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ORIGINAL ARTICLE





EMPOWERMENT OF ELDERLY WOMEN: A SURVEY IN GULBARGA CITY

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Abstract:

The elderly population is considered as the problem. The present study is made to reveal the general and health problems of elderly women living in slum areas of Gulbarga city. The paper has elaborated the statistical estimates of elderly men and women at the national and state level. Findings revealed that there are lack of security and health problems for the elderly women. Hence, it is suggested that there is need to empower the elderly women by increasing awareness of the elderly women, so that they can avail benefits from the schemes and welfare policies of government formed for elderly. For this purpose, the NGOs and Voluntary Organizations must have to survey the elderly women in slum areas of Gulbarga and create awareness about the Government Policies and Welfare Schemes for the elderly, so that they can avail benefit from these schemes. The paper is concluded with the remarks that it is very essential to pass a legislation on the part of the government to look after and care the elderly in the family by the younger.

KEYWORDS:

Elderly women, Empowerment, Health, Life satisfaction, Welfare.

INTRODUCTION:

Ageing of populations and extension of life are significant by-products of the demographic transition. Ageing of population is primarily the result of two factors—reductions in fertility and mortality. The reduction in mortality rates implies a longer life span for the individual and the reduction of fertility implies a decline in the proportion of the young in the total population. Thus an 'ageing population' means a population characterized by higher average life expectancy and increasing proportion of the elderly in the total population (Siva Raju, 2000).

The elderly women, who generally do not have the ownership right to family housing or property, and still, now tend to continue the household duties in order to prove useful to their family. Increasing number of elderly women experience neglect and indifference from their children. High level of illiteracy, a lack of remunerative occupation as well as negligible awareness about legal and economic rights among elderly women, in comparison with their male counterparts, make elderly women more vulnerable than elderly men, to neglect and abuse by their sons and daughters-in-law (Shah and Joshi, 1996). Hence, it is generalized that the elderly women have pathetic situation in their family as well as in society. Further, majority of the elderly women living in slum areas are illiterate and depends on others for their basic needs as they have no economic security.

GROWTH OF ELDERLY POPULATION IN INDIA:

The growth of elderly population sex-wise is shown in the following table.

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Table No. 1. Growth of Elderly Population (60+) by Sex, India (Registrar General, 2001)

Year	Total Population	Males	Females
1901	12.06	5.50	6.56
1911	13.17	6.18	6.99
1921	13.48	6.48	7.00
1931	14.21	6.94	7.27
1941	18.04	8.89	9.15
1951	19.61	9.67	9.94
1961	24.71	12.36	12.35
1971	32.70	16.87	15.83
1981	43.98	22.49	21.49
1991	55.30	28.23	27.07
2001	75.93	38.22	37.71

In India life expectancy has gone up from 20 years in the beginning of the 20th century to 62 years today. Better medical care and low fertility have made the elderly the fastest growing section of society, whereas in France, it took 120 years for the grey population to double from 7 % to 14 %. But in India, the grey population has doubled in 25 years. It is highlighted that:

77 Million elderly population (projected to 177 Million by 2025)

90 % with no Social Security

30% of older persons live below the poverty line

33% of older persons live just marginally over the poverty online

80% of older persons live in rural areas.

73% are illiterate, and can only be engaged in physical labor.

55% of elderly women are widows

There are nearly 200,000 centenarians in India (Age Care Forum, 2007).

From 1901 to 2025: 12 million to 177 million

1901 - 12 Million elderly

1951 - 19 Million elderly

2001 - 77 Million elderly

2025 - Projected 177 Million elderly

PROBLEMS OF ELDERLY WOMEN:

It is surprising to note from the above statistics that about the widows population that is female elderly population consists of 54.04% of the elderly population. Elderly Women, if widow faces several problems such as lack of status in the family as well as in society, loneliness, poor economic status, lack of social recognition, depression, severe health problems, lack of care from the family members, etc. Even though the widows' population is major in the elderly population, till now no considerable study was made to know about the socio-economic, health and psychological problems of the elderly women. It is also noted that during the old age the women rather men to a major extent faces the different problems. To study their problems, the present study was made covering elderly women living in slum areas.

