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### Feminisation of Ageing Population in India: Issues and Concerns



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#### **ABSTRACT**

The shift in age structure associated with ageing population has a profound impact on broad range of socio-economic and demographic conditions of the elderly in India. However, such an effect is not homogeneous in respect to the place of residence and sex. Though a higher life expectancy is an indicative of an improvement in health conditions and living standards, the prevalence of poverty, illiteracy, lack of social security and support system, general awareness and amenities have constituted a major problem for the elderly. The present paper intends to highlight these issues of the old age in general and of the women elderly in particular.

#### **KEYWORDS**

Old age, female elderly, vulnerability and policies

## RESEARCH PAPER

### Introduction

Aging is a biological process. It is characterized by deterioration of physical capacity. This change of physical ability brings a change in person's active participation in different areas of life. A dependent life of the elderly person is more vulnerable and stressful. But, issues of ageing problems are not homogeneous. It varies in respect to gender, place of residence, economic conditions, living arrangements, health status, marital status etc.

The UN defines a country as "Ageing Nation" where the proportion of people over the age of 60 years reaches 7 percent to the total population. India has exceeded that proportion (8.6 percent) in 2011, and is presently having 1.31 billion populations, the second largest globally, comprises 17 percent of the world's population (United Nations, 2015). It is estimated by the U.N Population division that in the year 2028, India's population will overtake China's population. As India's population grows, its expanding share of the older population will also be notable. Currently, the growth rate of the number of elderly people (age 60 years and above) is three times higher than that of the population as a whole (Giridhar and Sathyanarayana et al, 2014).

**Table-1 : Decadal Growth of population in India: Elderly Vs General**

Period	% Change in	% Change in
1951-1961	+21.6	+23.9
1961-1971	+24.8	+33.7
1971-1981	+24.7	+33.0
1981-1991	+23.9	+29.7
1991-2001	+21.5	+25.2
2001-2011	+17.7	+35.5

Source: Census of India for 1951-2011

According to the Census Report, India, 1951-2011, the growth in elderly population is all along being higher than the growth in general population and has been found to shoot up to 35.5 percent in the last one decade. Moreover, the growth has been observed to be more pronounced in the rural area and the total growth of female elderly has been observed to be marginally higher than that of the male elderly (**Table-2**). This has led to a gender gap in the sex ratio of the elderly in India (Census India, 2001).

**Table-2: Elderly population (60 yrs +) in India (millions)**

Year	Total			Rural	Urban
	Person	Female	Male		
1961	24.7	12.4	12.4	21.0	3.7
1971	32.7	15.8	16.9	27.3	5.4
1981	43.2	21.1	22.0	34.7	8.5
1991	56.7	27.3	29.4	44.3	12.4
2001	76.6	39.8	37.8	57.4	19.2
2011	103.8	52.8	51.1	73.3	30.6

Source: Population census Data (1961-2011)

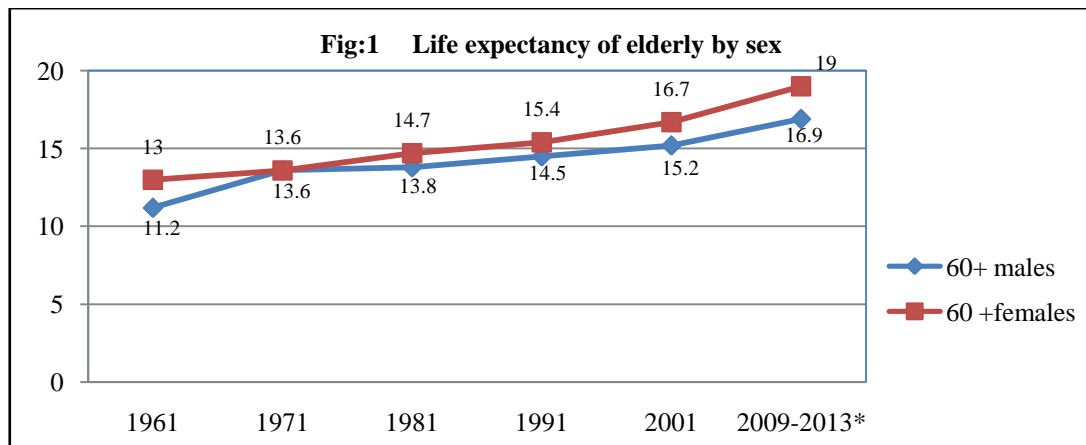
Census of India shows that the sex ratio of the elderly was considerably high (1028) in 1951 and subsequently dropped to about 938 in 1971, but finally increased up to 1033 in 2011 (**Table-3**). Higher sex ratio of the elderly which is an indication of feminization in the segment of elderly population is the result of the decreasing birth rate, fall in death rate and longevity of life of the people on account of improved and better economic well-being, better medicines and medical facilities.

