

AGED WOMEN IN MIDDLE CLASS AND POOR FAMILIES: A SOCIOLOGICAL STUDY IN SILIGURI

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BY

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August, 2017

DECLARATION

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ABSTRACT

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The study explores and focuses on the effects of socio-economic status and social class on the life of elderly women through a comparative study between the elderly women belonging to two different social classes (i.e. middle class and poor families). The study aims to explore and comparatively study the various dimensions of their life which includes their (a) Economic status: Nature and extent of their economic problems and the ways through which they solve these problems and adjust themselves in the family are comparatively assessed. (b) Social status: Changes in the status of the elderly women of these two classes, effect on their roles, how and to what extent their loss of roles affects them are studied comparatively. Their perception as being felt by their family members, the nature of their participation in social roles, their social acceptance in the family and outside it; and their various needs are also investigated simultaneously. (c) Health care and support: Nature and extent of care and support extended to them by their family members are also probed into and comparatively assessed. The present study attempts to view these factors in the light of the Activity theory of ageing. Limited study in these areas and its greater significance in government's policy formation are the main motivations for undertaking the study.

The Municipality area of Siliguri, subdivision of the Darjeeling district, West Bengal is the area chosen for the study. The sampling unit for the investigation are, women aged 60 years and above. A total of 100 samples are drawn, with equal number of samples (i.e. 50) from both the categories. Samples from each category are selected purposively on the basis of their Class, Marital status, Age Group, Educational status, Pattern of Living arrangements, Physical condition, Participation in work and Economic status. Necessary data and information are collected through direct contact with the target group, through intensive field work, home visits and personal interview with the respondents with the help of interview schedule and observation. Poor elderly women, suffer more from economic problems, inspite of their higher participation in work force and inspite when having a source of income. The frequency of meeting their needs with priority, fulfillment of their needs and satisfactory monetary support received by them are highly dependent on having a source of income and their participation in work. The middle class elderly women on the other hand continue to enjoy the above factors at a higher frequency,

inspite when they are non-earning or are non-working. Besides these, unlike the middle class, participation in work force and having a source of income is responsible for the lesser dependency of the poor elderly women on their family members for meeting most of their expenses and needs. Although, as compared to their middle class counterparts, a significant number of poor elderly women, inspite when working report absence of satisfactory monetary support and lower frequency of meeting their needs with priority by their family members.

Middle class elderly women continue to enjoy a higher level of importance and acceptance from their family members. Most of these elderly women are still consulted by their family members on issues of decision making and management of the household, as compared to their poor counterparts. This indicates higher acceptance of the middle class elderly women among their family members than those belonging to the poor families. Higher social acceptance of the middle class elderly women can also be confirmed by the diverse and wider range of activities performed with their children/ grandchildren and spouse, unlike their poor counterparts. On the other hand, social networks of the poor elderly women are found to be much wider. Their active participation in these leads to their higher level of social acceptance outside the network of their family and kins. This in turn proves to be much helpful in providing them a large extent of financial, social and health care support, for which the middle class elderly women most often depend on their kins and family members.

Moreover, a higher proportion of middle class elderly women show adjustment regarding their loss of job and their changing status and importance in the family. Their satisfaction with regard to the fulfillment of their needs and priority assigned to the same, care taken by their family members, amount of time spent with them by their family members and the changes experienced in their social relationships are also higher than their poor counterparts. Moreover, unlike the poor elderly women, a positive perception towards younger generation and towards the changing social systems is also reflected in case of those belonging to the middle class. The company, love, care and support of their children however, are the primary needs of the elderly women at this age, irrespective of their class. This is followed by the need for some financial support, especially for medical expenses. Besides these, socialising and travelling to relatives and friends, need for security, need for physical rest, need for mental happiness, enough money to spend on themselves are some of the needs that they express.

Dependence on family members for medical expenses and assistance sought at the time of illness is found more, among the middle class elderly women, On the other hand, the poor elderly women are found to depend more on self-income for meeting these expenses. Besides this, a higher reliance on friends and neighbours for meeting these needs, in case of poor elderly women are also found. Role of daughters are also found to be highly significant in these issues, irrespective of their class.

Activity theory of ageing, is not found to be fully relevant for the study, as having a source of income and not only participation in work is found to determine their fulfillment and priority assigned to their needs; and their status and acceptance in their family. Besides these, their class, educational status, marital status, earning status of their husband and their living arrangements are also found to have a significant impact on the above factors.

PREFACE

This study contributes to the understanding of the different dimensions of ageing in the light of social class, participation in economic and non-economic work and active participation in different social roles. Class has a significant impact on the life of the elderly women in determining their educational status, nature of occupation of their own and of their spouse, resources held by them and their participation in economically gainful work. This in turn affects their economic and social status in the family; and in determining the extent of health care and support received by family members. Elderly women of the poor stratum though are economically more self-reliant and active than those of the middle class, but their poor educational status, nature of their work, socio-economic background of their family often fail to provide them control over their own resources and fail to ensure their acceptance among their family members. Besides these irrespective of class, the above factors are also found to have a significant bearing on their adjustment to role loss and changes experienced by them at old age; and the extent of care and support received from their family members. Widowhood is found to increase their dependency on others and lower their acceptance in their family, especially in case of poor families where she is economically inactive. This study gives a critical perspective of the Activity theory of ageing in looking at their economic status and dependency, social status, social acceptance, role losses and the health care and support received by them.

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CHAPTER: 1

INTRODUCTION

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Ageing as a biological process is an inevitable phase in the life cycle of every human being. However, the age or line that demarcates 'Old age' from adulthood is still quite vague. This is due to the fact that the concept of 'Old Age' does not have the same significance in every society. Though in Demographic Analysis, age 60 and above is taken as the parameter to define 'Old Age' but there are many societies where 65 years is considered to be the cutoff point at which people become eligible for all the old age benefits.

Old age, a growing problem today all over the world has become an issue of great concern not only for the demographers but also for the government, economists and policy makers. Some scholars have referred this phenomenon as the '*Age Quake*' or the '*Greying of the population*'. This phenomenon has shaken the very base and socio-economic structure of our society. Demographic factors like decrease in the fertility and mortality rates especially due to better education, nutrition, knowledge, awareness and better medical facilities have led to the increase in the number of elderly person in the general population. However, this phenomenon till recently had been a feature only of the developed countries of the world but it no longer confines itself to the same and is rapidly becoming a feature even of the developing countries, like India. In the year 1959 the total population aged 60 years and above accounted for 8 percent of the total population, which is expected to increase by six fold (i.e. 14 percent of the total population) by the year 2025. Moreover, till 1960 half of the elderly population was living in developing countries, which is expected to rise to more than three quarters by the next century. It is also expected that during the year 1980 to 2020, about 75 percent of the additional number of the global elderly population, would be in the developing countries and while the population of the developing countries is expected to increase by 45 percent over the same period, their elderly population will increase by more than 80 percent (Sen, 1994). With the increase in global elderly population and the demographic transition experienced worldwide as a result of this phenomenon, India has also witnessed a similar transition. India currently ranks fourth among the countries which have a large number of elderly population in absolute number. India's 60

plus population is growing at an alarming rate and the 80 plus segment of the population is growing even faster (Vasantha & Premakumari, 2000), (Lalitha, 2000). The population in the age group of 60 years and above was 4.57 percent in 1961 which went up to 5.14 percent in 1981 (Chowdhry, 1992). 50 percent of the world's elderly population lives in Asia, out of which 23 percent live in India, where the number of elderly population has increased from 12 million in 1901 to 57 million in 1991. It is estimated to be 326 million in 2050 (Behera, 2007).

The increasing rate of '*Greying of the population*' in the developing countries of the world, especially in a country like India has far reaching consequences. It not only poses challenge to the socio-economic structure of the country but also to the elderly persons residing herein. Especially the kind of social changes that India is undergoing since the past few years due to the effect of modernisation, westernisation, urbanisation and globalisation has a severe impact on the elderly persons residing in these countries. Such changes include breakdown of the joint family system, changes in the role of the family, empowerment of women and changes in their role, rising competition in the job market and increasing importance of modern technology, weakening of the interpersonal relationships within the family members etc. In the face of all these changes, it is the elderly persons who get deprived of their authority, role and even of the care and attention needed at this age.

Another dimension of this greying of population is the sex ratio of this elderly population, which exhibits a larger proportion of females than males. Even the group of the oldest old i.e. 80+ population marks the predominance of females. Almost 65 percent of the 80 plus population are females. In 1995, 77 percent of the centenarians were women and by 2050, this number is expected to increase to 84 percent. It is found that women outnumber men in almost all countries of Asia and this factor can be attributed to the greater life expectancy of females than males (Dhar, 2004). In the year 2002, sex ratio (men per 100 women) for the 60+ population was 91:100 and reduced to 81 for men in the age group of 80+ populations (Datta, 2004). This phenomenon of the increasing number of females in the ageing population is referred by many scholars as the "*feminisation of ageing*" which is occurring worldwide and India is also not an exception in this case.

The feminisation of aged population will have significant consequences, especially in a country like India. Indian society, being patriarchal in nature expects a woman, since her birth to be socially and economically dependent on the male members of her family. Throughout her life

she is expected to depend on her male kins, mostly her father, husband and sons. This dependency of a woman on her male relatives, throughout her life time cumulates in old age. Moreover, ageing also aggravates this dependency when even for minor things, majority of the women are found to depend on their male kins, especially when it comes to their protection, support, and decision making. Many studies reveal that in India even today, the elderly male acts as the decision making authority and head of the family. Decision making is still believed to be the domain of men where females have very little say. Studies conducted in these areas also points out that they are not only the poorest and the most vulnerable section of the population but are also more disadvantaged than their male counterparts. This is mainly due to the inequalities faced by them with regard to education, health, nutrition, income, ownership of property and resources which in turn drags them to a more vulnerable position in their old age, especially in case of absence of their husband.

Widowhood has been truly regarded by many scholars as the “social death of a woman”. Society attaches many taboos with widowhood starting from taboos associated with some food to participation in rituals and ceremonies. In a country like India, widowhood deprives a woman not only of her resources but also many of her social rights, status and roles that she enjoyed previously and hence makes her completely dependent, especially during her old age. While taking a look at the demographic profile of the ageing population, we can clearly see the higher proportion of the widows as compared to the widower. This fact can be attributed to factors like lesser age of the females than their husband at the time of marriage, more tendencies of men to remarry after losing their spouse and lastly longer life expectancy of women than their male counterparts. Several studies pointed out to the poor economic condition of the elderly widows in India. In these studies some cases of widow abuse are also reflected. These abuses include verbal, physical and financial abuse from the younger members of the family. Lack of awareness and access of the elderly women with regard to the economic and property related matters leaves them vulnerable and open to exploitation and abuse even by their close relatives.

Economic and social dependency of a woman on their male relatives is a common phenomenon in Indian society still today. This is mostly due to the fact that inspite of several efforts towards women empowerment and self-sufficiency, majority of the women in India still do not go out to earn money. Since her very childhood she learns to depend on her male kins especially for the fulfillment of her economic and financial needs. On the other hand, the family related roles and

responsibilities are considered to be her first priority. These gender roles get imbibed in her since her childhood and restrict her in many cases from choosing a full time career in the future. Hence throughout her life she keeps herself primarily engaged in non-remunerative domestic works, which does not guarantee her any security in old and in case of disability. Studies reveal that even in case, where they are able to overcome these factors, and have taken up an employment, their employments are often found to be guided by family considerations. Thus, a large portion of them are either found to take up casual employment or remain underemployed with interrupted careers so that they can simultaneously carry on their family responsibilities. Moreover, in some cases it is also found that even being financially independent she can hardly claim any independent identity of her own. This dependency status often leaves the elderly women with no resources or a very little resource to support herself during her old age.

On the other hand, India being a patrilineal society, the women are also deprived when it comes to the inheritance of property. Though many laws are passed to ensure property rights to women but in most cases they cannot guarantee these rights to women in real sense. Moreover, when it comes to the ownership of property, it is often thought to be a male business and in most cases women are regarded as incompetent in this matter. Thus in India, most women do not own property and even where they do they are often found to be guided by the male members for the management of the same. Studies conducted on elderly women reveal that the rate of unemployment, low level of income, less ownership of property is much higher among the elderly women than their male counterparts. Moreover, these factors are highly associated with the wellbeing of the elderly women in the later years, as they tend to influence not only the economic status or the resources available to them but also their social status, like the level of authority, degree of their acceptance in the family, care and support extended to them and even their social adjustment. Thus, it can be concluded that the '*feminisation of ageing*' will lead a major segment of women to a triple jeopardy, firstly due to their gender i.e. being a woman in a patriarchal society, secondly in most cases being economically dependent and thirdly being an aged. The situation is worse in case where she is a widow or disabled. Thus, this section of women can be referred to as the most vulnerable.

All elderly women, irrespective of their financial, social, educational, and marital status are faced with a feeling of emptiness in the later years of their life. Though, its intensity varies depending on many factors. As discussed earlier majority of Indian women give prime importance to their

family and to their immediate kins, hence they lead a family centric life throughout their lifetime. Even when engaged in any employment, family remains their first priority. Thus slowly and gradually their social world, their happiness, their grief, their success, their failure starts revolving around their relatives and family members. Studies conducted on social relationships of elderly women shows that in case of a large number of women their social relationships centers around their immediate kins and relatives. But it is quite unfortunate that when the same women becomes old and depended she is thought to be a burden, loses her importance and is often cast aside by her family members. This often leads to deterioration of her social relationships especially with their immediate kins. “As their children grow up and marry their position and status in the family deteriorates even further” (Datta, 2004), which in turn results in isolation and loneliness. Moreover, at this stage, the elderly women generally suffer from a feeling of insecurity and role loss, often due to the takeover of the management of the household affairs especially the kitchen affairs by her daughter in law. This often results in difference of opinion and even at times gives rise to conflicts in the family, deteriorating her social relationships further.

Moreover, many elderly women find themselves lonely and alone after being separated from their adult children As a result of urbanisation; now most adult children migrate to other cities or foreign countries for further education or in search of better jobs leaving behind their old parents in their native places. Studies on this aspect reveal that the conditions of such women are worse, as at this age what one requires mostly is the emotional support and company of their own children. Monetary support or any kind of material benefits often cannot substitute this support for them. As pointed out by several studies, old age demands both emotional support and physical care from one’s own children thus, separation from them at this age results in the feeling of loneliness, frustration, anxiety and insecurity among the elderly women. These studies also reveal more frustration among the elderly women than elderly male with regard to the absence of their children. In many cases, instead of getting the care and support of their children needed at this age, they are often forced to manage almost every affair by themselves, taking care of their ailing husband and remain dependent on friends, relatives, or neighbours for help. Moreover, such a situation, not only deprives the women from the company and support of their children but also alienates them from their grandchildren, which is a major source of joy and happiness during old age

It is also to be noted that the gender roles of our society, promote the notion of women's role within the boundaries of the four walls. These gender roles are also responsible for the low level of social network available to them as compared to their male counterparts, throughout their life and especially during their old age. Several research points out to the fact that social networks in old age not only prove helpful in reducing psychological problem and feeling of isolation among the elderly person but also has a positive relation with their adjustment. These studies even highlights that elderly women have more kins and blood relatives in their social network i.e. their social networks are often limited within the family. These factors can be attributed to women's role within the family and their involvement in care giving.

It is well known that during the past the family and society used to assign much importance to its elderly members. They were entrusted with high status and respect. Not only in the family but also in the community, an elderly person was treated with respect and was considered as a source of knowledge and wisdom. In the family they were the supreme authority and ultimate decision maker. Even the status of elderly women in such societies was quite high. In the family especially in household affairs they used to enjoy an authoritative position. All the younger members of the family, including her daughter in laws used to treat her with respect and attended to all her needs. Moreover, in such societies due to the lack of modern technology, face to face interactions were common among the family members, these close interactions with the family members and the company of her children and grandchildren provided her the needed emotional support. These elderly women not only enjoy the authoritarian position in the family due to her age but also because of the knowledge and experience associated with her seniority. Moreover, the roles performed by her in the family were also of huge importance. These societies were self-sufficient to a large extent with almost no dependence on the paid services for family support. Thus all the functions related to the household were performed by the females of the family, and the task of management of the same was taken up by the elderly women of the family. All these gave them a sense of importance and authority within the family. Hence role loss, feeling of insecurity; isolation, loneliness was not so prominent among the elderly women during that period. Besides this, the joint family system, served as the main institution where even the widows, the old and the disabled were looked after and taken care of by their own relatives.

Today due to the impact of modernisation and westernisation, the elderly people are experiencing a sharp decline in their status and the case is even worst in case of elderly women

who are reported to be the most dependent section. Social changes experienced due to these factors mainly the gradual breakdown of the traditional joint family structure, reduction in family size, changes in the role of women, introduction of modern technology and highly competitive forces of living have far reaching consequences for the elderly women in our society. Moreover, due to the highly competitive job market and highly demanding forces of living, majority of the adult children are constrained to discharge their duties towards their parents. This is also resulting in reduced interaction of the elderly person with their children which weakens their social relationship resulting in loneliness and isolation. In some cases, the health care and medical support of the elderly persons demands such high expenses that it becomes difficult for a middle class family to afford or cope with the same. These results in the negligence of a large section of elderly people who are subjected to abuse at times and hence are leading a vulnerable life.

Studies points out that modern industrial society characterised by rapid technological progress has made the aged unfit for the present generation. At present, the age or the experiences associated with it have lost much of their value. Contemporary society attaches high value to the education, occupational status, profession, skills, intellectuals and material achievements, and resources held by the person. Various researches on elderly women in India reveal that they form a section of population who are much less employed, less educated, less skilled, holds lesser resources than their male counterparts. Thus when these achieved qualities are counted upon, the elderly women's position deteriorates even further.

On the other hand possession of the knowledge and skills of modern technology makes the younger generation more resourceful and lifts them to the position of supremacy both in the family and society and the elderly members become more dependent. In addition, the already dependent woman becomes much more dependent as her age progresses and simultaneously her position of authority declines further. Moreover, in modern India, all the functions of the families have been taken over by specialised agencies and paid help like providing education, providing recreation, attending to pregnant women, prenatal and postnatal care of the mother and the child etc. which have led to role loss and have further declined the status of aged women. Several studies in these areas have pointed out to the declining status, self-esteem and authority of the elderly person as a result of the loss of these functions which have been attributed to the changing cultural and pattern of social system; and changing attitude of the younger generation.

However, the other side of the picture also cannot be ignored. In India even today, inspite of the forces of Modernisation a considerable proportion of the youth still cherish their traditional values, and thus prefer to serve their parents at home, instead of sending them to old homes. Some of these aged parents still holds an authoritative position in the family and continue to receive respect and care of their children. Moreover, many elderly people provide financial contribution to their family and provide economic support in cases where the children are unemployed or does not have sufficient income. This fact can be supported through studies conducted by various scholars from time to time. This reveals the fact that family ties are still alive in Indian society.

Social Situation of aged women belonging to different economic sections or social classes of the society though are apparently the same but these social classes play a major role in influencing the experience of old age. Studies points out that the factors that influence the class position of a person are Occupation, Education, Income, Ownership of Property, Resources held by the person in old age etc. Some other factors also associated with it are Power, Authority, Opportunities, Social Adjustment Family support and care. Thus the impact of social class is “largely a matter of accumulated advantage or disadvantage built up over a lifetime” (Moody, 1998). Hence the importance of class in analysing the social situation of the elderly women cannot be ignored.

Economically well off women of the middle class families are often faced with insecurity and isolation. In most cases their economic affluence or self-sufficiency does not prove to be enough to grant them a sense of security at this age. Factors that generally prove be to more effective is the companionship of their children and grandchildren. As been discussed earlier, the forces of modernisation and changes associated with it are responsible to a large extent for the degrading condition of elderly woman. Due to the changes in the social structure and forces of living, the youths are often overburdened with the responsibilities and demands of their workplace and family. These often lead to the neglect of the elderly members of the family, especially of their emotional needs. Hence the elderly people are often faced with an emotional gap in their life. The family members being too busy in their own affairs often have no time to give them company or attend to their needs Besides this due to the changing role of women, many women now are stepping outside the home for job and career, leaving the elderly members at home alone, with no one to look after or to take care of them. In such cases the family has no other

option but to appoint a paid help or to seek help of paid care givers. But care and support from these paid caregivers often does not help in subsiding the insecurity and loneliness of the elderly people. Besides these, middle class elderly women are often faced with role loss, mostly when their physical capabilities do not permit them to participate in many physical activity including household chores or in the rearing of their grandchildren. However, the situation is different in case of women who are physically active. Moreover, in these families the household chores are mostly performed by paid help which also limits the scope of the elderly women to participate in these activities.

In case of working women her retirement also exaggerate her problem. The old women in such cases feel useless and lonely and are often faced with many psychological problems due to this change in status and role loss. Studies on this issue highlights that retirement has great significance in the life of an elderly person, because it means not only economic dependence, reduced income but also loss of social relationship and authority, reduced social acceptance and increased dependency. There are however exceptions to this, and there are instances where many of them participate in social activities and maintain their social networks in order to reduce their feeling of isolation. Moreover, there are even instances where their role loss as care givers in the family does not take place and they continue to enjoy their previous status in the family by maintaining cordial relationship with their children and family members.

On the other hand, the elderly women of the poor families are more often faced with financial problems, “having spent all their hard earned money on children’s education and marriage, they are shell-shocked when their offspring refuse to give them shelter... they are considered as an extra moth to be fed” (Kumar, 2000). Thus the condition of such women without resources is more vulnerable. Lack of resources not only limit their access to medical aids but also have a negative impact on the level of care and support from their family members. Moreover, the condition is worse where she is disabled. Disability often limits her physical activity and also restricts her gainful contribution in the family. Such woman is regarded as a burden and her health and other needs become secondary for the family members.

The separation of the elderly women from their adult children due to marriage or due to their migration for career and employment has become a common phenomenon and is most commonly visible among the middle class families which often results in the loss of their parental role. Moreover, a much larger proportion of elderly women belonging to the poor

families are found in the labour force when compared to those of the middle class. This reflects the fact that loss of activity is much earlier and more prominent among the middle class elderly women than among the elderly women belonging to poor families without enough resources. Moreover, the poor aged women working in unorganised sectors often do not have to face the problem of post retirement. Instead, these women continued to work inspite of physical disabilities and health problems in order to provide financial support to the family and at the same time had to perform household activities like looking after the grandchildren etc. because more often due to financial problems they cannot afford paid help. The women 'who do not retire at all like the housewives and people from unorganised sector like the farmers are able to cope with the situation arising out of old age much better' (Muthu & Arumugam, 2000). Though the situation is different in case of women, working in organised sectors who generally to some extent faces the post retirement problems much similarly as the middle class retired women.

It has been pointed out by many studies that women without or with little resources not only have to face problems with regard to their care and support from their family members but also face serious deprivation when it comes to their health care and medical aid. Families with poor financial position often face difficulties in affording the expenses of medical care for the elderly women. Situation becomes worse in case of disability and where she suffers from recurrent problems due to any chronic disease. In such cases their needs and health conditions often becomes secondary for the family members. Studies show that these women either suppress or neglect their ailments or takes resort to some free or less expensive services for seeking medical aid. Some of these studies also points out that seeking of medical aid or treatment though are much common among the elderly persons but it is less sought by elderly women than the men (Audinarayan, 2012b), (Nasreen, 2009) and (Raj, 2012). Thus "the woman of the poor families faces serious deprivation when it comes to their health, their health status is worse when compared to the average health status of the women belonging to the middle class family" (Harris, 1983).

Hence it can be understood that the social situation of every elderly woman in our society is not the same. The extent of their social acceptance both inside and outside her family; degree of role loss and their perception towards it; changes in their decision making authority in the family and in their intergenerational and social relationships; and the level of care and support rendered to them by their family members all depends on their socio- cultural and economic background i.e.

the social class to which they belong to. This fact has been highlighted by several studies (Moody, 1998) and (Bhatia, 2013).

Thus in the present study an attempt has been made to find out the effect of socio-economic status on the life of elderly women. In order to do so the study seeks to comparatively study the elderly women belonging to two different social classes. In this context, the study looks into various dimensions of their life which includes their:

- **Economic status:** Nature and extent of economic problems and their adjustment towards it.
- **Social status:** The extent of their social acceptance, degree of their role loss and their social participation both inside and outside the family
- **Health care and support:** Access to health care services, and care and support extended to them by their family members.

Here it is worth mentioning that though socio-economic differences can be observed simultaneously among all the three existing social classes (i.e. the upper class, middle class and the lower class or poor families) but the present study will only restrict itself to two categories, i.e. the middle class and the poor families.

'Middle class' is the 'social class between the upper and lower, including professional and business workers' ("Middle class," 1994). The Dictionary of Sociology, states that " It is a strata between upper and lower classes...often identified through occupations like white collar jobs and at times through income and life style" ("Middle Class," 2009). Moreover, according to the Sage Dictionary of Sociology, the term refers to 'non-manual workers'. It also states that "the division between middle and working class is not economic but it is social and cultural". ("Middle Class," 2006). Besides these many sociologists have tried to define 'middle class' in terms of their family income, ownership of assets, pattern of consumption etc. however, in the present study the concept of '**middle class**' is mainly restricted to:

- Families whose members belong to professional and intellectual groups like the service holders, doctors, lawyers etc. and
- whose primary source of income comes from non-manual work.

On the other hand, as the study is conducted in an urban area, the definition of poor families, has been restricted only to the poor families of urban areas or the "**urban poor**" which comprises of "the migrants from rural areas due to economic reasons that enforce them to join the informal

sector in urban centers due to illiteracy and lack of any specific skills. The informal sector provides low wages and they live in places known as slums, squatters and pavements which are devoid of proper sanitation, water, nutrition etc.” (Center for Urban Studies: The Indian Institute of Public Administration, 1987). Thus in the present study, the families who are included under the **‘poor’** category include those:

- who are mostly slum dwellers, pavement dwellers,
- earning their livelihood on daily basis in informal sectors like potters, carpenters, rickshaw pullers, cart pullers, vendors etc.
- or whose primary source of income come from manual works and whose members are mainly engaged in casual and unskilled or semi- skilled occupations like, labourers on construction sites or who are engaged in road works, or who work as domestic helpers etc.

The study restricts itself only to the above mentioned social classes and does not include the families belonging to the ‘upper class’. This is because ‘upper class’ families have their own unique features and dealing with the three simultaneously will make the study more elaborate and vast and it will get diverted from its objectives.

