

CHAPTER 1

INTRODUCTION

1.1 Introduction

The elderly Indian population is one of the fastest-growing in the world. At 110 million, India has the second-largest global population of ageing citizens. The divisions confirm older people to be a varied group requiring consideration according to their needs.

India lacks basic infrastructure and expertise to support the health & welfare of our elderly. The health and well-being of the elderly are affected by many aspects of their social and physical environment. These include life-style, marital status, family support and social networks, income, work, retirement and environmental factors like condition of housing. A large number of the elderly females are illiterate in most of the studies and it may be the reason before 60 years back female education was rare in our country even in Kerala. Therefore, work force participation is less."

Two thirds of the elderly males and 90-95 percent of the elderly females are illiterate and a large number of them, particularly women, are single owing to the death of the spouse. It is also estimated that about 18 million males and 3.5 million females aged 60 years and above would need jobs for their economic support. These figures have been derived on the proportion currently working. Besides 55 million of the aged will not be working in 2001, majority of whom probably will not have adequate savings nor family assistance. Such a grim situation would call for larger financial investments to save these elderly people from destitution and

provide a minimum level of decent maintenance to them either by a government or by voluntary organizations.

According to multiple surveys across the country, for most Indian senior citizens, the biggest concerns are Healthcare costs, Lack of financial support and Isolation. In addition, most of the aged are not accorded the dignity of care they deserve in later life.

We also observed interactive relationship of social capital associated with functional ability, which indicated that special attention and efforts should be paid to older adults with less educational attainment, with multimorbidity, with advanced age, and with lower level of social participation, cohesion for the purpose of maintaining sound functional ability. Our findings may be of salient relevance for devising more targeted and effective interventions to prevent the onset of functional limitations among community-dwelling older adults. Studies have recently found that social capital, which reflects how individuals or groups can get resources by their inter-social networks and support, has substantial influence on elderly health.

The role of social capital in living arrangements, mental health, and life satisfaction was observed among elderly people. According to our analyses, social support was inversely related to functional ability, which suggested that older people with more social support were more likely to be functionally limited.

The economic productivity and physical strength of aged persons decline with advancing years; hence they require to depend on other family members. But experiences show that, co-residence is typically mutually beneficial to both the generations.

The support does not always flow in the same direction which is mostly from younger to older generation. Co-residence may also be benefited by the contributions rendered by older person such as the provision of child-care, household chores by the elderly. Family is viewed as the main source of care and support for elderly wellbeing. Though the care and support are two different dimensions Support broadly can be defined as financial assistance, whereas care is defined as emotional support. Family is often a significant source of care and support for older persons in countries where social security and social services are absent or negligible. Elderly in these situations largely rely on the family members as their economic productivity and physical strength decline with advancing years. Thus, living arrangement becomes an important constituent of the overall well-being of the elderly and provides some indication of the level of actual support available to them.

In our study, social support was defined as resources that can be available to the elderly when they were in a difficult time. Four items concerning the frequency of getting support (both subjective and objective) from someone else, organizations or groups were asked to assess the level of social support when they were in need. In particular, a low level of social participation and social connection put the elderly at greater risk of functional disability. Special attention and efforts should be paid to older adults with less educational attainment, with multimorbidity, with advanced age, and lower level of social participation and cohesion. Our findings may be helpful in developing strategies to prevent functional limitations and lessen the associated negative impacts on individuals, families, and society.

1.2 Statement of problem

Ageing is stated as the inevitable consequence of decline in productiveness. With the advent of technology and modernization, there has been a decrease in the mortality rate, increase in awareness, nutrition, advancement in health care facilities and an increase in life expectancy. **The main purpose of this study is to acquire an understanding of the problems of the aged people. When individuals reach old age, the various problems that they have to experience include, decline in health conditions, retirement, financial problems, loneliness and dependence upon others.** The problems that have been taken into account in this research paper include, social, economic, psychological, health, crime, abuse and other miscellaneous problems. Another area that has been included is social work interventions. There are formulation of measures and policies that aim at alleviating the problems of the elderly, provide them security, protection and focus upon their well-being.

With the advent of industrialization, globalization and economic liberalization, the individuals are getting familiar with innovative and modern techniques and methods. The youth is occupied with enhancing their career opportunities, middle aged people are engaged in jobs and earning their livelihoods and the aged individuals are leading retired lives. They either get occupied in some kind of honorary work, or manage the household chores through obtaining assistance from the caregivers or they follow their daily routine. The individuals are gaining more mobility and joint family system is being disintegrated into the emergence of nuclear family system. The aged people are experiencing changes in their social

lives. In India, there has been an increase in the number of older persons. The aged people within the country are being provided various facilities and senior citizen benefits. These are beneficial and render a significant contribution in providing them support, especially when they are living by themselves.

In the present world, individuals, belonging to marginalized, deprived and socio-economically backward sections of the society aspire to earn better career opportunities and sustain their living conditions. The individuals migrate from rural areas to urban areas in search for better livelihoods opportunities, leaving their elderly parents. When individuals live separately from their elderly parents, they may communicate with them and make regular visits.