**Table -3: Sex ratio: Elderly Vs General population.**

Year	Sex Ratio of Elderly population	Sex Ratio of General population
1951	1028	946
1961	1000	941
1971	938	930
1981	960	934
1991	930	927
2001	972	933
2011	1033	943

Source: Census of India for 1951-2011

Average Indian life expectancy at age 80 has likewise increased significantly, from about 5 years in 1950 to more than 7 years at the present time. By the middle of this century, it is predicted to rise up to 8.5 years (United Nations, 2015). According to the Report of SRS, Register General, expectancy of life at 60 years of age of the population by sex has increased for the both male and female elderly population but the increase is found to be more in case of female elderly (Fig:1). It indicates that there will be more female elderly in this segment of the population in India. The feminization of the segment of the elderly population in India has been compared with double edged sword (Davidson, Digiacom, and McGrath J.,2011). Longer life expectancy, on the one hand, is taken as a victory for women i.e., overcoming mortality from reproductive, communicable, and chronic conditions. On the other hand, longer life expectancy of females implies a period of social isolation, and adverse economic and health conditions.



Source: SRS, Registrar General, Vol. 46 No. 1 January 2012, India & SRS-2010, (April, 2012),

SRS Statistical Report, 2011; Social statistics Division, Government of India .2016

Thus, feminization of ageing has raised some critical issues regarding the vulnerability of female elderly in their socio-economic life. These issues can be better understood when we study with some background variables, like the social structures of the elderly as well as their economic position and their health status.

The present study has made a minor attempt to assess the vulnerability of the female elderly in respect to some selected socio-economic back ground variables like,

### **Objectives of the study**

- 1) To study the socio-economic status of the elderly in India.
- 2) To find out the gender gap of the elderly in respect of socio-economic variables.

### **Methodology:**

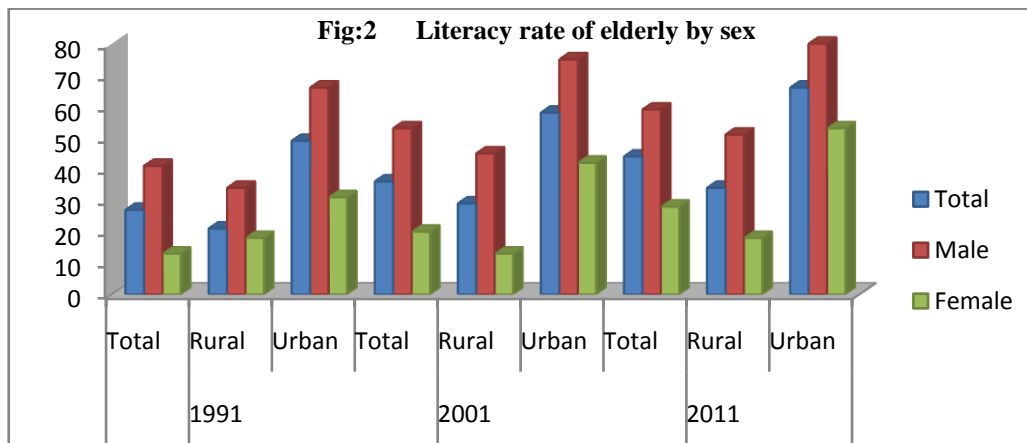
The present study is descriptive in nature. The requisite information has been obtained from secondary source. The secondary data are obtained mainly from NSSO, Census of India. Keeping above objectives in background, the study has selected some social and economic variables. The social variables include literacy rate, marital status, living arrangement and health of the elderly while; economic variables include participation in gainful employment, economic dependency, access to ownership of property and financial management.

### **Social profile of the elderly**

#### **Literacy**

There exists a wide gender gap of general literacy in India. The gap is more pronounced in the rural area (Census India, 2011). A wide literacy gap between male and female elderly has also been observed to persist over the last decade. The gap of literacy rate is found to

be 28 percent, 33 percent and 31 percent in the census periods of 1991, 2001 and 2011 respectively (**Fig:2**).