Another reason behind the attempt to undertake the present study is that, very limited studies have been conducted in the mentioned area. Thus undertaking research in the mentioned area will help to fill the research gap. Simultaneously the study will also be significant for policy formulation, as it might prove helpful for the government or other authorised policy formulating bodies in identifying the differences in the needs of the elderly women belonging to different social classes which in turn will enable them to formulate policies that will best suit the needs and requirements of these elderly women.

Hence, an attempt has been made here to comparatively study and analyse the socio-economic situation; and the health care and support received by the elderly women belonging to the middle class and poor families. For the purpose of the present study, the area that falls under the Siliguri Municipal Corporation is chosen. Siliguri is a town, situated in the Darjeeling district of West Bengal, though some areas of the town fall in the Jalpaiguri district of West Bengal as well. Being the gateway of North-eastern India and for being the economic and commercial hub of the

region, the place attracts huge migrants from the neighbouring countries of Bhutan, Bangladesh and Nepal and also from the neighbouring states of Bihar, Sikkim and Assam. It is for this reason, and also due to the rapid pace of urbanisation that the town is experiencing for few decades; the city attracted the attention for the conduction of the present study.

Theoretical approach of the study:

The present study will stand in contrast to the Disengagement Theory of ageing that observes old age as an inevitable withdrawal from the social system and views this withdrawal as functional for the society and a pre-requisite for the social stability. This theory also views decreased interaction between aged individuals and society as a universal and inevitable process that provides liberation to older people from following societal norms and duties (Willson, 2007). This theory ignores aged person's own view of ageing, his social need, his ability to participate actively in the societal affairs and even his contribution that might prove beneficial for the society.

Both the Disengagement Theory and the Activity Theory of ageing makes the functionalist assumption that middle age/ adulthood activity has to be maintained in order to maintain the equilibrium and stability of an individual's life. However, the Activity theory is built on the assumption that individuals are able to replace their lost roles and activities with that of the new ones, which would in turn lead to better adjustment and highest level of life satisfaction in the old age (Kart, 1989). The Disengagement Theory on the other hand holds that disengagement from all the roles and activities of the middle age is inevitable and is essential in order to maintain social equilibrium.

Thus in contrast to the Disengagement Theory of ageing, the study concentrates itself on the Activity theory of ageing- that draws a positive relationship between Activity, Life satisfaction and Social Acceptance in the later years. The theory believes that though ageing and the physiological changes related to it are inevitable but the emotions and social needs of an individual, even at this age remain more or less the same. The theory also believes that individuals who stays active and does not withdraw oneself from the activities of the social world are much well-adjusted and more satisfied in the later years (Kart, 1989).

Although, from its origin Activity Theory was based on the, equilibrium theory of ageing showing a positive relationship between Activity patterns and Life satisfaction but later on, this theory was reformulated into an interactionist perspective. This perspective draws a relationship between self and role, and the use of ‘reflected appraisals’ and social interaction to strengthen or support the self. This perspective thus looks at the socio-psychological relationship between specific activities and life satisfaction. Thus according to this perspective, meeting of functional needs is not the only motivation for maintaining or continuing the activity of the middle age, rather but the aim is to maintain a socially supported self-structure which is expected to lead to optimal self-satisfaction at old age (Atchley, 2006).

However, this study looks at various dimensions of the aged women belonging to middle class and poor families, from the functionalist version of the Activity Theory. According to this perspective, if the activity patterns of middle age/ adulthood are maintained or continued at old age, it would not only lead to the meeting of functional needs but will also bring about stability or equilibrium in one’s life which in turn will lead to maximum life satisfaction at old age. The functionalist perspective of the Activity theory is built on the assumptions and ideas that were forwarded by the Functionalist, Talcott Parson pertaining to system requirements (The Social System) (Giddens, 2006). This theory is based on four major concepts: - Activity, Equilibrium, Adaption to role loss and Life Satisfaction. It makes the functionalist assumption that the activity pattern maintained during the middle years in order to fulfill the needs of the individuals and achieve life satisfaction, should be maintained in the old age also in order to maintain the equilibrium (Atchley, 2006). Thus similar to the Structural Functionalist, it holds that in order to maintain the equilibrium, the lost activities, and roles are to be replaced and if this does not happen or if the roles are dropped or not continued, it would lead to lower life satisfaction. Moreover, it also holds that the most successful way to adapt to a role loss is to find out substitute role to satisfy one’s needs.

The various limitations to which this theory has been subjected to are:

- This theory assumes that individuals have a greater level of control over their social situations. It assumes that people have the capacity to create or reconstruct their life according to their wish. This might however, be true for few individuals, whose social

and economic resources allow them to do so, but for the one who does not fall in such category or who suffers a dramatic decline in income and health in old age may find difficult to reconstruct or create roles or activities, according to their wish.

- Secondly, this theory emphasises the stability of the psychological and social conditions throughout all the phases of the life cycle which might make sense for a person who has witnessed stability in his/her social and physical environment. But it has little meaning for a person who has witnessed a sudden and dramatic change in his environment, social condition and status due to retirement, widowed or due to poor health or disability at old age.
- Thirdly, another limitation of the Activity Theory is the expectations that activities of any kind will substitute for the lost involvement in work, marriage, parenting and other roles (Kart, 1989).

In spite of the various limitations of Activity Theory, unlike the Disengagement perspective, this perspective does not ignore the social need of an ageing individual, his ability to participate actively in societal affairs or his ability to beneficially contribute for the society. Hence, the present study takes this perspective into consideration while comparatively studying the extent of their participation (both inside and outside the family), degree of role loss and the extent of their social acceptance and its effect on them. It simultaneously also studies the extent of their economic problems and financial dependency, and the extent of care and support they receive from their family members.

Review of literatures:

In the following section an attempt has been made to review some books, journals and articles that are found relevant for the present study. In this context, it is to be mentioned that though books, journals and articles of both Indian and foreign authors have been reviewed in this section but emphasis are given on the Indian literatures, as literatures or studies conducted in Indian context are found more relevant for the present study.

The changing India's demographic landscape has been highlighted by **Dhar (2004)**. In particular, the fall in the mortality rate and the rapid rise of the 60+ population. His book argues that despite this scenario, India has not bothered to think about its aged population and neither has devised appropriate policies for them. It thus highlights the need to take up the cause of the elderly person and to create an environment, which would ensure their protection against various risks.

The book analyses the demographic and socio-economic condition of the ageing population of India in the context of Asia and identifies the factors responsible for increasing ageing population. It also investigates the factors that are responsible for faster ageing in some countries while slower in others. In this context, the book analyses the various complex issues relating to the flow of people such as migration, that alters age distribution population and its impact on the ageing. The book also facilitates demographic comparisons across regions with special emphasis on Japan, Thailand, and China

The book also introduces various ways in which ageing can be measured, including their potential limitations. It also puts forth the concept of ageing index and suggests the need to develop an Elderly Status Index that takes into account the casual factors of ageing.

Moreover, it also investigates the implications of the future trends and patterns of the ageing population. Its impact on the developmental sectors such as Health, Saving, Investment, Consumption patterns, Work force participation, Residence pattern, Migration, Social Security etc. are also studied. The author in this context identifies some major issues relating to the integration of the elderly people into the general mainstream of healthy and productive life.

The book investigates the status of elderly person in India and presents a comparative study of the status of the elderly people belonging to rural and urban sector of different regions. Their status is assessed from the combined roles of the factors like Life expectancy at age 60, Literacy level, Living arrangements, Economic independence, Retirement benefits, Ownership and control of wealth, Health status and Social interaction. Moreover, the book studies the change in their status over time and the factors responsible for such change. In this context, strong evidence is found of the growing incidence of the low level of wellbeing among the elderly people in Asia, particularly of India. The author here identifies the role of the family in supporting the aged individuals as one of the most important factor in ensuring a better life for them. It has also points out that breakdown of the family integration and weakening of the family support are the most important factors for their low level of wellbeing. Simultaneously the author

denies believing that social development results in worsening the condition of the aged individuals. He rather tends to believe that the aged individuals of the present time are the temporary victims of the demographic and economic transition and 'transition from wellbeing based on family support to a state of wellbeing in which institutional support is a major component'. Thus, he believes that their condition will improve with the adjustment in these factors over time.

The author realises that in order to cope with the rapidly changing demographic age structure, there is a need to create an environment, which could ensure the wellbeing of the entire population of the elderly people based on their full participation in the process of development and an equitable distribution of benefits that are generated in the process. He also argues in favour of 'Graceful Ageing' or 'Active Ageing' and suggests measures through which it can be achieved.

Chowdhry (1992) through, a historical perspective of ageing presents the social situation of the elderly people in the ancient Greek and Roman civilisation, where the elderly persons were treated with respect and awe. Along with that, he also highlights the various practices related to the treatment of the elderly people, prevalent in the primitive and prehistoric societies, which were sometimes kind and even at times brutal.

The author also points out that due to the diverse social values prevalent in the Indian society at present the position of the elderly people are quite uncertain today. Our traditional value tells us to respect our elderly people, whereas the forces of modernisation have led to the growth of individualism and places a different kind of demand on the young generation which brings about a change in their forces of living. Due to these factors, their children who migrate to a different place in search of job often prefer a separate living arrangement for them. Moreover, due to the increasing cost of living, increasing cost of medical care the younger generations are often faced with difficulty to look after or providing proper care to the elderly people, even if they wish to. Sometimes, they are often found to have a negative view regarding the qualities of the elderly people. Similarly, the young generations are also sometimes misunderstood and are looked upon as selfish and irresponsible person by the elderly people. Thus according to the author there is a need to reduce the gap between the two generations so that each other's shortcomings can be overlooked, misunderstandings can be overcome and cooperation can be achieved. The author

also feels that it necessary for the government to help the families in taking care of the elderly members by offering tax reliefs, involving social workers and setting up of Day care centers for them.

The growing number of elderly people in the society and their growing vulnerability due to the changes in the social structure has been highlighted by **Khan (2004)**. By presenting different case studies, the author point out to the changes that are occurring in the social structure especially as a result of the changes in the structure of the family. Family, which was once the only place to provide care and support to its elderly and dependent members are now breaking down due to the forces of modernisation. Also due to the changing market demands and the prevalence of the culture of consumerism, adult children are now migrating to the cities or abroad, living behind their old parents at the mercy of the paid help and the neighbours. These elderly parents not only suffer from the lack of security but also from loneliness, isolation and many other emotional problems. All they want at this age is not money but the company of their children.

Considering the present scenario, the author feels that the government should come forward for them and consider the elderly population as vulnerable as the women and children, and frame special policies for their empowerment. Moreover, the author suggests that the emotional vulnerability of the aged people could be curbed by socialising them on the problems of ageing and on the situation, which they might face at the separation of their children.

The alarming rate of increase in the global elderly population, including India and its implications on the Indian society is pointed out by **Nayar (1989)** in his study. While pointing out to the economic implications of ageing, he states that the increasing elderly population would lead to the increasing number of people outside the work force. Rigid economic structure, failure to provide sufficient employment opportunities and especially the 'statutory age of retirement' are some of the factors that he points out as the cause of decline in productive force ratio. According to him, these phenomena will not only have a greater impact on the society's productive power, but also on its saving and investment behaviour. He thus argues that these would lead to further vulnerable situation and insecure future for the elderly population driving them into the 'vicious circle of deprivation'. Moreover, while pointing out to the psycho-social

implications, he has talked about the factors like modernisation, industrialisation, urbanisation, erosion of values and privileges previously associated with the elderly people as the major cause behind their declining economic and social status. In this context, while pointing out to the status of elderly women, he comments that, “In a society like India, where both womanhood and widowhood are handicaps, the problem of ageing will assume a new meaning for women”. Lastly, he suggests ‘new roles’ and proper training on these roles to be provided to these ageing populations as this would help to reduce their dependency on the younger generations and hence would reduce their problems to a large extent.

In his study, **Ansari (2001)** observes that the increasing number of the elderly population, together with the social changes and the eroding traditional values associated with urbanisation and modernisation results in many socio-cultural, economic and health problems for the elderly people. He remarks that with the growing number of the elderly people (a considerable portion of which are unproductive) the dependency ratio has increased and this dependency ratio is higher in case of female elderly. The author also points out that this dependency on the younger generations results in their ‘changed attitudes’ with regard to themselves or negative self-perception among the elderly person and hence most of them consider themselves as a burden for the family members. The author believes that increased level of social support will solve many of the social and psychological problems of the aged people. Hence, beside good housing conditions, well balanced diet, and proper geriatric services as strategies for improving the conditions of the aged he also suggests the need for sufficient social support (which mainly includes close friends, relatives, family members, and members of the young generations) for the elderly people.

Karkal (1999) draws our attention to the growing population of the elderly people, especially the population of the elderly female in the Indian Society and their increasing plight. He argues that inspite of the fact that the proportion of the elderly population is increasing; our society lacks sufficient security and support system for them. He also argues that the condition of the elderly female is worst in this case, as due to the existing structure of the Indian society, its female population from their very birth has to suffer from various discriminations and their conditions worsen, as they get old.

In a similar way, **Gopal (2006)** also points out that in a society like India where the female population is among the most disadvantaged group the fact of rapid increase in their population has made this section an extremely vulnerable one. He points out that this section of population who are in great need of care and supports are not provided with proper security measures by the state. Moreover, according to him whatever social security measures are provided by the state, are made available only to a negligible portion of the elderly population, involved in the organised sector. Thus, elderly women of the Indian society who mostly devote their entire life in managing the household activities (which are not only unpaid but are also unrecognised) and most of whom are engaged in unorganised sector are deprived of the social security benefits from the state. The author remarks that though recently government has started various social security measures for the work force involved in the unorganised sectors but these measures are implemented only partially and still a large number of workforce engaged in the unorganised sector are deprived of it. Moreover, though the Government has started many social security schemes and benefits for the women who are destitute, widow, pregnant, mother with child, divorced and separated but little has been done with regard to elderly women who stay within her family. In case of such women, family is held responsible to provide for their social security and thus it is expected they will depend on their family members for their security and support during their old age. With the changing social structure and functions of the family in Indian society, the dependent elderly women are considered as burden for the family members and hence they neither receive any social security from the state nor from their own family. The author thus argues that unless and until the property rights of women and the prevailing traditional patriarchal norms of the society can be altered, the women of our society will continue to suffer and their sufferings will worsen at their old age.

Bhadra (2011) points out to the cumulative deprivation of the elderly women throughout their life due to their social position. The author remarks that the various problems, which the elderly women are faced with, in the society, are socially constructed and not the construct of the ageing process itself. The author realises that 'Gender' is itself a social construct and goes a long way in determining the 'quality of life' of aged women in a patriarchal society like India. By presenting numerous statistical data from various sources, the author highlights the picture of growing

elderly population in India and most importantly to the growing number of female elderly in the aged population. The state-wise comparison of gender gap in the life expectancy is also pointed out. The author also goes on pointing out to several factors which results in the gender gap in life expectancy of this age group and the various factors that determine the quality of life of women at this age. In this context, the several factors which the author identifies are widowhood, role loss, dependency, decline in social status and prestige, decline in physical stamina, low access to formal skill, health care, social support, and poverty. The author states that these factors along with longevity becomes a 'burden rather than a cause of celebration' for them.

Through various evidences, the author shows that 'Deprivation, discrimination, exploitation, and abuse' are higher among elderly women. Economic dependency is also seen more among the elderly women than men (who at some point of time in their life were engaged in some gainful employment). Whereas in case of women in the Indian society most of them throughout their life remain engage in non-remunerative domestic work or else are engaged in unorganised sector with no social or job security. Moreover, dependency is also found to be more among urban elderly population than among rural elderly population, who remain engaged in some or the other kind of activity until they become completely physically inactive. The author also points out that widowhood, illiteracy and dependency are the important determinants of the wellbeing of the elderly people, and these factors in India are found to be more among women than men. The author also highlights that decline in physical activity results in dependency, loss of social status, loss in decision-making power, role loss, decreased social interaction, and neglect of the elderly women both inside and outside the family. Thus, these factors have greater influence on the wellbeing of the elderly females and often lead to isolation, powerlessness, and feeling of low self-esteem among them. The author also points out that these factors coupled with lack of social security programmes results in vulnerability among elderly women. Thus, she suggests that they deserve special attention from the society, policy makers as well as from the state and with these in mind she recommends several policy actions for the welfare of the elderly women.

A study has been conducted among the male pensioners by **Reddy (1989)**. The author finds that nearly 61% of them even after their retirement act as the decision maker of the family relating to the financial matters. While examining their relationship with the family members it is found that their relationship with their children has strained after their retirement. It is also found that the

cordial relationship with the children depends on the level of affection shown by the elderly people towards their children and on the fulfillment of their needs by the elderly parents. Daughter-in-laws are reported to have 'poor relationship' with the elderly people especially in case of the oldest respondents. On the other hand, Grandchildren are reported to be the 'best companion' of the elderly people who have the strongest attachment with them. In this case, the author observes that there is an increase in the number of elderly people having the companionship of their grandchildren with the advancement of their age. While examining the degree of financial support received by them from their working children it is found that less than 50% of the elderly people are receiving satisfactory support from their children while two-fifths are receiving financial support, the amount of which is not satisfactory.

A significant association between the working status of the elderly people, economic contributions made by them and their acceptance by the family members is reported by **Yadava, Yadava & Sharma (1996)**. The study reflects that 38% of the non-working elderly population are faced with an inferior behaviour. Moreover, 74% of them who are making economic contributions to their family are found to enjoy better status in comparison to those who are of non-contributing type. Their acceptance also depends on the educational status, prior occupation and the caste group to which they belong, as respondents having higher educational status, belonging to higher caste, engaged in service or business during their younger years are found to be more accepted by their family members.

Gore (1997) attempts to make a detailed study on the various perspectives and some common variables through which old age can be studied. While studying the phenomenon of retirement, he states that retirement not only means loss of income and work for the aged but it also mean loss of social relationships, increased economic dependence, and loss of authority. The author remarks that these losses create a social and psychological void in the life of the elderly people leading to isolation which is more prominently visible in case of a retired elderly male than a retired female who can replace her previous roles with appropriate familial roles.

Nasreen (2009) studies the elderly people in the urban neighbourhood of NCT Delhi. The study explores the range of problems experienced by them and examines the coping strategies adopted

towards minimising such stresses and strains of life. Gender differences in such coping pattern of the elderly people are also studied. The book also attempts to look into the range of economic, health and social problems experienced by the elderly people in their family and outside it.

In this context, the book seeks to examine whether their economic dependence leads to compromising with their needs and wants, its effects on their relationship with their family members and the ways they manage their expenses. Data on these issues reveals that majority of the elderly people studied falls in the non-working status, majority of which are women than men. Only a small number of elderly people are found to have a regular income of their own, which in case of elderly males are almost double than the females. With low income and less ownership of property, the rate of dependency is also quite high among the elderly females. It is revealed that this dependency has a direct relation with the age and gender of the elderly people. This rate is also found more among the women elderly and the elderly people belonging to the 'oldest old' age group. Moreover, financial dependency is found to influence the care and supportive behaviour of the family members towards the elderly person to a large extent.

With regard to their health status the author also tends to study whether their failing health status affects their social mobility. Data reveals that the health status of the elderly people is quite poor. Besides several physical problems, a number of elderly people are found who either lost their mobility or whose mobility has reduced due to their physical disabilities. Data gathered with regard to the medical facilities availed by them reveals higher level of awareness among the elderly people with regard to their health, and their high expenditure on health related issues but this awareness and expenditure seems to be quite low in case of females than their male counterparts. Children in majority cases are found to be the only support of the elderly people with regard to their medical expenses, however a few are also found to manage their medical expenses on their own.

Majority of the elderly person studied are found to contribute gainfully to their family by participation in various household activities. The participation of elderly females are found to be more in case of household chores while the male elderly are found to provide help in financial terms. Though a large number of elderly person are consulted in routine household works but the involvement of women in the decision making with regard to household affairs are found to be much less than their male counterparts.

Intergenerational relationships reflect affection for their children and a very strong attachment to their grandchildren, but their affection towards their children, always does not ensure care and support from the same member. For emotional and psychological support a great dependence is found on spouses, children and daughter-in-laws which are also most commonly found in case of women.

Due to the impairment in health and economic status the elderly people of the studied area are found to face with many financial, emotional and social problems. To cope up with such problems a number of strategies are adopted by them. Firstly in order to cope up with their financial issues many of them are found to depend on their children. However quite a number of elderly persons, in order to cope up with the same are found to curtail their day to day and medical expenses. The number is more in case of women than men. This seemed to have a huge impact on their health and social status. Moreover to suppress their emotional disturbances arising out of this, many of them take help of religion. Simultaneously due to the deterioration in their health status, a number of these elderly people are unable to participate in household affairs and chores. This is also found more in case of women. Deterioration of health and disability curtails their movement and hence makes them more dependent and reduces their social participation. However a large number of elderly people reports to have been cared and looked after by their family members. Coping pattern of the elderly people with regard to their health status reveals dependence on spouse, children and medical aid. However such patterns are most commonly found in case of men.

However the study reflects that economic and physical dependence are inversely related to the status of an elderly person and with the quality of their interpersonal relationships. Changes in interpersonal relationships are found to be felt and experienced more by women than men. The coping pattern of the elderly person with regard to the change in their relationships with their children reveals non-interference, avoidance of conflict, expressing helplessness, crying, more sleeping, engagement in religious activities etc. Women generally are found to follow a negative way of adjustment with these changes. Even when it comes to lifestyle, women's life style are found to be characterised more by dependency while men comparatively are found to follow a more positive life style which mainly focuses on their health and physical fitness.

Lastly the book has also looks into the social security measures adopted by the government and NGOs in order to solve the problems of the elderly people. Though the measures adopted by

these agencies are found satisfactory, however the study reveals family to be the best institution for providing physical, social and emotional support to the elderly person.

The book studies the situation of the elderly person belonging only to the low socio-economic groups and thus does not highlight the situation of the elderly people belonging to different socio-economic groups (for example the higher or middle socio-economic groups). Moreover, the author though studies the gender differences in the coping pattern of the elderly person but the differences in such pattern with regard to educational status, family background and profession of an elderly person should also be an important consideration. In spite of its several gaps, the study seems to be relevant for the present research and is also found very useful in studying the economic, health and social problems experienced by the elderly person and also in studying the coping strategies adopted by them.

Ray, Dasgupta & Basu (2003) study the condition of two different categories of elderly women, i.e. the Santal elderly women and the urban elderly widows. The study is carried in a village of Burdwan district of West Bengal among the aged Santal women and another study in the CMC Ward (Kalighat) of Kolkata is conducted for obtaining information on the elderly widows.

Due to the lack of available literatures on the problems of the aged of the various tribal groups the study attempts to find out the various problems faced by these Santal women and also to understand their understanding and feelings towards their own changing situations. With such vision the author studies their socio-economic conditions, their living conditions, health conditions, their status; and their roles and relationships within their family. The role of the government for the benefit of the aged women with reference to the Santal tribe is also discussed.

The second study aims at exploring the distressful and disadvantageous situation of the elderly widows by studying their economic condition, family life, health status, care received by the family members, their network and relations with the family members etc. The book also highlights some case studies taken during the process of the research. While studying the widows the author realises that their problems are more complex and multidimensional and they are the victims of three-dimensional exploitations i.e., being a female, being an aged and specially being a widow.

The major gap of the book is that it studies the conditions of the elderly women belonging to two different categories separately and does not attempt to make any comparison between them. This prevents the readers in having an understanding of the differences in their conditions with regard to a particular situation (i.e., the economic situation, family relations, health status etc.). In spite of this gap the book is helpful as it provides a picture of the conditions of aged women belonging to two different categories, studying which will be helpful for the present study.

The impact of the ability of an aged female to adjust on matters relating to their health, wellbeing, economic security, life satisfaction and their acceptance by the family members and in the neighbourhood is studied by **Panda (2005)** in her book. The author realises that cultural factors in a patriarchal social structure make the elderly women much more vulnerable in relation to men. Moreover, the age related degenerative changes at the physical or mental level affects their level of adjustment in the family and leads to a feeling of loneliness and alienation among them. Towards this vision, the study aims to ascertain the level of social adjustment among them, study their health status, their acceptance in the family and neighbourhood, their sense of security and their life satisfaction in relation to the level of social adjustment. The study is based on the Role theory of Ageing and assumes that the ability of the elderly women to adjust is an intrinsic factor, and plays a bigger role in solving most of the problems that the aged are faced with. This includes harmonious adaptation to the changed circumstances, flexibility, positive attitudes, cheerful disposition, and the like.

With this vision, the author has carried out the study on a sample of 350 urban elderly female in family setting belonging to middle income groups. The author has studied their demographic status and socio-economic background through variables such as their total population size, age distribution, marital status, religious affiliation, caste, mother tongue, family background, family composition and migration status, size of the house hold, educational level and occupational status. In order to ascertain the level of Social Adjustment among the elderly females, the author has taken into consideration four parameters of adjustment i.e. Attitudinal adjustment, Conflict adjustment, Need adjustment and Role adjustment. The summation of all these four parameters is counted as the overall Social Adjustment level. Moreover, an attempt is also to analyse their health status and wellbeing through variables like optimism-pessimism, loneliness, death fear, tension, anxiety, type of sleep etc. and their Quality of life and Life satisfaction through variables

like type of sleep, self-evaluation of health, utilisation of leisure time and type of engagement in daily life activities. These factors are again studied in relation to the levels of their Social Adjustment. Their Social Acceptance, both in the family and neighbourhood, has been assessed by studying the various roles played by the elderly women in the family as well as in the community, including their participation in the decision-making roles. The author then attempts to find out the degree of association between their Social acceptance in the family and community level and their level of Social Adjustment. Efforts are also made to study the degree of respect they get from their family members and its association with the level of their Social acceptance. Lastly the book analysed the Social Adjustment of the elderly females in terms of their Sense of Security. Their Sense of Security is measured by their economic conditions, their expenditure patterns and contribution to the family, with respect to buy and arrange things for themselves as are felt necessary, with respect to their marital status, to their ownership of movable and immovable property and feeling of loneliness among them. The association between Sense of Security and Life Satisfaction among them is also measured.

The book concludes with the findings that elderly females who accept Role change and age related changes without any difficulty, not only shares cordial relations with her family members but also feels satisfied with her life. Cordial relation with the family members and others depend on their ability to adjust and not on any other factors like the number of members in the family, ownership of property, educational status and occupational patterns of the aged women. Moreover, these factors are not linked with psychological wellbeing like, optimism, loneliness, fear of death, self-evaluation of health and life satisfaction. Type of sleep, level of anxiety and tension are found to be important indicators of wellbeing. Respondents with high level of social adjustment often are found to enjoy easy sleep and respondents with fewer tensions and anxiety have good health condition. Moreover poor health conditions are often found to contribute to the feeling of loneliness and death fear among aged women.