In case of women, it is a double burden that older women have to bear. In addition to having to face the travails of being a senior citizen, there is an in-built disadvantage of being a woman in India. According to the latest statistics, around 18 million of the 70 million senior citizens in the country are widows. The widows have different psychological problems such as feeling of insecurity, loneliness, lack of adequate care from the family members, non-recognition in society, etc. The lack of adequate financial resources, the power to make decisions and a lifetime of living under the control of other members of the family have rendered many of them incapable of running their lives after 60 years. While the aged remain a largely neglected group, special care services for aged women are yet to occupy the attention of policymakers and



voluntary organizations (Meena Gopal, 2006).

The present study is concerned with the women elderly population in Gulbarga, a big city in Karnataka. The Population estimates of Karnataka state reveals that there are total 52850562 populations consisting of 26898918 males and 25951644 females. Of which the age-wise distribution of elderly population includes about 1498909 population is between the age group of 60-64 years of age, followed by about 953187 of population is between the age-group of 65-69 years of age group, about 799497 of the population is between 70-74 years of age group, about 353230 of the population is between the age group of 75-79 years of age and approximately 457199 of the population is of above 80 years of age. Hence, it can be said that totally more than 40, 62,022 elders are living in Karnataka state according to the Census of India 2001 (Planning Commission, 2007).

OBJECTIVES:

- 1.To analyze the problems of elderly women in particular and elderly people in general.
- 2.To know about the health problems of elderly women in slum areas; and
- 3.To make an enquiry into whether the elderly women are benefited through the Government Schemes and Programmes.

METHODOLOGY AND LIMITATIONS:

. The present study was made on the elderly women living in slum areas of Gulbarga city. The Gulbarga city have as many as 42 slum areas and density of population is 45,645. As the , population in these areas is large to cover, a sample survey covering four slum areas namely, Konchikoravar Oni, Sanjay Gandhi Nagar, Gandhi Leprosy Colony, and Rajapur Village Harijanwada was made by surveying 150 elderly women aged above 60 years. Further, interview and observation is used as methodology to collect the primary data from the respondents.

ANALYSIS, INTERPRETATION AND DISCUSSION:

The collected primary data is analyzed, interpreted and discussed as under.

1. Occupation:

It is noted that many of the elderly women still engaged in handicrafts, small business, household work, working as domestic servant, beedi workers, construction workers, labour in small industry, retired from organized sector jobs and such other work to earn for livelihood. A few of the respondents are also unemployed and depend on children's income or on old age pension. The occupation of the respondents covered under the study is shown as under.

Table No. 2. Occupation

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Particulars	Frequency	Percentage
Domestic Work	16	10.67
Business/Industry/ Self-Employed	12	8.00
Employed	06	4.00
Formal Sector		
Informal Sector	31	20.67
Retired	07	4.66
Unemployed/ Housewife	78	52.00
Total	150	100

2. Individual Annual Income:

Income determines the economic power and purchasing power of the person. The income may be in the form of salaries, pension, rent, wages, interest, profit, dividend, agricultural return, etc. It was asked to the elderly women covered under the study to furnish the details on their present individual annual income. The collected data is presented in the following table.





Table No.3. Individual Income (Rs. Per Annum)

Particulars	Frequency	Percentage
Below Rs. 2500	20	13.33
Rs. 2501 to Rs. 5000	33	22.00
Rs. 5000 to Rs. 10000	17	11.33
Above Rs. 10000	09	6.00
None	71	47.33
Total	150	100

3. Old Age is Curse and Dissatisfaction in Life:

Due to their worries and physical weakness, majority of the elderly people think old age is curse and dissatisfaction in their life. Even there are many kinds of disappointments such as lack of care and respect from younger, ill-health due to aging, etc, which made the elderly people to feel dissatisfaction in life and they think that old age is a curse. The information on whether the elderly women agree that old age is curse and dissatisfaction in life is tabulated as under.