On the other hand, there are cases of individuals, who do not look after their parents and mainly focus upon enhancing their own livelihoods opportunities. The levels of savings and investments are the determinants of growth of the modern sector and, hence, the generation of employment as well as the process of urbanization. The development of industrialization has led to migration of individuals to other places, primarily in search for employment opportunities. The aged people in India, experience various types of problems.

We are preparing this project by understanding the living conditions of a large number of elderly people in the community.

Objectives of the study

- To Study the living conditions of elderly
- To find out the difference in family care for the elderly.

- To analysis the socio-economic problems of elderly people
- To study the provision of various support systems provided by government agencies for the welfare of the elderly.

1.4 Scope of the Study

The study covers the living arrangements of the elderly in with respect to elder care in **Pallickal Panchayat, Pathanamthitta**. Living arrangements of older persons are the result of individual preferences and available resources, as well as the social, economic or health constraints that people face as they grow older.

There are 50 sample respondents selected for the study. The study describes the care that should be provided to the elderly population, which can be considered to be the important fact for the mutual understanding of the generations. The kind of support and care experienced by the elderly depends on the living arrangements of the elderly, though their own children extend such type of support, in many cases. The current social, economic, and related factors will have profound influence on the future of the elderly. Therefore, it is important to understand the differences between care and support for elderly people. "Support for the elderly" and "taking care of the elderly" are two different concepts. While support for the elderly is defined as providing financial assistance (pensions and social security), care of the elderly is defined as extending emotional support, which can be provided only by family members or by those persons with whom the elderly live.

1.3 Relevance of the study

With increasing number of older adults worldwide, promoting health and well-being becomes a priority for aging well. Well-being and physical and mental health are closely related, and this relation may become more vital at older ages as it may contribute to aging well. The state of well-being is a multifaceted phenomenon that refers to an individual's subjective feelings, and exploring perspectives of older adults on aging well is developing to be an important area of research. This makes the study relevant.

Limitations of the study

- Limited time for the detailed study
- Study was limited to sample size the result generated may not be adequate.
- Due to the covid19 situation, data collecting is difficult.
- Non corporation from the side of people

Chapter 2

REVIEW OF LITERATURE

Definition

“Aging is a biological process, experienced by mankind in all times. However, concern for aging of population is a relatively new phenomenon, which has a raised due to significantly large increase in the number and proportions of aged persons in the society”. In the words of Seneca, “Old is an incurable disease”, but more recently, Sir. James Sterling Ross Commented: “You do not heal old age. You protect it; you promote it; you extend it”. As already noted, with the aged population constituting 10% (India 7.8%) and moving towards 20% in another 25 yrs. (India 14%), Kerala is moving fast towards an ‘aged society’. The percentage of aged population is hence close to that of the developed countries of the world. "Biologically" aging begins at least as early as puberty and is a continuous process throughout adult life. "Socially", the characteristics of members of society who are perceived as being old vary with the cultural setting and from generation to generation. 'Economically', the elderly is sometimes defined in terms of retirement from the work force but, especially in societies with a normal or statutory retirement age, many individuals cease economic activity for reasons unrelated to aging. And many of those who cease to work, continue to contribute indirectly to their society's economy through support to working family members, voluntary work, or deployment of wealth. 'Chronologically', age has long been used as an indicator of the expected residual life span. Recent changes in the mortality rates have changed the predictive significance of chronological age, and refinement of care objectives has shifted the emphasis from prolonging life expectancy to increasing life expectancy free of disability "Although

there are commonly used definitions of old age and ageing, there is no general agreement on the chronological age at which a person can be defined as old. However, most developed world countries use the chronological age of 65 years and over as a definition of an older person (Gianna Kouris, 2008). This definition is based on the fact that people become eligible for full pension benefits at this age in most developed countries; however, the eligibility for retirement has been under change and the official retirement age is currently rising due to an ageing population and increased life expectancy (OECD, 2011). The United Nations has agreed on a cut-off of 60 years and over with respect to the older population, while people aged 80 years and over can be referred to as 'very old' (UN Department of Economic and Social Affairs, 2002). According to the law, a "senior citizen" means any person being a citizen of India, who has attained the age of sixty years or above.

Considering the Nordic context of this thesis, it is noteworthy that life expectancy in the Nordic countries is among the highest in the world; in 2009, 17 and 18 per cent of the total population in Finland and Sweden respectively was 65 years or older, while around five per cent was 80 years or older (Eurostat, 2011b). In the Nordic countries, the population of 65 years and above is 29 per cent of the working age population (i.e., 20-64 years) and the demographic dependency ratio will further increase (Nordic Council of Ministers, 2011).

