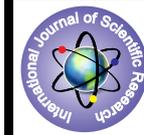


Geriatric: Social Inclusion and Development



SOCIOLOGY

KEYWORDS: GERIATRIC, SOCIAL INCLUSION, DEVELOPMENT, DEPENDENCY

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ABSTRACT

The main thrust of this study is to examine the inclusion and participation of the elderly in the society and their role in development. This study includes a sample of sixty elderly persons from Anand district of Gujarat comprising both males and females, and covering rural and urban areas. The data collection involves both qualitative and quantitative techniques. The analysis is done based on Activity approach. The main objectives of this study are: to examine the role of elderly in decision making; to examine the inclusion of elderly in active work force; and to understand the relation of inclusion of elderly and development. It is found from the data that majority of the elderly are disengaged and very few are involved in active work force. Those who are engaged and active are the ones who are living dignified lives. The more they are allowed to participate, the more the benefits to the society and greater the development of the nation.

Throughout the world there has been an increase in the life span from 47.7 years in 1950–1955 to 67.9 years in 2005–2010. Though life expectancy is higher in the more developed regions of the world that is around 76.9 years, the less-developed regions have also experienced greater increases in life expectancy from 42.3 years to 65.5 years (Roy, 2012). Currently India has around 77 million elderly populations in its fold, which is estimated to increase up to 301 million by 2051. The aged population in India is currently the second largest after China. According to the United Nation any country having above 7% of elderly population is termed as an ageing nation (Prasad, 2011). Gujarat has 6.9% of elderly population in its fold which is a considerable proportion.

Geriatric means an old person, but there is no specific age when a person can be termed as old, it largely depends on the social as well as physical factors of the individual concerned. In India, the age of 60 and above is termed as Geriatric. Often the geriatric population is referred to as a social problem, but it is time that we look at their potential and the far reaching benefits of this populace. According to WHO in a socially inclusive society, older people are able to make valuable contributions to their communities, neighborhoods and families if their needs are met with dignity, their differences respected and their involvement recognized (Queensland, 2012). Social Inclusion is a process where all people feel valued, differences respected; basic needs met leading to a dignified life. Development is referred in this study as a process of change that lead to improvements in human well-being, social relations and social institutions and that are equitable, sustainable and compatible with principles of democratic governance and social justice.

The study examines the inclusion and participation of the elderly in the society and their role in development. The National Policy on Older Persons (NPOP) formulated in 1999 by the government of India suggested that the older persons be recognized as not just the “consumers of goods and services” but also the “producers of goods and services” (Bhatia).

REVIEW OF LITERATURE

Kohli’s (1996) study tries to understand the changes and events which affect the process of ageing covering demography, status, family support system, health and social adjustment. Liebig and Irudaya Rajan (2005) have examined ageing issues from a variety of perspectives. K. L. Sharma’s (2009) edited book deals with the factors like quality of life, personality and adjustment, attitude towards elderly, problems of the elderly, social status, social support and successful ageing.

METHODOLOGY

This study includes a sample of sixty elderly persons from Anand district of Gujarat comprising both males and females,

and covering rural and urban areas. The data collection was done using a structured interview schedule and analyzed using both qualitative and quantitative techniques. Analysis of the study has been carried out with an ‘activity’ approach because this theory implies that the more active the elderly people are the more likely they are to be satisfied with life.

OBJECTIVES

The main objectives of this study are - to examine the role of elderly in decision making; to examine the inclusion of elderly in active work force; to understand the relation of elderly and development.

ANALYSIS & FINDINGS

In the study, 60 elderly persons (Table – 1) are taken comprising of 30 males and 30 females. The age distribution of the respondents’ shows that majority of them are in the age group of 60-70 years. Only 2% of the elderly are in the age group of 91 years and above. Aging is a very natural process which brings with it many physical changes. The morbidity rate among the aged is high as they are susceptible to infections.