The study also reveals that tension and conflict in relationship with others often contributes to rating of own health condition as poor or very poor by the respondents while elderly women who take initiatives for harmonious interaction with others often enjoy good health. Moreover, those who are rigid in behaviour and conservative in attitudes often remain in tension and stress and this affects their psychological wellbeing and social adjustment. Acceptance by others gives a feeling of self-worth, which depends on the ability of the aged women to interact and relate

harmoniously with others. Engagement in household activities and in activities related to the care of their grandchildren provides the elderly females an opportunity to win acceptance, love and respect of the family members while women with poor adjustment abilities often complain for undertaking such activities at the cost of their own free time.

The study reveals that interaction with peers and friends and their participation in the community work often brings psychological satisfaction to the aged respondents. It also contributes to their greater acceptance in the society which in turn increases their self-worth and confidence. Moreover involvement in the decision making process indicates their acceptance and integration. The feeling of economic security and insecurity neither depends on the family's economic position nor on their contribution to the family for their upkeep. Rather it depends on the type of relation, the younger members of the family share with them. Strained relations not only disturb the aged women psychologically, but also enhance their feeling of insecurity. Moreover, the elderly women suffering from economic insecurity tend to have low life satisfaction.

It is thus concluded that being adaptable, amiable, flexible, tolerant and empathetic, being acceptable of the age related changes and loving nature of the aged women go a long way in getting respect and status in the family and in developing harmonious relationship with others which in turn also positively effects their physical and psychological wellbeing.

The book's particular emphasis on the social adjustment of the elderly women and its effects on their psychological and mental health make it very useful for the present research, which would attempt to study role loss that the elderly women are faced with, its effects on them and their level of social adjustment in coping up with it. The book often overstressed the issue of social adjustment of the elderly women in solving their economic, psychological, and emotional distress. It overlooks totally the necessity of some level of adjustment from the members of the family and community in solving the same. The major gap of this book is actually in its theoretical framework. It assumes that most of the problems faced by the elderly person in certain major areas like their feeling of loneliness and role loss, their sense of security, their physical and psychological wellbeing, life satisfaction and social acceptance in the family and community can be solved by adjusting with the changed circumstances and with the age related changes. This will also help to develop harmonious relation with others. Though, there is no reason to deny the truth of this assumption that harmonious relationship with others, be it the members of the family, neighbourhood, friend and community goes a long way in solving many

of the psychological or other problems that the elderly people are faced with. However, one cannot also deny the fact that the picture is not same in every case. Some instances are also found where the elderly person inspite of being adjustable has to face lots of suffering and ill treatment from their family members. Moreover, these kinds of assumptions can lead us to an idea that the elderly person who are being abused and ill-treated by the family members are themselves responsible for their own faith and it is them who cannot adjust well with other members of the family and hence are being neglected. Thus these kinds of assumptions are one sided and partial where the burden of adjustment is on the aged person alone. Thus efforts should be made to study not only the level of social adjustment of the aged person but also of other members of the family with regard to the elderly person. Moreover, they as well should be encouraged to learn skills to cope with the elderly members of the family.

The study conducted among the elderly widows by **Manna & Chakraborty (1989)** reflects that majority of the widows suffer from loneliness and isolation. Even while staying within joint families the elderly widows are faced with several kinds of social problems like loneliness, lack of involvement in decision-making, unrespectable behaviour and conflicting relationship with younger generations. It is also observed that a large number of them receives inadequate treatment facilities and unbalanced diet and as a result suffers from various health problems. The authors argue that all the socio-psychological problems that elderly widows face are the result of their poor economic conditions and the economic insecurity that most of them suffers from.

The psychological factors contributing to the low self-esteem among the widows is studied by **Jamuna, Lalitha & Ramammurti (2004)**. It is found that the self-esteem among the widows decreases with age. Elderly widows living in the urban areas report higher self-esteem as compared to their rural counterparts. Moreover, the level of education, economic status and family structure all tend to have a significant impact on the level of their self-esteem. Self-esteem of the elderly widows is also found to depend on the extent to which they get attention and recognition from both their family and other members of the society. Widows, who are economically dependent throughout their life, have a greater chance of losing their role as a decision maker in the family after the loss of their husband.

Realising the above factors, the authors feel that necessary steps should be taken at both the Government and societal level in order to enhance their self-esteem. Economic status being one of the important factors which influences the self-esteem of the widows, the author suggests that steps should be taken to improve their economic status through various pension scheme and suitable income generation programmes. Psychological counseling facilities are also suggested for elderly person in order to enhance their psychological health.

A theoretical construct of Socialisation to Old Age is developed by **Rosow (1974)**. The author is of the opinion that unlike, the process of socialisation during the earlier transition of life, people are not effectively socialised to the transition in old age. The author points out that the social situations associated with the earlier transitions of life are almost absent at this stage and this fact give rise to all the problems associated with the elderly person.

Rosow, through this book attempts to examine this factor in the context of the aged people in the American society and tries to find out the reason behind the gap in the socialisation of the aged individuals. In an attempt to do so he also examines the major Institutional forces which are at work and their impact on the position of the older people. A chapter is devoted to the Theoretical preface of socialisation where the major variables of socialisation are closely examined. Particular attention is given to the structure, elements of socialisation, the conditions that affect them, the factors that govern its processes, different socialising agents, formal and informal processes in socialisation and the prospect of social change in it. The author also reviews a number of additional factors like Role reversal, Role clarity, and Role models, which normally facilitates socialisation. The book also examines the function of norms and their critical relation to socialisation. It also examines normative expectations for the aged individuals that govern their behaviour and the socialisation process which a person undergoes in the course of transition into the Old Age. The socialisation structure of the elderly people are also analysed and an attempt is made to find out its difference with the socialisation structures associated with the earlier stages of life.

After analysing these factors, it is concluded that due to the social changes which the modern American society has undergone in the recent years, the institutional support for the elderly person has decreased and this has affected their status in the family and society resulting in different kind of Stereotypes against them. It has also resulted in Role loss and Role Ambiguity

among the elderly person. Moreover, the author also observes that the expectations of social gains which positively prepare a person for the next stage in life are generally absent while people are moving into old age. Rather the transition to this stage is marked by social losses, role discontinuity, and loss of group membership. Moreover, the author points out that the existing norms for the elderly person are marked by ambiguity, vagueness and are often unspecified. According to the author these factors complicates the process of socialisation at this stage. The book also reflects that the denial of the aged people for being old, lack of proper role models, and lack of hope for renewal, redemption, rehabilitation and social integration in the face of negative values associated with old age results in their low motivation towards prospective socialisation. After going through the book, it is realised that Socialisation does play an important role in enhancing the coping skills of the elderly people and in developing their adjustment capacity with regard to new roles. Though, the book is found to be quite useful in studying the social situation of the aged women, especially with regard to their adjustment in the family and outside it and their role loss but it tends to suffer from various gaps. A major gap of this book is that it is basically a theoretical construct of old age socialisation. It studies the old age and the problems associated with it as a whole and do not take into consideration the practical realities of old age and the varying conditions of ageing with respect to a person's sex, social class, race, health, or other status. Moreover, the author is more concerned with the socialisation of the aged people, which he feels is the key for their better adjustment in society and family. It is quite true that norms and socialisation process are almost absent for the elderly people in our society and there is a need to develop such norms as this may introduce the elderly person to the age related changes. However, simultaneously, there is also a need to develop norms for the younger generation of the society that will make them learn or will encourage them to look into the needs of the elderly people. Though in many societies such norms exists for the younger generation but the recent changes in social matrix with impact of modernisation, globalisation and growing individualism, norms which teaches one to respect the elderly person, tends to vanish. Thus, an effort should also be made not only to strengthen the socialisation process of the aged people but also of the younger generation with regard to providing care and respect to the elderly person. Only such an approach could be fruitful.

The living arrangements and the dependency status of the elderly person have been examined by **Arivukarasu (2011)** in his study among the Muslim elderly people of the Cuddalore district. The study hypothesises that the care and support, expected and needed by the elderly person from their family members is linked to their pattern of residence or living arrangements. Thus, their living arrangements have a great impact on their physical and psychological wellbeing.

The study reveals that higher degree of industrialisation, urbanisation and the breakdown of the family size results in the deterioration in the quality of life of the elderly people. It is found that a greater number of Muslim elderly women i.e. 4.07% live alone than their male counterparts (1.77%). 4% of the studied elderly respondents are living in a household where their immediate relatives are not present. On the other hand, 7 % of them live with their spouses alone as their children have migrated to other cities. Moreover, 60% of the elderly men are found to be living with their spouses, children and grandchildren, in comparison to 42% for the elderly females.

Moreover, the paper while attempting to study the level of poverty among the Muslim elderly respondents finds that the most vulnerable group consists of the elderly females in the urban areas. 64% of these elderly females are dependent on others for food, clothing and health care. While in case of the rural elderly females, they continue to work in old age inspite of their poor health. The author, though lastly concludes that the elderly person places a burden on the household especially in case where the economic condition of the family or household is poor but has not attempted to study the elderly people on the basis of the economic class to which they belong.

A study by **Maruthakutti (2011)** focuses on the level of wellbeing of the elderly respondents and the factors affecting it, such as the size of their social network and the level of social support received by them. The study has been conducted among 484 elderly people residing in a rural area in Tirunelveli District in Tamil Nadu.

The study reveals that most of the respondents experience either moderate (45.9%) or low (43.6%) level of wellbeing. Age, Sex, Education, Marital status, Occupation, Income and Living Arrangements are found to be the important determinants of their well-being, where as it is not found to vary with Caste group or levels of their social ranking. Level of well-being is found to decline with increasing age. Female respondents especially the widows are reported to have a much lower level of well-being when compared to their male counterparts. Elderly respondents

with higher level of education are found to experience a higher level of well-being. It is found that engagement in some kind of occupation tends to increase the level of well-being among the elderly people.

Mansy (2014)'s study highlights the impact of migration of adult son to other countries, on the elderly parents. In this respect the study attempts to analyse the living conditions of the elderly people, their participation in work force, support received from their migrated children and also their problems and perception with regard to their son's migration. Findings reveal that a significant number of elderly people are found to be living with their spouse and non-migrant children after one/more of their child /children has migrated to other countries. More number of men against women is found to be living with the wife and children of their emigrant sons. However quite a significant number of elderly females are also found to be living alone.

The study reveals that the elderly respondents receive financial support or monetary help from their emigrant children. This serves as the major source of their income in many cases, and also the reason for majority of the elderly person to remain out of work force or their non-participation in work. However, a large number of the elderly respondents reports, that the contribution of their emigrant sons are insufficient and irregular in meeting their needs.

Data on the problems faced by them and their perception with regard to their son's migration reveals that most of the elderly females are dissatisfied with this fact and complains about the non-availability of physical and mental support in the absence of their children. The study also reveals a greater dependence of the elderly people on their relatives, kins for economic and social support in the absence of their children. A greater dependence on daughters is also found. Certain psychological problems like feeling of loneliness, frustration, anxiety, feeling of insecurity are also found among some elderly respondents in the absence of their migrated sons. The feelings are found to intensify in case of those who are also living away from their grandchildren. The data reveals that though the elderly respondents admit to the positive sides of their children's employment outside the country, (like improvement in the quality of their life, their financial status, and respect received in the society and so on), but majority of them are still unable to look at it positively and cope with the absence of their son/sons. With these findings the author conclude that conjugal ties or blood ties rather than consanguine relationships play an

important role in providing the needed physical, mental and emotional support to the elderly people in such cases.

Ushashree (1997)'s study focuses on the perception of the disabled elderly person with regard to the level of social supports available to them. The study reveals that the oldest old as well as the urban elderly people as compared to their rural counterparts, report poor perception with regard to social support. Moreover, it is found that economic position of the family, economic position of the elderly person and their gender are also some important factors that determine their position and the social supports available to them. The author points out that women being the age old deprived class is also deprived of their freedom of interaction outside their family and home since their childhood. Hence, at this age they are left with no one but only their son/s, daughter-in-law/s or other close relatives for their social support. Thus, their quality of life at this age totally depends on the level of satisfactory relation with her son/s and daughter-in-law/s.

Mangla & Chadha (1991) while studying the level of social network among the Institutionalised and Non-institutionalised elderly males and females, observe that the level of social network among the Institutionalised elderly people is much less than those who are Non-institutionalised (while the level is much less among the institutionalised elderly males than females). They argue that inspite of the fact that the elderly respondents of both the categories suffer from common role loss at this stage, it is the institutionalised elderly respondents who totally disengages themselves from the society and hence from their social networks after coming to the institutions. It is also noted that, irrespective of gender the institutionalised elderly people have lesser number of kin and blood relatives in their social network while in case of the non-institutionalised elderly males the number is quite lesser than their female counterparts. The author has attributed this factor to the gender difference in kin relationship, which indicates elderly women's involvement in the maintenance of kin relationship and network than men.

A comparative study on the rural and urban elderly people is conducted by **Biswas (1989)**. It is observed during the study that in the rural areas, more elderly women are dissatisfied with the care that they received from their family members, when compared to their male counterparts. The author while pointing out to this fact attributes it to the factors like 'economic dependence',

'lower old age death rate among women in the rural areas' which contributes to the deprivation of elderly women in these areas. On the other hand, it is also observed that irrespective of the region, culture, and economic situations, it is the elderly women who generally face greater neglect with regard to the 'health care arrangements' and support that they receive by their family members.

Raj (2012) in his study attempts to study the health status of the elderly people and the factors that mostly affects their health. The study reveals that only a few elderly respondents rate their health status to be 'good'. Analysis of data shows that women as compared to their male counterparts report to have more health issues and have a poor health status. Health issues among the elderly respondents ranges from serious and chronic health issues like Tuberculosis, Cancer, Diabetes, High blood pressure, Neurological Disorders, Respiratory Diseases, Gastric Problems to Joint pains, Loss of eyesight, hearing, hair and teeth. Lack of coherence in speech is also reported among some. Studying the factors that influences their health, reveals that though the servings they consumes daily are sufficient but there is a lack in the amount of nutritional food consumed by them. Moreover, the study also reports the use of intoxication among few elderly people. It is revealed that more number of women as compared to men is not concerned with their health status. The reasons for this, as provided by them are non-availability of time, financial problem etc. Data with regard to health care and support reveals that majority of the elderly people are receiving support of their children during their illness, followed by few receiving support from their spouse and a very small number relying on institutional care.

A study on the quality of life and life experiences of the elderly people residing in a Panchayat area is conducted by **Menon (2014)**. For this purpose the author attempts to study the living conditions of the elderly people living in different situations. The findings of the study are presented in the form of case studies for further understanding and analysis. The study reveals various health issues among the respondents. Besides various physical health ailments, a number of psychological and behavioural issues are also reported, like anxiety, depression, frustration, complaining, quarrelling, irritation etc. Moreover, in most cases data with regard to their living conditions are also found to be quite poor, with lack of electricity, lack of toilet facility, lack of

proper drinking water etc. which are found to determine the living conditions and quality of life of the elderly person to a great extent.

Data with regard to their living arrangements and support extended to them reveals that daughters play an important role and are proved to be the last support for those elderly people who have no one to take care at this age, especially with regard to caregiving, nursing, feeding and fulfilling social obligations. Moreover, social networks among the elderly people are also found to be quite limited mostly due to their limited time and their physical ailments which restrict them from engagement in such networks.

Subalekshmi (2014) attempts to study the level of care and support extended to the elderly people by their family members. In this respect, on the one hand the author attempts to study the extent and type of care and support extended to the elderly respondents and the factors which have a major impact on this. Besides this, the elderly people's perspective with regard to the care and support extended to them are also analysed. On the other hand the study also attempts to probe into the situation of the care givers by analysing their view with regard to care giving and the problems they face with regard to this. Moreover, the study is simultaneously carried out with the elderly respondents and their care givers belonging to lower, middle and high income group families.

The study categorises the types of care that the elderly person receives in their family into Instrumental, Emotional, Financial and Social. The study reveals that majority of the sons provide emotional and financial care to elderly person as compared to the daughter in laws, while daughter-in laws come in majority in case of providing social assistance to their elderly in-laws. However, instrumental care is found to be provided to the elderly people, both by their sons and daughter in laws in equal number. However, Social class are found to play an important role in the provision of care and support to the elderly people, for example, financial assistance is found to be more among the higher and middle income groups while provision of social assistance is found to be much less in the families with higher income, better occupation and better education. On the other hand, the study on analysing the situation of the care givers, points out that care giving is a serious problem for the care givers in most cases. However, the situation is grave in case of the families belonging to lower and middle income group. The study also highlights some cases where care givers want to send their elderly parents to old homes/institutions, while there

are also some cases where the care givers wants to refrain from such options due to the fear of being ridiculed by the society. The author concludes that with the changing social structure care giving is becoming an issue of great concern and hence demands an immediate attention.

Turlapati (2011)'s study shades much light on the level of life satisfaction among the elderly people living in urban settings. Simultaneously it also attempts to identify the factors that tend to influence the level of their life satisfaction. For this purpose some of variables/ factors are identified, which are analysed in order to judge its impact on the life satisfaction of the elderly people. These factors are Physical/Psychological health, Loneliness, Social support and Spiritual wellbeing.

Data collected during the course of the study points out that on an average the elderly person reports higher level life satisfaction. Moreover, all the above factors like Physical/Psychological health, Loneliness, Social support and Spiritual wellbeing are found to be some important determinants of their wellbeing and life satisfaction. For example, life satisfaction is found to be more among the elderly respondents with better Physical/Psychological health, lower level of Loneliness, higher level of Social support and higher level of Spiritual wellbeing. Lastly the study points out some of the areas of intervention by social workers in order to improve the level of life satisfaction of the elderly people.

Audinarayana (2012 a)'s study aims to understand the nature and pattern of caregiving to the elderly respondents in an urban setting. In this context the study examines the differences in care giving in relation to the living arrangements and background of the elderly person. Perspectives of the caregivers in relation to care giving and difficulties faced by them in the process are also studied. The study reveals that in majority cases the care and support available to the elderly respondents are provided to them by their son/s and daughter in law/s. Their co-residence with their children serves as a major factor in the provision of care and support extended to them by their children. However, the study reveals an inverse relation of the socio-economic status of the elderly respondents and the family where they reside in, with the care and support extended to them. Elderly respondents with better socio-economic status and those belonging to higher monthly income households report to receive lesser care and support by the care givers. On the other hand studying the care givers perspective with regard to care giving reveals that with a few

exceptions majority of the care givers provide care and support to the elderly people as a matter of responsibility, out of love and affection for them and out of the fear of being ridiculed by the society. However, the study reveals that economic support to the elderly person tends to be positively influenced by the higher income of the care givers.

A similar study by **Audinarayana (2012 b.)** focuses on various issues related to the socioeconomic situation of rural elderly. The study aims to focus on the gender wise differentials in the socio-economic status, living arrangements, familial and social participations, health status and utilisation of the health care services, pattern of disabilities among the elderly person. Besides these, the factors that determine the above mentioned issues are also studied. In this context attempts are also made to study and analyse the general problems and expectations of the elderly people.

The study reveals poor socio-economic conditions of the rural elderly, with much poorer status of widows and women belonging to the lower strata of the society. Occupational status of the elderly people reveals that almost half of the studied elderly people are non-working and this number is higher in case of women than men. Similarly participation in skilled work is also found to be more among the elderly males than their female counterparts. Their pattern of living arrangement mostly reveals co-residence with their sons followed by co-residence with their spouse, especially in case of women than men. Though, some of the elderly respondents are also found to be living alone. Income and occupational status are found to be very much related to their living pattern. Elderly respondents with better occupational status and high level of income tend to live alone while co-residence with sons is mostly found in case of those who are either non-working/ housewives/without any source of income/widowed/ separated women/ single women or elderly person with a lower level of income.

Participation in household activities is also found to be significantly higher in case of females than the elderly males. However, this shows a decline with the increasing age, physical disability and reduction in the size of the family to which the elderly person belongs. However the percentage of participation in such activities is found to be more among women belonging to the non-SC and STs/ single /separated/ widowed/divorced women and women belonging to households with better standard of living than their counterparts. Participation in familial ceremonies and problem solving role is still found to be performed by a higher number of elderly

respondents. This participation tends to be higher in case of women and those belonging to the economically better off households, whereas, it lowers with the age and their physical disability. Decision making role is reported to be performed more by the males. Intergenerational contacts like visiting the children or talking to them over phone is reported by those with a better socio-economic background and among those who are suffering from some chronic diseases.

The study points out that the health status of the elderly respondents deteriorates with their current age. Interestingly, 'chronic morbidity' is found to decrease with the increase in monthly income of the elderly person and of the family to which they belong. On the other hand 'unhealthy status' is reported to be more among the elderly person belonging to the better social strata and with higher family income. However disability is found to be more among elderly women and oldest- old, while its rate is quite lower in case of those belonging to higher monthly income group and also among those who worked as agricultural labourers. Mostly half of the studied elderly respondents are found to rely on the government services when it comes to medical aid. The study reveals that reliance on governmental services for medical needs depends largely on their level of income and educational. It shows an inverse relation i.e. higher the monthly income level and education status, the lower is the dependence on governmental services.

Economic and monetary problems are found to be the major problems that the elderly people are faced with. However feeling of loneliness due to the lack of company and support / need of a helping hand, especially during the time of illness are also some of the problems faced by them. Most of the elderly respondents expresses that their only need and expectation is to have a cordial relationship with family members, care and support from them, financial support from the family members as well as certain social security measures from the community and government. The study reveals that a substantial number of elderly respondents are willing to join old age homes mostly for the convenience of their children/ due to their low income/ for having no children etc. Moreover, though a large number of them are aware of the Maintenance of Parents Act but only a few favoured to lodge complain against their children.

Mishra (1987)'s study among the male retirees highlights that Social Adjustment of a person during the old age largely determines his/ her life satisfaction and wellbeing. The author attempts to study the level of social adjustment among the elderly males and the factors that determines its

level. For this purpose the common determinants of social adjustment are classified under three heads i.e. Situational factors, Attitudinal Factors and Behavioural Factors.

With regard to situational factors the study reveal that majority of the elderly respondents are found to be suffering due to their reduced income level, which again creates a problem for them in seeking medical assistance. It also reveals that social adjustment of a person during his/her old age is largely determined by their educational level and past occupational status, as both these factors tend to determine the amount of resources held by them. Thus higher the level of these factors higher is the level of Social Adjustment among them. Moreover, financial factors, level of income, health condition or physical fitness of elderly people also tends to positively influence their level of adjustment, as higher level of these factors are found to reduce their dependency on others and enables them to lead a comfortable life.

An Analysis of the attitudinal factors reveal positive attitude of the elderly person with regard to some factors of social change, whereas negative attitude towards a few. Majority of them reports to have a positive attitude towards non- interference in the affairs of children. Positive attitude on these factors are found to determine the level of social adjustment of the elderly person in a positive way. However, religious beliefs are found to have no association with their level of adjustment either positively or negatively.

Behavioural factors on the other hand is found to be associated to their relationship with their children, family members, neighbours, relatives and friends; their living arrangements; involvement in occupational activity; hobbies; religious activities; overall activities and social interaction. Data collected in this section reveals co-residence of the elderly respondents mostly with their spouse and unmarried children. The study also reveals that elderly people prefer to live with their children and enjoy their company. The financially well off elderly people are likely to get more care, respect and position of authority in the family. The study also points out that the quality of their relationship and interaction with children; and their co-residence with children tends to have a positive association with their life satisfaction and adjustment. On the other hand frequency of conflicts with children and other family members is found to be negatively associated with social adjustment. For the elderly people whose children are living away, the quality of their relationship with children, frequency of meeting or interacting with them are found to be positively associated with their adjustment.

Though the study reveals that majority of the elderly respondents do not have any intimate friend and most of them are not the members of any Voluntary Organisation, but these factors are found to be positively related with their adjustment. Moreover, other factors that are revealed to have a positive relation with adjustment are involvement in occupational activity, time spend on hobbies, social interaction with non- family members, level of social network etc. However, involvement in religious activities is found to have no association with their adjustment level.

The author concludes that with social change importance of acquired properties like occupational status, education, health, income are increasing whereas concepts like age and seniority are losing its importance. Lastly the study concludes that 'active type' rather than 'disengaged type' of life is more desirable for a better social adjustment in old age.

Bhatia (2013), while discussing on the social wellbeing of elderly people, point out that this factor is determined mainly by two conditions, one is the autonomy that they enjoy and the other is the degree of vulnerability that they suffer from. While pointing out to the relationship between these two factors, the author states that these two factors are inversely related, i.e. lesser the degree of autonomy enjoyed by a person, higher is the level of vulnerability that he/ she suffers from.

The author also points out to four major deficits which an elderly person suffers from and where he/ she require sufficient aids. These factors are participation deficit, mobility deficit, sensory deficit, cognitive deficit and resource deficit. In the context of these factors, the author discusses on the autonomy of an elderly person. According to him, ensuring autonomy not only means empowering an elderly person but also sensitising and providing support to his/her social environment.

While discussing about vulnerability of an elderly person the author points out that it is related to class, gender and ethnicity and is deep seated in social processes and relations. He also mentions that vulnerability is determined by one's socio-economic features, physical feature of the person's environment and individual resilience. He again points out that it is the socio-economic systems and processes that influence the life and resilience of an elderly individual which they utilise in meeting the challenges of their life. In this context the author observes that the most vulnerable sections among the elderly people are the widows and the single women.

In the next step the author analyses the two concepts of autonomy and vulnerability in relation to the psychology and geo-social context of an elderly person. In doing so he points out that the diverse geo-social condition of elderly woman determines their opportunities, power, autonomy available to them and even the challenges and vulnerability that come in their way. He also highlights that how the psychological, physical and geo-social status of elderly women enables them to gather resources which further help them to determine their position, power, status and functions both in the society and family. He proves this fact by citing the examples of many scholars.

The study also points out to the importance of Social network in the life of elderly women. According to the author, social networks helps them not only in overcoming the problems of 'isolation' and alienation' mostly due to the neglect of family members, death of spouse or close relatives and separation of children but also helps them in overcoming other psychological problems like depression and social withdrawal.

Lastly the author draws attention of the reader with regard to insufficient attention of Government and National Planners with regard to the plight of the elderly women in the National Policies of India. He remarks that the cause of elderly women have been ignored both in the National policy for the women in general and also in the National policy for the Elderly. In this context he highlights several factors which play a significant role in their plight .Simultaneously he also appreciates the attempts and initiatives taken by some governmental schemes and Civil Societies from time to time to minimise the plight of the elderly women in India. In this regard some gaps in the Governmental Policies are also pointed out by the author along with some suggestions to improve the same.