Many of the definitions presented above emphasize positive functioning in their descriptions of mental health and well-being. The functional model of mental health (Lahtinen et al., 1999) describes mental health as a foundation for experienced mental well-being and effective functioning in individuals. Further, mental well-being is

viewed as part of a process, where positive functioning and social interaction in various social contexts are emphasized for their important impact on mental health and well-being in all ages. The definitions of health, mental health and mental-well-being reviewed in this chapter can be applied across the life span, however, some factors are pointed out as being especially relevant to older people's mental health. For example, mental health of older adults is associated with positive and active ageing, where they can remain in control over health determinants and make their own lifestyle choices (Cattan & Tilford, 2006; Swedish National Institute of Public Health, 2007).

Socio-economic aspects of aging

Most studies have revealed that a high percentage of elderly females are illiterate. The reason may be derived from the fact that female education was rare in our country (including Kerala) till the recent past. This accounts for the low work force participation prevailing amongst the elderly females today.

“Now the traditional value system is undergoing change along with the changes taking place in the family structure. Nowadays elderly are not given the same respect as they used to get before. They are not shown adequate care and attention by their family members partly due to the limited resources and partly due to growth of “individualism” in modern industrial life”.

“A recent study revealed that 19 percentage of the population above 60 years still work in the villages in Kerala”. Ageism due to

modernization is the discrimination against old people because they are old and allows younger generation to see them as different from themselves. Marginalization is a key factor which alienates or dissocializes the old.

Community especially the young spurn the elderly due to the latter's inability to function on their own and make an active contribution to the economy. Active involvement from the young and the aged is required to avoid this marginalization. The youth can be counselled to accept the aged just as they would accept a new born. The aged can be informed to be more accommodative to the decisions of the young and strive to contribute to the family within their constraints. As noted in WHO TRS 1984, "No country can provide formal health and social services adequate to serve as a substitute for the informal care system, even if it were desirable to do so".

Research Gap

The aged in the traditional societies enjoyed, unparalleled sense of humor, authority and decision-making power in the family and were treated as repositories of experience and wisdom. This experience, during crisis situations emotional, economic and social was duly appreciated and given weightage by younger generations. The change in the value system, individualism of the youth in transitional Indian family system have become responsible for the declining authority and status of the aged.

Even though social investment was a major blessing of traditional joint families in India, in all developing countries, women especially elderly women are spending their later phase of life without adequate or even negligible security measures. In short, a variety of comprehensive, valid and reliable, multidimensional, functional assessments are available. It needs to be ensured that the measures used are sound so that appropriate services in adequate amounts can be provided to improve the functional status of the elderly.

CHAPTER 3

THEORETICAL FRAME WORK ON LIVING ARRANGEMENTS AND SOCIAL CAPITAL OF ELDERLY PEOPLE

3.1 Introduction

The aged people are experiencing changes in their social lives. In India, there has been an increase in the number of older persons. The aged people within the country are being provided various facilities and senior citizen benefits. These are beneficial and render a significant contribution in providing them support, especially when they are living by themselves.

Although the role played by careers is integral to older adults and the care system, the significant impact caring has on their physical and mental health as well as on their finances raises questions about the long-term sustainability of unpaid care. Collectively, it is evident that there is a clear challenge to meet the care and support needs of an ageing population both now and in the future.

3.2 Meaning

Elderly or old age consists of ages nearing or surpassing the average life span of human beings. The boundary of old age cannot be defined exactly because it does not have the same meaning in all societies. Government of India defines 'senior citizen' or 'elderly' as a person who is of age 60 years or above.

The role of social capital in living arrangements, mental health, and life satisfaction was observed among elderly people. To acquire an understanding of the problems of the aged people. when individuals

reach old age, the various problems that they have to experience include, decline in health conditions, retirement, financial problems, loneliness and dependence upon others.

3.3 Roles and importance

Older persons are becoming an ever-greater proportion of the total population, with the proportion of the very old (60 years and above) growing the most rapidly. Older people are important members of any society and therefore have the right to live in dignity in later life. Moreover, older people possess the skills, knowledge and experience to continue to contribute effectively to society, given the fact that the predicted increase in the number of older people in the coming decades is considered a valuable resource for all societies.

Positive aging is a term used to describe the process of maintaining a positive attitude in older age. It includes psychological and health aspects, continuing to participate in society, and ensuring a safe source of income. Increasing life expectancy and better health in old age are a major success and represent a potential in terms of working power, qualification and experience that societies need to use productively. Experience with “active ageing” shows that the older persons who are integrated into society have a higher quality of life and longer and healthier lives. Societies need to consider more actively how to integrate older persons and ensure their participation in a cohesive society of all ages.

3.4 Socio-Economic Aspects of Aging:

“The health and well-being of the elderly are affected by many aspects of their social and physical environment. These include life-style, marital status, family support and social networks, income, work, retirement and environmental factors like condition of housing. A large number of the elderly females are illiterate in most of the studies and it may be the reason before 60 years back female education was rare in our country even in Kerala. Therefore, work force participation is less. Two thirds of the elderly males and 90-95 percent of the elderly females are illiterate and a large number of them, particularly women, are single owing to the death of the spouse. It is also estimated that about 18 million males and 3.5 million females aged 60 years and above would need jobs for their economic support. These figures have been derived on the proportion currently working. Besides 55 million of the aged will not be working in 2001, majority of whom probably will not have adequate savings nor family assistance. Such a grim situation would call for larger financial investments to save these elderly people from destitution and provide a minimum level of decent maintenance to them either by a government or by voluntary organizations. Most studies have revealed that a high percentage of elderly females are illiterate. The reason may be derived from the fact that female education was rare in our country (including Kerala) till the recent past.