Table - 1

AGE / GENDER	MALE	FEMALE	TOTAL
60-70	10	17	27
71-80	13	6	19
81-90	7	5	12
91-100	0	1	1
101-110	0	1	1
Total	30	30	60

The ageing trend in all developing countries including India has to cope with the rapid industrialization, urbanization and modernization process. The social changes preceding these processes have brought about structural changes in the Indian family system. Migration of younger population to industrial towns and cities in search of better opportunities and life style have led to the breakup of joint families and rise in nuclear families. Out of the 60 elderly (Table -2) 30 are from families and 30 from old age homes. The data shows that though our society has been subjected to the drastic and consistent social changes, it has been able to take forward the social system like joint family. It has been observed that out of 30 elderly, 57% of the people still lived in joint families and 43% are in nuclear family system. The interesting fact to note is that while the people in joint families were found happy living with big families, some of the people

living in nuclear families thought the arrangement to be more convenient and less complicated.

In the study a deliberate sampling of the elderly in old age homes was also done by taking 50% of the respondents from old age institutions in Anand district. It has to be noted that large scale migration, nuclear family system and inter-generational conflicts has led to the mushrooming of old age homes thorough out the district.

Table - 2

Family Type	Sex	Decision Making	Earners	Total
Nuclear Family	Male - 4 Female - 9	Yes - 4 No - 9	Yes - 6 No - 7	13
Joint Family	Male - 10 Female - 7	Yes - 12 No - 5	Yes - 9 No - 8	17
Old age Home	Male - 15 Female - 15	Yes - 0 No - 30	Yes - 3 No - 27	30
Total	60	60	60	60

The cultural values and traditions determine to a large extent how a society views older people and the ageing process. India and China are two countries that believe in protecting and respecting their elders. For ageing to be a positive experience, longer life should be accompanied by good health, participation in the society and security. Out of the 30 elderly from the family category, 40% expressed that they were included in the decision making process. Only 16% living in joint family said that they were not included in the decision making process. Hence, the data clearly reveals that in the decision making process elderly living in joint families enjoyed a better say in the activities in the family. It was also found that most of them who were excluded from decision making process were women, as the data shows that only 20% of the women were actually included in the process. This may be partly due to the patriarchal dominance in which men made all the decisions. None of the persons staying in an old age home answered in affirmative to decision making process, from this it is very obvious that none of them would have preferred to stay in an institution if at all they had some say in their lives as well as in their families.

Support system and inclusiveness are the two major criteria of relationship. As people age, the major setback in their lives is the demise of their spouses. It is at this juncture that a person requires companionship so that their life becomes meaningful and satisfactory. The data (Table -3) shows that 56.66% of the elderly are widowed, of which 67.65% are women and 32.35% are men. A marginal number of around 8.33% have separated, but they also made it clear that they were not divorced.

Table - 3

MARITAL STATUS / GENDER	MALE	FEMALE	TOTAL
INTACT	14	7	21
WIDOWED	11	23	34
SINGLE	0	0	0
SEPARATED	5	0	5
DIVORCEE	0	0	0
LIVE-IN-RELATIONSHIP	0	0	0
TOTAL	30	30	60

Indian culture and tradition stereotypes the role, function and activities of an elderly person. Most of the samples in the study had a stereotyped lifestyle which did not put life into their years. Our data regarding participation in recreational activities showed that only 7% of the samples engaged in some kind of recreation, while most of them said that they did not go for movies nor watch TV but were into spirituality. Most of the people led a very secluded and lonely life as the data revealed that 77% of the people were either not included in the family get-together

ers or their health did not permit them to engage in such activities. Very few said that they accompanied their children or relatives while holidaying. However most of them agreed that they were informed or invited to marriages. Other than this, very few had regular meetings with their friends or relatives. One of the most important reasons precluding them from visiting relatives and friends is the mode of transport and its comfort ability. 68% of them used public transport for going around. Taking all these factors into consideration it is clear that there is very little to rejoice during old age. Only 6 persons out of 30 said that they were very satisfied with life. Out of the 30 respondents taken from old age home 50% of them said that they were dissatisfied with life. This is mainly because of aloofness from their dear ones, health problems and also due to boredom and inactivity. 17.6% in joint families 6% in nuclear families and 23.3% in old age homes felt that their life is neither good nor bad.