Table No. 4. Old Age is Curse and Dissatisfaction in Life

Particulars	Frequency	Percentage
Yes	86	57.33
No	64	42.67
Total	150	100

4. Reasons for Dissatisfaction in Life and Feeling as Old Age is Curse:

As stated above, 86 of the total respondents have agreed that old age is a curse and dissatisfaction in life. It was asked to those respondents that why they have opined the same on their old age. The reasons furnished by them are tabulated as under.

Table No. 5. Reasons for Dissatisfaction in Life and Feeling as Old Age is Curse

Particulars	Frequency	Percentage
Lack of Care & Respect in Family	72	83.72
Health Problems	37	43.02
Personal Reasons	28	32.56
Total	86	100

5. Health Problems:

As discussed in the previous chapters, ill-health is a major problem of elderly people. The Elderly people are suffering from many health problems both mental as well as physical problems. There is surprise that many of the elders are not at all suffering from any kinds of health problems. Hence, it was asked to the elderly women covered under the study that whether they have any health problem and collected information is as under.



Table No. 6. Health Problem

Particulars	Frequency	Percentage
Yes	107	71.3
No	43	28.6
Total	150	100

6. Chronic Health Problems:

There are some type of chronic illness associated with old age or heredity of people such as Cardio-vascular problems, diabetes, Asthma, Bronchitis, Cancer, Psychiatric Problems, Dental Problems, Ophthalmologic problems, etc. A few of the respondents are also suffering from these chronic health problems. The information collected on the chronic health problems of the respondents and furnished as under.

Table No. 7. Chronic Health Problems

Particulars	Frequency	Percentage
Cardio -vascular Problems	37	24.6
Diabetes	28	18.6
Asthma/ Bronchitis	69	46.0
Cancer	04	2.6
Psychiatric Problems	15	10.0
Dental Problems	23	15.3
Ophthalmologic Problems	37	24.6
Gynecological Problems	42	28.0
Others	18	12.0
None	43	28.6
Total	150	100

7. Regular Visit to Medical Physician:

It is noted that even though healthy, many of the elderly people make regular medical check-up to maintain their health always fine. Further, a few of the respondents are suffering from different kinds of health problems and are also needed the doctor's prescriptions to maintain their health. Hence, it was asked to the respondents that whether they visit medical physicians regularly and the collected information is shown as under.

Table No. 8. Regular Visit to Medical Physician

Particulars	Frequency	Percentage
Regularly	28	18.67
Occasionally	44	29.33
Never	78	52.00
Total	150	100

8. Beneficiary from Welfare Schemes from Government:

When asked about awareness about the welfare policies from the Government, only 108 of the total respondents are aware about the government policies and schemes for the welfare of elderly people. It was



asked to the respondents that whether they got the benefit from one or more of these schemes and policies from the government and collected responses are shown in the following table.

Table No. 9. Beneficiary from Welfare Schemes from Government

Particulars	Frequency	Percentage
Yes	91	60.6
No	17	11.3
Not Applicable	42	28.0
Total	150	100

10. Type of Welfare Schemes from Which got Benefited:

As discussed already there are only 91 of the total respondents who are beneficiaries from the welfare schemes for the elderly people of the government. Particularly, the respondents have got benefit from the following government schemes.

Table No. 10. Type of Welfare Schemes from Which got Benefited

Particulars	Frequency	Percentage
Old Age Pension (Sandhya Suraksha)	29	19.3
Day Care Centres/ Old Age Homes	04	2.6
Annapurna Scheme		
Health Care	22	14.6
Concessional Travel	51	34.0
Income Tax Concession		
High Rate of Interest on Deposits	11	7.3
Others	03	2.0
Not Applicable	42	28.0
Total	150	100

11. Government Schemes are Sufficient for the Welfare of Elderly:

As discussed already, both the central government as well as different state governments is executing policies and schemes for the welfare of the elderly people. Hence, it was asked to the respondents that whether they agree that there are sufficient schemes for the welfare of elderly population and collected responses are summarized as under.