This accounts for the low work force participation prevailing amongst the elderly females today. Now the traditional value system is undergoing change along with the changes taking place in the family structure. Nowadays elderly are not given the same respect as they used to get before. They are not shown adequate care and attention by their family members partly due to the limited resources and partly due to growth of “individualism” in modern industrial life. A recent study revealed that 19 percentage of the population above 60 years still work in the villages in Kerala. Ageism due to modernization is the discrimination against old people because they are old and allows younger generation to see them as different from themselves. Marginalization is a key factor which alienates or dissocializes the old.

Community especially the young spurn the elderly due to the latter’s inability to function on their own and make an active contribution to the economy. Active involvement from the young and the aged is required to avoid this marginalization. The youth can be counselled to accept the aged just as they would accept a new born. The aged can be informed to be more accommodative to the decisions of the young and strive to contribute to the family within their constraints. The aged in the traditional societies enjoyed, unparalleled sense of humor, authority and decision-making power in the family and were treated as repositories of experience and wisdom. This experience, during crisis situations emotional, economic and social was duly appreciated and given weightage by younger generations. The change in the value system, individualism of the youth in transitional Indian family system have become responsible for the declining authority and status of the aged.

3.5 Support systems

Elderly people may experience a wide range of needs for support, which could vary from needs for practical help or assistance in the event of physical disability and security, constant with the personal and social losses, which have been sustained. No community support mechanisms are organized for the welfare of the elderly women in our country. Even in the Primary Health Care delivery system these vulnerable sections are left. In India millions of people in the rural areas depend entirely on the Primary Health Care System. It is unfortunate that the Primary Health Care workers, male and females have no training in health care of the elderly and are unaware as to how to counsel the elderly individuals both males and females. In Primary Health Centre level or subcenter level there is no provision of Health care delivery system to the elderly population alone anywhere in our country. The multipurpose health workers are not given training regarding the care of elderly. Nor registers are kept for collecting the details of elderly people as the authorities do in the case of infant, child, adolescents and eligible couples. This emphasizes the need for health care support from the younger generation. "The socio-biological view considers the phenomenon of social support to be deeply rooted in our biological inheritance, providing a central influence in our success as life form.

Role of the Family

The role of the family is regarded as imperative in taking care of the needs and requirements of their aged family members. They provide all kinds of support and assistance, which can help the aged people in alleviating their problems. When the family members are compassionate, caring and thoughtful, they not only provide aged people moral

3.6 Problems Faced by Old Age People

As per the Indian tradition, families have been described to provide social security to old age members of the family. Today changing family structure is caused increased problems of old age people. The major problems which oldest people face are lack of economic provisions, poor health conditions, lack of emotional support and illness in the post retirement period. This state of affairs becomes a social economic problem or issue as many people feel it is a problem. The problem of inadequate income after retirement, loss of spouse or ample free time, poor health, social isolation, were family relationship and physically and financially dependency et cetera - all these situations are interrelated or interdependence, The traditional

Indian joint family system is now declining and more families are becoming nuclear. On the background it is taken to explore the correct situation of care and support for all the oldest people in the families.

1. Social Problems

The position and status of the aged individuals have been undermined by transformations in the cultures, values and overall living conditions of the individuals. In the present existence, technology has gained grounds and individuals belonging to all age groups, categories and backgrounds are making use of technology in carrying out their tasks and functions. The elderly individuals are not usually aware of usage of technology, they may just speak on the phone, watch television or listen to music and religious beliefs on radio or on their mobile phones. This indicates that they are usually unaware of how to perform various tasks and functions through the usage of technology. When aged people are unaware of usage of technology, they may encounter problems in communicating with people at distant places by sending messages, pictures and videos. Unawareness in terms of technology is one of the factors that impedes socialization of the aged people.

When individuals belonging to rural communities, migrate to urban areas in search of better employment opportunities, they usually leave their parents. There are number of reasons for this, the living accommodation in urban areas is expensive, and the rent is unaffordable for them. When individuals get engaged in full time jobs, then taking care of the needs and requirements of the elderly usually becomes a problem for them. The aged people may

experience problems in adjusting to social life of the cities. They usually feel apprehensive in going to nearby marketplaces and obtain assistance from their family members. The complexities of modern life and living conditions undermine the traditional values and beliefs of the aged people. They have their own traditional beliefs and viewpoints, which normally are not believed by the youth and the middle-aged people, as they are accustomed to modern values and beliefs. Hence, in this manner, the knowledge and beliefs of the aged people gets devalued. When they have their family members around, relatives and a good social circle of friends, then it is likely that they may feel secure and supportive. On the other hand, there are aged people, who are above 80 years of age and live alone. They do not have family members around and are primarily dependent upon their caregivers. In these cases, aged people experience social problems. They do not take pleasure in going out into the social circle. In case, celebrations or ceremonies are organized among their relatives, friends or Neighbours, they do not enjoy going. Hence, when aged people get accustomed to isolation, they experience social problems. In order to alleviate social problems, it is vital for the individuals to form a good circle of friends and interact with relatives, friends, caregivers and neighbors.