Among the above studied literature, only a few did discuss about the social situation of aged women belonging to different social classes but none of these literatures has dealt with the topic in a broad perspective. Thus, an attempt has been made hereby to make a broad and detailed study on the topic.

Objectives:

The primary objective of the study is to comparatively study and analyse the status of the elderly women belonging to middle class and poor families. Towards this vision various relevant books and journals are studied and reviewed in the previous section. During review of literatures, major areas or dimension in the life of an elderly woman which are felt to demand more attention are the economic dimension, social dimension and health care and support received at old age. Moreover, studies reveal major differences between the women belonging to middle class and poor families with regard to the above mentioned areas/ dimensions. Hence, keeping these literatures in view, the status of an elderly woman are categorised under the following dimensions: Economic status, Social status and Health care and support. The following objectives are then developed and framed under these broad heads in order comparatively study the elderly women of the above mentioned categories.

Economic Status:

It is observed that rapid technological changes often make the elderly less relevant or unsuitable for the present day job market. Moreover, the phenomenon of retirement drives out many individuals, above the age of 60, from the work force, who are often still able to contribute beneficially for the society. All these often leave the elderly people with low and even at times with no income, making them more dependent on the younger generation. Situation of the elderly women in this context is much grave, as in most cases often they are found to remain economically dependent on the male members of the family throughout their life. Lower participation in work force has increased their dependency. The majority of the married or widowed elderly women in middle class families are maintained either by their husband, other family members, or children. Thus they fail to contribute to the family expenses and hence are often regarded as burden to their family members. Previously working or presently working

elderly women in the middle class families often have a source of income or at times avail benefits of retirement including pensions and pay some amount to their family for their upkeep. However, their contributions to the family often fail to ensure them a feeling of security. In contrast to this there are even instances where the elderly women inspite of her dependent status are treated in her family with awe and respect.

On the other hand the elderly women belonging to poor families continue to work unless they are completely disabled or become physically weak. Most of them continue to contribute to their family income and hence are often not considered as burden to the family. But for those who become disabled and suffer health problems sometimes have to face serious consequences when their children deny to give them any financial support. However, even in some cases, due to the poor economic background of the family, even their income and economic contribution in the family does not ensure them the required support and care from their family members and the fulfillment of their needs.

- 1. Thus hereby the study investigates and compares the nature and extent of economic problems of elderly women of both the classes.**
- 2. The study also explores how the elderly women belonging to these two categories solve these problems and adjust themselves in the family.**

Social status:

The elderly women of the middle class families often being educated, experience greater changes in their status, due to loss of certain roles and loss of decision making power in the family. The more effect of western education and the kind of jobs that the members of the middle class families are engaged into, sometimes results in widening the gap between her and her family members. This makes the women feel more neglected and isolated. In contrast to these in the poor families due to less effect of westernisation, the change of values among the family members is not so prominent. Moreover due to illiteracy, the elderly women of the poor families often do not realise their change in status.

In addition to this, in the poor families, continuation of work till one becomes completely disabled helps them to contribute to their family income even at old age. This makes them less

dependent on the family members and consequently the role loss, decline in decision making authority and loneliness is much less among them when compared to the working women of the middle class families who after a certain age goes for retirement. Retirement and reduced income sometimes creates a feeling of uselessness and depression in them. The picture is worse in case of those who do not draw pensions and those were nonworking. However, in all these cases the chances of exception cannot be ignored and had to be considered with equal importance.

- 1. Therefore the study aims to investigate how the status of the elderly women of these two classes has undergone changes, how their roles get affected due to the changes and to what extent their loss of roles affects them.**
- 2. The study also comparatively studies their perception as being felt by their family members. Moreover, the extent of their social acceptance and nature of their participation, both within the family and outside will comparatively be investigated.**
- 3. The study also attempts to comparatively investigate the various needs (Social, Economic and Health) of these elderly women.**

Health care and support:

Ageing is usually associated with deteriorating health and physical condition and often with various chronic diseases which make their situation worse. Moreover, the weak financial position of the elderly people often does not permit them either to take nutritious food or proper treatment which results in sharp deterioration of their health. Poor health along with financial crisis and dependence on the family members for care and support accentuates their problems.

The picture is worst in the poor families, where women since their very childhood suffer from lack of proper nutrition which results into much health hazards. Those who continue to work can contribute at least something to get proper treatment or to take nutritious food, but situation is worst in cases where she is dependent. Low income of the family does not permit to spend much money on her treatment and food.

- 1. Therefore the study attempts to investigate the nature and extent of care and support extended to them by their family members.**

Methods of the study:

Universe of the study:

The present study is conducted in the Municipality area of Siliguri, subdivision of the Darjeeling district, West Bengal. The city of Siliguri lies across the Darjeeling district and some parts of it falls in the Jalpaiguri district of West Bengal as well. For the present study, few areas are chosen purposively in order to draw sufficient number of samples (i.e. women aged 60 years and above) belonging to 'Middle class families' and representatives of the 'Poor families'. Representatives of the 'Middle class' are drawn from Ward number 16 and Ward number 15 of Siliguri Municipal Corporation area both of which falls in the Darjeeling District and are mostly inhabited by middle class families. On the other hand, representatives of the 'Poor families', are drawn from Durgadas colony and Chittaranjan Colony which lies in Ward number 20 of Siliguri Municipal Corporation area and comprising mainly of slums and squatter settlements.

Sampling:

The sampling unit for the investigation under the present study are, women aged 60 years and above. For the purpose of the study, the elderly women aged 60 years and above are categorised based on their economic background (i.e. middle class and poor families). In the next step, certain areas are chosen purposively where the number of the elderly population belonging to the above mentioned economic categories are available. Then out of the total number of elderly population in the studied areas which is 366 in number (according to the voters list updated recently before the conduction of the study), a total of 100 samples are drawn based on purposive sampling method, with equal number of samples from each economic categories (i.e. 50 from each category). The criteria based on which the samples are purposively drawn are Marital status, Economic status, Educational status, Pattern of Living arrangements, Physical condition, Participation in work and Age Group.

Tools and Techniques of Data collection:

Necessary data and information are collected through direct contact with the target group, through intensive field work, personal interview with the help of interview schedule, containing close and open ended questions for data collection. Observation is also used as a tool for data collection. Data are also collected from secondary sources for the fulfillment of the study.

Data are collected by home visits through face to face interview with the help of interview schedule and observation. Every selected elderly woman is personally contacted for the purpose of interview. The purpose of investigation is explained to her and she is encouraged to explain her opinion freely. Data are also collected from secondary sources like published materials, books, journals, newspapers etc. Secondary sources that are used for the study are mainly some theoretical work on ageing and first hand field based studies published as books and journals. Various internet sources are also used to gather recent data and literatures on ageing. Besides these, newspaper articles are also reviewed from time to time. Both primary data and secondary data are taken into consideration and the present report is prepared.

Data processing and Analysis:

Data processing mainly involves necessary tabulation for preparing the data for analysis. The process is both manual and electronic. It mainly involves necessary editing, categorising the open and close ended questions, computerisation and preparations of tables. The data are thereafter analysed qualitatively and the report is prepared.

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CHAPTER: 2

GENERAL PROFILE OF THE RESPONDENTS

An attempt has been made in this chapter to highlight the general profile of the respondents of the study. These include their Age structure, Marital status, Caste background, Educational qualification, their Living arrangements, Family income, Family professions and the number of children of the respondents.

Background and demographic aspects of the studied area:

In this regard it is worth mentioning that the study has been conducted in the Municipal area of Siliguri subdivision of the Darjeeling district, West Bengal. The city of Siliguri lies across the Darjeeling district and some parts of it falls in the Jalpaiguri district of West Bengal as well. 14 out of 47 wards of Siliguri Municipal Cooperation fall in the Jalpaiguri district. In the year 1994 the city attained the status of Corporation. The city has a population of 513264 (Population Census 2011, n.d.). In order to fulfill the purpose of the study, samples from two different types of social classes are drawn i.e. Middle class and Poor families and for this purpose, some areas are purposely selected from where samples of both the classes are available in sufficient number.

Representatives of the middle class are drawn from Ward number 16 and Ward number 15 of Siliguri Municipal Corporation area. Both the areas fall in the Darjeeling District and have sufficient number of representatives of the Middle class. The populations of these wards are 8,002 and 4,922 (for ward number 15 and 16 respectively) with a total number of 3,358 households (2,071 and 1,287 households in ward number 15 and 16 respectively) (IndiKosh- All about India, n.d.). The total populations of elderly women in these wards are 229 (according to the voter's list updated recently before the conduction of the study). The people residing in these areas are mainly service holders including both Govt. and private services and a large number of

them are also engaged into business. Besides these, a considerable portion of these people are self-employed like Doctors, Lawyers, and Professors/Teachers or are engaged independently in other skilled jobs. The people residing in these areas are mostly the owners of the plot of land that they reside on. Many of these people are residing here as long as 40-50 years. However due to the emergence of many new apartments and housing complexes in these areas, in the recent years many new comers are also found, who are residing here from 5- 10 years. Besides this a number of families also stay in rent.

In a similar way, representatives of poor families are drawn from some colonies which fall under Ward number 20 of Siliguri Municipal Corporation area. Ward number 20, lie in and around the railway track that passes across the city. The nearest railway station is Siliguri Town Station. This ward mainly comprises of slums and squatted settlements. There are altogether six slums under this ward, these are Durgadas colony, Jyotinagar colony, Chittaranjan Colony, Rammohan colony, Sraban Nagar colony and Fuleshwari Unnyan colony. The areas chosen for the study are Chittaranjan Colony and Durgadas Colony. The total population of Ward number 20 is 9009 with approximately 2181 households. There are approximately 334 and 364 households in Chittaranjan and Durgadas colony respectively (IndiKosh - All about India, n.d.). The total population of elderly women in these colonies is approximately 137 (according to the voter's list updated recently before the conduction of the study). In this context it is to be noted that the number of elderly women who were actually available in the area during the study, are much less in number as many of them could not be found or contacted due to death, migration or visit to some other place at the time when the study was conducted. This is however true for both the classes. The residents of these colonies are mostly Hindu and are mostly Bengali speaking. Majority of them are engaged in manual work, semi-skilled or unskilled jobs. They are mostly labourers, house maids, helpers, van pullers, rickshaw pullers, auto drivers, venders, carpenters, mechanics, factory workers etc. while a few of them are also self-employed who runs small business or are petty shopkeepers. Majority of the people of these areas are migrants. Both interstate and international migrations are found here, as a large number of them have migrated from Bangladesh followed by Bihar, Assam and even Orissa in few cases. The period of their stay in these colonies is as long as 30 years and even more in few cases.

Demographic profile and Socio-economic background of the respondents:

Age Structure:

Age is an important indicator that reflects the degree of autonomy and resources enjoyed by a person. It is a significant indicator of the status and authority enjoyed by a person both in the family and society. It is also significant in reflecting the health and physical status of an individual. Many studies conducted on elderly persons reflects the close association of chronological age with the level of functioning of individual in different social roles, their level of adjustment and their social and psychological wellbeing. Nasreen (2009) observes that chronological age not only influences the status and position of an individual in his family and society but also reflects the health condition and efficiency of an individual. Mishra (1987) on the other hand is of the view that it is important in determining their living arrangements.

In this study, the elderly women belonging to the two social classes are further classified into various subgroups, depending on their age. The three sub-groups used here for classification are 60-69 years, which represents the category of women belonging to '*young old*' group, secondly the age group of 70-80 years, which represents women belonging to the '*middle aged old*' group and lastly 80 years and above representing women of the '*oldest old*' group. Table 2.1 represents the age structure of the elderly women of both the classes. It reflects that in case of both the classes a large majority of the respondents falls in the category of young old, i.e. in the age group of 60-69 years, followed by a smaller number belonging to the category of middle aged old, while a much smaller number of elderly women i.e. 12% belongs to the category of oldest old.

Age group	Middle class	Poor families	Total %
60-69 years	58	64	61
70-79 years	30	24	27
80 years and above	12	12	12

<i>Total</i>	50	50	100
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Marital status:

Marital status is also an important factor in determining the status of an elderly person, especially in case of women. India, being a patriarchal society, values women in relation to their marital status. Here a woman's status and position is determined by her husband's position in the society. Many scholars while conducting studies on widowhood has rightly points out that, 'widowhood is the social death of a woman'. Marital status influences not only elderly women's position in the family and society but also their economic, health and psychological status, their level of social adjustment and the level of their social participation. Bhadra (2011) points out that widowhood hampers the economic status of an elderly woman and sometimes even drags her into poverty. It lowers their status and results in their marginalisation both within the society and family, leading to their loss of decision making authority and increase in their level of dependency.

In the presents study, the marital status of the respondents is presented in Table: 2.2, which reflects that the number of widows is relatively higher than those belonging to the other categories. This is true for the respondents belonging to both the classes. Their total number is 57%, with 52% and 62% for middle class and poor families respectively. In this context it is to be mentioned that irrespective of class, a higher number of widows are found in the age-group of 70-79 (middle aged old) and 80+ (oldest old). This category is followed by a number of women who are presently married (40%). However as compared to the middle class, the number of widows is more among the poor families. On the other hand as compared to none of the poor elderly women, only 2% of the middle class respondents are found to be unmarried. Even the number of separated and divorced women is also found to be much less i.e. (2%) and this is found true for both the categories. Such a pattern, which shows greater number of widows among the elderly women, indicates greater life expectancy of the females which naturally leads to feminisation of ageing.

Table 2.2: Marital Status of the respondents (in percentage).

<i>Marital status</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total %</i>
Presently married	44	36	40
Widow	52	62	57
Unmarried	2	0	1
Divorced/ Separated	2	2	2
Total	50	50	100

Caste group:

The caste group of the respondents is represented in Table 2.3 which reflects that comparatively higher number of respondents of the middle class family belongs to General caste, i.e. 92%, while this percentage is only 28% in case of poor families. On the other hand the number of respondents belonging to Scheduled caste is comparatively higher in case of poor families than middle class families, which shows 70% and 8% respectively. None of the respondents of the middle class families belongs to the category of Other Backward Class, while in case of poor families the number of members belonging to this category is 2%.

Table 2.3: Caste group of the respondents (in percentage).

<i>Caste group</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total %</i>
General	92	28	66
Scheduled Caste	8	70	43
Other Backward Class	0	2	1
Total	50	50	100

Educational Status:

Education is a tool to achieve greater success and satisfaction in life which in turn ensures well-being of an individual. Education not only determines economic security and prosperity, but also goes a long way in determining the level of adjustment in an individual, especially during her/his

old age (Mishra, 1987). It helps an individual to adjust himself during the phase of transition into old age.

The Educational Status of the respondents presented in Table 2.4 reflects that their educational status is quite poor. A considerable number of the elderly women i.e. 38% are Illiterate and 16 % of them are just literate or have received some Non-formal education. While looking at the class differences it is observed that the number of Illiterates in the poor families is much higher when compared to the number of Illiterates in the middle class families representing 60% and 16% respectively. Simultaneously, Non-formal education has been received by 26% of the respondents of the poor families, whereas in case of middle class families the percentage is 6%. Contrastingly, formal education below std. X has been received by 27% of the elderly women, out of which the percentage is 42% in case of middle class and only 12 % in case of elderly women belonging to poor families. Similarly, education till Secondary to High School level has been received by a very small number of respondents belonging to the middle class whereas in case of the poor families this number is more insignificant. On the whole the total number of elderly women who has received education till Secondary to High school level is only 9%. On the other hand a very small proportion of the elderly women are found to have completed their Graduation or pursued education till Master's Degree or above, showing only 6 % and 4% respectively. However, in case of Graduation and Master Degree, the number is only 12% and 8% in case of middle class whereas none of the respondents, belonging to the poor families have pursued education till Graduation or Master's degree and above. Thus, it can be analysed from the table that the educational status of the respondents in general is quite poor, as majority of them are illiterate. Even while comparatively analysing the situation it can be seen that, the educational status of the elderly women belonging to the middle class families are quite poor, where average number of elderly women studied below X std. The situation is even worst in case of respondents belonging to the poor families.

<i>Educational status</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total %</i>
Illiterate	16	60	38
Literate/ non-formal education	6	26	16
Below Std. X	42	12	27
Std. X to H.S/ High School	16	2	9
Graduation	12	0	6
Masters or above	8	0	4
<i>Total</i>	50	50	100

Family Income:

Income status of the family, where the elderly person resides in, is quite significant in determining the care and support being extended to them by her family members, especially in case where they are dependent. Moreover, when it comes to their medical and health care needs, the financial position of the family that they resides in goes a long way in determining the extent and kind of medical and health care being extended to them (Harris, 1983) and (Kaulagekar, 2007). In the study conducted by Subalekshmi (2014) it is pointed out that social class play an important role in the provision of care and support to the elderly person, for example, provision of financial assistance is found to be higher among the higher and middle income groups. The study reflects that care giving is a serious problem for the care givers in most cases, especially where the families belong to lower and middle income group. Moreover, in some cases the family income also determines an elderly person's living condition and the diet being provided to them in the family. In the present study the income structure of the families, chosen for the purpose of the study reflects the difference in the income status of the families of both the classes. Table 2.5 reflects that while the monthly income of the majority of the families belonging to the middle class falls in the range of 55000 and above, in case of poor families it lies in the range of 5001 – 15000. Moreover, the highest income group to which the poor families falls in, is the range of 15001- 25000, while in case of middle class families it ranges from 55000 and above. Moreover, the percentage of the poor families falling in the range of

15001-25000 is only 18% whereas in case of middle class families the number of families falling in the range of 55000 and above is 38%. This pattern reflects the difference in the financial status and the material benefits enjoyed by the members of the families belonging to both the classes.

Monthly Income range	Middle class	Poor families	Total %
up to 5000	0	18	9
5001- 15000	6	64	35
15001- 25000	16	18	17
25001-35000	16	0	8
35001-45000	14	0	7
45001-55000	10	0	5
Above 55000	38	0	19
Total	50	50	100

Main profession of the family of the respondents:

Table 2.6 reflects that the main profession of the families which the respondents belongs to. For the purpose of analysing, the professions are categorised into several categories. It is however seen that the members of the majority of the families studied are engaged into self-employment. However, the proportion is 46% in case of middle class families and comparatively much lesser i.e. 26% in case of poor families. Moreover, kind of self-employment which the members of the middle class families are mainly engaged into are Business, followed by medical and legal professionals like Doctors, Lawyers etc. whereas in case of poor families the members falling in self-employed category are mainly very small and petty business men, petty shopkeepers i.e. person running a small canteen, a road side tea shop, a small road side dhaba, pan shop, petty grocery shop in the community or other petty business. In 22% case the members of the middle class families are found to be engaged in Government jobs. The position held by the members of middle class who are government service holders are mainly Government School / College teachers, officers, clerks or engaged in other white collar jobs. Variations are also seen with regard to families whose primary income comes from Private jobs. In case of poor families private jobs include working in other's shop, working as drivers, caretakers, security guards,

working in garage etc. while for middle class this include working in Private schools / colleges/private banks/ Private companies/Big Stores/Corporate houses as officers, clerks, salesman, accountants, managers etc. A considerable large number of members i.e. 38% belonging to the poor families as compared to none belonging to the middle class families are found to be engaged in Manual/ Casual jobs which include working as rickshaw pullers, van pullers, toto/ auto drivers, contractual labourers, fruit/vegetable or other vendors, house maids etc. This is again followed by 22% of the poor families whose basis source of income comes from semi-skilled or non-skilled jobs. These mainly include families whose members work as carpenters, painters, plumbers, electricians, tailors, mechanics etc. Besides this only 6% of the families belonging to the middle class are found to be engaged in contractual jobs. These include contractual jobs in different government offices, projects, schools etc. Moreover, 12% of the families belonging to the middle class and 4% families belonging to the poor category are found to run their family with income through some other sources. In case of poor families, the elderly women falling in such category are either found to live alone or with their spouse (if married), where both the respondents and her spouse are non-working at present. They are either found to depend on beggary or depend on the mercy of their children for economic support. Whereas in case of middle class families, falling in such category, the elderly women either resides with their spouse alone (if married) and are found to run their daily living with the pension of their husband. However in one case, the widowed elderly belonging to the middle class family is found to live with her unemployed son who runs her family with the pension of her deceased husband.

Table 2.6: Main profession of the family of the respondents (in percentage)

Profession	Middle class	Poor families	Total %
Self employed	46	26	36
Government job	22	0	11
Private job	14	10	12
Manual / casual job	0	38	19
Semi-skilled and non-skilled jobs	0	22	11
Contractual jobs	6	0	3
Other sources of Income	12	4	8
Total	50	50	100

Number of Children of the respondents:

Children are considered to be a greater source of support at old age. Thus the number of children is likely to determine the amount of support and care that an elderly person is likely to receive at his/her old age. When it comes to children and support at old age, it is always the sons who are considered to be primarily responsible for it. In Indian society, it's quite common to consider a male child/ sons as a support of their parents when they grow old. Keeping this factor in mind table number 2.7 (i) and 2.7 (ii) takes a look at the number of children of the elderly women and also the number of their sons and daughters.

Table 2.7 (i) shows that 4% of the elderly women in the middle class families have number children. This is mainly found in case of the elderly women who are either unmarried or are divorced, without any children. Majority of the respondents of the middle class families i.e. 48% are having 1-2 children, followed by 3-4 children i.e. 36%, in comparison to 40% and 40% respectively in cases of the elderly women belonging to the poor families. However only 8% of the elderly women belonging to the middle class families are having 5-6 children and 4% have children up to 9-10 in number in comparison to 20% and 0 % of the respondents belonging to the poor families respectively. The above trend is however an indication of the acceptance of the small family norm more among the elderly women belonging to the middle class families than those belonging to the poor families. However, 4% of the middle class respondents having 9-10 children in comparison to none belonging to the poor families are an indication of higher rate of survival of children in middle class families, which again points out to the differences in their financial background that often permit better treatment facilities and better nutrition to its members.

Table 2.7 (ii) shows that 64% of the respondents belonging to each category have 1-2 sons and 58% belonging to middle and 66% belonging to poor families are having 1-2 daughters. This is followed by 16% and 12% respondents belonging to middle and 22% and 12% belonging to the poor category, who are having 3-4 sons and daughters respectively. Whereas only a small number of respondents i.e. 2% and 4%, belonging to middle and 0% and 2%, belonging to poor families are having 5-6 sons and daughters respectively.

<i>Number of children</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total %</i>
None	4	0	2
1-2	48	40	44
3-4	36	40	38
5-6	8	20	14
7-8	0	0	0
9-10	4	0	2
Above 10	0	0	0
Total	50	50	100

<i>Number of sons and daughters</i>	<i>Middle class</i>		<i>Poor families</i>	
	Sons	Daughters	Sons	Daughters
None	18	26	14	20
1-2	64	58	64	66
3-4	16	12	22	12
5-6	2	4	0	2
Total	50		50	

Living Arrangements of the respondents:

Living arrangements generally determines the care and support that an elderly person receives from her family members. Table 2.8 shows that majority of the elderly women of the studied area, irrespective of their class, resides with their children and spouses (if are presently married). Moreover, the number residing with their married children (with or without spouse) both in the middle class and poor families is much more as compared to the number of elderly women residing with their unmarried/separated/divorced children (with or without spouse). This trend points out to the fact that many elderly person still today inspite of the breakdown of the joint families, co-resides with their married children, which is found to be a major source of care and their needed physical, emotional and psychological support at old age. On the other hand it also

points out to the existing family ties of Indian society which still remains untouched by the forces of modernisation. On the other hand, a very small section of elderly women are found to be residing with their married daughters, which is only 4% in case of middle class and 2% in case of poor families. It is significant to note that co-residence with married daughters are found mostly among the elderly women who are widows and who either have no son or whose son doesn't look after them.

This points out to the fact that co- residence with married sons gives them a feeling of security. Moreover, it is also known during the survey that co-residence with married sons/ children are often an assurance of the necessary security at old age, especially in terms of health care and financial security that they require at this age. While comparatively analysing the situation, it is revealed that co-residence of the elderly women with their married children in case of poor families (both with married sons and daughters) are mostly found in case where she is a widow. However, only 8% of presently married women are known to reside with their married children along with their spouse in these families. On the other hand, though in case elderly widow belonging to the middle class families the rate of residing with married children is found to be equally true but as compared to the poor families (8%) a much higher number of presently married elderly women are found to live together with their married children as well as both their married and unmarried children along with their spouse (26%). This findings on the one hand reflects dependency of the elderly women on their married children in the absence of their husband, irrespective of their class and on the other hand it points out to the better relationship and acceptance that the elderly women of the middle class families enjoy with their children, in comparison to their poor counterparts.

It is interesting to note that in poor families however, many instances are found where the elderly woman stays alone or with spouse (if married) in a completely separate arrangement, though shares the same residential compound with her married son/s. A significant number of elderly women i.e. 14% in case of middle class families as compared to 12% elderly women of poor families who are married are found to be living with their husband alone. In case of middle class families, either the children of these women are settled in some other city/ state or country or they have only daughters who are married off and presently staying in their matrimony. On the other hand, in case of poor families most of the women staying with their husband alone reports

not to have good relationship with their children neither do they receive any kind of support from them.

Quite a small number of respondents i.e. 4% belonging to the poor families as compared to 2% of middle class are found to be living alone. It should also be noted that, the elderly women is widow, in all such cases where she is found to be living alone. Apart from these, in the middle class families 6% elderly women co-reside with their relatives. It is worth mentioning that in both these cases, the elderly women are either widows or single/unmarried/separated.

Table: 2.8: Living Arrangements of the elderly women (in percentage).

Living Arrangements	Middle class	Poor families	Total %
Alone	2	4	3
With Husband	14	12	13
With Husband and unmarried /separated/divorced children	4	16	10
With Husband and married children	16	8	12
With Husband and both married and unmarried children	10	0	5
With married Son/s	34	38	36
With married Daughter/s	4	2	3
Both with married and unmarried children	6	12	8
With unmarried/separated/divorced/widowed children	4	10	7
Relatives	6	0	3
Total	50	50	100

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CHAPTER: 3

ECONOMIC STATUS OF THE ELDERLYWOMEN

Economy is one of the most important factors that determine the wellbeing of an elderly person as well as his/her status in the family and society. Nasreen (2009) points out that economic condition is not only a reflection of security in old age, but it also results in bringing about care and support from the family members. Our society being patriarchal in nature, most of its female members remains almost economically inactive and unproductive even during their working age. This generally happens due to society's general norms; where still today, a woman is not only expected to devote herself to her family and children, but also to consider this as their primary responsibility. Thus majority of them are found to be engaged in unpaid/ non-remunerative domestic work. This often results in their low participation in any paid employment, disrupted career graphs, low ability to control resources, low participation in decision making, especially with regard to property, resources etc. All these factors in turn results in various kinds of dependency on the male members of the family, like husband and sons. With old age when their physical and psychological dependency accelerates, this economic dependency increases further. With almost no or very little source of income associated with little or sometimes no accumulation of wealth, their dependency increases resulting in poor economic status and many kinds of economic problems in old age. Many studies conducted in this area reveals higher rate of economic dependency among women; and gender and age group to have direct relationship with this dependency (Nasreen, 2009) and (Audinarayan, 2012 a.).