While talking about ageing or geriatric the first thing that comes to our mind is health and dependency. But now with the change in the demography and the elderly becoming a distinctive group in the society the time has come to look at the group at a larger perspective and make an effort to understand the potential of the aged to contribute effectively to the economy of the nation. The analysis of the study shows that 30% of the people in joint family are earning. At the same time, it is found that only 10% of the elderly who are in the old age home are pensioners. Of the people who are not earning, majority are women. Majority of the people who are earning are from the un-organized sectors like agriculture, business or self-employed and daily wage earners. This clearly indicates that those working in organized sectors were subjected to mandatory retirement at a particular age which naturally pushed them to the background and inactivity. Since the unorganized sectors do not have any specific period of retirement, the people in these sectors continue working till they are able to.

The data also reveals that only 40% of the samples have any kind of regular source of income. Our country does not have a structured system of social security. The pension system is a prerogative of a few who work in the organized sector. In India only 10% of the population enjoys the benefits of pension scheme. Though the Indian government has introduced geriatric pro pension like widow pension, old age pension etc, most of the people do not avail it as they are unable to go through the long drawn and complicated procedures associated with it. Neither they are provided with the information regarding the schemes nor do they have anybody to help them. Lack of awareness, helplessness and apathy on the part of the administration has led many elderly people to lead a pathetic and derogatory existence.

Our society is a family oriented society where much importance is given to relations. Parents feel obligated to support their children even after they become adults and independent. The dependency status shows that around 38.3% of the respondents have dependent children, grand children or other close relatives on them. The study revealed that most of the elderly who got pensions or some earnings spent the most to support their extended families and did not have much as savings. Whatever they earned or saved during their active lifetime was spent on their daughter's marriage or other family obligations. This makes them completely dependent on their children or relatives at times. The economic dependency makes this group vulnerable to abuse and segregation.

When assessed for their active role in the society, it was found that 30% of the elderly in joint families are active while only 20% are active in a nuclear family. It was also found that men are comparatively more active than women as they tend to engage themselves in agriculture or any kind of self employment. The elderly women in joint families were found to be physically inactive as compared to women in a nuclear family.

Only 7% of elderly in the old age homes were active and 93% of them are found to be inactive. Most of the old age homes though provided lodging and food there was no recreation or any such activity to keep them engaged or occupied. Hence they are made

to feel lethargic, dejected and thereby leading a solitary and disengaged life.

The unprecedented demographic change of population aging and population growth is a key structural issue. Social development thinking has started to pay attention to empowerment, participation, promotion and realization of the full range of economic, social, cultural and civil human rights for people (Helpage International, 2012). The data clearly shows minimum participation of elderly in work force, dissatisfaction to life and greater dependency on others for existence. The study reveals minimum opportunity for the elderly to contribute for the development process. There is a widespread discrimination on grounds of age, healthcare, legal services, education and above all negative attitude towards older people. Older people and their issues are ignored or sidelined by policy makers and moreover, no elderly people are included in planning and budgeting at any level. Social exclusion distances older people from being a part of the mainstream population thus making them less likely to participate in decision making and planning in their communities.

CONCLUSIONS

The way forward to a better social inclusion and development in case of elderly population lies in strengthening and promoting participation in the active workforce, promoting positive attitude towards them, building up of partnership between several older peoples' groups, human rights organization and non-governmental organization to bring supporting policies and laws for a secure and dignified existence (Helpage International, 2002). The government of India with the introduction of NPOP assures the older persons that they wouldn't be unprotected, ignored or marginalized (Prasad, 2011). But our study has revealed an altogether contradictory picture that the elderly live an insecure, marginalized and unprotected life. However, it is neither right to entirely put the blame on the State alone, change and development can only be attained with the partnership of individuals, families, communities and institutions of civil society.

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