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Research Paper—Social Work

Is the Elders Safe in India- A Review

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ABSTRACT

This article is based on problems of elderly people in our Indian society. The aged are known as "elderly" or "old people" and are generally taken to be people above the age of sixty. There are so many factors to men are responsible for increasing problems of sixty year old. There are so many factors which are responsible for increasing problems of ageing like modernization, technological changes, urbanization etc. There are many problems faced by elderly. These are physiological problems(major body system continue to slow down as organs continue to shrink, sense los etc), psychological problems (depression, loss of appetite etc.), economic problems (lack of old age and widow pension in time, financial problems etc.), besides that various forms of physical, emotional, sexual abuse of elderly are mentioned in this paper.

Introduction

In Indian society traditionally, elderly people are regarded as symbol of the divine and given utmost respect. They are considered as the repository of wisdom, carriers of traditions and transmitters of experiences and ideals of group living. The aged have a definite place in society. The genesis of most of the problems of the elderly people is being socio-cultural, the solutions too have to be sought in the wider social milieu. Ageing is natural, universal and inevitable with the passage of time. It is the last stage in the 'life journey' and the closing period in the 'life span' of men and women with decreased capacity for adaptation. The aged are known as 'elderly' or 'old people'. This age group is also called "Geriatric Age Group". Due to dependence for personal requirements, old age is sometimes called the 'second childhood'. This age limit varies in relation to the country, period, socio-economic status, educational backgrounds and pattern of living.

Ageing has been viewed differently by different persons. To an industrialist, it can mean power and wealth, where as to a middle class employee, it amounts to be forced retirement; for the poor it is a stage of dependence. To most ageing implies physiological and psycho- social changes reflected in general physical weakness, decline in sense of perception mental activity, lessening social activities and interest.

The old age covering the later part of life of an individual, when physical deterioration begins to appear, is generally marked by a shift in an individual's position from active social participation to sufficient decline in role performance and from economic-self sufficiently to economic dependence. The role deficit and consequent lowering of morale is primarily a problem of adjustment arising out of withdrawal from work, poor health and low socio-economic status.

Emerging Factors related to Senior Citizens

Problems of ageing make their appearance generally after the age of 60 years and above. Older people increasingly suffer social losses with age. Their social life is narrowed by loss of work associates, death of relatives, friends and spouse and poor health which restricts their participation in social activities. The home becomes the centre of their social life which gets confined to interpersonal relationships with the family members.

Today, the traditional joint family system has given way to the modern nuclear family system where the aged find themselves unwanted. They are being increasingly isolated and left out. They are unable to cope with the speed of the modern world.

The force of modernization, technological change, mobility and the explosion in the lateral transmission of knowledge are making changes in life styles and values to adjust to the changing circumstances. Labour force participation of the older population has declined and the female share of the older work force is increasing. Illiteracy remains high among older people, especially in women. Education is a crucial basis for an active and fulfilling life.

Older persons are generally neglected, ignored and in some cases abused. The abuse is more psychological than verbal. The elderly need true love and affection from the younger generation.

Ageing is a time of multiple illness and general disability. Along with changes in biological composition, life style factors are also important for disorders and diseases in old age. Economic problem occupy an important problem. The most vulnerable are those who don't own productive assets, have little or no savings

or income from investments made earlier, have no pension or retirement benefits and are not taken care of by their children; or they live in families that have low and uncertain incomes and a large number of dependents. The demographic dimension relating to the population of 60 years and above can briefly be summarized in qualitative terms.

1. The number of elderly persons 60 years and above in 1901 was about 12 million. In 2001 it increased to about 72 million. In 2051 this is expected to increase to about 301 million.

2. The rate of increase of the population of 60 years and above is higher than the rate of increase in the general population.

Problems of Elderly

Due to increase in life expectancy, the number of older persons also raised. In India the persons above 60 years of age are classified as aged person. The rapid increase in the population of older persons can be attributed to the following factors; * Advantages in medical/ health technologies * Gradual fall in mortality rate * Increased awareness of healthy living * Better nutrition * Increased life expectancy

Some major problems of aged in the light of the findings from various studies as attempted;

Physiological Problem

As far as physiological problem is concerned the aged easily fall in the various anatomical and physical changes. Weakening and declining of the body continues at a gradual but steady phase. Appearance continues to change, senses los acuity, major body system continue to slow down as organs continue to shrink. They may suffer from failing heart, chest disease, falling eye-sight, become deaf, encounter digestive disturbances, circulatory problems, obesity, changes in skin colour and texture, malnutrition, etc. So they don't enjoy food, sleep, loud noise and company of others. All these changes in physical appearance have serious social and psychological implication.

Lack of nutrition is another factor to affect the physiological problem of the elderly. Writing about nutrition for elderly, Asha Kumari (1999) writes, "a recent study found that the only known method of increasing longevity is cutting calories. Deficiency of protein is common in the elderly and is one of the factors producing oedema, anemia and lowered resistance to infection. A study by Vijay Kumar states that special health problems of elderly women were urinary incontinence, utero- vaginal prolapse, breast cancer, osteoporosis, post menopausal morbidities. Depression and dementia are widely prevalent among elderly females. Alzheimer disease is more common among women. (Kumar Vijay S. 1995)

About addictions, a study conducted in six villages in Rohtak district of Haryana reports that over 71% of men were smokers against 34% of women. Overall 55% enjoyed smoking on the pretext of relieving abdominal problems and digestion. Over one fifth of these elderly used tobacco snuffs and 3.58% were addicted to other drugs (Lal Sunder, et al., 1999)

Psychological Problem

1. Bereavements are a major crisis. The loss of a husband, wife or a close family member is the single most stressful event in a person's life. Death of the spouse can hit an older person extra hard because of sheer length of relationship involved. The longer relationship lasted the greater impact of the loss.