2.Economic Problems

Economic problems are experienced by the aged people, belonging to deprived, marginalized and socio-economically backward sections of the society. When the individuals are engaged in minority jobs, when their income is meagre and is not enough to meet their needs and requirements, then the individuals experience economic

problems. Social security and financial security of the aged people is of utmost significance. In India, majority of the aged people experience financial problems as they are not in a position to earn their livelihoods. When their savings are not enough to meet the medical expenses and other household responsibilities, then they experience financial problems. When they possess finances and wealth, then usually they are exploited by their family members. In India, more than 65 percent of the aged people are dependent upon others for their daily life activities and responsibilities. The aged women, who are independent accounted for less than 20 percent, whereas men were independent to a major extent (Financial Status of Older People in India, 2011).

The financial status of the aged people is directly connected with their financial independence. With the disintegration of the joint family system and the emergence of nuclear family system, the aged people prefer to live by themselves and manage all their finances. The younger individuals are having increasing academic and professional pursuits and due to this, the elderly is connected with them to a lesser extent. The individuals, who have accumulated wealth with their hard work have acquired net-worth, and value in terms of the money matters. The economic problems among the aged people have taken place due to fast changing socio-economic conditions, ongoing open market policies, and liberalization of economy (Financial Status of Older People in India, 2011). When individuals have been engaged in well paid jobs and professions, then they do not experience financial problems. On the other hand, financial problems of the individuals have been severe, when they have been unable to make savings for old age. The major economic problem that aged people have experienced is that of exploitation.

There have been cases of family members and relatives, who keep a watch on the finances that they possess. In a direct as well as in an indirect manner, they make an attempt to take money from them. When individuals are unable to find good employment opportunities or aspire to seek admission in a reputed educational institution for the pursuance of higher studies, they exploit the elderly family members and take money from them for their own benefit. The other problems that aged people experience in terms of finances is robbery and theft. When outside the home, individuals feel, a person is living alone and possesses sufficient wealth, they even get subjected to violent and criminal acts. Various areas that cause economic problems for the aged people have been stated as follows:

Medical and Health Care

With aging, individuals experience health problems and illnesses. They need regular medical check-ups; they are required to take their medicines and in case of other health problems are even required to undergo medical treatment. Medical and health care are regarded as areas that need finances. In some cases, medical treatment is quite expensive and individuals need to spend money. When they are wealthy, they do not face any problems, on the other hand, when they are not financially strong, then they experience problems.

Education of Children

There are aged people, who have to take care of the needs and requirements of their grandchildren, especially when their parents are not around. Education of children is regarded as a crucial area. Every parent or grandparent wants his child to acquire good education and aspires to get him enrolled in good educational institutions. Reputed educational institutions are expensive. When individuals are not financially strong, then they experience problems in making provision of good quality education for their children or grandchildren. When good educational institutions are not available in the region, where they are residing, then economic problems prove to be impediments within the course of sending them to other cities to acquire education.

Management of Household

The management of the household is a difficult task. There are numerous areas that need to be taken into consideration, these include, cleaning, washing, preparation of meals, gardening, taking care of electricity, water and other civic amenities and so forth. These tasks demand manual labor as well as finances. The elderly individuals are usually unable to carry out the household chores on their own and need to hire helpers and caregivers. When they are

financially strong, they will be able to pay their salaries. On the other hand, when they experience economic problems, they will be unable to hire helpers and need to formulate measures to manage the household chores on their own.

Social Causes

When the aged people are living alone, then usually they get engaged in some social work. Social work keeps them occupied and eliminates the feelings of loneliness. The social work is carried out by the individuals on the basis of the fields and professions that they have been engaged in. For instance, if they have done teaching, they may provide coaching classes to the children, belonging to deprived and economically weaker sections of the society. The feelings of kindness and generosity enable the individuals to help others. In helping others, in giving others something, it is vital to be financially strong. When aged people are economically secure, they may make donations to the underprivileged children in the form of books, stationary items, bags, clothes, food items etc. On the other hand, economic problems prove to be impediments within the course of implementation of certain social causes.