Another factor which has a huge impact on the economic status of the elderly women is the incidence of widowhood. A woman, being economically dependent on her father since her childhood till her marriage, and on her husband thereafter, often falls in a grave situation after the death of her husband. With little knowledge of her husband's property and resources, with little savings and often with no source of income and their position becomes more vulnerable

after their husband's death. At this stage their dependence shifts entirely to their adult children, especially sons. Several studies shows that dependency on children especially when it comes to financial matters is found to be more among the female elderly than their male counterparts, which is often due to more incidence of widowhood among them and also due to their greater economic dependency (Bhadra, 2003), (Audinarayan, 2012 a.) and (Kaulegekar, 2007).

Moreover, women's lesser participation in organised sector jobs as compared to the males, deprive them of the benefits at retirement, like pension and others. Thus, in many cases even their participation in work does not guarantee them with security and independence at old age. George (1973) rightly points out that the retirement benefits do not have any significance for the individuals who were never engaged in any regular employment in their lifetime. He even adds that women in majority cases are often found to depend on the retirement benefits of their deceased husband. Though, some of these benefits lapses with the death of the husband and others gradually diminish in amount with time. Besides this another important factor which can contribute to some economic sufficiency at old age is the rate of savings of a person throughout his/ her life. Even in this aspect the elderly females lag behind than their male counterparts. Nasreen (2009)'s study points out to the low rate of savings among the elderly females which is attributed to their low rate of engagement in gainful employment throughout their life. However, exceptions in all the above mentioned cases also cannot be fully ignored.

The economic status and problems of every elderly woman vary depending on some factors. A most influential factor in this regard is the social class to which they belong to. Social class determines their educational status, occupational status, financial resources and ownership of property which in turn play quite a decisive role in determining the elderly person's status at old age (i.e. their working status at old age, ownership of property, fulfillment of needs, dependency for monetary help, nature of spending, care and support provided by family members etc.). Thus, this chapter attempts to analyse and comparatively study the economic status and, the nature and extent of economic problems of the elderly women, belonging to middle classes and poor families. Besides this, an attempt is also made to comparatively investigate the way in which the elderly women belonging to these two categories solve their problems and adjust themselves. This is done by studying the aspects like their occupational status, source of income, ownership

of property, assets and possession of bank accounts. Attempts are also made to explore their dependency for monetary support from others, person from whom the support is generally received and whether the support received is sufficient for the fulfillment of their needs. Moreover, assessment is also done with regard to the priority given to their needs, the extent of fulfillment of their needs by their family members, person generally approached for the fulfillment of needs; freedom enjoyed by them in monetary matters or spending of money, their pattern of spending, nature and frequency of travelling; and support sought in this regard etc. Moreover aspects like marital status, living arrangement, working and income status of self and spouse, physical disability of the elderly women are also analysed, to find out their association or effect on the economic dependence, fulfillment and priority given to their needs, and their freedom to spend money on their own.

Present Occupational status of the elderly women:

Occupational status indicates the level of economic independence of an elderly person. During old age, a person's deteriorating mental and physical condition often does not permit him/her to remain engaged in any economically productive work. Moreover, retirement is also an important factor for those who were engaged in organised sectors previously. In most of the studies conducted on elderly person, it is seen that while the majority of them are non-workers, but their number are comparatively more in case of female elderly than their male counterparts (Ansari, 2000), (Nasreen, 2009), (Bhadra, 2003) and (Bhadra, 2011). In this section an analysis of the occupational status of the elderly women belonging to the middle class and poor families is thus carried out.

Table 3.1 shows that only 32% of the respondents are currently engaged in some sort of remunerative work, while a significant proportion (68%) of them are non-working. Moreover, the percentage of elderly women, presently engaged in some sort of economically gainful work are significantly higher (52%) in case of elderly women belonging to the poor families as compared to those belonging to the middle class (12%). While looking separately at each class, it can however be noticed that in middle class families the number of non-working elderly women are much more as compared to the number of elderly women who are currently engaged

in work. Contrastingly in poor families, the number of working elderly women are little bit higher than those who are non- working. The reason behind the difference in the occupational status of these classes can be explained by the differences in their economic background which compels the elderly women of the poor families to work even at this age and even sometimes with their deteriorating health.

Table 3.1: Present Occupational Status of the elderly women (in percentage).

<i>Present occupational status</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Working	12	52	32
Non- working	88	48	68
<i>Total</i>	50	50	100

In case of poor families, the nature of occupations that the elderly women are mainly engaged in is manual work. Almost 65% of the working elderly women are engaged in manual work in factory/ construction sites, as house maids, as cooks in different households etc. Besides these some of the elderly women are vendors, some are engaged in part time jobs which they get from nearby factories, like wrapping toffees, tailoring etc. 19% of them are also found to be self-employed, like running petty grocery shops, road side tea stall, dhabas etc. Some of these elderly women are also found to be running road side canteens and dhabas together with their sons. On the other hand, middle class working elderly women are engaged mostly in private jobs (50%) like full time teaching jobs, engaged as faculty in private coaching centers on part time basis, some provide private coaching at home while remaining 50% are self-employed.

Past Occupational Status of the elderly women:

Past occupational status is also an important factor in assessing the present economic status of an elderly person. It not only reflects their economic condition during their early years but also their rate of savings and level of economic dependency throughout their life. Moreover, the nature of occupation that they were previously engaged into also determines the kind of benefits that they

are entitled to at this age. With this point of view the past occupational status and the nature of occupation of the respondents of both the classes are analysed comparatively.

<i>Table 3.2: Past Occupational Status of the elderly women (in percentage)</i>			
<i>Past occupational status</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Working	16	66	41
Non- working	84	34	59
Total	50	50	100

While looking at the total number of the working and non- working elderly women in table 3.2., it can be seen that only 41% of the elderly women were engaged in some economically gainful employment during their early years, while 59% were non-working. This definitely confirms the fact of lower participation of women in the labour force of our country. Analysing both the classes individually, shows that in case of middle class the percentage of elderly women engaged in some kind of remunerative work in their adult years is significantly less(16%) than the percentage of elderly women who were non-working (84%). On the other hand, in poor families the percentage of previously working elderly women are comparatively more (66%) than the number of elderly women who were non-working in their early years (34%). Moreover, a comparative analysis of both the classes shows that the proportion of working elderly women among the poor families are much higher (66%) than in case of the middle class families (16%).

The nature of occupation that the elderly women of both the classes were previously engaged into also shows a marked difference. In case of middle class families, nearly 50% of the respondents were engaged in Government sector, as teachers, clerical staffs and library staffs in various government schools, colleges and libraries. Besides these, 50% of the elderly women were engaged in private jobs, as teachers, lecturers and nursing staffs in different private schools, institutes and nursing homes. Contrastingly, while looking at the poor families we get a somewhat different picture. 82% of the elderly women belonging to the poor families were previously engaged in manual work, as home maid, tea factory worker, construction labour, cook in different households etc. 18% of the respondents belonging to the same category were engaged in casual/ skilled jobs like providing private coaching to small children and tailoring; 18% were engaged in private jobs as caretakers, peons and helpers in offices, ICDS and private schools.

The above data shows, a much higher participation of the poor elderly women in unorganised and private sectors and casual jobs which means absence of any economic security and benefits at old age.

Sources of Income of the elderly women:

Sources of income are considered as one of the major indicator of the level of economic independence at old age. Sources of income at old age provide an elderly person with a sense of economic security at old age and hence are considered as an important determinant of their wellbeing. Hence in the following section the sources of income of the elderly women belonging to both the classes are focused into and analysed comparatively.

The study reveals that much higher proportion of the elderly women belonging to the poor families (64%) have at least one source of income as compared to the elderly women belonging to the middle class (38%). On the other hand 62% of the middle class elderly women, in contrast to 36% of the poor elderly women are without any source of income and hence are completely dependent on their husband, sons and other earning members of their family for the fulfillment of their daily needs. Hence it can be asserted that the rate of dependency is more among the elderly women belonging to the middle class families as compared to their poor counterparts. A definite reason behind this is the higher participation of the poor elderly women in economically gainful activities. Moreover, the benefits of Widow Pension scheme and Old age Pension scheme enjoyed by some of the elderly women belonging to the poor families is also another reason for this factor. Needless to say that these security schemes cover only the families living below the poverty line and hence middle class elderly women are not entitled to it.

<i>Income sources</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Work	32	81	63
Widow Pension / Old Age Pension	NA	44	27
Deceased husband's pension	42	0	16
Own Pension	16	0	6
Private pension scheme/ Monthly Income Scheme	16	0	6
Rent	32	9	18
Total	19	32	51

Table 3.3 shows that for the poor elderly women, a major source of income (81%) comes from the remunerative work that they are engaged into as compared to 32% in case of middle class. Another important source of income for the elderly women of the poor families is the security schemes (Widow Pension schemes/ Old Age Pension Schemes) that some of them (44%) are covered under. However, it is to be noted that the percentage of coverage under these security schemes is not satisfactory. Many elderly women belonging to the poor families during the interview have complained of the fact that they are forced to work even with their fragile health as they do not get any assistance from the government. However, many elderly women who enjoy the benefits of these schemes reports that the amount provided under these schemes is quite small in size and are irregular in nature. On the other hand in case of middle class elderly women, 42% of them depend on the pension of their deceased husband while 16% of them depend on their own pension. However, this is only true in case of those, whose husband or who themselves were previously engaged in organised sectors with retirement benefits. Besides these, for a few middle class elderly women (as low as 16%) an amount received monthly from private pension schemes and monthly income schemes (MIS) are the main source of income. Rent is also another source of income for a number of respondents (32%), especially belonging to the middle class families, whereas in case of poor families only 9% of the elderly women manage some income by renting their property. Here it must be noted that few women belonging to both the middle class and poor families have more than one source of income.

Ownership of Property and Assets:

Ownership of property and assets ensures some amount of security at old age. The study thus focuses on the ownership of property and assets by both these classes of elderly women and have also analysed the type of property and assets held by them.

The study shows a marked difference between the two classes of elderly women in terms of ownership of property and assets. A much higher proportion of the elderly women (86%) belonging to the middle class own some property and assets as compared to only 34% of the respondents, belonging to the poor families. In case of middle class a significantly higher number of elderly women (86%) hold some form of property or assets as compared to 14% who do not hold any. With regard to kind of property or assets owned by the respondents of the middle class families, it is seen that majority of the elderly women who holds assets, have some form of savings/ fixed deposit either in bank or in post office. This is followed by 91% of the elderly women who own some amount of jewellery. Though in some cases the amount of jewellery left with them is too small in amount as they reports that they had to spend some of them in marrying off their children. 72% of the elderly women own some immobile property like houses, flat, plot of land or shops while 84% of them have life insurance policy in their name.

In case of poor families, the proportion of elderly women who own some form of property and assets is significantly low i.e. 34% in contrast to 46% of the elderly women who do not hold any. Most of these poor elderly women who own some form of property or assets, have small to very small savings /fixed deposits in banks and post offices. This is followed by 65% who own some amount of jeweler. For majority of the elderly women the amount of jeweler left with them is very small in amount while very few informs that whatever money they earn they save some amount from it and time to time invest in buying some small jewelries. 59% of the elderly women report that that they have some immobile property in their name, in most cases it is the house where they reside in.

Possession of Bank Account:

Possession of bank account is often an indication of the possession, of some sort of monetary savings/ financial resources. Hence it is an indication of financial security of a person, which

largely determines his/her wellbeing at old age. Besides these, at old age due to several physiological and psychological changes, a person often lose autonomy in undertaking many tasks, especially when it comes to financial matters. This is especially true in case of women. Studies reveal that even in their early years many women remain unaware and do not feel confident to handle their financial matters by themselves and hence, often take the help of others in these matters. This dependency increases with age. At old age, autonomy in relation to the operation and management of own bank accounts or resources are important as it not only provides the person with a confidence of handling their own resources but also is an indication of their active participation in the life affairs. Moreover, in some cases it also saves the person from various threats of cheating, in terms of financial matters, sometimes even from his/ her own relatives.

Hence in this section not only the proportion of elderly women, possessing bank account is investigated and comparatively studied in relation to their class, but their awareness related to the amount of money they have in their account is also looked into. The study also focuses on whether the elderly women are able to operate their account independently. In this context, the study probes into the reasons for not being able to operate the account independently and also attempts to know the relationship of the respondents with the person whose help is sought in this matter.

The study reveals that majority of the elderly women studied (65%) possess bank account in their name as compared to 35% who do not. While comparatively analysing, it is seen that a much higher number of elderly women (74%) belonging to the middle class possess bank account as compared to 56% of the poor elderly women. However, in this respect it should be noted that a number of elderly women belonging to both the classes reports that they have opened accounts in bank in order to apply for Gas connection and as a result they have zero balance in their account. Another important aspect is that in case of a significant number of married elderly women who possess an account, reports that the account is jointly owned by them and their husband.

Findings reveal that, out of the total number of the elderly women of both the classes, possessing bank account, a bit higher proportion (82%) belonging to the poor families as compared to the middle class families (76%) report that they are aware of the amount of money they have in their

existing account. 24% elderly women belonging to the middle class families and 18% of the poor families on the other hand, reports that they are not aware of the amount of money they have in their account. This unawareness indicates their dependency on other members of the family with regard to the ownership of resources. On the other hand, awareness in this respect is found to be associated with the educational and working status of the elderly women as a higher proportion those with higher educational qualification and almost all elderly women, participating in remunerative work, reports awareness in this issue.

Table 3.4 (i) reflect that, a much higher proportion (79%) of the elderly women depends on others for the management of their account. However, this dependency is comparatively found to be more among the elderly women of the middle class (81%) than those belonging to poor families (75%). These differences seen between the elderly women of the two categories, clearly indicates a higher level of dependency of the middle class elderly women with regard to the management of their own resources. Moreover, even their dependence with regard to the operation of their account is found to depend much on their educational qualification and working status. Irrespective of class, a higher proportion of elderly women with higher educational status and a higher proportion of those engaged in any remunerative work are found to report self-reliance in this regard as compared to those who are non-working or with lower educational qualification.

<i>Table: 3. 4. (i): Dependence of the elderly women for the operation and management of their bank accounts (in percentage).</i>			
<i>Whether dependent on others</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Not dependent	19	25	22
Dependent	81	75	79
Total	37	28	65

<i>Table: 3. 4 (ii): Reasons for the dependency of the respondents in relation to the management of their bank accounts (in percentage).</i>			
<i>Reasons for the dependency</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Not aware of the process to operate Bank Account	60	62	61
Due to Physical problem	17	0	10
Due to lack of confidence	23	38	29
<i>Total</i>	30	21	51

Table 3.4 (ii) reflects the reasons, reported by the respondents for not being able to operate own bank account/s independently. It is found that out of the total number of elderly women who depend on others for the operation of their bank account, 61% are not aware of the process of operating the same. While 10% of the elderly women report that due to their physical problem they have to depend on others. Moreover, 29% of them report that due to the lack of confidence they have to depend on others for the same. However, lack of confidence and unawareness about the process of operation of bank account are reported more among the elderly women belonging to the poor families than those belonging to the middle class. On the other hand, 17% of the middle class respondents report physical problem as the reason for not being able to operate their account independently. However, no such reason is reported by the respondents of the poor families.

It is revealed during the study that, majority of the elderly women who have to depend on others for the operation of their account, takes the help of their son/s. This is true for the elderly women belonging to both the middle class and poor families, showing 27% and 43% respectively. In the next level higher number of dependency are found on husband in case of elderly women belonging to the middle class families (23%) and on daughter/s in case of poor families (24%). Dependency on daughter/s in this matter are found to be 13% in case of middle class families while dependency on husband among elderly women of the poor families is found to be 14%. However a very small proportion of the elderly women are found to depend on son in law/s and other relatives in case of both the classes, showing 3% and 3% respectively in case of middle class and almost 5% and 5% respectively in case of poor families. Moreover, some middle class elderly women are found to depend on more than one person for help in this matter i.e. 7%

depends on both son/s and daughter/s, 7% on both son/s and daughter in law/s, 7% on both daughter/s and son in law/s, 7% on husband and son/s and another 3% on daughter/s and husband. The data thus gives us a clear picture of the higher level of dependency of the elderly women in this matter on their primary kin i.e. Sons, husband and daughters, irrespective of their class.

Monetary support:

During old age, with a person's deteriorating health and physical condition, their working capacity decreases and hence often they become dependent on other earning members of the family. Moreover, in case of elderly females, their lesser rate of participation in remunerative work, as compared to their male counterparts even during their working years make them more dependent during old age. In most cases, with almost no source of income at this age they have to depend on others for monetary support to manage their daily expenses. Thus the level of monetary support received by the elderly females is also an important factor in determining their wellbeing and the fulfillment of their needs. Moreover, it is also an indication of the level of their dependency on others and a way in which they cope up with their economic problems. Thus the study focuses on the whether any monetary support is sought by the elderly women in order to fulfill their day to day requirements, relationship with the person from whom the support is received and whether the amount received is sufficient for them to meet their daily requirements. Findings show that nearly 80% of the respondents receive monetary support from others of which 86% belongs to the middle class and 74% to the poor families. In this context, it is to be noted that, especially in case of middle class families majority of those receiving monetary support from others are those who are either non-working or whose income is not sufficient to meet their daily expenses. This is also found to be equally true even for the elderly women belonging to the poor families. However, in case of some poor elderly women it is found that in most cases, inspite when they are working they have to handover their entire income to either her husband or to her sons for her upkeep, especially when they are widows. Thus in such cases even when the elderly woman is working or has sufficient income sources she has to remain dependent on the other members of the family to meet the expenses of her daily needs. On the other hand 14% and 26% of the respondents belonging to the middle class and poor families

respectively manage their daily expenses or fulfill their requirements with whatever money they earn from work or receive from other income sources. In few cases, both in case of middle class and poor families it is also found that the elderly women besides managing their own requirements with their own income also contribute some amount to their family, sometimes as their upkeep and sometimes as a kind of monetary support to their adult children. However comparative analysis of the situation shows that, the dependency for monetary support is found to be more among the respondents of the middle class families as compared to their poor counterparts, which is naturally due to the higher rate of participation of the elderly women belonging to the latter category in remunerative work.

Table: 3.5: Person from whom the elderly women receive monetary support (in percentage).

<i>Relationship with the person providing monetary support</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Husband	23	32	28
Son/s	33	32	33
Daughter/s	0	3	1
Son/s and Daughter/s	23	22	23
Husband and Daughter/s	2	0	1
Son/s and Relatives	2	0	1
Grandson/s and Daughter/s	0	3	1
Son in Law/s and Daughter/s	5	5	5
Husband and son/s	7	0	4
Son/s and Grandson/s	0	3	1
Relatives	5	0	3
Total	43	38	81

Table 3.5 reflects that in majority cases the main source of monetary support are son/s (33%), and both son/s and daughter/s (23%), especially when the elderly women is a widow. For the married elderly women of both the classes in 28% cases the support is received from the husband alone, while only in very few cases the support is received both by husband and son/s (4%) and from husband and daughters (1%). Moreover, in case of few elderly women (3%) belonging to the poor families, daughters and in 3% cases grandson and daughters are also found to be the

source of monetary support. In such cases the elderly women either do not get any monetary help from their son/s or do not have any living son/s. For both the classes the proportion of elderly women who get monetary support from their son in law/s and daughter/s is as low as 5 %. In most cases these women either stays in their daughter's family as their son/s do not look after them or they do not have any living son/s. However, in case of 2% elderly women belonging to the middle class family, monetary support is received both from son/s and relatives. In such cases the elderly women is a widow residing in joint family with her relatives, and owning a share in her husband's property which is also owned jointly by other relatives co-residing with her. Thus her expenses are shared by both her son and the relatives (the other shareholders of the joint property). Besides these, 5% elderly women belonging to the middle class receives monetary support entirely from their relatives with whom they stay. These women are either unmarried or are separated from their husband and don't have any children to provide support at this age. In this context it is worthwhile to mention that few elderly women (who do not have any source of income or whose income is not sufficient to meet her needs) especially belonging to the poor families do not receive sufficient monetary support from their family members. Hence, these elderly women depend on monetary support provided to them by their neighbours/friends, which they pay off later at their own convenience. However, inspite of these cases, it can be concluded from Table 3.5 that children are the major source of support for majority of elderly women still today, irrespective of the social class to which they belong to. This reflects the familial values that are still present in our society inspite of the forces of modernisation.

Among the elderly women who receive monetary support, almost 79% of them belonging to the middle class family report that the monetary support they receive is sufficient to meet their daily expenses. However the percentage who reports to receive satisfactory monetary support is quite low in case of the elderly women belonging to the poor families, which shows only 38%. Moreover 5% of the elderly women belonging to the middle class and 24% of the poor families report that the monetary support they receive is not enough to meet their daily expenses. Besides this 32% of the respondents belonging to the poor families as compared to 12% of the middle class families report that they somehow has to manage with whatever support they receive. However, 5% of the elderly women belonging both to middle and poor families report that the assistance they receive is sometimes sufficient and sometimes not, to meet their daily needs. The

overall picture however reflects that the monetary support received by the elderly women belonging to the poor families in most cases is not sufficient to meet their daily requirements. However, in some cases the elderly women admits that this is due to the meager income of their children and family members.

It is revealed during the study that a higher proportion of the elderly women with no source of income are found to depend on monetary support from others for the fulfillment of their day to day needs as compared to those who have some source of income. Hence, monetary support is found to be inversely related to the source of income of the elderly women. Moreover, higher proportion of elderly women receiving monetary support are found among those, who have an earning husband as compared to those whose husband is nonearning. A higher number of elderly women belonging to the middle class, with non-earning husband, are found receive monetary support as compared to those of the poor families who fall in the same category. This indicates better social relationship and social acceptance of the middle class elderly women among their family members as compared to their poor counterparts. A more or less similar picture is also revealed in case of widows. In case of elderly widows without a source of income, the support is received by a higher number, belonging to the middle class as compared to those belonging to the poor families. However, higher dependency of the elderly widows on monetary support from others is found those without a source of income as compared to those having a source of income. Thus it can be concluded that irrespective of class, while having an earning husband is positively related to the monetary support received by the elderly women who are married, in case of widows having a source of income is inversely related to the monetary support received by them. Similarly, monetary support is inversely related to the working status of the elderly women as irrespective of class differences, a higher proportion of non-working elderly women receive or depend on monetary support as compared to the elderly women who is working.

Besides these, it is also revealed that higher proportion of elderly women without source of income, co-residing with children and husband and with husband alone receives monetary support as compared to those with source of income, falling in the same category. Similarly in case of widows, co-residing with their children or relatives, a higher proportion of elderly women without source of income receive monetary support as compared to those with source of income. Thus irrespective of class, living arrangement and marital status of the elderly women, a

higher rate of monetary support is received by those who do not have any source of income as compared to those who have one.

Hence, it can be concluded from the analysis that dependency on monetary support is found to be inversely related to the self-sufficiency of the elderly women in economic matters as the elderly women having a source of income of own are found to depend less on monetary support from others than those without a source of income. On the other hand, especially in case of the elderly women without a source of income, monetary support from others is also found to be a means through which they deal or cope up with their economic problem and needs.

However, satisfaction with regard to the amount of monetary support received is reported by a higher proportion of middle class elderly women, without any source of income as compared to the poor elderly women, falling in the above mentioned category. In case of the poor elderly women, without any source of income a much higher proportion report that they have to manage their expenses with whatever support they receive. While a considerable proportion report that the support they receive is not satisfactory. Another few report that the support they receive is sometimes sufficient to meet their needs while sometimes it is not. On the other hand, in case of the elderly women with a source of income, a much higher proportion, irrespective of their social class reports that the support they receive is sufficient to meet their needs. However, their proportion is higher in case of those belonging to the middle class families as compared to their poor counterparts. Hence it can be concluded that unlike the middle class, having a source of income is positively related to receipt of satisfactory monetary support in case of the elderly women belonging to the poor families.

Satisfactory monetary support is also found to be related to the earning status of husband. A higher proportion of elderly women, with earning husband belonging to both the classes report to receive satisfactory monetary support, in contrast to those whose husband is nonearning. Similarly, in case of elderly widows, satisfactory monetary support is found to be positively related to own income status. Irrespective of class a higher proportion of widows with a source of income report to receive satisfactory monetary support as compared to those without a source of income. Hence, satisfactory monetary support is positively related to the earning status of husband, in case where the elderly women is married and to own income status where she is a widow.

Moreover, unlike the poor elderly women, for those belonging to the middle class, satisfactory monetary support is not found to depend on the working status of the elderly women. Hence it can be concluded that unlike the middle class, for the elderly women belonging to the poor families, satisfactory monetary support is found to be positively related to their engagement in any remunerative work. Moreover, in case of the middle class elderly women, it is not found to be related to one own income status, where she is residing with her children and husband or with her husband alone. In contrast to this, in case of poor elderly women, it is found to be positively related to own income status even when she is co-residing with her children and husband. However, irrespective of class in case of widows co-residence with their relatives/ children, satisfactory monetary support is found to be positively related to having a source of income of the elderly women.

Fulfillment of the needs of the respondents by their family members:

An effort is also made to know the frequency at which the needs of the elderly women belonging to both the social classes are fulfilled by their family members and the level at which their needs get prioritised within their family. Moreover, the person to whom they generally approach for the fulfillment of their needs, when it is not within their affordability is also explored.

Table 3.6 (i) reflects the frequency of fulfillment of needs of the elderly women. It shows that a much higher proportion of the elderly women belonging to the middle class (64%) report that their needs are 'mostly' met by their family members, when compared to 10% of the poor elderly women. 56% percentage of the poor elderly women however state that their needs are 'sometimes' met by their children/family members. The proportion stating the same is much lesser i.e. 30% in case of those belonging to the middle class families. On the other hand, 4% and 2% of the elderly women belonging to middle class and poor families respectively report that their needs are 'always' met. However, as compared to 2% elderly women belonging to the middle class, 24% elderly women of the poor families report that their needs are 'rarely' met. This is followed by 8% of the elderly women belonging to the latter category who report that their needs are 'never' met by their family members. However, such incidence is not reported by any middle class respondent.