2. Depression is a common condition among the elderly. Its symptoms include loss of appetite, fitful sleep, early morning awakening, weight loss, lack of energy and motivation, sometimes even thoughts of suicide. Some of these factors are normal by products of the ageing process. But a combination of all may be serious.

* Difficulties in accepting ageing
* Difficulty in acceding the cultural changes and its impact on the relationship with children
* Communication problems with family or community health workers as a result of language and cultural barriers.
* Anti-ageing, sexiest, racist attitude

The influence of psychological factors such as fear, worry, anxiety and loneliness has been shown to affect not only actual dietary intake but also utilization of nutrients. In studies with older women, "Swanson reported negative nitrogen and calcium balances during anxiety over the terminal illness of a relative and during periods of living alone." (Kumari, Asha, 1999)

Economic Problems

Many sample surveys conducted in rural India, in general, reflect a greater degree of financial insecurity among the aged. Inadequate financial resources were indicated as one of the major problems of the Indian elderly. This also seems to be of a higher degree among female elderly compared to their male counterparts (Dak and Sharma, 1987).

Under National Old Age pension Scheme (NOAP), Central Assistance is available on fulfillment of the following criteria:

* The age of the applicant (Male or Female) should be 65 years or more
* The applicant must be a destitute in the sense that she/ he has no regular means of subsistence from her/ his own source of income or through financial support from family members or other sources.

The amount of old age pension varies from state to states. The scheme is implemented in the State and Union Territories through Panchayats and Municipalities. There is a similar pension scheme for the widows

also. Vrinda Gopinath in her article describes how widows living in Vindavan, a holy place of Hindus, are deprived of the pension; she says that "the widows are entitled for a pension of Rs. 1500/- per month. There are several cases of cheques being issued in names of land lords, account books which are wrongly tabulated, pension forms which are suspiciously lost. It is also reported that a couple of lakhs of rupees lying in local banks collected over the years are drawn out by bank clerks. The temple priest has brought widows, abandoned women, even families looking for food and shelter."(Gopinath, Vrinda, 2000).

Problem of Elder Abuse

Several definitions of elder abuse exist in literature. Broadly elder abuse has been defined as the infection of physical, emotional or psychological, social, professional and institutional harm on an older adult (usually over 65 years).

According to Beennett, Basingstoke, Kingston and Penhale (1997) three different levels of abuses are Macro, Mezzo and Micro abuse. Macro abuse refers to issues at the societal level such as lack of access to health care, poor social security and institutional abuse. Mezzo abuse includes the injustice heaped on other people and marginalizing them. Micro abuse deals with the conflicts and interactions between two people an older person and an adult family member or a caregiver in an institution.

Wolf and Pillemer (1989) and the National Elder abuse Incidence Survey (U.S. 1998) stated various dimensions of elder abuse as follows:

* Physical abuse may range from slapping or shoving to severe beating or restraining.
* Emotional or psychological abuse can range from name calling, verbal assault, giving the 'silent treatment' to insulting and threatening.
* Sexual abuse may range from sexual exhibition to rape.
* Financial or material exploitation range from misuse of an elder's fund.
* Violation of rights includes reduction of personal freedom or autonomy, involuntary commitment, guardianship etc.

Singh, R.R. (2010) in his article "Concerns of Senior Citizen: Needed Initiatives with Special Reference to Human Rights" mentioned about the forms of Elderly Abuse are emotional, physical, social, professional and institutional.

* **Emotional:-** Blackmail, indignities, segregation in the household etc.
* **Physical:** -Battering, forced labour, persisting hunger etc.
* **Social:** -Isolation, segregation, "framing", fraudulent wills.
* **Professional:-** Negligence, indifference, rudeness, strikes, unregulated and exploitative service fees by different professionals including those in the field of law and medicine, which are among the oldest service professions.
* Institutional: All the above.

Social Barriers

* Lack of information about programmes and services for the elderly
* Lack of home care and home supports
* Lack of support services, weak family, social and community networks
* Lack of participation in recreational, social and community activities

Conclusion:

To conclude, it can be said that the problems of elderly must be addressed with Care and Support. The article reveals that most of the elders in our society are facing different type of abuses and Psycho-Social problems. It exists in every society whether in rural or urban in different way.

Suggestions to rectify problems faces by elderly in India:

1. Life centers must be established at Taluka level to accommodate and care all "destitute old".
2. Any son or daughter earning above BPL must deposit 10% of his or her income in the bank account of his her father/ or mother, who is above 60 years, if the latter have no other means of income.
3. There is need for a separate police to enquire into cases of elderly abuse in every major towns and cities.
4. Free medical checkup and supply of drugs should be given to all needy old suffering from diseases the affect elderly particularly in India.
5. Proper lessons in school books must be added about care of old. Mass media like T. V. also must support programmes which propagate care of old.

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