Other Causes

Aged people usually possess strong religious beliefs and take pleasure in making visits to religious places. When they do not experience any economic problems and feel financially secure, they may plan their visits to religious places, even to other cities. On the other hand, when they experience economic problems, they are unable to plan visits to other places. In such cases, they usually visit temples that are located nearby their homes. Means of transportation, diet and nutrition, equipment, tools and other materials that they need to use can be purchased, only when a person is financially secure. On the other hand, economic problems prove to be the major impediments within the course of sustenance of living conditions. Financial security of the aged people is proposed by tax benefits and higher rates of interest on the deposits for the senior citizens. Other measures that have been formulated include, promotion of long-term savings in rural and urban areas, increased coverage and revision of old age pension schemes for the aged people, who are residing in the conditions of poverty and backwardness. Pension, provident fund, gratuity and other retirement benefits are various sources that make provision of financial security to the elderly individuals. The services of the social workers are utilized in making provision of employment opportunities for the elderly individuals. They have to ensure that the employment opportunities should be such that can be appropriately carried out by these individuals. The main objective of getting engaged in employment opportunities for the elderly is to alleviate the feeling of loneliness, helping them in remaining occupied and generating a source of income, so that they are able to easily meet their needs and requirements

3. Health Problems

As the individual ages, health problems among them are common. There are various kinds of health problems experienced by the aged people. These include, visual impairments, hearing impairments, speech impairments, decline in word usage and vocabulary, pain in the joints, high or low blood pressure, and other illnesses. Older individuals may live longer but they may get prone to illnesses and diseases. World Health Organization defines health as a state of complete physical, mental and social well-being. It is not merely absence of a disease. Health is considered more important for the aged people, as they are the ones, who primarily experience a decline in the health conditions in old age. The Constitution of India envisages the establishment of a new social order based on equality, freedom, justice and dignity of the individual. It aims at the elimination of poverty, ignorance and ill-health and directs the State to increase education, nutrition levels and standards of living among individuals. Bringing about improvements in the health care is regarded as one of the primary duties.

The maintenance of the health and strength of the workers, men, women, children and the aged people is implemented, when they are provided with opportunities and facilities to enhance their living conditions in a well-organized manner. The health of the aged people gets affected by primarily two factors. These are due to the environmental conditions and biological conditions. When

environmental conditions are taken into consideration, both home as well as outside the home influence their health. Within the home, when any kinds of conflicts and disputes takes place between individuals, then aged people in some cases feel stressful and they have an effect upon their health. These conditions usually affect the mind-sets of the individuals. As a result, they may not consume their proper diet and nutrition, may not obtain adequate sleep and as a result, they experience a decline in their health conditions. the biological conditions that have an impact upon the health of the individuals include, visual impairments, hearing impairments, pain in the joints, nervous disorders, weakness, heart complaints, asthma, tuberculosis, skin diseases, and so forth. Women Usually Report more health problems as compared to men.

the aged people, who are above the age of 60 years and are living below the poverty line, account for seven to eight percent of the population. the aged people in the unorganized sector like the agricultural laborer's, casual workers or landless laborer's have to look after their family and household responsibilities and financial problems are the major causes of barriers within the course of achievement of their desired objectives. aged people need assistance and support from their family members and caregivers in taking care of their health conditions. when they receive support and assistance, they are able to maintain good health and live longer. on the other hand, when they are lonely and lack the support and assistance, then they are unable to meet their health care requirements in an appropriate manner.

Measures to Alleviate the Problems of the Aged People

The measures that aim to provide solutions to the problems of the aged people have been stated as follows:

Improving the Economic and Social Welfare

- In order to provide solutions to the economic and financial problems of the aged people, they should be made provision of full time or part time employment opportunities. This would enable them to generate a source of income, improve their economic and social welfare and reduce their dependence upon other individuals. The pension scheme is also beneficial to the individuals, who are particularly in a destitute condition. In the pension scheme, it is important that the aged people should be able to receive their pension on a regular basis and without implementation of formalities

Improving the Health Conditions

– The development of health care and medical facilities even in rural areas, free medical check-ups, provision of advanced methods, ensuring that individuals are getting their proper nutrition, medicines, and keeping the environment clean are some of the factors that aim at improving the health conditions. The aged people should get

engaged in some physical activities. Within the household, it is necessary that the environment should be amiable, there should be provision of civic amenities and facilities, restrooms and clean drinking water. The individuals need to possess the awareness that preparation of meals and other household functions should be carried out in a clean environment.

Improving their Participation in Activities and Functions – The aged people are encouraged to participate in various activities and functions. These may be social, cultural or religious. Participation in these activities and functions help them to alleviate their loneliness and it stimulates one's mind-set. In old age homes, one gets involved into playing of games, indoor and outdoor, individuals read, socialize with each other and render an operative participation in the case of celebration of a festival or event. Mostly the aged people are encouraged to give their ideas and suggestions, as they are experienced. This is when one has to organize a function in a family, old age home or a society, when one has to seek suggestions and ideas in case of any problems or issues and individuals share with each other their daily life experiences. Sharing of joys and sorrows is regarded important and aged people find it soothing.

Implementation of National Policies and Programs – When formulation of policies takes place, it is vital that the aged people should be given equal importance as the other individuals. Voluntary organizations that aim at helping them should be given assistance. Society and state should

formulate the policies, taking into consideration their needs and requirements. The Maintenance and Welfare of Parents and Senior Citizens Act (MWPSCA) enacted in December 2007 to ensure need-based maintenance for the parents and the senior citizens needs to be more completely and equally implemented in all the states as awareness of this Act.