Table 3.6 (i): Frequency of fulfillment of needs of the elderly women (in percentage)

<i>Frequency of fulfillment of needs</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Always	4	2	3
Mostly	64	10	37
Sometimes	30	56	43
Rarely	2	24	13
Never	0	8	4
Total	50	50	100

Table 3.6 (ii) shows that most of the middle class elderly women (44%) report that their needs are ‘sometimes’ given or met with priority by their family members/children. This percentage is much less (24%) in case of poor elderly women. However, majority of the elderly women belonging to the poor families (46%) state that their needs are ‘never’ met with priority, whose proportion is much higher as compared to the 10% of the middle class respondents who report the same. Besides this, as compared to none of the elderly women of the middle class, 18% of the poor families feel that their needs are ‘rarely’ given priority. Moreover, a significantly higher number of elderly women belonging to the middle class (40%) as compared to 10% of the poor category report that their needs are ‘mostly’ given priority by their family members. However, only 6% belonging to the middle class and 2% belonging to the poor families report that their needs are ‘always’ met with priority by their family members..

Table 3.6 (ii): Frequency at which the needs of the elderly women are met with priority within their family (in percentage)

<i>Frequency at which their needs are met with priority</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Always	6	2	4
Mostly	40	10	25
Sometimes	44	24	34
Rarely	0	18	9
Never	10	46	28
Total	50	50	100

Looking at the total picture it can thus be concluded that the middle class elderly women are in a much better position when it comes to the fulfillment of their needs and also in terms of priority given to the same. The frequency of these factors in case of those belonging to the middle class is much higher as compared to the poor elderly women , whose poor financial /economic background often prove to be a hindrance for the same.

During the study an attempt is also made to know the relationship of the elderly women with the person to whom she generally approaches, for the fulfillment of her needs when it is not within her affordability. Table 3.6 (iii) shows that majority of the elderly women approach their son/s and husband for the fulfillment of their needs, but this proportion is lesser showing 24% and 16% respectively in case of the elderly women belonging to the poor families than those belonging to the middle class (32% and 24% respectively). However, a number of elderly women are found to depend on both son/s and daughter/s for the fulfillment of their needs. This percentage is slightly higher in case of the poor elderly women (18%) than those of the middle class (16%). Dependency on daughters is however found to be more among the poor elderly women.

Table: 3.6 (iii): Person to whom the elderly women approach for the fulfillment of their needs (in percentage)

<i>Relationship with the person</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total %</i>
Husband	24	16	20
Son/s	32	24	28
Daughter/s	10	16	13
Son and Daughter/s	16	18	17
Husband and Daughter/s	2	0	1
Grand children	0	2	1
Son/s and daughter in law/s	4	0	2
Son in Law/s and Daughter/s	2	0	1
Son/s and Husband	4	0	2
Daughter in law/s	0	2	1
Neighbour/s	0	6	3
Relative/s	6	4	5
Relative/s and neighbour/s	0	10	5
Employer/s	0	2	1
Total	50	50	100

Another significant fact which can be asserted from the table 3.6 (iii) is that the middle class elderly women mainly depend only on their primary and secondary kins (like their husband, son/s, daughter/s, son in law/s, daughter in law/s and grandchildren) and a very small percentage on their relatives (especially those who stays with their relatives and do not have any living primary and secondary kins) for the fulfillment of their needs. On the other hand, a number of poor elderly women (almost 22%) depend on their relatives, neighbours and even on their employers i.e. under whom they work (in case of working elderly) for the same. These elderly women report that whenever they are faced with any need which is not within their affordability, or cannot be meet with their income or the monetary support they receive, they approach their relatives/ neighbour and even their employers for help. In such cases they borrow money from them and pay them off according to their own convenience. These elderly women also report that they are bound to seek help from others (like relatives, friends, neighbour and employers) as they do not get any help from their children in this regard. Some of these elderly women also report

that even though their needs are mostly fulfilled by their family members but at times their family members are also unable to provide them with any support, due to their limited income. At this time neighbours and friends are their only support.

Further analysis shows that irrespective of class, fulfillment of needs of the elderly women depends on their income status. Having a source of income is always related to the greater frequency of fulfillment of needs of the elderly women, by their family members. However, this fact is more commonly visible in case of the respondents belonging to the poor families as compared to the middle class elderly women. Similarly, from the analysis a relationship could also be drawn between the earning status of husband and own income status with the frequency of fulfillment of needs of the elderly women. In case of presently married elderly women belonging to the middle class, though the earning status of the husband is found to be positively related to the fulfillment of the needs, in case of poor elderly women however, the frequency of the fulfillment of their needs are not found to depend on the income status of their husband. An important reason behind this could be the fact that a majority of the poor elderly women, with a nonearning husband, are found to have a source of income of their own. However, higher proportion of the elderly widows, having no source of income belonging to the middle class are found to be in a much better position when it comes to the fulfillment of their needs as compared to the elderly women of the poor families.

Moreover, working status of the respondents are also found to have a positive bearing on the frequency of fulfillment of their needs by their family members. A much higher number of working elderly women belonging to middle class against those falling in the non-working category, reports that their needs are always and mostly met by their family members. Similarly, in case of poor families, a higher number of nonworking elderly women report that their needs are never fulfilled as compared to a few elderly women who are engaged in some remunerative work at present.

It is also revealed that in case of middle class elderly women, having a source of income is not related to the fulfillment of their needs where the elderly woman is co-residing with her husband and children. However, in case of co-residence with husband alone, source of income of the elderly women are found to be positively related to the frequency of fulfillment of their needs. On the other hand, in case of poor elderly women, their source of income tend to influence the

frequency of fulfillment of their needs by their family members, even when she is co-residing with her children and husband. However, assessment could not be made in case of poor elderly women, without a source of income, co-residing with their husband alone, as in poor families no such samples are found. However, assessment made with regard to the frequency of fulfillment of needs, of the respondents of the poor families having a source of income (co-residing with their husband) shows quite an unsatisfactory picture. A considerable number of these elderly women, report that their needs are 'sometimes' and 'rarely' fulfilled. Moreover, none of them reports their needs to be 'always' or 'mostly' met. This to some extent reflects that co-residence with husband, often do not guarantee these poor elderly women, the fulfillment of their needs, even when she is earning.

Analysis of data also reveals that in case of middle class elderly women, their source of income does not determine the priority given to their needs by their family members. In contrast to this, a positive relation can be established between the two factors, in case of the elderly women belonging to the poor families. Besides this, irrespective of class a positive relation is found between the earning status of the husband and priority given to the needs of the elderly women. However, middle class elderly widow, without any source of income are found to be in a much better position with regard to the priority assigned to their needs, as compared to the elderly women of the poor families. Moreover, unlike the poor elderly women, the working status of the elderly women belonging to the middle class is also not found to be related to the priority assigned to their needs. Similarly, unlike the poor elderly women, source of income is found, not to determine the level of priority assigned to the needs of middle class elderly, where she is co-residing with her children and husband or with her husband alone. However, assessment could not be made in case of poor elderly women, without a source of income, co-residing with their husband alone, as in this category no such samples falling in this category are found. On the other hand, irrespective of class, in case of elderly widows co-residing with their children and relatives, source of income is found to determine the level of priority given to their needs by their family members.

Spending of money:

Here an attempt has been made to investigate the nature of spending of the elderly women and also to know whether they are allowed to spend money freely on their own requirements. This not only will focus on the level of autonomy that they enjoys with regard to spending money on own requirements and also on their nature of spending.

Findings show that in comparison to the elderly women belonging to the poor families (36%) a much greater number of their middle class counterparts (56%) report that they are free to spend money on their own needs. However, in this context it should be noted that most of these elderly women of the middle class families states that, though they are free to spend money on their own needs but generally they do it with the consent of their husband/ son/s or daughter/s. In case of 44% elderly women belonging to the middle class and 64% belonging to the poor families, who report to have restriction in such matters, state that this restriction is mainly due to the absence of any sources of income of their own and due to their dependency on others. Some elderly women also report that the limited and meager income of their family members prevents them from spending money on themselves. However, in a number of cases the elderly belonging to the poor families reports not to have freedom in such matters inspite when she is earning or having some source of income. Such elderly women report that whatever they earn they have to hand over the entire amount to their son/s or husband and have to remain dependent on them even for small expenses. Some of these elderly women also report that whatever they earn from their job they have to give the entire amount to their son/s as their upkeep, without keeping any amount for themselves. But their son/s refuses to pay them even their travelling expenses they require to go to their work place. Some of them remark that they will get to eat only as long as they are working and contributing to their family. If they discontinue, their work they will have to starve, as their children won't look after them. Findings however shows that, irrespective of class, having a source of income especially if the elderly women is a widow, an earning husband, their engagement in some remunerative work, have a positive relation with their freedom to spend money.

In this context effort is also made to know the nature of spending of the elderly women, whenever they get some amount of money. Table 3.7 gives us a statistical representation of the

same. The table 3.7 shows that frequency of spending on buying gifts for grandchildren and on children and other family members, on religious purpose are found to be more among the elderly women of the middle class. Whereas the frequency of spending money on the requirements of the family members, on buying commodities of daily needs, on own medicines and health related issues is found to be more among the poor elderly women. This probably shows the differences between the requirements of the two classes of elderly women. While the middle class elderly women spends more on buying gifts and other things for family members, on religious matters (like donating on temples/ religious places, buying items of puja etc.) the poor elderly women spends more on the fulfillment of basic requirements of the family and fulfillment of own basic needs. Moreover, a number of elderly women belonging to the poor families as compared to the middle class are found to contribute the entire money they get, to their son/s / husband or daughter/s for their upkeep. Apart from these a number of elderly women of the poor families are found to spend some amount as their travelling expenses. However, spending on items of addiction (like chewing of betel leaves/ taking of gatka/ tobacco etc.) is found to be more among the elderly women of the poor families than their middle class counterparts.

Table: 3. 7: Nature of spending money of the respondents (in percentage)

Grounds on which money is spend	Mostly		Sometimes		Rarely		Never		NA	
	<i>Middle class</i>	<i>Poor families</i>								
Gifts for grand children	17	2	24	18	2	12	4	13	3	5
On children and family members	15	9	25	18	3	8	5	15	2	0
On other requirements of the family	14	25	10	18	5	1	20	6	1	0
On buying commodities of daily needs	23	37	12	11	2	0	13	2	0	0
On own medicines and other health related issues	16	28	10	15	1	0	23	7	0	0
On Travelling	6	0	6	15	2	11	36	24	0	0
Contribute for own upkeep	5	14	1	7	0	1	41	24	3	4
On religious purpose	4	5	33	25	8	14	5	6	0	0
On addiction(like betel leaf, gatka, tobacco) etc.	4	5	3	19	2	8	41	18	0	0

Travelling:

Travelling is often an important means of recreation at old age, especially when it comes to visiting religious places or a close relative. It is an important factor because to a large extent it helps an elderly person to associate him/her with the outside world and promotes his/her interaction with the same. Moreover, to a large extent it also helps in driving out the feeling of loneliness and isolation associated with old age. However, on the other hand, travelling besides

involving monetary expenses (which are often a limitation at old age) also often involves dependency on others, especially when it comes to elderly women. In our society a women is often not allowed to travel alone, mostly due to her gender and hence she has to remain dependent on others for the same. During old age, the social factors couples up with her deteriorating physical condition which further limits her movement and increases her dependency on others. Hence, both the above mentioned factors (i.e. the monetary expenses and dependency on others) at times limit the frequency of their travelling or restrict their travel to places of their choice. Thus an attempt has been made here to assess the extent of economic problem faced by the elderly women of both the classes and their level of dependency on others in this regard. Attempts are also made to explore the ways they adopt or whose support they seek to deal with these issues. Besides these, their frequency of travelling, places commonly visited by them, their freedom to travel to the places of their choice are also explored. Moreover, the support they receive from their family members with regard to their traveling expenses, the person who generally accompanies them during travel are also probed into, which helps to assess their relationship with others and also their interaction outside their family.

Table 3.8 (i): Frequency of travelling (in percentage)

<i>Frequency of travelling</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Frequently	16	0	8
Sometimes	8	10	9
Rarely	58	54	56
Never	18	36	27
<i>Total</i>	50	50	100

Table 3.8 (i) show that majority of the elderly women (56%) state that they ‘rarely travel’, while 27% report that they presently do not travel or ‘never travel’. However, in case of elderly women belonging to the poor families, the percentage who report that they ‘never travel’ is much higher (36%) than the proportion of middle class elderly women (18%) who report the same. 58% of middle class elderly women as compared to 54% of the poor families, however report that they ‘rarely travel’. The reasons for this low frequency of travelling among these elderly women, as reported by them are primarily their deteriorating health and also their limited income to spend

on travelling expenses (especially in case of the poor elderly women). The number of elderly who report to 'sometimes travel' and 'frequently travel' are found to be significantly less (10% and 0% respectively among the elderly belonging to the poor families as compared to 8% and 16% respectively of those belonging to the middle class.

Irrespective of class, a large number of elderly women (70%) report that they are not free to travel to the places of their choice, this proportion is again high (84%) in case of the poor elderly women as compared to their middle class counterparts (56%). These elderly women report that these restrictions are mainly due to their low or absence of income / their poor health and their dependency on others. This often restricts them in travelling alone and hence they need to be accompanied by some person. Though, the proportion of women reporting low or absence of income as the main reason for such restriction is high among the elderly women belonging to the poor families than those belonging to the middle class.

Table, 3.8 (ii) shows that among the elderly women who travel, a much higher proportion of those belonging to the poor families (28%) report that they travel alone, than those of the middle class, who in most case depend on their family members for the same. Dependency on family members for travelling is found to be quite lesser i.e. 53% in case of the elderly women belonging to the poor families against 71% of those belonging to the middle class. Moreover, in some cases the elderly women of both the classes (12% and 16% in case of elderly women of middle and poor families respectively) are found to be accompanied by their neighbours/relatives while travelling. Such incidences are also found to be slightly more in number in case of poor elderly women than those belonging to the middle class. A few numbers of elderly women belonging to the poor category are also found to be accompanied by their friends while travelling. This reveals more dependence on kins and family members in case of the elderly women belonging to the middle class, than those belonging to the poor category. It also reveals that in most cases the life of the middle class elderly women centers around her kin and family members, where as in a considerable number of cases the poor elderly women are either self – sufficient in this matter or depends on their neighbours/relatives and friends for the same. This reflects their social interaction and relationships outside their family, which often play a greater role in providing them the needed support that they require at this age.

Table 3.8 (ii): Person who generally accompanies the elderly women while traveling (in percentage)

<i>Person who accompanies</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
None	17	28	22
Family Members	71	53	63
Neighbours/ relatives	12	16	14
Friends	0	3	1
Total	41	32	73

Much similarly, a larger number of elderly women belonging to the middle class are found to depend on their son/s and husband for their travelling expenses. Contrastingly much higher proportion of the elderly women of the poor families meets their travelling expenses by themselves. This proportion however, is found to much low in case of middle class elderly women. Assistance from daughters and son in laws are also found in few cases in case of both the classes of elderly women. Apart from these, in very few cases relatives also extends their support especially in cases where the elderly women is co-residing with them.

The study reveals that irrespective of the social class, the most commonly visited places by the elderly women are their relatives. This is followed by a large number of middle class elderly women who reports to mostly visit religious places, however this percentage is much low in case of elderly women belonging to the poor families. Visit to children is also found to be more among the middle class elderly women than those belonging to the poor category. One of the reason for this is that in most cases the children of the poor elderly women, in case staying separated from them or if are married (in case of daughters), are staying in the same town and in some cases even in the same neighbourhood where the elderly women resides. In case of the middle class elderly women however, their children in many cases are staying not only out of the town and state but even in abroad, in few cases. Besides this, few elderly women, especially belonging to the middle class reports that they sometimes go for a tour with their family members. Such visits are however reported by a very few number of elderly women belonging to the poor category. Another few number of respondents report that they visit their friends who stay in some other towns.

From the above findings it can be concluded that though the elderly women of the poor families are economically more active than the middle class elderly women but their participation in economically gainful activities, does not always ensure them economic self-sufficiency. This is mainly due the limited resources of their family, where the elderly women's contribution is considered to be an important factor for their upkeep. Thus inspite of having a source of income, in most cases, she has to handover all her earned money to her son/s, husband for meeting the requirements of her family, and remains dependent on them even for minor things. Moreover, in some cases the money earned or received by them as old age/widow pension so irregular and merge that it fails to meet their economic needs. These amounts are often too little in meeting their medical expenses even. Thus participation in work or having a source of income in most cases does not reduce their dependency on others to that extent. On the other hand the middle class elderly women are found to be less economically active and hence, more dependent on their family members. However, the monetary support received by the elderly women of the middle class from their family members are often enough to meet most of their economic requirements which to a large extent reduces their economic crisis. On the other hand, the monetary support received by the elderly women of the poor families, in most cases are not sufficient to meet their requirements. In some cases they have to adjust with whatever support they get. Unlike the middle class elderly women, some poor elderly women even reports absence of any economic support from their children and family members. Hence, it can be concluded that the elderly women belonging to the poor families are likely to suffer from more economic crisis as compared to their middle class counterparts.

Moreover, majority of the elderly women with an earning husband are found to have less/no economic problems as compared to those whose husband is non-earning. However, in comparison to their counterparts, more number of elderly of the poor families suffers from economic problems inspite when their husband is working or having a source of income. This is due to their limited income which is not always sufficient to meet the family expenses, especially at the time of crisis. The condition of widow/single elderly of poor families without source of income is worst in this regard.

Participation in economically gainful activities though seemed to be positively related with the economic status of an elderly women but almost half proportion of the elderly women of the middle class families presently engaged in such activities reports economic problem mostly due

to the lack of sufficient income at present. Similarly a considerable number of elderly women belonging to the poor families report to suffer from economic problems, mostly due to the same reason and also due to the lack of access to own income. However a significant proportion of non-working elderly, belonging to the middle class reports absence of any economic problem as compared to the poor elderly women. This difference is obviously due to the differences in the socio-economic background of these two classes, which play a greater role in fetching them better economic and monetary support from other members of their family.

Living arrangement of the elderly women is also found to have an effect on their economic status. Elderly women having a source of income, co-residing with children and husband seems to affect their status positively. A higher number of such elderly women belonging to the poor families reports absence of economic problems than the middle class elderly women falling in the same category. On the other hand, in case of non-earner or who do not have a source of income, a higher proportion of the elderly women belonging to the poor families are found to suffer from economic problem as compared to their middle class counterparts, inspite of co-residence with children and husband.

On the other hand, the poor elderly widows, having a source of income and living with children, suffers more from economic problems than the elderly women of the middle class. Similarly in case of those without a source of income, economic problems are reported at a higher proportion from those belonging to the poor families, than their middle class counterparts falling in the same category. Similarly, elderly widows/ divorced /single living alone with and without a source of income in the middle class families are found to be in a better position than those of the poor families. However co-residence with husband alone seemed to have a much positive impact on the economic status of the elderly women especially in case of middle class, inspite when they do not have a source of income. Although, for those of the poor families, not having a source of income tend to affect the status of the elderly women even when she is residing with her husband.

Similarly in case of disabled elderly women, with and without income belonging to the middle class reports absence of any economic problems in almost all cases as compared to the elderly women of the poor families.

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CHAPTER: 4

SOCIAL STATUS OF THE ELDERLY WOMEN

Social status is of utmost importance in studying the well-being of a person. Human beings, being a social animal, their well-being to a great extent revolve around their participation in the social world that surrounds them which includes their family, relatives, work place, neighbours, and friends. Active participation in this world not only gives man a sense of satisfaction and fulfillment but also helps to develop confidence in them. Besides this, social recognition from other members of the society and family gives man a sense of importance, as a member of the society. For human beings, social factors play an important role in not only developing his personality but also play a greater role in his socialisation process. Social participation, social role playing and social acceptance of a person in his/her family, peer group, neighbourhood, and work place is of immense importance in this case.

During old age due to the deterioration of physical and mental abilities and also due to various societal factors, a person often experiences sudden change in his/ her social status. Old age often results in withering away of many social roles which were once a part of his life and which had help him to earn recognition from other members of the society and family. In this context, retirement or loss of job is an important factor which results in role loss among the elderly persons. Besides this, when it comes to his/ her family, changes often comes with the loss in decision making power which is generally taken over by the members of the younger generation. This role loss is often accompanied by changes in his/her social relationships, social recognition and acceptance which a person has received throughout his life. Social acceptance and recognition tends to give a person a sense of self-worth, and hence is an important factor in ensuring their well-being.

In case of women, due to their low participation in work force, the main arena in which their role and power revolve around is their family. But in our society this role and power is again determined by the marital status of a women. A living and active husband generally assures greater power and diminishes the chances of role loss to a great extent in old age. Similarly studies reveal that an active participation in house hold work and its management or any other

beneficial contribution in the family ensures an elderly woman a higher status and better social acceptance (Gowri, Reddy & Rani, 2003) and (Panda, 2005).

With the objective of assessing the changes in the social status of the elderly females, belonging to the middle and poor families, the present study seeks to investigate the extent of role loss that the elderly women of both the classes experience with regard to their job and also within their family. This is assessed by studying their participation in the decision making process and the frequency at which their consultation is sought by their family members, when it comes to decision making. Attempts are also made to investigate their perception with regard to the changes experienced by them in this regard. Besides this, their participation and decision making in household affairs and activities are also studied. Efforts are also made to explore their engagement in social/ welfare activities. Apart from this, their contributions in their family are also assessed by studying their participation in various household and other activities.

Besides these, their social acceptance is assessed by investigating their relationships with other members of their family, especially their grandchildren and children and also with their friends and neighbours, who generally form an important part of one's life, outside the family. In this context, their relationship with their husband (if alive) is also assessed. Assessments are also done with regard to their participation in various social activities like frequency of going for shopping, going to religious places, going out with family members, visiting a friend or relatives, attending social gatherings, going out for a walk etc. Efforts are also made to know about their engagement in social/ welfare activities. Apart from this, their contributions in their family are also assessed by studying their participation in various household and other activities. Moreover assessments are also done with regard to their perception on the changes that they are experiencing in their status, as a result of role losses and the attitude of their family members towards them. Their perception with regard to the fulfillment of both their economic, emotional and health care needs and requirements by their family members; towards the younger generations; and changing gender roles and social values are also assessed simultaneously.

Extent of role loss and their perception towards it:

Social roles are important in one's life as they give a person an opportunity to provide their valuable contribution in the society and family which not only gives a sense of fulfillment but

also helps to gain recognition from other members of the society. With old age, generally due to some physical and societal factors these roles start fading away leaving the elderly person jobless, unable to contribute to the society and family gainfully, thus making them dependent on others. Though this is not always true in every case and exceptions to these are also found, where an elderly person in spite of his age is actively participating in all societal affairs and continues to gain recognition from other members of the society and family. However, in case these role losses take place they generally have several impacts on the well-being of the elderly person resulting in severe depression, frustration, and feeling of worthlessness among them. Thus this section probes into and studies comparatively whether and to what extent role loss has been experienced by the elderly women of both middle class and poor families. Efforts are also made to study their perception in relation to the role losses that they are experiencing.

With this objectives, several factors are assessed like their participation in decision making process, management of household affairs, social/welfare activities etc. Efforts are also made to study the changes experienced by them in these areas and their perception towards these changes. Moreover, in order to assess their role loss, their contributions to their family especially in the household chores are also studied intensely. The elderly women who were once employed but are non-working presently are also studied for assessing their perception towards the loss of their job.

Participation in Decision making:

The role of decision making though is usually performed by men in our society but often it gives women a sense of authority and power when the decision making power of the family rests in the hands of their husband. This is because in a patriarchal society a woman's status is often determined by the status and power enjoyed by her husband. However, in old age there often occurs a change in the decision making authority in the households. The power so enjoyed by a person during his/her adulthood is often lost at the hands of the younger members of the family. Moreover, as women tend to live longer than men, so generally after the husband dies the decision making power of the family often gets transferred to the younger members of the family. This transfer of power in many cases results in a feeling of loss of authority and worthlessness among the elderly women and it is intensified if they are not given a chance to

express their views or are not consulted in any matter. However, this is not true for every woman, because in many cases the elderly women are found to be well adjusted to the transitions of their life and thus they welcome every change with positivity.

In this section efforts are made to study the elderly women's participation in decision making authority, changes in authority with regard to the same and their perception towards these changes.

Table 4.1 (i): Decision maker of the family...past and present (in percentage)

Person acted /acting as the decision making authority	Past		Present	
	Middle class	Poor families	Middle class	Poor families
Self	0	8	4	6
Self and husband	10	10	16	10
Self and Son/s	0	0	0	2
Self and Daughter/s	0	0	2	4
Self and Daughter in law/s	0	0	0	2
Self , daughter/s and son/s	0	0	4	2
Husband	84	78	10	14
Husband and sons	0	0	8	6
Son/s	4	2	42	48
Daughter/s	0	0	2	2
Daughter and Son- in Law/s	0	0	6	4
Relatives	2	0	6	0
Total	50	50	50	50

Table 4.1 (i) shows lesser participation of the elderly women in the decision making of the household. It can be noticed that only 8% of the elderly women belonging to the poor families against none belonging to middle class were the decision maker of the household in the past. However, 4% of the elderly women of the middle class families against 6% of those belonging to the poor families are presently the decision maker of their family. This lesser number of elderly

women acting as the decision making authority suggest the prevailing patriarchal system in which the male still holds the authority of decision making. However, in few cases, the elderly women are found performing the decision making role along with their husband and other younger members of the family. In this context it should be mentioned that this percentage is 22% in case of middle class and 20% in case of elderly women belonging to the poor category. The comparative analysis with regard to participation of the elderly women in decision making authority thus shows no significant difference between the two classes.

Table 4.1 (i) also shows declined authority of the husband in decision making, but in this context it should also be noted that most of the elderly women covered under the present study, irrespective of their class are widow, which is also one reason that accounts for the above fact. However, the decision making power in most cases, rests in the hands of the husband and in some cases both with the elderly women and their husband, where they married and co-residing with their spouse. The table 4.1 (i) at a glance shows that irrespective of class, in majority cases the decision making authority rests with the younger male members of the family like son/s and son-in laws (in case of elderly residing with their married daughter). However, only in case of one elderly woman belonging to poor families, the daughter plays the decision making role. In this context it is noteworthy that in this case the elderly woman though stays alone, in a separate arrangement and in a separate residence but she is looked after by her daughter who stays in the same neighbourhood with her husband and children. Due to her physical disability (as reported by her) it is her daughter who takes all the decisions for her. Besides these, a few elderly women belonging to the middle class resides with their relatives and hence the decision making authority rests with the relatives, co-residing with them. However 80% and 66% of the elderly women belonging to middle class and poor families respectively are found to experience changes in this matter where their own or their husband's decision making power is lost or is presently shared with the younger members of the family.