Table No. 12. Government Schemes are Sufficient for the Welfare of Elderly

Particulars	Frequency	Percentage
Yes	70	46.67
No	80	53.33
Total	150	100

FINDINGS:

Following are few findings from the study.

1. Majority of the respondents are not working outside and are housewives;



- 2.As most of the respondents are housewives, they have no individual income;
- 3.Old age is a curse and dissatisfaction in life as expressed by a great majority of the respondents; 4.An overwhelming majority that is 71.3% of the respondents have health problems. Major health problems include Asthma/ Bronchitis (46.0%), Gynecological Problems (28.0%), Cardio-Vascular Problems (24.6%), Ophthalmologic Problems (24.6%), Diabetes (18.6%), Dental Problems (15.3%) and
- 5.Even though a great majority of the respondents have health problems, still majority of them do not visit the hospitals and consult medical practitioners;
- 6.60.6% of the respondents have got benefits from the social welfare schemes of the Government; 7.0nly few welfare schemes are availed by most of the respondents. Particularly, Concession Travel (34.0%), Sandhya Suraksha (19.3%), Health Care (14.6%), High Rate on Investments (7.3%), Day Care Centres (2.6%) and such others are major welfare schemes availed by the respondents.
- 8.It is highlighted from the study that only 46.67% of the respondents are satisfied with the welfare schemes and programmes from the Government.

SUGGESTIONS:

such others.

Following suggestions are made from the present study.

1.It is essential to identify the old aged people who are in need of help in terms of social and health security. This work should be made by the Non-Governmental Organizations and social welfare organizations; 2.It is suggested to make publicity of the Government Welfare schemes for the elderly. For this purpose, the NGOs and voluntary organizations should organize the awareness camps; and 3.Rigorous punishment is needed for the atrocities and violence against the elderly people and particularly elderly women.

CONCLUSION:

The records show that the India is developing in all respects. But, still many of the social problems are needed urgent attention of the Government in general and social community in particular. Of the major social problems, problems of elderly are a major one, as the statistics revealed that the elderly population is increasing decade by decade. Even though government has formulated sufficient welfare schemes and policies for the elderly, they are not reaching majority of the elderly. This is so because, the elders are not aware about such schemes. For this purpose, it is the bounded work of the NGOs and voluntary organizations to counsel and guide the elderly who felt insecure in social and economic aspects and also increase awareness of elderly on welfare schemes. As observed by the authors, many of the elderly women are facing violence from their own family members. Hence, it is very essential to pass a legislation on the part of the government to look after and care the elderly in the family by the younger and also to control the violence and atrocities on the elderly.

REFERENCES:

- 1.Age Care Forum (2007): Age Care: Overview. 2007.
- 2.Meena Gopal (2006): Gender, Ageing and Social Security. Economic and Political Weekly. Vol. 41 No. 42. 21st October 2006. P. 4477-4486.
- 3. Planning Commission, 2007: Karnataka Development Report. New Delhi: Academic Foundation, 2007. P. 171.
- 4. Registrar General and Census Commissioner, Government of India, (2001): Ageing in India. Occasional Paper No. 2 of 2001.
- 5.Shah, Anupama and Joshi, Uma (1996): Aging Women belonging to Low Socio-economic Status. (Gujarat). IN: Research in Social Welfare. Edited by A.S. Kohli. New Delhi: Anmol Publications, 1996. P. 241-253
- 6.Siva Raju, S. 2000: Ageing in India: An Overview. IN: Gerontological Social Work in India. Edited by Murli Desai and Siva Raju. Delhi, B. R. Publishing Co, 2000.

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