Residential Aspects – The aged people prefer to stay within their own homes. They either live by themselves or with their family members. In the case of one's housing and residential aspects, security is the main concern. The individuals are required to keep the doors and windows locked, keep their valuables and money in safe places or if they feel that their security is under threat, they need to obtain the services of a security guard. Housing is being developed on a rapid scale within the country, but usually in terms of nuclear families. In some cases, the aged people reside within the nuclear families. When they obtain respect from their children and grandchildren, when they take care of their needs, then they feel pleasurable and contented in living with them.

Family and Community – The main role of the family and community towards the aged people is to provide them support and assistance. The family is the first and the foremost institution, which needs to take care of the requirements of the aged members. Family members are supposed to provide solutions to the health, economic, social, psychological and other miscellaneous problems. In case of any event or incident, aged people feel contented, when their family members are around. For instance, in case of medical treatment, or visiting a physician, support of family members is of utmost significance. On the other hand, the members

of the community are required to interact with the aged people in a respectful manner, possess a helping nature and make provision of assistance and services that would lead to their well-being.

Education – Education and information regarding various aspects enables the individuals to lead productive lives. When they are well educated and informative, they will be able to look after their health care requirements, consume adequate diet and nutrition, possess information in terms of how to implement their security, manage their household chores in an appropriate manner, interact well with others, work for the welfare of the community, carry out other transactions in an effective manner and alleviate the feelings of stress, pressure, anxiety and depression. An educated person is able to make effectual utilization of their skills and abilities and does not feel worthless. In some rural communities, there have been establishment of adult education centers that aim to upgrade the literacy skills among the aged people, who are above 60 years of age. These individuals have either dropped out of school long time ago or have never been enrolled in school before.

Non-Government Organizations – The main objective of the non-government organizations is to focus upon the welfare of the aged people. The role of non-government organizations and other agencies have been geared towards their protection and security. The aged people, who have experienced any form of abuse or mistreatment usually develop apprehensiveness and vulnerability and seek assistance from non-government organizations. The abuse and mistreatment can be in the form of financial exploitation, different forms of abuse, and other criminal and violent acts. The aged people, who are primarily alone and frail,

they are supported by these organizations to live a safe and secure life.

Extra-Curricular Activities – The aged people normally get engaged in extra-curricular and creative activities. These enable them to remain occupied, they are able to make use of their skills and abilities and one's mind-set remains normal through getting engaged in these activities. For instance, they get engaged in various kinds of games, which may be indoor, such as chess or carom or outdoor, such as badminton or tennis. They get engaged in physical activities, these include, walking, running, yoga, meditation and so forth. They get involved in the production of handicrafts and artworks. Preparation of meals is another activity that mostly elderly women take pleasure in. Elderly women even get engaged in activities such as knitting or embroidery for more than four hours a day. Hence, getting involved in extra-curricular and creative activities help them to make use of their skills, they remain occupied, feel contented and pleased and develop a social circle by donating or gifting the items.

CHAPTER 4

DATA ANALYSIS AND INTERPRETATION

The study has been under taken in Pallikal panchayat Pathanamthitta from 50 households. The study describes the care that should be provided to the elderly population, which can be considered to be the important fact for the mutual understanding of the generations. The kind of support and care experienced by the elderly depends on the living arrangements of the elderly, The results received as follows.

SOCIO-ECONOMIC CONDITIONS,
AND SOCIAL SUPPORT AMONG THE ELDERLY IN A RURAL AREA.

Panchayat: Pallickal

4.1 Age

Table 4.1

Age

AGE	NO: OF RESPONDENTS	Percentages (%)
60-69	21	42
70-79	16	32
80+	13	26
Total	50	

4.2 Marital Status

Marital status	No: of Respondents	Percentages (%)
Married	28	56
Widowed	11	22
Separated	6	12
Single	2	4
Divorced	3	6
Total	50	

4.3 Education

Education	No.of respondents	Percentages (%)
Illiterate	12	24
Primary	29	58
Secondary	5	10

PDC	3	6
Graduation & Above	1	2
Total	50	

4.4. Previous Occupation

Occupation	No. Of respondents	Percentages (%)
Household	10	20
Agriculture	21	42
Petty Business	4	8
Other	15	30
Total	50	

4.5 Present Occupation

Occupation	No.of respondents	Percentages (%)
Household	4	8
Agriculture	29	58
Unskilled	11	22
Other	6	12
Total	50	

4.6 Personal income per Month from all sources

Personal Income (Rs)	No.of respondents	Percentages (%)
Nil	14	28
Below 500/-	2	4
500-1000/-	27	54
1000 and above	7	14
Total	50	

4.7 Family composition

Family Type	No.of Respondents	Percentages (%)
Stay Alone	6	12
Stay with others	44	88
Total	50	

4.8 Percapita income

Percapita income	No.of response	Percentages (%)
Below 1000/-	7	14
1000 -10000/-	32	64
10000 and above	11	22
Total	50	

