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Geriatric Health

THE PROBLEMS AND ISSUES OF ELDERLY WIDOWS IN INDIA : A CASE STUDY OF ODISHA FOR CRAFTING SUSTAINABLE SOLUTION FOR THEIR SOCIAL INCLUSION

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ABSTRACT India's population is 1.3 billion, which is 17 % of the global population. The population Census 2011 suggests that as of 2011 there were 104 million elderly people in India. While the global elderly population will double from 2011 to 2050, India's elderly population will triple in size (World Population Ageing Report United Nations, 2019). Within India there is a significant interregional and interstate demographic diversity based on the stage of demographic transition. Considerable variations exist in the age structure of the population. Southern states like Kerala, Tamil Nadu, Odisha are at the forefront of ageing with over 9% of their total population above 60 years Population ageing is an inevitable demographic reality. There are various facets to this phenomenon: increase in the size of the older population, longer life-expectancy and decreasing fertility rates. Countries experience a shift from a period of high mortality, short lives, and large families to one with a longer life, far and fewer children (United Nations, 2019. This study is focused on the assessment of the socio-economic problems faced by elderly widows in Puri town, Puri District of Orissa. The data has been collected from the elderly widows those are coming under 6o years and above. Random sampling and interview schedule, case study and observation method used for data collection. This paper also emphasis on many reviews that types of problems faced which includes physical, psychological, mental during widowhood. So to develop positive attitude towards widows and widowhood, different sensitization programme by the intervention process of professional . Thus, the need is for creating opportunities for socialisation within communities in their neighbourhoods can enhance the overall well being of the elderly members. Age-friendly cities, communities and spaces act as the basis of social inclusion of elderly people.

KEYWORDS : Quality Of Life, Geriatric Issues, Social Inclusion, Psychological Health, Age-friendly Cities.

INTRODUCTION:

India's population is 1.3 billion, which is 17 % of the global population. The population Census 2011 suggests that as of 2011 there were 104 million elderly people in India. While the global elderly population will double from 2011 to 2050, India's elderly population will triple in size (World Population Ageing Report United Nations, 2019). Within India there is a significant interregional and interstate demographic diversity based on the stage of demographic transition. Considerable variations exist in the age structure of the population. Southern states like Kerala, Tamil Nadu, Odisha are at the forefront of ageing with over 9% of their total population above 60 years Population ageing is an inevitable demographic reality. There are various facets to this phenomenon: increase in the size of the older population, longer life-expectancy and decreasing fertility rates. Countries experience a shift from a period of high mortality, short lives, and large families to one with a longer life, far and fewer children (United Nations, 2019.

Population of ageing is an inevitable demographic reality. There are various facets to this phenomenon: increase in the size of the older population, longer life-expectancy and decreasing fertility rates. Countries experience a shift from a period of high mortality, short lives, and large families to one with a longer life, far and fewer children (United Nations, 2019). The global population is ageing rapidly at an unprecedented rate. As of 2015, the number of people above the age of 60 years stands at 901 million. This statistic is set to double by 2050 to a projected 2.1 billion, as suggested by the World Population Ageing Report (United Nations, 2019).

According to 2011 census, 6.9 percent of women in India are widows; every fourth household in India has a widow. In absolute terms, the magnitude of such population has in creased from nearly 2 crores in 1971 to 7.2 crores in 2001. Loss of spouse is equally painful for both husband and wife but widows face more problems and hardships under the pressure of gender bias and changing values. The nature of family life and relationship is changing due to increasing consumerism, globalization and growing individual thinking in all walks of life. Migration of younger generation to cities and other countries and breaking of joint family system are leaving elder generations uncared for, especially when there is a single parent. But it is pathetic among the elderly poor especially, uneducated dependent widows.

Even the United Nations Economic Commission for Europe has advocated for the development of suitable frameworks under which older people can exercise, reduce stress and socialise (UNECE, 2015). According to them this would positively impact overall health of citizens. Thus, the need is for creating opportunities for socialisation within communities in their neighbourhoods can enhance the overall well being of the elderly members. Age-friendly cities, communities and spaces act as the basis of social inclusion of elderly people.