Analysis of data further shows that irrespective of the class to which the respondents belong to, their age group is found to be inversely related to their participation in the decision making process, as with increasing age their participation in decision making tend to reduce. In this context it should be noted that irrespective of class, the proportion of elderly women belonging to the 'middle aged old' and 'oldest old' group who participate in the decision making process

are either having a source of income or are living alone, where she is the sole authority to take every decisions regarding her family.

Moreover, participation in decision making is also found to be related to the educational status of the elderly women as a higher rate of participation is noticed among the elderly women who have pursued education till higher secondary level to master degree as compared to the elderly women who are illiterate, achieved non-formal education or have studied till secondary level. Similarly in case of elderly women belonging to the poor families, a higher level of participation is found among elderly women who have pursued education till higher secondary level. However, comparison of both the classes in this matter shows that a much higher number of poor elderly women, who are illiterate, achieved non-formal education or have achieved education till higher secondary level participates more in decision making than the middle class elderly women falling in these categories. This can however be due to the overall poor educational status of the elderly women of this class.

Findings also reveal that participation in remunerative work is positively related to their involvement in the decision making authority. However, the proportion of working elderly women participating in decision making authority is found to be much higher in case of the middle class elderly women those belonging to the poor category. This suggests that in most cases, even participation in remunerative work for the poor elderly women does not ensure their participation in the decision making.

Besides these, participation in decision making is also found to be positively related with the earning status of the husband, especially in case of middle class. However, this is not been found to be true in case of the elderly women belonging to the poor families, a reason behind this could be the fact that all the poor elderly women with non-earning husband, who participate in the decision making process are either working or have a source of income of their own, which can be a cause of their participation in the decision making process. Moreover, irrespective of the class, to which the respondents belong to, having a source of income, especially where the elderly woman is a widow is also found to be positively related to their participation in decision making.

Besides these, a relation can also be noticed between the marital status of the elderly women and their participation in decision making. Irrespective of their class, a higher participation in decision making is noticed among the married elderly women as compared to the widows and

unmarried. A higher participation in the decision making is also noticed in case of middle class elderly women co-residing with their husband alone as compared to those, co-residing with their children and husband. This is however not found to be true in case of poor elderly women, where higher rate of participation is found in case of those co-residing with children and husband. However, irrespective of class, the rate of participation in decision making among the widows co-residing with their children or relatives in this matter are found to be much lesser as compared to the above mentioned categories.

In this context, attempts are also made to analyse the perception of the elderly women (belonging to both the categories), towards the changes experienced by them in the decision making authority. This will not only give us a picture of their attitude towards these changes but will also reflect the level of their adjustment with these transitions of life. In this context, (Panda,2005) remarks that the convenience at which an elderly person give up her previous roles and takes up new roles according to the changing needs, reflects her ability to adjust. With these objectives, some statements are presented before the respondents during study. They are asked to select the statements that they think could give expression to their feelings and views. Data gathered from this process reveals that in case of 16 elderly women belonging to middle class and 13 belonging to the poor families such changes has not taken place, (i.e. the person previously playing the decision making role still continues to play it). However, (out of the remaining 34 elderly women belonging to the middle class and 37 elderly women of the poor families) , 21 (62%) elderly women of the middle class and 15 (41%) elderly women of poor families feel that the change is quite '*normal*'. Besides, these 12 (35%) elderly women belonging to the middle class also feel that their '*position is not affected by the change*'. On the other hand the remaining 13 i.e. (38%) elderly women belonging to the middle class and 20 (54%) elderly women of poor families feel that '*they have no option but to compromise with the present change*' and also that '*in the past the person playing the decision maker role was better than the present one*'. A few of them even feels that '*their authority is lost due to the change*'. However, 6% elderly women belonging to middle and 5% belonging to poor families remain '*indifferent*'. In this context it should be noted that, accepting this change as normal and feeling that their position is not affected by the change reflects their adjustment to the changing situations of their life. The percentage of the elderly women accepting the change positively is comparatively higher than those elderly women who

are facing problems to adjust with it or who feel that their position is lost due to it. However, it should be noted that the number of elderly women accepting the change as normal are found to be more in case of middle class families than in case of poor families. In poor families, majority of the elderly women are found to face problems while adjusting to these changes. These differences among both these two categories of elderly women can be explained by the difference in their educational and cultural background. Education not only aims to provide knowledge but also provides the power of tolerance, control and adjustment to life situations and these can be clearly reflected in this case.

However, to understand the elderly women's participation in decision making process, it is also important to study the frequency at which they are consulted by their family members when any decisions are being taken in the family. Their participation in this process is important because the level at which their consultation is sought by their family members determines to a great extent, the level of their social acceptance in the family.

Table 4.1 (ii): Frequency at which the consultation of the respondents is sought in decision making (percentage)

<i>Frequency of consultation</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Always	32	18	25
Mostly	24	34	29
Sometimes	16	10	13
Rarely	8	10	9
Never	18	24	21
N/A	2	4	2
Total	50	50	100

The table 4.1 (ii) reflects the frequency at which the elderly women are consulted by their family members in the decision making process. The table 4.1 (ii) shows that 32% of the middle class elderly women and 18% of those belonging to the poor families are 'always' consulted by their family members when any decisions are being taken in the family. In this context it should be noted that these elderly women whose consultation is 'always' sought by their family members

are mostly married and are co-residing with their husband, with or without children or where the elderly women is herself the decision maker of the family. However, the table 4.1 (ii) shows that majority of the elderly women studied i.e. 56% in case of middle class and 52% in case of poor families are 'always'/ 'mostly' consulted by their family members at the time of decision making. Only 16% and 8% of the elderly women belonging to the middle class against 10% and 10% elderly women of poor families are 'sometimes' and 'rarely' consulted. On the other hand 18% and 24% of the elderly women belonging to middle class and poor families respectively report that they are 'never' consulted in any matter. However, the question is non-applicable for 2% and 4% of the middle and poor elderly women respectively, as they stay alone, and have no family members staying with them to seek their consultation.

Comparative analysis of the two classes shows that a higher proportion of the elderly women belonging to the middle class are consulted by their family members as compared to those belonging to the poor families. This to a great extent reflects the acceptance of the middle class elderly women within their family and their relationship with their family members. Analysis also shows that consultation in decision making is positively related to the educational status of the elderly women as a large majority of the middle class elderly women who has pursued educational qualification till higher secondary to master degree are 'always' and 'mostly' consulted by their family members, than those who are either illiterate/ achieved non formal education or who have studied till secondary level. Similarly in case of poor families, elderly women who have pursued educational from primary to higher secondary level are found to be 'always' and 'mostly' consulted by their family members than those who are either illiterate or have achieved non-formal education.

Much like participation in decision making, consultation in the same are also found to be inversely related to the age group of the elderly women, as irrespective of class a higher proportion of elderly women falling in the age group of 60-69 years are found to be 'always' and 'mostly' consulted by their family members as compared to the elderly women falling in other categories. Moreover it is found to diminish with age.

A positive relation is also found between the participation of the elderly women in remunerative work and household chores and consultation in decision making. It is found that irrespective of class, a higher proportion of elderly women participating in remunerative work and household

chores than those who do not are 'always' and 'mostly' consulted by their family members in decision making.

The study also reveals a relation between the frequencies of consultation with the living arrangement of the elderly women. It shows that irrespective of class, a much higher number of elderly women co-residing with their husband alone are 'always' and 'mostly' consulted by their family members as compared to those co-residing with their children and husband. However in case of widows co-residing with relatives/ children, source of income are found to play an important role in the frequency at which their consultation is sought.

The study reflects that most of the elderly women whose consultation is sought by their family members are consulted in Property related matters, matters related to marriage, job, buying of household goods/furniture, education of children, buying gifts for relatives, religious affairs/ rituals and child rearing. However, when it comes to religious affair and rituals, their consultation is mostly sought by younger members of the family. A considerable number of elderly women are also consulted in property related matters and this is true for both the classes. This is followed by a large number of elderly women who are also consulted by their family members in case of deciding and buying gifts for relatives and during the purchase of any household goods/ furniture. Marriage of is an area where the elderly women still find importance; this is also reflected in the study as irrespective of class, a significant number of elderly women are consulted when it comes to the marriage of their children or grandchildren. This is followed by a some elderly women who are consulted in child rearing, but their number is comparatively much less in case of poor elderly women. This is probably due their poor relationship with their children especially their daughter-in laws in most cases and also due to the fact that a significant number of them are staying alone or co-residing only with husband without their children. In matters of education and jobs of the family members however, the elderly women of both the classes are found to get less importance as their consultations are rarely sought by their family member in these matters.

Efforts are also made to probe into their perception, if in any case they are not consulted by their family members. Majority of the respondents of the present study (i.e. 50% of middle class and 34% belonging to the poor families) state that '*it is normal*', as according to these elderly

women, *'it is not always possible for the family members to seek their consultation in every matter'*. Some of the elderly women having similar opinion state that *'though their family members always seek their consultation but sometimes in the interest of the family they have to take some decisions at their own, which is quite normal and there is nothing to feel bad about'*. Few elderly women especially belonging to poor category state that *'the children are now grown up and now they are the earning members of the family, thus it is quite natural that they will decide everything'*. These statements reflect greater adjustment of the elderly women towards the role loss that they are experiencing at this age.

This is followed by 14% and 12% elderly women of the middle and poor families respectively who state that *'they have no interest to be a part of the decision making'*. Such statements are an indication of social withdrawal and loss of interest of the elderly women in family and social matters. This is both due to their poor physical condition and sometimes out of the feeling of depression that results from their role loss. Much similarly 2% of the elderly women belonging to the middle class and 4% belonging to the poor families feel that *'they are not capable of giving a better suggestion'*.

On the other hand, 30% of the elderly women of middle class and 34% belonging to the poor category *'feels bad'*, *'feels insulted and feels that their authority is lost'* when they are not consulted by their family members in any matter. Some of these women belonging to the poor families remark that *'I don't have any problem with regard to the decisions taken by my sons, I don't want to interfere. They do whatever they like but sometimes I feel bad and depressed and feel that my importance has reduced'*. Another woman remarks that *'when it comes to decision making I have no authority. My son decides everything and sometimes consults my husband but if I ask, they avoid me. I feel bad because the entire day I work for the family but can't expect to have any authority in return'*. Besides this, 8% elderly of poor families remain indifferent to this question. However, 4% and 8% of the elderly women belonging to middle and poor families respectively state that they take every decision in their family and hence none of the decisions are taken in their family without their consultation.

However, comparative analysis of both the classes reveals that a higher proportion of elderly women belonging to the middle class are found be well-adjusted than those belonging to the poor families.

Information about decisions taken in the family:

In order to assess the extent of importance given to the elderly women in their family, along with their level of their participation in decision making, the frequency at which their consultation is sought, and the frequency at which they are informed about any decisions being taken in the family. Attempts are also made to assess their attitude towards the same.

Table 4.2 shows that quite a larger proportion of elderly women i.e. 62% belonging to the middle class and 58% of the poor families are ‘always’ and ‘mostly’ informed by their family members about any decisions being taken in the family. This again points out to their acceptance among their family members and the importance given to them in their family. This is followed by 14% elderly women belonging to middle class against 10% of the poor families who report that they are ‘sometimes’ informed about the decisions taken in the family. Whereas 16% elderly women belonging to each class report that they are ‘rarely’ informed. On the other hand 6% and 12% elderly women belonging to middle and poor families respectively report that they are ‘never’ informed about any matter. However, the question is found to be non-applicable for 2% and 4% elderly women belonging to middle and poor families respectively as these women stays alone and hence this question is non-applicable for them.

<i>Frequency at which the elderly women is informed</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Always	38	22	30
Mostly	24	36	30
Sometimes	14	10	12
Rarely	16	16	16
Never	6	12	9
N/A	2	4	2
<i>Total</i>	50	50	100

Attempts are also made to assess the perception of the elderly women, in case they are not informed by their family members about the decisions taken in the family. A significant number

of elderly women (i.e. 40% of middle class and 24% belonging to poor families) state that, 'It is normal' and they do not feel bad about it. While, 12% and 8% elderly women belonging to the middle class and poor families remark, that 'they have no interest to know' about the decisions taken in the family. On the other hand 44% and 52% of those belonging to middle class and poor families respectively, feel 'worthless', 'feels insulted', position is lost' and 'feels bad' in case they are not informed about any decisions taken in their family. However, the question is non-applicable for 4% of middle class elderly women and 16 % elderly women belonging to the poor families as these women are either staying alone or some of them report that such situations do not arise in their case.

Participation in the management and decision making of household affairs:

In Indian society, a women's position till today centers within the four walls of her family and household. In this society, a woman whether working or non-working is expected to deliver her duties towards her family as her first priority. During her adulthood a woman generally manages the household affairs by her own. In some cases she acts as the sole authority in the management of these affairs and all the family members has to consult her before taking any decisions related to these affairs. But with age, a woman loses many of her roles, and management of household affairs is also one among them. With the arrival of daughter-in law in the family, she gradually loses her authority on household affairs. The new person generally tries to manage the household affairs according to her own wish and convenience which generally takes away from the elderly women the roles related to the management and decision making of these affairs. However, to some elderly women this transfer of authority and the responsibilities associated with it, is a cause of great relief in old age where as to others this cause feelings of loss of authority, feeling of being dominated and also sometimes even results in depression among them.

In this context the present study has also enquired whether any changes have taken place with regard to the decision making of the household affairs. Table 4.3(i) reflects that irrespective of class, in majority cases, the elderly women were the sole authority in the management of household affairs in the past (90% and 96% in case of middle and poor families respectively). Besides these, another few proportion of the elderly women in the past participated in the

decision making affairs jointly with others. Only in case of 4% elderly women belonging to the middle class the role of management was played by the relatives staying with her.

However, the table 4.3 (i) also shows that in the present time the role of management of household affairs in majority cases has been transferred to the daughter-in laws of the family, though in case of a considerable proportion the authority still rests with her (i.e. 26% in case of elderly women belonging to each category). Besides these, 18% of the elderly women belonging to middle class and 22% belonging to poor families are found to participate jointly with their daughter-in laws in the management of these affairs. Similarly joint participation with daughters in the management is found in case of 6% and 12% of the elderly women belonging to middle and poor families respectively. Only in case of 4% elderly women belonging to the middle class families the authority rests jointly in the hands of the elderly women along with the relatives staying with her. However, in very few cases, especially where she co-resides with her daughters, these affairs are decided and managed by the daughters. Only in 2% case the authority is enjoyed by the relatives staying with the elderly women. In this context it is significant to note that the number of elderly women participating in the management of household affairs are higher in case of poor families (60%) than in case of middle class families (54%), this confirms greater participation of the elderly women belonging to the poor families in the management and decision making role of the household.

**Table: 4.3 (i): Management and decision making of the household affairs....past and present
(in percentage)**

<i>Person acted/ acting as the decision making authority</i>	<i>Past</i>		<i>Present</i>	
	<i>Middle class</i>	<i>Poor families</i>	<i>Middle class</i>	<i>Poor families</i>
Self	90	96	26	26
Self and Daughter/s	4	4	6	12
Self and Daughter in law/s	0	0	18	22
Self and others	2	0	4	0
Others/relatives staying with the elderly	4	0	2	0
Daughters	0	0	6	4
Daughter-in law	0	0	38	36
Total	50	50	50	50

While analysing the proportion of elderly women who has experienced changes in this regard it is found that in case of 42% and 40% cases belonging to middle class and poor families the decision making power of the elderly women in this regard is lost at the hands of the younger members of the family. Presently these younger members now act as the sole decision maker in the management of these affairs.

Analysis of data shows that much like their participation in decision making of the family, their participation in the decision making and management of the household affairs is inversely related to their age-group, as their rate of participation in these affairs are found to decrease with their increasing age. On the other hand, it is found to be positively related to the educational status of the respondents, their participation in remunerative work and in household chores, self- income and income of husband of the respondents. Besides these, living arrangements of the elderly women are also found to be related with their participation in these affairs.

A higher rate of participation in these affairs is found among the elderly women with higher educational status (Higher secondary- Masters in case of middle class families and Primary – Higher secondary in case of poor families). Participation in these affairs is also found to be

higher among those elderly women who participate in some remunerative work and also among those who participate actively in household chores. Data shows that proportion of participation in the management of household affairs is higher among those elderly women, who actively participate in household chores, This proportion is however found to be much lesser in case of the elderly women who participate in some light household chores whereas this proportion further reduces in case of those who do not participate in any household chores.

Besides these, a higher number of middle class elderly women with an earning husband are found to enjoy the decision making authority in household affairs than those whose husbands are non-working. However, this is not found to be true in case of the elderly women belonging to the poor families. In their case it is to be noted that, these poor elderly women, with non-earning husband either have a source of income of their own or they co-reside with their husband alone/ with husband and unmarried children where she is the sole authority to manage these affairs. Besides these in case of widows, having a source of income is found to be related to their participation in these affairs. It is also noted that irrespective of class, a higher number of elderly widows having a source of income, participates in the decision making of household affairs than the widows who do not have any source of income. Moreover, irrespective of class, a higher rate of participation is found among the elderly women co-residing with their husband alone than those co-residing with their husband and children or widows co-residing with their children or relatives. Moreover, irrespective of class, in case of elderly widows their income status is found to be positively related to their participation in decision making as higher proportion of widows with a source of income are found to participate in the decision making of these affairs as compared to the widows who do not have a source of income.

In this context, the perception of the elderly women towards the change in the management and decision making of the household affairs is also studied. The study reveals that out of 50 respondents from each class, in case of 15 elderly women belonging to middle class and 14 belonging to the poor families, the change in authority have not taken place. Thus the remaining 35 elderly women belonging to middle class and 36 belonging to the poor families, in whose case decision making role have changed or have been handed over to some other person, are studied to assess their attitude towards this change. The assessment reveals that majority of the elderly women have a normal attitude towards the change. This is true for both the classes.

However elderly women showing 'normal' attitude is comparatively much more in number (71%) in case of middle class than in case of elderly women belonging to the poor families (50%). Another 9% of the elderly women belonging to middle class and 6% of poor families state that 'they feel relieved' due to the handover of authority to the younger generations of their family. Besides, 3% of the elderly women belonging to the poor families feel that 'their position is not affected by the change'. On the other hand, the remaining 26% of the elderly women belonging to the middle class and 36% of poor families remark that 'they have no option but to compromise with the present change' or feel that 'their authority has lost due to the change'. Moreover, 6% of the elderly women of the poor families remain indifferent to the question. Much like the previous section, the assessment made in this section also gives an indication that the middle class elderly women are well-adjusted than their poor counterparts with regard to the role loss experienced by them in their old age.

In order to study the level of role loss of the elderly women with regard to the management of the household affairs, the frequency of seeking their consultation by their family members in these matters is also enquired into and represented in table 4.3 (ii). The table 4.3 (ii) reveals that nearly 58% of the respondents are consulted 'always' and 'mostly' by their family members in matters of household affairs like deciding the daily menu, buying goods of daily needs, kitchen affairs, deciding the interior of the household etc. This proportion is 60% in case of families belonging to middle class and 56% for those belonging to poor category. This indicates that inspite of their role loss in the management of household affairs; their importance in the family has not reduced when it comes to seeking their consultations in these matters. Seeking of their consultation by their family members give the elderly women a sense of importance and a feeling of being loved and respected by their family members. One respondent in this context comments that 'my daughter-in laws are like my daughters, they provide me with all the necessary support...I don't feel dominated by them, in fact till now they seek my consultation in every matter'

Table 4.3 (ii): Frequency at which consultation of the respondents are sought in household affairs (in percentage)

<i>Frequency at which consultation is sought</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Always	40	26	33
Mostly	20	30	25
Sometimes	20	20	20
Rarely	6	4	5
Never	12	16	14
N/A	2	4	3
Total	50	50	100

Besides this, 20% of the elderly women belonging to each category inform that they are ‘*sometimes*’ consulted by their family members in these matters. On the other hand, 6% of the elderly women of the middle class and 4% belonging to poor category are ‘*rarely*’ consulted on these matters. Whereas 12% and 16% elderly women belonging to middle and poor families respectively report that they are “*never*” consulted on these matters. However, there are few elderly women who live alone and hence the question is non-applicable for them.

Much like participation in decision making of household affairs, frequency of consultation sought by the family members from the elderly women with regard to these affairs are also found to depend on factors like educational status, age-group, participation in remunerative and household chores, self and husband’s earning status and living arrangement of the elderly.

Higher proportion of elderly women whose consultation are always and mostly sought by their family members in these matters are mostly found in case of those who have achieved education till Higher secondary /Graduation/ Masters in case of middle class elderly women and till Primary/ secondary/ Higher secondary level in case of poor elderly women. Seeking of their consultation in these affairs is found to be inversely related to the age-group of the elderly women as irrespective of class, higher proportion of elderly women whose consultation are ‘always’ and ‘mostly’ sought by their family members are mostly found in the age-group of 60-69. Moreover, this rate tends to reduce with the increase in age-group of the elderly women. Irrespective of class, participation in remunerative work and household chores are also found to

have a positive relation with the frequency at which their consultation is sought regarding the decision making of the household affairs. Irrespective of class, higher proportion of elderly women whose consultation are 'always' and 'mostly' sought by their family members are found in case of those elderly women who are presently involved in any remunerative work in contrast to those who are not. Similarly, higher frequency of consultation is also found in case of those elderly women who participates in any household chores in contrast to those who do not.

Besides these, irrespective of class elderly women with an earning husband are found to be consulted mostly in these matters as compared to those with a non-earning husband. However, it is noted that unlike the elderly women of the middle class, in case of poor families frequency of consultation in these affairs also depend on the income of the elderly women, especially when the elderly is a widow. It is also found that irrespective of class, elderly women who are 'always' and 'mostly' consulted by their family members in these matters are mostly those who are co-residing with their husband alone as compared to those co-residing with their husband and children and widows co-residing with their children/ relatives.

Majority of the elderly women state that '*it is quite normal*' and they do not feel bad if they are not consulted on these issues. However like previous analysis, the proportion of women having such attitude is much higher in case of middle class elderly women (42%) than those belonging to the poor families (30%). Another very small number of elderly women (10% in case of middle class and 6% in case of poor families), remark that '*they have no interest to be a part of these affairs*'. On the other hand 26% and 30% of the elderly women belonging to middle and poor families respectively, disclose that '*they feels insulted*', '*feels that their position is lost*', '*feels worthless*', '*feels bad*' and '*feels dominated*' in case they are not consulted. However, 6% of the elderly women of the middle class families and 4% of poor families remain indifferent to this question. In this context it is to be noted that for 2% and 4% of the elderly women belonging to middle class and poor category this question is found to be '*non-applicable*' as these elderly women stay alone and hence they don't have any one to seek their consultation. This is followed by a significant number of elderly women (14% and 26% in case of middle and poor families respectively) who sate that they decide every matters of the household and hence every time they are consulted by their family members before any decision on such issues are taken. Proportion of such elderly women is however more in case of poor families than in case of middle class.

Reason for the loss of job, their perception towards it:

In this section efforts are made to study the reasons behind the loss of employment of the elderly women, who were working in the past but are non-working at present. In this context it should be noted that some elderly women belonging to the middle class who were engaged in some full time job in the past, after retirement have engaged themselves in some part time job like providing private tuitions at home and so on. Though these elderly women are working and earning some amount at present but their income has reduced to a considerable extent after retirement from what they used to earn through their full time occupation. Hence they are also included in the present section.

Table 4.4 reflects the reason for the loss job of the elderly women who were previously engaged in some work. 'Retirement' is reported to be the reason for the loss of job by 71% of elderly women belonging to the middle class (who were previously engaged in some remunerative work), while 'Physical problem' by 14% elderly women belonging to the middle class against 94% of the elderly women belonging to the poor families. Besides this, 'family pressure' as the cause of the loss of employment is reported by 14% of the elderly women belonging to the middle class. Another 6% elderly women belonging to the poor families, report to have lost their job due to the sudden close down of the institution (school) where they used to work. From these data it can be concluded that while for the middle class elderly women 'Retirement' is one of the main reasons for the loss of their job, for the poor elderly women 'physical problem' or disability/ incapacity to work due to physical problem are the main reasons for the loss of employment for a majority of them.

Reason for the loss of job	Middle class	Poor families	Total%
Retirement	71	0	22
Physical Problem	14	94	70
Family pressure	14	0	4
Any other reason	0	6	4
Total	7	16	23

In this context, the perception of these elderly women towards the loss of their job are also studied and comparatively assessed. For this purpose, some previously constructed statements are presented before the respondents and they are asked to give their opinion as strongly agree/agree/indifferent/strongly disagree and disagree.

Almost all the respondents irrespective of their class ‘agree’ to the statement that ***‘Loss of job is natural and inevitable’***.

However, 57% of the elderly women belonging to the middle class against 56% respondents belonging to the poor families ‘agree’ that ***‘Retirement is healthy because after struggling for the whole life, old age is the period when one needs some rest’*** where as 43% and 38% of the elderly women belonging to middle class and poor families respectively ‘disagree’ to the same. One of the elderly women belonging to the poor families in this context remarks, that *‘Earning some money in old age to fulfill one’s need is more important than taking rest’* whereas another elderly women of the middle class who ‘disagree’ to the statement states that *‘Though retirement/ withdrawal from job is necessary, but one should be allowed to continue work till the person is capable to because work helps a person to live actively in old age’*.

71% against 31% of the elderly women belonging to the middle class and poor families respectively ‘agree’ that ***‘After retirement or loss of job it is difficult to spend time’*** while 29% against 56% of the elderly women belonging to the middle class and poor category respectively ‘disagree’ to it. 13% of elderly women remain ‘indifferent’ to this question. In this context it is to be mentioned that the elderly women who ‘disagree’ to the statement reveal that, after retirement they do not face any boredom, as throughout the day they remain busy in their household chores

and other activities with their family members. Thus it is not difficult for them to spend time. The number of elderly women who 'disagree' to the statement is found to be comparatively more in case of the poor families than the proportion of elderly women belonging to the middle class families. This is probably due to the greater participation of the elderly women of the poor families in the household chores.

While all the elderly women of the middle class 'strongly agree' that '*If given an opportunity I would like to join job again and do something productive*' it is only 71% of the elderly women belonging to the poor families who 'agree' to the same. It should be noted that these elderly women report that this unwillingness is due to their ill health and weak physical condition which restricts them from rejoining their job or do something productive.