4.9 Community support

Yes 37, No :13

Community Support	No.of response	Percentages (%)
Yes	37	74
No	13	26
Total	50	

4.10

Health services

Medical expenses	No.of Responses	Percentages (%)
Below 500	11	22
500-1000	21	42
1000-5000	14	28
5000 and above	4	8

Total	50	
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4.11 System of medicines

Medicines	No.of Respondence	Percentages (%)
Ayurveda	8	16
Homeo	26	52
Modern Medicine	14	28
Other	2	4
Total	50	

4.12 Financial assistance from government

Financial support from government	No.of response	Percentages (%)
Yes	34	68
No	16	32
Total	50	

CHAPTER 5

SUMMARY OF FINDINGS, SUGGESTIONS AND CONCLUSION

A descriptive study was undertaken among the elderly people in Pallickal Panchayat area during the period from March 21 2022. Information was collected from 50 elderly people from rural area.

The aim of the study was to investigate the Socio-economic conditions, and social support among the elderly in rural area.

Socio economic factors:

Age

From table 1, it is seen that majority 42% of old age were in the age group 60-69 followed by 32% in 70-79 and 26% in 80 and above. However, the number of

elderlies in 60-69 age group was rather high in this panchayat

Marital status: In the present study, 56% of the old age population were currently

married. Widows constituted 22% of the total women studied. divorced / never married women were very few and constituted about 18%. Statistically no difference was noted in the percentage distribution of women according to marital status. Widow-hood is disproportionately high among females compared to the male elderly.

Level of education: Though literacy status in the locality is assumed to be 24% or more were illiterate and 58% were having primary level of education. The remaining 18% had secondary or above level of education and only one woman had studied up to graduation.

Regarding previous occupation, in the locality 88% of the elderly were engaged in household affairs and the

rest were engaged in agriculture/manual labor/doing petty business.

Considering present occupation also about elder 70% of the elderly were engaged in house hold activities even with their ailments and 5 to 30% were at rest and others were engaged in income generating activities.

Personal income: It is significant that hardly 72% had income of their own, and was only a meagre amount either from old age pension or from other sources.

Type of family: An analysis of the reason for the old age persons staying alone, about 12% of the persons are not interested to shift from their place or home condition in which they were in the young age. There are such situations in the old age persons around 88% staying with others but in such cases, the other members will be with them due to some reason or other.

Community support: An attempt was made to assess the various assistances received by the old age persons from various sources About 74% from the above table 4.9. Even in this respect 5-26% did not have any social

support. Sociological analyzing of support net workers in old age in the locality observed that to a large extent support in the form of general care, that is help in personal care, advice, economic support and companionship, support on a regular basis come from the house and or the procreated unit of the offspring residing with the elderly. The traditional way of supporting the elderly in our culture still remains in most of the societies.

Health services: With regard to the utilization of PHC/Sub-center/Govt.hospitals, only 38% of the locality. Most 68% of this locality elderly being economically dependent; the cost of treatment is often a burden on the household. Therefore, many of the elderly ignore their ailments unless they become too acute. Thus, there is a great need for an appropriate insurance scheme for enabling the elderly to meet their medical expenses.

CHAPTER 5

SUMMARY AND CONCLUSION

The review highlighted that older people living with chronic conditions have unmet care needs related to their physical and psychological health, social life, as well as the environment in which they live and interact. Findings of this review also emphasized the importance of developing care models and support services based around the needs of older people. Living arrangement, financial position and well-being would undergo change in old age. Therefore, in-depth studies through multidisciplinary assessment on issues like socioeconomic problems, morbidity pattern, psychological stress and social security needs of the elderly should be done nationwide. Strategies should also be developed to create general awareness on the specific problems of the elderly. As the existing health delivery system is not providing any special attention to the aged and in rural areas the health care of the elderly is almost entirely dependent on Primary Health Care, Health Workers should be given training in elderly geriatric services. Health Insurance policy for the elderly in rural areas has to be formulated and Rehabilitation of the elderly should be done through integrated community development programs. Physical

aids should be made available to the elderly who are below the poverty line. Day care centers and senior citizen's club, organizations with recreation facilities should be established in each ward in every Panchayat. Integrated health care services as well as comprehensive social security measures could provide better quality of life to the aged. Mobile geriatric unit could be more effective as it can cover a large number of aged in rural areas especially the immobile.

Traditional role of respecting and caring elders should be reinforced through school level and interventions from the primary level. Elderly women should be given legal security against abuse and harassment.

Immunization like Tetanus Toxoid should be provided free of cost to all the elderly through PHC / Government Hospitals. The experiences and expertise of the elderly should be utilized for the society. The increased life expectancy of elderly women in rural area does not mean that their life is free from morbidity or disability and it is not a healthy life expectancy. A national security program should be designed in such a way that elderly people who are

disabled, frail and destitute become eligible to governmental support. Like younger age group, the aged also require health, personal and social care Establishment of separate geriatric clinics in PHCs, Government hospitals and also geriatric wards in the hospitals with specialization in geriatrics.

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