Review of Literature :

Hegdewar Samajothan and Kalyan Samiti (2004) conducted a study at two districts of Bihar (Munger, Bhagalpur) and Del hi (South &East) on problems and issues of elderly women. 3.45% single women respondents, 51.5% widows, 3.94% divorces and 0.69% separated women were participated. 41.78% respondents reported that they were not able to walk properly due to osteoporosis, injuries, arthritis, muscular strain etc, 41.55% respondents had weak eye sight, 48.95% had sleep disorders, 8.44 % were suffering from T.B, and 2% respondents had cancer. It was found that about 40% of re spondents were not able to manage tension and anxiety.

Sinha, Debotosh (2005) studied on problem of elderly abuse, some reflections and implications for social work practice. About 80% of the elderly population in India lives in rural areas, and 30% elderly are below the poverty line. The physi cal abuses observed among elderly people were repeated unexplained injuries, bruises or grip marks around the arms or neck and inconsistent explanations of the injuries, emo tional/ psychological abuses were verbal assaults, humilia tions, threats, harassment or abusive behaviour.

Asothai A & Vasanthi G (2011) mentioned about age-related disease in women "Ageing and Health". With ageing certain biological changes start occurring which outwardly may show as tiredness, breathlessness, joint and muscle aches, forget fulness, decreased appetite, sleep, sight and hearing. Similar changes are seen in degenerative diseases, associated with old age like blood pressure, joint and brain disorders, diabetes, cataract, malnutrition etc. A variety of symptoms com plained by patients invite multiple- drug treatments which have their own problems. The problem of menopause in the middle-aged women may prolong even during old age for some women with psychological imbalance. The health system is discriminatory against women and the care they get is utterly insufficient. The physically, psychologically and economically dependent older women are more prone to harassment.

Kitchlu N.T conducted a study of "socioeconomic condition of widows" in union territory of Delhi. The study found that the custom of marrying daughters at a very young age is one of the root causes of high incidence of widowhood in India. After widowhood life style affects her dress, food, make up, participation in various social and religious functions. An overwhelming majority (92%) of widows had to face financial problems after widowhood. Continued tension due to the loss of husband and the resulting socio-economic problems wreck the health of many a widows and disturb their mental peace.

Obulesu C. M conducted a study on "Problems of widows – A study". Nandyal urban division was selected among 3 revenue division of

Kurnool district of Andhra Pradesh. An aged widow not only suffers due to widowhood but also due to the old age problem. It was found that age has influenced the social and psychological problems of widows. In the case of caste, it only influenced the economical problems of the widows. In the case of jobholders and non-jobholders, their economic independence showed its influence on economic and psychological problems.

Agarwal Kuntal (2003) conducted a study on 'Elderly widows in old age home'in Meerut. Respondents are elderly Hindu widows varying in age – 20% belong to the age group of 65-75 years and the rest 80% belong to the age group of 76 years and above. Majority of respondents (70%) are illiterate, 20% are literate from primary to X class and the rest 10% are educated upto M.A, Ph.D and retired as teachers. Majority of respondents (80%) are living in old age homes as a result of non-adjustment with family members and due to a feeling of unwantedness at home. Economic dependence is also one of the major causes of their neglect at home.

Objectives of the study:

To analyse the socio-economic profile of the respondents
To know the socio-economic problems of elderly widows

METHODOLOGY:

The researcher has collected data from 125 elderly widows (60 years age and above) of Puri town, Puri district of Orissa. Random sampling was used for this study. Sample consists of different areas of the Puri town which includes Atharnala, Nabakalebara road, Matiapada, Kumbharapada, Narendrakona, Badasankha & Temple side lanes. The research tools used were the interview schedule, case study method and observation method for data collection. The sample size was 125 respondents.

Economic Condition of Family

Nearly 40 % of the respondents mentioned that their financial condi tion was average but 48% respondents were facing financial problems and they were coming under the category of very poor (18%) and poor (30%). Their life was full of miseries and sorrows and only 12% had good conditions. Even out of 125, 120 respondents (96%) were not able to maintain their livelihood satisfactory.