Source: Census of India 1991, 2001, 2011

The wider gender gap in elderly literacy rate in the rural area as shown in the **Fig: 2** above, itself explains the gravity of the problem. This gender gap in literacy pushes the women to the most disadvantageous position in respect of access to ownership, management of property and financial assets, living arrangement and health at their older age at most.

#### **Marital status**

Marital status of the elderly assumes special significance in the context of care in old age as it is known that those who are married fair better in all economic and social aspects than those who are single. A major concern related to the increasing proportion of the elderly female, especially, widows in the population. Two reasons are given for the marked gender disparities in widowhood in India (i) longer life span of women compared to that of men and (ii) the general tendency in India for women to marry men older than themselves (Gulati and Rajan, 1991). Widowed men are also much more likely to remarry and thus restore their earlier status. Though the relationship between the well being of the elderly and their marital status cannot be spelt out precisely, any change in the marital status of the elderly deserves careful examination.

**Table-4** shows a significant gender gap related to the marital status of the elderly in India. The proportion of currently married male elderly is found to be highest (79.45 percent); in rural area, it is 78.57 percent while, in urban area, it is shown 82.27 percent.

**Table- 4 : Marital Status of the elderly in India (in percentages)**

Marital status	Rural			Urban			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Never married	1.65	0.55	1.10	1.74	1.19	1.46	1.67	0.71	1.19
Currently married	78.57	39.06	58.96	82.27	38.64	59.97	79.45	38.95	59.21
Widowed	19.43	59.85	39.49	15.85	59.71	38.27	18.58	59.81	39.19
Divorced/separated	0.36	0.54	0.49	0.14	0.47	0.31	0.31	0.53	0.42

Source: NSSO 60th round (Jan-Jun, 2004)

Incidence of widowhood for elderly women is found to be nearly 60 percent in both rural and urban area while, in case of elderly male, it is found to be 15.85 percent in the urban area and 19.43 percent in the rural area. This implies that the widowhood seems to be the chronic amongst the elderly population in India.

According to the NSSO 60<sup>th</sup> round Report, almost in all states, more than sixty percent of the women were living without spouse. The prevalence of widowhood among men was as low as twenty percent in most of the states in India. The trend of high incidence of loss of spouse was making life insecure for the elderly, specially the women in India. It has a direct effect on the living arrangement, management of property and financial assets and ultimately, the health of the elderly (Pandey and Jha, 2011).

#### **Living arrangements among elderly**

Living arrangement is an important component in dealing the welfare of any specific group. The elderly persons, being less able to be independent, need the care and support of others in several aspects. The care and support enjoyed by the elderly is linked to their residence in other words, the living arrangements.

In Indian society, as most of the women elderly live in joint family and they have least access to income and assets. As a consequence, they are left with no alternative but to stay with their children and grand children in absence of their spouse. According to the NSS 60th round, 59.02 percent of the male elderly as against their female counterparts (42.05 percent) live with their spouses, children and grandchildren (**Table-5**).

**Table-5: Percentage Distribution of Elderly by their Living Arrangements, 2004**

Living arrangement	Urban			Rural			Total		
	M	Fem	To	Mal	Fem	To	Mal	Fem	To
Living alone	1.9	3.49	2.7	1.7	4.33	2.9	1.7	4.07	2.8
With spouse	8.1	4.86	6.5	8.2	6.00	7.2	8.2	5.65	7.0
With spouse, children & grand	58.	40.7	49.	59.	42.6	51.	59.	42.0	51.
With children & grand children	29.	48.7	38.	30.	45.9	37.	29.	46.8	37.
With other relatives	1.9	2.11	2.0	0.7	1.06	0.8	1.0	1.38	1.2
With other non relatives	0.1	0.04	0.0	0.0	0.02	0.0	0.0	0.02	0.0

Source: NSSO 60th round (Jan-Jun, 2004)

A gender gap can also be observed in respect of living arrangement of the elderly: as against 46.83 percent of the female elderly (without spouse) live with their children and grandchildren and only 29.86 per cent of the males (without spouse) live with their children and grandchildren. However, the gender gap in this respect to the living arrangement is found to be higher in the rural area. The larger proportion of widows living with children and grand children explain two dimensions of the elderly i.e., feminization of elderly population and the dependency at the old age of the female elderly both in terms financial and familial support (Chaudhuri & Roy, 2007).

