family to stay at the same place are causing the breakdown of the joint family system. At the same time, the insurance motivation of the joint family system has deteriorated gradually while the cost of parenting has been affected to a higher degree, leading to a lower rate of fertility.

Therefore, the progress of the industries catalyzes the process of urbanization but creates the invaluable family support system unavailable to senior citizens.

1.1 Social Issue

The position and status of senior citizen have been utterly weakened by issues such as changing values, growing individualism and rising hopes for consumer goods as a result of the effect of education, urbanization, westernization and Industrialization, smaller number of children due to approval of small family custom and hence greater exposure in the matter of requirement, relocation of younger members to towns for alternative basis of livelihood, acute paucity of accommodation in urban areas and the excessive rents which act as a tough deterrent for bringing old parents to live with the children.

Still, the fact rests that the processes of modernization and urbanization are transforming society beyond appreciation. With the breaking down of the joint family system and the rise of the nuclear family, individuals have become more worried about their wives and children. As a result, the care of the elderly parents has become a matter of burden for them. This has required the provision of the substitutive security net and a provision of social services for aged persons.

1.2 Socio-Psychological and Emotional Issues

Though fulfillment of basic needs is important for the survival of mankind yet man as a social being, does not live by bread alone. He wishes to live in the society where he gets the feeling of belongingness. Such connotations give meaning to his life. He vacates some position and enjoys some privileges, performs useful roles for the society. In the traditional Indian society, the aged persons were given deference and they adored position of authority.

The socio psychological difficulties of the aged perhaps an area which has more relevance in traditional than in advanced societies. The veneration shown to the old, the weight given to their advice, the willingness to have them to mediate in differences and the unique honour and respect shown to them in social functions in customary societies have no parallel in modern societies. The concern and insecurity caused by failing health weakening income and the persistent threat of death as one advances in life are other issues paying to emotional impairment among the old.

1.3 Economic Issues

Great anxiety in old age relates to financial uncertainty. When the question is seen in the context of the circumstance that one-third of the population is under the poverty line and about one-third is above it. But belong to the minor income group, the financial condition of two-thirds of the population above 60 can be said to be delicate.

The elderly in terms of their economic situation may be placed in the following categories:

- (i.) Those who find their income reduced on retirement from their employment or if freelance find their income reduced due to a reduction in their working capacity;
- (ii) Those whose income is not linked with earning capacity or age and is insufficient or is in excess of their needs.

These two may further be observed in terms of their family accountabilities such as education of their children or the socio-moral responsibility of performing the marriage of the children mainly that of a daughter.

The advanced levels of economic reliance among older women arise due to the following factors:

- (i) Women's gentle role in the family;
- (ii) Male supremacy in property and family properties;
- (iii) Customary social values and prejudgments that restrict women's involvement in paid labour;
- (iv) Women's contribution in low paid works; and
- (v) Women's higher involvement in agriculture (or family business);

This has obligated the conscientious souls to think in terms of providing social security welfares and economic profits to the elderly people and keep the fag end of their life devoid of horrible experiences.

1.4 Health Issues

Progresses in medical technology over the past years have endorsed longevity but not worthy health. The issue is that old people live longer but are more vulnerable to diseases. According to the doctors, while the incapacitating effects of old age cannot be ignored, risks can be minimized through cautious planning and deterrence beginning from middle age.

World Health Organization states health as a state of complete physical, mental and social well-being and not just absence of disease or disability. Perpetuation of life is not sufficient unless the prolonged period of life is made livable. The mortality rate per thousand of the population has been reduced from 27.4 to 14.8 and the life expectancy at birth has increased from 32.7 to over 52. Health is also considered as a basic human right by the World Health Organization (WHO). According to it, "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, and political belief, economic or social condition"

According to The National Policy for Older Persons, PHCs in the rural community should become one-stop shops on elderly care. The Policy also stipulates that in addition to

strengthening the PHCs, medical and Para-medical staff in primary, secondary and tertiary healthcare services should be given training in the healthcare of the elderly. It also endorses that hospices supported by the state, or assisted by charity be set up to take care of the chronically ill or destitute elderly.

1.5 Crime against Senior Citizens

One of the main worries with which aging people are subjected to is a crime or the fear of crime. The impression of crime is very severe among the old because, they often have limited budgets, frequently live in inner-city neighborhoods, where offenses are more common and may be injured more easily in the course of the crime. Physical handicaps such as vision or hearing loss can make the elderly easy victim. With reduced strength, elder people are less able to defend themselves or escape from a threatening condition. The crimes, which are mostly committed against these people, are theft, burglary, cheating, physical assault etc. Even without crime, these people live in the fear of crime because of their helpless situation. Sometimes, the fear of crime can be harmful as the crime itself. Fear is useful if it encourages suitable protection. But experiencing endless fear over a long period can be harmful to one's physical and mental health. Over the past few years, newspapers have been progressively reporting about violent assaults on elder persons staying alone. Increased urbanization has resulted in a consequent increase in the number of aged people living alone in the cities. Retired men and women living by themselves in apartments are often the targets of burglars and housebreakers. Planned crimes and sometimes murders have been taking place with appalling regularity, particularly in the metros of Delhi and Mumbai.