Psychological condition

Most of widows (96%) were facing psychological problems like tension, mental unrest, many times they find difficult to adjust to the changed environment, more so when they were just being tolerated and were not being treated well in their family. The loneliness also makes them psychologically de pressed and they persistently face such psychological prob lems as old age worries, emotional instability, lack of proper response etc.

Old Age Pension

Out of 125, only 28 (30%) of the senior single women were getting old age pension. But 70% of the respondents were deprived of that.

Faith in God and their religion:

All the respondents have extreme faith in God and their hindu Religion. After becoming widows they practiced many fasts, festivals through the year due to respect for hindu religion. They become purely vegetarian, were white sarees and attend religious programmes .They told after their husband death, nobody was helping them except God. As Puri is famous and known as Jagannath Dham, so widows were liking to stay there. The most interesting fact is that all most all the people have the wish to die in Puri and want their cremation in Swargadwara. Puri is especially for this reason, abode of the widows , who stay in Puri for regular visit to the Jagannath Temple, doing punya karmas and lastly for die in this punya kshetra(Holy Place).

Schemes and Programmes being run by the various Ministries/ Departments of Government of India, for welfare of Senior Citizens .

1.**"Integrated Programme for Senior Citizens (IPSrC)",** This scheme was earlier known as "Integrated Programme for Older Persons (IPOP)" and is being run under the administrative control of Ministry of Social Justice and Empowerment. Under this scheme, grants-in-aid are given for running and maintenance of Senior Citizens Homes popularly called Old Age Homes/Continuous Care Homes, Mobile Medicare Units, etc., to the Implementing Agencies such as State Governments /Union Territory Administrations (through Registered Societies)/ Panchayati Raj Institutions (PRIs) / Local bodies; NonGovernmental/Voluntary Organizations. Under the Scheme, grant is released after the receipt of Utilization Certificate of previous grant.

2. **'Rashtriya Vayoshri Yojana (RVY)'**, The objective of the scheme is to provide senior citizens, belonging to BPL category and suffering from age related disabilities/ infirmities, with such physical aids and assisted living devices which can restore near normalcy in their bodily functions. This scheme was launched on 1st April, 2017 and is under the administrative control of Ministry of Social Justice and Empowerment. Under the Scheme, assisted living devices such as walking sticks, elbow crutches, walkers/ crutches, tripods/ quad pods, hearing aids, wheelchairs, artificial dentures, spectacles are provided free of cost to the identified beneficiary senior citizens. The Scheme is being implemented by the "Artificial Limbs Manufacturing Corporation (ALIMCO)", a Public Sector Undertaking under this Ministry. The devices are distributed in the camp mode to the identified beneficiaries. The Scheme is being funded from Senior Citizens' Welfare Fund (SCWF). 1 ~

3**."Senior Citizens' Welfare Fund"**, In pursuance of the Budget Announcement, 2015- 16, this welfare fund has been created to be utilized for such schemes, for promoting financial security of senior citizens, health care and nutrition of senior citizens, welfare of elderly widows, schemes relating to Old Age Homes, Short Stay Homes and Day Care of senior citizens etc. , for the promotion of the welfare of senior citizens. This scheme is under administrative control of Ministry of Social Justice and Empowerment. The Fund comprises of the unclaimed amounts transferred by every institution holding such fund in the Schemes including Small Savings and other Saving Schemes of the Central Government such as Post Office Savings Accounts, Post Office Recurring Deposits Accounts etc., Accounts of Public Provident Funds and Accounts of Employees Provident Fund, that remain unclaimed for a period of seven years from the date of the account being declared as inoperative account. The Fund is administered by an Inter-Ministerial Committee, comprising of Department of Financial Services, Ministry of Health and Family Welfare, Ministry of Rural Development, Ministry of Housing & Urban Affairs and Ministry of Labour and Employment, with Ministry of Social Justice and Empowerment as the Nodal Ministry for administration of the Fund.