### Health Condition of Elderly

The process of biological ageing brings with it several accompanying health problems or diseases. It is obvious that people become more and more vulnerable to chronic diseases, physical disabilities and mental incapacities in their old age. The decline in the efficient functioning of the various organ systems of the body including the immune system renders the elderly particularly vulnerable to several diseases. At old age, the body becomes more prone to illness and due to deteriorating physiological conditions, elderly suffer from multiple and chronic diseases (Raju, 2011). Moreover, the existing gender gap in respect to health and ageing in India, asserts that elderly female compared to their male counter parts are likely to experience more adverse health conditions, illness episodes, disabilities and hence, greater difficulty in physical activities (WHO,2007 and Agrawal, 2011). Women are often observed to face inequalities related to health care which are invisible within the discourse of ageing policy in India (Davidson P., M.M. Digiacomio, and S. McGrath J, 2011).

The **Table-6** shows the prevalence of chronic disease in India. It is observed that the heart disease is the major chronic problems among both male and female elderly. Prevalence of heart diseases amongst elderly males and females is higher in urban area than in the rural area.

**Table-6: Number of person (per 1000 persons) aged 60 years and above reporting a chronic disease by place of residence and sex (India)**

Types of Chronic Disease	Rural			Urban		
	Male	Female	Total	Male	Female	Total
<b>Whooping cough</b>	8	6	7	4	2	3
<b>Ulcer</b>	37	54	44	30	24	27
<b>Problems of Joints</b>	30	40	34	26	45	35
<b>Hypertension</b>	23	53	36	50	59	54
<b>Heart Disease</b>	95	59	80	165	162	164
<b>Urinary problems</b>	78	28	57	89	33	63
<b>Diabetes</b>	30	52	40	68	36	53
<b>Cancer</b>	18	36	26	25	25	25

Source: NSSO 60th round (Jan-Jun, 2004)

Among the elderly males, most common problem was urinary problem. It was 89 in the urban area and 78 in the rural area. On the other hand, elderly females reported to suffer from hypertension (i.e., 59 female in the urban area and 53 in the rural area). Thus, there exists a gender gap in respect of health conditions of the elderly: female elderly in the rural area, in particular, are found to be more vulnerable to chronic diseases compared to their male counterparts.

### **Economic Profile**

#### **Participation in gainful employment**

Lack of financial resources is one of the major problems of the Indian elderly and it seems to be of higher degree among the female elderly in comparison to their male counterparts (NSSO 60th round). Moreover, the loss of economic independency arises with the increase in age. Financial problems are more common among widows and also among the elderly who live in nuclear families.

Regarding the status of gainful employment among the elderly (**Table-7**) it is observed that only 33.8 percent were engaged in the productive work and the percentage of participation amongst the male elderly has been significantly higher (53.1 percent) as against their female counterparts (14.6 percent). The rural-urban break up shows that the percentage of the engagement in gainful employment amongst the elderly in the rural area is higher (38.2 percent) than their urban counterparts (20.0 percent).



**Table-7: Status of gainful employment among the elderly in 2004 (in %)**

Status	Rural			Urban			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Economically Active	59.3	16.7	38.2	33.0	8.0	20.2	53.1	14.6	33.8
Non Active	40.7	83.3	61.8	67.0	92.0	79.8	46.9	85.4	66.2

Source: NSSO 60th round (Jan-Jun, 2004)

In most of the cases, engagement in gainful employment, on the part of the elderly are found to be under compulsion, as most of them are poor. The high levels of work participation among the elderly implies that majority of them work to avoid the economic and social crisis, that, they faced both within and outside the family set up. Thus one of the critical issues raised in the high levels of work participation is that “for poor elderly people there is only one retirement, not from work, but from the world’ (Mishra and Sarma,1999).

**Access to property and financial assets**

A striking gender differences can also be observed in respect of property and financial asset. This significant difference is due to perhaps, limited implementation of inheritance law in both urban and rural area. It is also observed that more than three quarters of elderly male in rural and urban areas owned properties while, it is less than half of elder female have their access to property and financial asset. (Table-8).