The suicide rate among elderly people is also quite major in India. In 1993 a total of 5350 (3700 males and 1650 females) persons of the age of more than 60 years committed suicide because of several reasons out of which poverty, the dispute over property, death of a dear and near one's bankruptcy or sudden change in economic position and fall in social reputation are prominent among males. Among female aged persons, quarrel with daughters in laws, poverty, insanity and dreadful diseases, had been identified as reasons for their suicide.

1.6 Abuse of Older Persons

Apart from the crimes that are committed against old people, they are also subjected to different kinds of abuses these days. The following are the various forms of abuses:

- (a) Physical abuse;
- (b) Emotional or psychological abuse;
- (c) Financial exploitation; and
- (d) Neglect.

1.6.1 Physical Abuse

Refers to single acts that may be repetitive, or to stable acts. Enduring acts include inappropriate restriction or confinement, which causes pain or bodily harm. The significances of physical exploitation include physical indicators of abuse and noticeable psychological appearances, such as diminished mobility, confusion and other altered behaviors.

1.6.2 Emotional or Psychological Abuse

This includes-Words and interaction that denigrate older individuals are hurtful and diminish their identity, dignity and self-worth. This abuse is characterized by:

- (i) Lack of respect for the older person's privacy and belongings;
- (ii) Lack of consideration for his/her wishes;
- (iii) Denial of access to significant persons; and

(iv) Failure to meet the person's health and social needs. Indicators of emotional abuse can include severe psychological manifestations including fear, poor ability to make decisions, apathy, withdrawal and depression

1.6.3 Financial Exploitation

Includes the following

- (i) The illegal or improper use, or misappropriation of an older person's property and/or finances;
- (ii) Forced changes to his/her will and other legal documents;
- (iii) Denial of right of access to and control over personal funds; and
- (iv) Financial scams and fraudulent schemes.

1.6.4 Neglect

is lack of action to meet an older individual's needs, by:

- (i) Not providing adequate food, clean clothing, a safe, comfortable place to live, good health care and personal hygiene;
- (ii) Denying the person social contacts;
- (iii) Not providing assistive devices, if needed; and
- (iv) Failing to prevent physical harm and to provide needed supervision.

1.7 Other Forms of Abuse

1.7.1 Sexual Abuse- Which is non-consensual sexual contact that ranges from violent rape to indecent assault and sexual harassment by caretakers. Sexual exploitation is mainly brutal if the victim cannot communicate well, or physically and environmentally incapable to guard him-/ her. Sexual assault is usually categorized under physical abuse.

1.7.2 Spousal Abuse- Can entail physical, emotional and sexual abuse, financial exploitation and neglect in a life-long or recent partnership.

1.7.3 Medication Abuse- Refers to the misuse of medication and prescriptions, deliberately or accidentally, by not providing needed medication, or by administering medication in dosages that sedate or cause bodily harm to the older person. Further definite forms of exploitation can also be recognized in the scientific prose on the subject.

1.7.4 Abandonment, or Desertion - Of older persons by individuals who are responsible or have assumed responsibility for their care.

1.7.5 Loss of Respect- Perceived by older persons in behaviour that is disrespectful, dishonouring or insulting.

1.7.6. Systemic Abuse

Refers to the marginalization of older persons in institutions, or by social and economic policies and their implementation, and leads to inequitable resource allocation and discrimination in service provision and delivery.

1.7.8 Scapegoating

Describes instances where older people (usually women) are identified and blamed for ills befalling the community, including drought, flood or epidemic deaths. Incidents have been reported where women have been ostracized, tortured, maimed or even killed if they fail to flee the community. In so fleeing, these individuals may lose their immobile assets.

1.7.9 Domestic Violence

Towards older persons occurs in the context of a breakdown in social relations between an older person and his/her family, or of family disharmony. The extent to which it occurs is influenced by sociocultural norms of acceptable behaviour, the primacy of family values and valuation of ageing in the society.

1.7.10 Community Violence

Affects older persons through generalized feelings of fear, which increase their overall sense of insecurity, as well as through direct violence. Criminal violence, including robbery, rape, assault, delinquency, vandalism, drug-related violence and gang warfare can effect households and communities by constraining members' access to basic services, health care and socializing, as well as by direct victimization.

1.8 Conclusion

There are so many problems the elderly are facing these days. They are Social, Psychological, Economical, and Medical, in nature. With the influence of the modernization among the young members of the community, the traditional standards and values have been affected. The attitude and behaviour of the younger generation have also been varying. Now they are objecting to follow the traditional standards and values of the joint family. After going through a moral deal of discussion on the issues of the elderly it can be concluded that the old persons are no more enjoying the love, affection and respect from the other members of the family. Their existence, experience and blessing are considered a must for all-round progress of the family. In a society where they command respect the aged feel that their life is worthy and they to make the family fully established.

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