4**. National Council for Older Persons (NCOP)**.In pursuance of the National Policy for Older Persons (NPOP), this council was constituted in 1999 to oversee implementation of the Policy and to advise the Government in the formulation and implementation of policy and programmes for the aged. The National Council for Older Persons (NCOP) has been reconstituted and renamed as National Council of Senior Citizens (NCSrC) in 2012. The mandate of NCSrC is to advise Central and State Governments on the entire gamut of issues related to welfare of senior citizens and enhancement of their quality of life. The Hon'ble Minister, Social Justice and Empowerment is the Chairperson of the Council.

5. **'Vayoshreshtha Samman'**. In order to recognize the efforts made by eminent Senior Citizens and Institutions involved in rendering distinguished services for the cause of elderly persons, especially indigent senior citizens, the Ministry of Social Justice and Empowerment started celebrating International Day of Older Persons (lOOP), since 1st October, 200S, giving in recognition to their contribution to the society. Further, in order to showcase the Government's concern for senior citizens and its commitment towards senior citizens with the aim of strengthening their legitimate place in the society, the Vayoshrestha Samman was upgraded to National Award and the Scheme of National Awards for Senior Citizens was notified in the Gazette of India on 22.01.2013. The Awards are given under thirteen categories. The National Awards were presented for the first time during 2013, on 1st October, on the occasion of International Day of Older Persons (lOOP). On 1st October every year, Ministry of Social Justice and Empowerment also organizes Health Camps, Inter-generational walkathons etc. in different States with active participation of Senior Citizens, Youth, Celebrities and Media-persons etc.

6. **National Social Assistance Programme (NSAP)**is a Centrally Sponsored Scheme of Ministry of Rural Development. NSAP is a social security/social welfare programme applicable to old aged,

widows, disabled persons and bereaved families on death of primary bread winner, belonging to below poverty line household. Old age pension is provided under Indira Gandhi National Old Age Pension Scheme (IGNOAPS)to the persons belonging to below poverty line CBPL) household. Central assistance of Rs. 200/- per month is provided to the persons of 60-79 years of age and Rs. SOO/- per month to the persons of age of 80 years or more. This Scheme is implemented by the States/U'I's, Identification of beneficiaries, sanction and disbursement of benefit under the schemes is done by the States/U'I's, A Top-up, over and above the Central assistance is also provided by State Governrnents/U'I' Administrations .

7. **"Annapurna Scheme"**. Department of Food and Public Distribution allocates food grains as per requirements projected by the Ministry of Rural Development under theAnnapurna Scheme, wherein indigent Senior Citizens, who are not getting pension under IGNOAPS,are provided 10 kg of food grains per person per month free of cost.

8. "**Antyodaya Anna Yojana(AAY).** Department of Food and Public Distribution implements Antyodaya Anna Yojana (AAY),under which rice and wheat at a highly subsidised cost, is extended to households, headed by widows/terminally ill/disabled persons/senior citizens, with no assured means of maintenance or societal support.

9. **'Pradhan Mantri Vaya Vandana Yojana' (PMvvy**) is under administrative control of Ministry of Finance. The scheme aims to protect elderly persons aged 60 years and above against a future fall in their interest income due to the uncertain market condition, as also to provide social security during old age. The scheme is being implemented through Life Insurance Corporation (Lie) of India. The scheme provides an assured return of 8% per annum payable monthly for 10 years. The differential return, i.e., the difference between return generated by LICand the assured return of 8%per annum would be borne by Government of India as subsidy on annual basis. The scheme was open for subscription for a period of one year, i.e., from 4thMay 2017 to 3rdMay 2018. The minimum purchase price under the scheme was Rs. 1.5 lakh per family for a minimum pension of Rs. 1,000/- per month and the maximum purchase price was Rs. 7.5 lakh per family for a maximum pension of Rs. 5,000/- per month. In pursuance to Budget Announcement 2018- 19, Cabinet at its Meeting held on 2nd May, 2018 has approved the extension of Pradhan Mantri Yaya Vandana Yojana up to 31st March 2020 and limit of maximum purchase price of Rs. 7.5 lakh per family under the scheme has also been enhanced to Rs. 15 lakh per senior citizen. A total of number of 2,82,155 subscribers consisting corpus of Rs. 17,704.65 crore are being benefited under PMVVYas on 30.06.2018.