**Table-8: Access to Property and financial assets among older persons and widowed persons:**

**by gender and place of residence**

	Rural			Urban		
	Male	Female	Difference	Male	Female	Differences
<b>Older Persons</b>						
Own property	81.9	47.9	0.6	76.5	43.4	0.6
Own and manage property	65.7	21.6	0.3	62.3	20.0	0.3
Own financial assets	70.3	41.2	0.6	71.3	38.5	0.5
Own & manage financial	56.7	18.9	0.3	58.6	17.6	0.3
<b>Widowed Persons</b>						
Own property	73.6	44.0	0.6	66.1	39.8	0.6
Own and manage property	50.5	18.0	0.4	46.0	17.9	0.4
Own financial assets	64.2	36.1	0.6	62.6	33.3	0.5
Own & manage financial	44.9	15.1	0.3	44.7	15.2	0.3

Source: Kodoth and Irudaya Rajan, 2008

Widowhood is a source of particular vulnerability amongst the female elderly in India (Mishra and Sarma, 1999). Females, in absence of the spouse, at the older age usually confront with various difficulties in their socio-economic lives. Non-accessibility to the ownership and management of the property and financial assets of the female elderly aggravates their vulnerability in their widowhood. Property ownership is also closely

related with the higher likely hood of living alone for the elderly women, particularly the widows (Chaudhuri & Roy,2007). **Table-8** shows that the proportion of widowed persons having accessibility to ownership of property (73.6 percent of men and 44.0 percent of women), is lower than elderly in general (81.9 percent of men and 47.9 percent of women). A similar trend of the elderly is also observed in both the urban and rural area.

### **Economic dependency status of the elderly population**

Economic dependency of the elderly people shows basically an account of working versus non working sections in the population. This means the burden of the 60 years and above segment of the population will have to be borne by a relatively smaller group of population (i.e. 15-59 years). In India economic dependency of the elderly has raised mainly two issues, income and housing insecurity. Rapid urbanization and increasing mobility of the people in the phase of socio-economic transformation in India, have broken down the traditional family support system and the house-hold of many elderly people (Agrawal, Lubet, Mitigang, Mohanty, and Bloom, 2016). Off course, poor elderly in general and female elderly in particular are exposed to these vulnerability. The following table depicts the dependency status among the elderly by gender and place of residence.

**Table-9: Economic dependency status among the elderly by sex and place of residence, 2004-05**

Dependency Status	Rural (%)			Urban (%)			Total (%)		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
<b>Old Persons</b>									
Not Dependent	36.4	24.7	30.	38.6	22.4	30.4	37.2	23.8	30.6
Partially Dependent	18.6	17.1	17	16.0	13.4	14.7	17.6	15.6	16.6
Fully Dependent	45.0	58.2	51.	45.4	64.2	54.9	45.2	60.6	52.8
<b>Widowed Persons</b>									
Not Dependent	33.3	2.4	18. 0	38.1	17.3	21.7	34.8	14.3	19.3
Partially Dependent	14.5	11.4	12. 2	13.9	9.5	10.4	14.3	10.7	11.6
Fully Dependent	52.5	76.2	69. 8	48.1	73.1	67.9	50.9	75.0	69.1

Source : S. Irudaya Rajan, ILO Asia Pacific working paper series, 2010.

It is evident from the above **Table-9**, that there are 52.8 percent as fully dependent elderly in India. Female elderly ratio is observed to be 60.6 and it is 45.2 for male elderly population. Rural urban breakup of the elderly population shows a significant gender gap. It is observed that in all the categories, the status of elderly females is found to be high compared to their male counterpart. The same trend is also found in case of widowed elderly population. A high dependency ratio implies a stressful life of the elderly (those who live below the poverty line) in general and women in particular and hence they need more economic support (Rajan, 2010).

### **Conclusion**

On the whole, we can conclude that due to the ongoing demographic transition, India faces major age structure changes with an accelerating growth in the aged (60 years and above) population. The proportion of elderly female to elderly males has been found higher than in the general population for all the years since independence. Widowhood and living without spouse is one of the real challenges for the elderly in India. Among the elderly people only two categories, namely those who live with spouse, children and grandchildren and those who live with children and grandchildren but without spouse, are predominant among the Indian elderly. In India only one third of the elderly are engaged in the productive work while it is significantly higher amongst male elderly than their female counterparts. Elderly females were more economically dependent either fully or partially. Ageing has been an essential part of the health care delivery system because it is associated with physical illness and disability. But the general poverty, lack of medical facilities, inadequate health insurance policy for the elderly particularly for the poor elderly, inadequate coverage of Government social security policy in India (in the unorganized sector) etc. have made the lives of the elderly vulnerable. Rural elderly are worse sufferers while, women elderly, particularly in the lower economic strata are the worst sufferers of the problems of the old age.

Thus, the findings of the present study raised issues for formulating appropriate policies and programmes meant to improve the quality of the lives of the elderly in general and female elderly in particular.

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