10**. National Programme for Health Care of the Elderly (NPHCE).Ministry of Health and Family Welfare, Government of India** has been implementing National Programme for Health Care of the Elderly (NPHCE)from the F.Y. 2010-11 to provide dedicated health care services to the elderly people at various level of state health care delivery system at primary, secondary and tertiary health care including outreach services.

National Programme for Health Care of the Elderly (NPHCE) has two components with the following provisions to provide health care facilities to the elderly people in the country:-
(1) National Health Mission (NHM) component: The district and below activities of the programme is being covered under Non-Communicable Diseases (NCD) flexible pool of NHM which are as follows:

Geriatric OPD and 10 bedded Geriatric Ward at District Hospitals.
Bi-weekly Geriatric Clinic at Community Health Centres (CHCs).

Weekly Geriatric Clinic at Primary Health Centre (PHCs).
Provision of Aids and Appliances at Sub-centres.

11. **Longitudinal Ageing Study in India (LASI) Project: Ministry of Health and Family Welfare** launched this project in 2016 to assess the health, economic and social status of the elderly (age 45-60). This project is going to be one of the largest comprehensive ageing surveys in the world with a sample size of 61,000. LASI project is being conducted by **International Institute for Population Sciences, lIPS, (Deemed University), Mumbai** which is an autonomous organization under Ministry of Health and Family Welfare. In India, LASI is to be undertaken by lIPS in collaboration with Harvard School of Public Health and Rand Corporation with the financial sponsorship from Ministry of Health & Family Welfare**, UNFPA India and National Institute of Health (NIH)/National Institute of Ageing (NIA), USA.So far an amount of Rs. 29.20 crore has been released under the programme.**

Medical facilities for Senior Citizens. Ministry of AYUSH has been providing the following facilities to senior citizens: i. Free consultation and yoga therapy under Yoga and Naturopathy. ii. OPDs are being provided in various Government Hospital at Delhi, Haryana, Tripura, Kerala, Madhya Pradesh, Andhra Pradesh and Jharkhand. iii. Free Yoga training at 50 Yoga Parks are being run through NGOs in various states of the country. iv. In addition, other programmes such as Health Promotion Programme, Yoga Therapy Programmes, Individual Yoga Therapy Sessions, Weekend Yoga Training Programmes, Monthly Clinical Yoga Therapy Workshop are also being imparted.Apart from these there are Health insurance, laws for ensuring their safety and security, consession in fares etc.

CONCLUSION

India's population is 1.3 billion, which is 17 % of the global population. Population Census 2011 suggests that as of 2011 there were 104 million elderly people in India. While the global elderly population will double from 2011 to 2050, India's elderly population will triple in size (World Population Ageing Report United Nations, 2019). Within India there is a significant interregional and interstate demographic diversity based on the stage of demographic transition. Considerable variations exist in the age structure of the population. Southern states like Kerala, Tamil Nadu, Odisha are at the forefront of ageing with over 9% of their total population above 60 years. Whereas, central and northern states like Assam, Bihar, Delhi have much lower proportions of aged population (India Ageing Report, UNFPA 2017) Multiple studies conducted on elderly populations in India have reported extremely high rates of depression and social isolation. Combatting mental illnesses can be very difficult particularly in India due to the social stigma associated with one's mental health. Therefore, it becomes integral to find innovative ways to incorporate mental health concerns into ageing solutions. World Health Organization (WHO) has recommended encouraging participation as a way to address isolation among elderly. The creation of community centres that are within walkable distances for older persons can be used to engage elderly people.

Thus, it can be concluded that there should be changes in the attitude of society towards widows and their widowhood through different sensitization programme by the intervention process of professional Social workers in family, school, college, community level etc. The people must develop positive view towards them to treat them as human beings. Govt. and NGOs also needs to focus on Spirituality, devo tional music, and entertainment and make them busy with different activities as per their skills and maintain discipline life at widows home and old age home. It is also necessary to provide different services like counseling and referral servic es, recreational centre, widows' pension timely, community based care etc.

Widowhood is both a crisis and a problem (Mallick Anupriya, 2003). It brings about economic and emotional setbacks. In India, widows have a really hard time because of the traditional prejudices prevalent again them. Older widows are facing emotional, psychological, financial problems and also physiological problems. They are neglected, abused, and exploited also According to 2001 census, 6.9 percent of

women in India are widows; every fourth household in India has a widow. In absolute terms, the magnitude of such population has increased from nearly 2 crores in 1971 to 7.2 crores in 2001. Loss of spouse is equally painful for both husband and wife but widows face more problems and hardships under the pressure of gender bias and changing values. The nature of family life and relationship is changing due to increasing consumerism, globalization and growing individual thinking in all walks of life. Migration of younger generation to cities and other countries and breaking of joint family system are leaving elder generations uncared for, especially when there is a single parent. But it is pathetic among the elderly poor especially, uneducated dependent widows.

Sinha, Debotosh (2005) studied on problem of elderly abuse, some reflections and implications for social work practice. About 80% of the elderly population in India lives in rural areas, and 30% elderly are below the poverty line. The physical abuses observed among elderly people were repeated unexplained injuries, bruises or grip marks around the arms or neck and inconsistent explanations of the injuries, emotional/ psychological abuses were verbal assaults, humiliations, threats, harassment or abusive behaviour.

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Objectives of the study

To analyse the socio-economic profile of the respondents
To know the socio-economic problems of elderly widows

METHODOLOGY

The researcher would be collecting data from 150 elderly widows (60 years age and above) of Puri town, Puri District of Orissa. Convinience and Purposive sampling would be used for this study. Sample would consists of different areas of the Puri town which includes Atharnala, Nabakalebar road, Matiapada, Kumbharapada, Narendra kona, Badasankha & temple side sahis.

Interview schedule, case study and unstructured observation method would be used for data collection.

Mostly, the study would address the concept of SDG 3 Addressing their Economic Condition of Family of the respondents mentioned that(their financial condition was average but respondents were facing financial problems and they were coming under the category of very poor and poor .To understand whether Their life was full of miseries and sorrows and only 12% had good conditions. Even out of 50, 48 respondents (96%) were not able to maintain their livelihood satisfactory. Psychological condition Most of widows (96%) were facing psychological problems like tension, mental unrest, many times they find difficult to adjust to the changed environment, more so when they were just being tolerated and were not being treated well in their family. The loneliness also makes them psychologically depressed and they persistently face such psychological problems as old age worries, emotional instability, lack of proper response etc. Old Age Pension Out of 50, only 15 (30%) of the senior single women were getting old age pension. But 70% of the respondents were deprived of that. Faith in God and their religion All the respondents have extreme faith in God and their hindu Religion. After becoming widows they practiced many fasts, festivals through the year due to respect for hindu religion. They become purely vegetarian, were white saries and attend religious programmes .They told after their husband death, nobody was helping them except God. As Puri is famous and known as Jagannath Dham, so widows were liking to stay there. The most interesting fact is that all most all the people have the wish to die in Puri and want their crimination in Swargadwar. Puri is especially for this reason, most of the widows stay in puri for regular visitor of Jagannath Temple, doing punya karmas and lastly for die in this punya kshetra(Holy Place). Conclusion So it can be concluded that there should be changes in the attitude of society towards widows and their widowhood through different sensitization programme by the intervention process of professional Social workers in family, school, college, community level etc. The people must develop positive view towards them to treat them as human beings. Govt. and NGOs also needs to focus on Spirituality, devotional music, and entertainment and make them busy with different activities as per their skills and maintain discipline life at widows home and old age home. It is also necessary to provide different services like counseling and referral services, recreational centre, widows' pension timely, community based care etc.

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