Studies show that loss of job usually results in declining status of elderly women in the family, feeling of being dependent on others and of being a burden to other members of the family, loss of confidence, and low self-esteem resulting in depression among them. Hence certain statements related to these are presented before the respondents and they are asked to state their opinions against them. Out of the 7 elderly women belonging to the middle class and 16 of the poor families, who has undergone loss of job, 27% and 30% of the elderly women of the middle class families 'strongly agree' and 'agree' to the the statement, '*Loss of job has affected my position in the society and family*'. In case of poor families this percentage is however, 43% and 20% respectively. On the other hand, 13% and 30% of the middle class elderly women 'strongly disagree' and 'disagree' to the statement in contrast to 11% and 20% of the elderly women of the poor category respectively who 'strongly disagree' and 'disagree' to the same. On the other hand, 6% respondents remain 'indifferent' to the question.

In a similar way 9% and 20% of the elderly women belonging to middle class 'strongly agree' and 'agree' to the statement '*I feel to be a burden to my family members due to economic dependence*' against 29% and 40% belonging to poor families. However, 71% belonging to the middle class and 31% of the poor families 'disagree' to it.

Almost equal proportion of elderly women belonging to the middle class and poor families (43% and 44% respectively) reports loss of confidence due to the loss of their job by strongly agreeing and agreeing to the statement, '*Loss of job has shattered my self-confidence*'. Whereas, 13% and 30% of middle class elderly women 'strongly disagree' and 'disagree' to the statement, in comparison to 11% and 20% of those belonging to the poor families. On the other hand, 14% of middle class and 25% elderly women of poor families remain 'indifferent' to the question.

Besides these, 60% and 11% respondents of the middle class 'strongly agree' and 'agree' to the statement '*I feel depressed due to the loss of an earning source and increasing economic dependence*' in comparison to 61% and 20% of those belonging to the poor families. On the other hand, 11% and 18% respondents 'strongly disagree' and 'disagree' to it, whose percentage is 4% and 9% in case of the poor families. However, 6% respondents belonging to the poor category remain 'indifferent' to the question.

All the elderly women of the middle class families 'agree' to the statement, '*I want to engage myself in social and community services*'. In poor families however, only 38% of the respondents 'agree' to the same while 44% of them 'disagree' to it. 19% of them however remain 'indifferent'.

The overall data in this section reveals that, irrespective of class all the respondents are aware of the fact that, one has to lose her/his job at old age, even majority of the respondents, irrespective of their class agrees that retirement in old age is necessary in order to provide some rest to a person who has struggled throughout his/her life. Though some respondents disagreed to the same as according to them, retirement brings with it loss of earning, reduced income, loss of confidence etc. Hence according to them, one should be allowed to continue his/her work till he/she is capable to. However, some of the respondents belonging to the poor families feel that loss of job has seriously affected their economic condition and has left them with no source of income, hence it is not healthy. A higher number of respondents belonging to the middle class as compared to those belonging to the poor category also feel that after retirement/loss of job, it is difficult to spend time. Irrespective of class, in most cases the reason for these feelings, is their lesser engagement in household chores and other activities and also lesser involvement or

interaction with family members, especially with their children and grandchildren. Moreover, most of these elderly women, irrespective of their class agree that if given an opportunity they would like to join a job again, however their number is more in case of those belonging to the middle class. Some elderly women belonging to the poor families disagree to the same as they feel that they are no more capable to work due to their poor health.

Besides this, majority of the elderly women feel that loss of job has affected their position in the society and family , however this percentage is more in case of the elderly women belonging to the poor families than those of the middle class. Likewise, a higher number of women belonging to the poor families as compared to the middle class feel that after loss of job due to economic dependence they consider themselves to be a burden to their family members. Similarly loss of confidence due to the loss of job is also found more among the elderly women of the poor families than their middle class counterparts. Even depression due to the loss of job is also reported more among the elderly women of poor families than those belonging to the middle class. This shows that loss of job/retirement have its impact more among the respondents of the poor families than those belonging to the middle class. Moreover it also reflects that they are faced more with the adjustment problems due to the loss of job, than their middle class counterparts.

Another difference between the elderly women of these two classes, in this context can be noticed from the fact that on the one hand all the elderly women belonging to the middle class state that they want to engage themselves in some social and community services but in case of poor families a considerable proportion disagrees to the same. These women state that they would like to engage themselves in those activities which will generate some amount of income for them, rather than any social or voluntary service.

Engagement in welfare and community services:

It is known that a very less number of respondents are engaged in some welfare and community services. Out of 50 respondents in each class, 2 belonging to the middle class and 3 respondents belonging to the poor families are engaged in such services. All the elderly women engaged in such services reports that involvement in such services gives them an excellent level of satisfaction. Out of the remaining 48 and 47 elderly women of both middle and poor families

respectively, only 28 elderly women belonging to the middle class and 11 belonging to the poor families express their interest to get engaged in such services. However, majority of the elderly women expresses their non-willingness for the same as according to them, their physical condition does not permit them to do so. Moreover, some of them feel that they remain so busy throughout the day with their household chores that they won't get time for such activities. Besides these, most of the elderly women, especially belonging to the poor families state that they want to involve themselves in those activities which will generate some amount of money for them. One of them remarks, *"by doing welfare or community services we won't be able to earn even a handful of rice for ourselves"*. In this context, another elderly woman remarks, *"What welfare we can do to others when we ourselves are in need of such services"*.

Needs (economic, social, emotional and medical):

In this section an attempt is made to analyse the needs (economic, social, emotional and medical) of the elderly women apart from their basic needs of food, clothing and shelter. A major proportion of the elderly women belonging both to the middle class and poor category states that all they need at this age are the love, care, support and company of their children and family members. This is followed by the need for medical support which quite a significant number of elderly women are faced with. Their percentage is a bit higher in case of the respondents belonging to the middle class than those of the poor families. The need for good food and the things that they are addicted to are also felt by some elderly women, whose percentage is much higher in case of those belonging to the poor families than those belonging to the other category. Some elderly women, especially belonging to the middle class families also report that they want to travel to different places or visit their friends and relatives and socialise with people. A similar number of elderly women, belonging to the poor families and few belonging to middle class, report the need for some physical rest and a comfortable life. In case of poor elderly this is mainly reported by those women who are still working to earn their livelihood inspite of their weak and fragile health.

Besides these few elderly women state that they need enough money to spend on themselves and on their family members while a similar number of elderly women report the need for mental happiness for themselves and their children to be the only need at this age. Some elderly women

also talk about the need for a security at old age. A quite insignificant number of respondents belonging to the poor category report the need for a good living condition while a similar proportion belonging to the middle class reports the need for physical and mental fitness.

Participation/ Contribution in household work/ chores:

Contribution in household activities provides the elderly women a sense of contribution to her family, if not in terms of money, in terms of labour atleast. Moreover, to a great extent it reduces social isolation of the elderly women by providing them with some confidence for being able to participate in the household activities. In the present study irrespective of class, though majority of the elderly women are found to participate in household activities however, their level of contribution varies. In this context it should be mentioned that, 14% respondents belonging to the middle class and 6% belonging to the poor families do not participate in any household activities. It is found that in most cases, the elderly women of the poor families, continue to work/or participate in the household chores till she becomes completely disabled. 6% elderly women of the poor category who do not participate in any household activities are completely bed ridden. However this is not true for the middle class elderly women. Though in very few cases poor health and disability of the elderly women are a reason for their non-participation in household chores but in other cases, due to presence of daughter-in law and maid in the family the middle class elderly women are almost left with no work to perform. Moreover, in a significant number of cases, the elderly women especially belonging to the middle class are found to participate only in the religious activities of the household (like offering puja/ performing rituals etc.) or in some lighter work like watering plants, washing own clothes etc. However in some other cases, the elderly women belonging to the same class are found to perform all the household chores including the rearing of grandchildren, especially in cases where the daughter-in law/daughter (with whom the elderly co-resides) is working. On the other hand there are also cases, though few in number, where it is also found that, inspite of the presence of daughter-in law in the family(i.e. where the daughter in law is non-working), the elderly women perform all the household activities sometimes inspite of her weak physical condition.

Comparative analysis of table 4.5 shows that a number of the elderly women belonging both to the middle class and poor families (who have grandchildren) participate in rearing of their

grandchildren which include activities like looking after them, taking them for bath, taking them to school, feeding them, helping them in doing homework, taking them to the park or for a walk etc. Even if their grandchildren are not staying with them, they perform these activities at the time when they meet them (in this case it should be noted that grandchildren both belonging to the son and daughter side are included).

Table: 4.5: Participation and contribution of the elderly women in household activities (in percentage, approx.)

<i>Nature of activities performed by the elderly women</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Looking after Grandchildren	32	34	33
Feeding grandchildren	18	12	15
Take them for bath	10	6	8
Take them to school	2	12	7
Helping them to do their homework.	2	2	2
Taking them to parks and for walk	10	20	15
Dusting and cleaning the house	56	76	66
Washing clothes	54	66	60
Washing utensils	38	68	53
Helping in the kitchen	42	40	41
Cooking	66	58	62
Buying vegetables and other items of grocery	54	72	63
Offering puja	88	90	89
Watering plants	30	6	18
Drawing water	20	56	38
Serving food	46	36	41
Looking after ailing husband	6	4	5
Outside work	10	84	47
None	12	6	10

However when it comes to other household activities it can be seen that higher proportion of the elderly women belonging to the poor families perform these activities than the elderly women of

the middle class. This activities generally performed by them are mostly dusting and cleaning the house, washing clothes, washing utensils, buying vegetables and other items of grocery and drawing water. The reason behind this is that in middle class families most of these activities are performed by paid help. Majority of the elderly women belonging to the middle class families who does the 'washing clothes' and 'washing utensils' activities, in most cases wash their own clothes. In case of washing utensils also, as they reports, most of them rarely they have to perform this activity as most of the time they are helped by their maid in this regard. However, such paid help is usually not afforded by the elderly women of the poor families and hence they got to do all the activities by themselves, though in some cases these activities are also done by the other members of their family, especially the daughter-in law or daughters. A significant proportion of elderly women are also found to participate in cooking activities. In this context it should be noted that a large number of respondents of the present study are widow; hence many of these elderly women take vegetarian food and cook their own food themselves in a separate arrangement. This is true for both the classes. However, some elderly women both widow and married are though not cooking separately for their own, but they participate in the cooking activities actively and cook for their entire family. In some cases, however these activities are jointly performed by them along with their daughter in law/s/ daughter/s.

In table 4.5, 'outside work' includes the work outside the household which include activities like paying electricity bills, collecting ration/ kerosene oil, deposition money in bank or other institution like post offices etc. Participation in these activities is found to be more in case of the elderly women belonging to the poor families than in case of middle class families. However in case of lighter job like serving food, helping in the kitchen (like chopping vegetables, grinding spices etc.), watering plants and so on the contribution of the middle class elderly women is found to be comparatively more than those belonging to the other category.

Perception towards the importance given to their contributions by their family members.

The perception of the elderly women, towards the importance given to them and their contribution by their family members, reflects the level of their social acceptance in their family.

Table: 4.6: Perception of the elderly women with regard to... “I feel that my contributions are not given enough importance by my family members” (in percentage)

<i>Perception of the respondents.</i>	Middle class	Poor families	Total%
Strongly agree	6	26	16
Agree	16	14	15
Strongly Disagree	30	16	23
Disagree	22	20	21
Indifferent	12	16	14
Not applicable	14	8	11
Total	50	50	100

Table 4.6 shows that nearly 26% and 6% respondents belonging to poor families and middle class respectively ‘strongly agree’ that their contribution is not given enough importance by their family members. Moreover 14% and 16% of the elderly women belonging to the poor and middle class families respectively ‘agree’ with the same. On the other hand, 52% belonging to the middle class and 36% of poor families ‘strongly disagree’ and ‘disagree’ to it. Higher number of elderly women, of the middle class family disagreeing to the statement shows greater acceptance of the elderly women of this class in their families. However 14% respondents are ‘indifferent’ and hence proper answer could not be fetched from them. 11% elderly women (7% belonging to middle class and 4% belonging to poor families) either stays alone or do not contribute anything to their family or perform any household chores because of their disability, hence the question is non-applicable for them.

Social acceptance of the respondents both within and outside their family:

Social acceptance here is referred to the acceptance of an elderly woman in her family and outside it. The relationships and social networks of a woman mostly restrict itself within the domain of her family members and relatives, to some extent this network often extends to their friends and neighbours as well. Thus, social acceptance of an elderly woman within her family,

relatives, friends and neighbour are of immense importance when it comes to their wellbeing. But with old age, due to the loss and shrinkage of many roles of an elderly person, their social acceptance both in the family and outside it also tends to diminish. In this regard various studies have pointed out that the social relationships and social acceptance of the elderly person in their family depends on their economic and physical autonomy /independence, and on the contribution made by them in the family for the fulfillment of the needs of their children (Yadava, Yadava & Sharma, 1996) and (Reddy, 1989). A study conducted by Ansari (2000) among the elderly person of rural Bihar reveals that the status of elderly person in the society depends on their level of participation in social activities. Similarly a study conducted by Panda (2005) reflects that their social acceptance to a large extent depends on the level of their interaction and participation in different social roles, within the family and outside it. Thus, in the present study the extent of social acceptance of an elderly women, is assessed by studying their relationship with their family members (like their spouses, children and grandchildren), friends and neighbours which is in turn assessed by exploring the amount of time spend by the respondents with them. Moreover, the extent of participation of the respondents in different activities with these people is also studied simultaneously. Besides these, the extent of their social acceptance is also assessed by studying their participation in different household and social activities (like activities performed with guest, engagement in welfare and community activities, engagement with religious institutions, frequency of going for walk/shopping/visiting religious institutions/ going out with family members/ visiting friends and relatives/ attending social gatherings).

Relationship with Grandchildren:

Grandchildren are a source of joy and happiness at old age. Studies reveal that spending time with grandchildren and looking after them lowers the depression and isolation associated with old age. It also helps the elderly person to develop good relationship with them which facilitates discussion of emotions and problems (Panda, 2005).

<i>Frequency of spending time</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Often	50	33	42
Sometimes	9	22	16
Rarely	41	36	38
Never	0	9	4
Total	44	45	89

Table 4.7 shows that 12% of the elderly women belonging to the middle class and 10% of those belonging to the poor families do not have any grandchildren. Thus excluding these numbers, if the remaining elderly women i.e. 44 belonging to the middle class and 45 in case of poor families are taken into consideration, then it can be seen that almost 50% elderly women belonging to the middle class and 33% of the poor families spend time with their grandchildren ‘often’. This is followed by 41% and 36% elderly women of the middle and poor families respectively, who ‘rarely’ spend any time with their grandchildren. The reason for this, as they state is that their grandchildren are all grown up now and they remain busy most of the times in their studies (school and coaching), hence the elderly women get little time to spend or even interact with them. In some cases however the reason is that their grandchildren is not staying with them, thus the elderly women get a chance to spend time with them only when they visit one another. However, some elderly women of the poor stratum report that, they go to work in the morning and come back during late afternoon and hence get little time to spend with their grandchildren. In this case it should be mentioned that while studying the relationship of the elderly women with their grandchildren, the grandchildren belonging to both the son’s and the daughter’s side are taken into consideration. Besides these, nearly 9% of the elderly women belonging to the middle class and 22% of the poor families, report that they ‘sometimes’ spend time with them. This is followed by nearly 9% respondents belonging to the poor families who state that their grandchildren ‘never’ spend any time with them. In case of middle class families, however such cases are not reported. Such cases in majority are reported by the elderly women having poor /strained relationship with their children and daughter-in law/s. However, poor relationship with children does not always results in their distance from their grandchildren. In many cases, it is found that inspite of having poor relationship with children and daughter-in

law/s, the elderly women continue to enjoy good and cordial relationship with their grandchildren. In this context, one elderly women belonging to the poor families remarks, *‘I don’t have any complain against my grandchildren, after coming back from school in the afternoon they always come to me and we spend good times together. At this age they are my only source of joy’*.

Irrespective of class, quite a large number of elderly women belonging to both the classes report that they spend time with their grandchildren by ‘interacting or gossiping’ with them, especially with regard to their schools, friends and studies. However, the topic of discussion varies according to the age of the grandchildren. Almost equal number of elderly women belonging to both the classes report that they entertain their grandchildren by narrating stories, playing with them, taking them to the park /for a walk/ visit nearby religious institutions with them and so on. This is followed by a few who spend time together sometimes by watching television with. A comparatively smaller number state that they help in the rearing of their grandchildren by looking after them/ feeding them/ taking them for bath etc. However another few elderly women take their grandchildren to the school and also help them in their studies. An insignificant number of elderly women, on the other hand report that they go with their grandchildren for shopping/ go for outing and even sometimes shares problem with them. Besides these, few elderly women belonging to the middle class state that they love to cook for their grandchildren. One of them in this context remarks, *“Sometimes my grandchildren come to me and ask me to prepare different sweet dishes for them like naadu, mooya, payash etc. They say that they love to have these dishes prepared by me’*.

Relationship with Children:

Children play an important role in providing physical and mental support in old age. Studies reveal that, children, especially sons are a major source of care and support for elderly persons and co-residence with them ensures greater physical, emotional and economical support in old age (Audinarayana, 2012.a.). The study conducted by Nasreen (2009) among elderly respondents of urban neighbourhood, reveals that elderly women covered under the study, tend to depend more on their children, including their daughters and daughter-in laws than their husband, for the

fulfillment of their needs. A similar study conducted by Mohapatra (2012) among elderly respondents of rural Odisha reflects that majority of the elderly respondents feels that the son and other family members should provide necessary support to old parents. Thus, the relationship of an elderly person with their children is an important factor as to a large extent it determines the care and support received by him/her. Moreover, cordial relationship with children also goes a long way in providing emotional support to an elderly person, which in turn plays a greater role in their well-being. Besides these, relationship with children also reflects the extent of social acceptance of the elderly person in their family. Keeping these factors in mind, in the present study, the relationship of the respondents with their children (of both the classes) are studied and analysed comparatively. For this purpose efforts are made to know the amount of time they spend with their children (including son and daughters), and the activities that they generally perform with them.

Before analysing the data, it should be mentioned that in the present section while studying the relationship of the elderly women with their children, both their sons and daughters are taken into consideration. As studying their relationship with all their children is not feasible, hence efforts are made here to study their relationship / frequency of interaction with at least one of their children (which include the children who are both residing and non-residing with them) and also with the child/children co-residing with them. The table 4.8 (i) show that majority of the elderly women who are covered under the present study ‘rarely’ spend time with their children. Comparison of both the classes shows in case of middle class, majority of the elderly women reports that they ‘sometimes’ spend time with their children. The reason behind, ‘rarely’ spending of time with their children, as the elderly women of the middle class reports, is that their son/s remains busy at work throughout the day and hence they get little time to interact. Moreover, another reason behind this is due to the fact that their children are not residing with them and hence they get some time to spend together only when they meet or during their interaction with them over phone or other electronic media. In case of middle class, children of some elderly women stays in abroad and hence some of them get a chance to meet their children once in a year and sometimes once in two years. However, telephone, internet and other such medium helps the elderly women to atleast communicate with their children, in case they are staying at a distance. In case of middle class families, video chatting and social network sites are

some other medium through which the elderly women communicate or spend time with their children. This though, helps to a great extent in reducing the distance between them; however, to some extent it definitely fails to substitute for the satisfaction that the elderly women receive from the face to face interaction with their children. These technological facilities are however, usually not available to the elderly women of the poor families. Besides this, poor relationship and conflict with children is also another reason for their less interaction/ spending less amount of time with children. However, 5% elderly women reports that their children ‘never’ spend any time with them, their proportion being higher in case of poor families (8%) than the middle class elderly women (2%). An elderly women belonging to the poor families in this context remarks, ‘*my son never comes even to enquire whether I am alive*’. Another elderly women belonging to the middle class states ‘*I am a burden to my family now and hence nobody wants to waste time by spending time with me*’. On the other hand, 24% elderly women belonging to both the classes reports that they ‘often’ spend time with their children. Comparative analysis of both the class shows, that a higher proportion of the elderly women belonging to the middle classes spend time ‘often’ and ‘sometimes’ with atleast one of their children than the elderly women of the poor families. Moreover, irrespective of class, frequency of spending time with children are found to be inversely related to their age group (which reduces with the increasing age of the elderly women), and positively related to having a good or satisfactory health status; and having a living and earning spouse.

Table 4.8 (i): Frequency of spending time with Children (atleast one of their children, including both co-residing and not residing with them) (in percentage)

<i>Frequency of spending time</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Often	25	24	24
Sometimes	40	24	32
Rarely	33	44	39
Never	2	8	5
Total	48	50	98

With regard to the common activities performed with their children, irrespective of class, majority of the elderly women reports that they spend time with them often by interacting on

different family related matters. This is followed by a significant number of elderly women who shares their problems with their children. However, it is noteworthy that when it comes to sharing of problems, in most cases they choose their daughters rather than their sons. Sharing of problems with children is however reported more among the middle class elderly women than among those belonging to the poor families. Besides this, a comparatively smaller number of elderly women are found to spend time with their children by watching different programme on television. In this context, an elderly woman reports that she spends most of her time in watching serials on television but whenever her son comes back home, in the evening she moves to her room and allow her son to view the programme of his choice. Thus difference in the topic of interest also prevents some elderly women in watching television with the younger generation, especially their sons. However, daughters more or less show interest on similar programmes/ topics and hence while watching television, daughter's company is most commonly sought. Apart from these, a very few elderly women are found to go out for outing with their children; this is most commonly seen in case of middle class elderly women. However, going for shopping with children, visiting religious institutions, going for a walk, attending social gatherings with children are common for a comparatively smaller proportion of elderly women.

In this context, effort is also made to probe into the relationship of the elderly women with their children with whom they are co-residing with. In an attempt to do so, the frequencies of time spend with the children with whom they co-reside with are analysed. In this context, besides class, a comparative analysis is also made between the amount of time spend with their sons and their daughter co-residing with them.

<i>Table 4.8 (ii): Frequency of spending time with Son/s and Daughter/s who co-resides with them (in percentage)</i>				
<i>Frequency of spending time</i>	<i>Middle class</i>		<i>Poor families</i>	
	<i>Son/s</i>	<i>Daughter/s</i>	<i>Son/s</i>	<i>Daughter/s</i>
Often	9	50	14	70
Sometimes	24	38	33	20
Rarely	59	13	25	10
Never	9	0	28	0
<i>Total</i>	34	8	36	10

The study reveals that irrespective of the social class to which the elderly women belong to, the amount of time spend with their daughter/s with whom the elderly women co-resides is more than with their son/s falling in the similar category. Thus it can be concluded that daughters are a greater source of emotional support to the elderly women, especially when they co-reside with them. In this context it should be mentioned that 11 elderly women belonging to the middle class and 9 elderly women of the poor families either stay alone/ stay with their husband/ relatives or do not have any children and hence they are not covered under the present section.

However, a comparative analysis of the table 4.8 (ii) shows that a higher number of elderly women belonging to the poor families spend time ‘often’ and ‘sometimes’ with their sons (co-residing with them) than the elderly women of the middle class. Besides this, majority, 59% of those belonging to the middle class against 25% of poor elderly women report that they ‘rarely’ spend time with their sons. The reason for this, as most of them states is that their son/s leaves home in the morning and returns in the evening and remains busy at work throughout the day and hence they get little time to interact/ spend time with them. However, some other elderly women, especially belonging to the poor families feel that, their son/s spends time or interact with them only when they have any personal interest. Moreover, 9% of the middle class elderly women against 28% of the poor families report that their sons ‘never’ spend time with them. As is revealed by the elderly women, in most of such cases the elderly women do not have a cordial relationship with her son/s, while others reports that their sons do not have time to spend on them as they remain too busy in their own schedule.

However, during the study, 9 elderly women belonging to poor families against 1 belonging to the middle class report to have poor relationship with their children (in most cases with their sons) who are co-residing with them. In this context it is worth mentioning that, in case of poor families, some cases of physical torture, verbal abuse and misbehaviour by sons are also reported. In one case, where the elderly woman stays with her married daughter, she reports misbehaviour from her son-in law. An elderly women in this context reports that she and her husband are both physically tortured by their son, she states, *“I am bound to work at this age, if I don’t my son will not allow us to stay at home and won’t give us food from the next day... I work for the whole month and at the end of the month handover all money to my son, without keeping a single penny for me, but sometimes even if I ask for the rickshaw fare, while going to work my son refuses to give the same and humiliates me like anything”*. Another woman reports that her son tortures her physically, does not give her anything to eat and frequently turns her out from home.

Though cases of physical torture is not reported by the middle class elderly women, but in a number of cases (9 cases) misbehaviour mostly from sons and daughter-in laws and in 1 case by daughter is reported by them. An elderly woman reports that, inspite of her poor health condition; she is forced to perform all the household chores by her daughter-in law. She states that *‘my daughter-in law does not allow me to visit my elder son or my daughters, as there will be no one at home to perform these household chores’*. She even states that *‘If I refuse to work, my daughter-in law says humiliating words to me and quarrels’*. Another elderly woman in this context remarks, *‘I feel bad when my son misbehaves and speaks with me rudely ’*.

However, inspite of some cases of elder abuse and poor relationship with children, the study reveals that irrespective of the social class, majority of the elderly women share good relationship with their children (both married and unmarried) staying with them. This is followed by a few who report that their relationship with their children is satisfactory. Some of the elderly women in this context remarks, *‘I can’t say about my daughter –in laws, but my sons cares for me a lot’*. Other respondent states, *‘I am very happy with my daughter-in laws. Due to some health issues I am unable to perform much household chores, hence my daughter-in laws does every work for me. I am the one to give orders to them...My daughter-in laws serves me a lot*

they massage oil on my hair, tie my hair and especially during illness they serve me a lot'. This shows that family ties are still alive and in many cases the elderly women continues to enjoy the love and care of her family members.

Comparative analyses shows that much higher proportion of middle class elderly women are having good relationship with their children and are the less victims of physical torture and verbal abuse of their children than those belonging to the poor families. This reflects the educational and cultural differences of the members of both these classes. However, irrespective of class, good and satisfactory relationship with daughters is reported in majority cases than with the sons. Moreover, unmarried sons tend to have more cordial relationship with the elderly women than the married sons. However, inspite of the higher proportion of the middle class elderly women having good relationship with their children (co-residing with them), the proportion of those who spend time with their children 'often' and 'sometimes' is comparatively lesser in case of the elderly women belonging to this class as compared to their poor counterparts. As are reported by the respondents of the middle class, this is mainly because of the nature of jobs of their children, due to which they remain busy throughout the day and even sometimes return at late night. Some elderly women of the same class report that even after returning home from their work place, their children continue with their work from home. This at times results in less interaction with not only their elderly parents but also sometimes with their wife and children. Such cases, except for a few are usually not reported from the respondents of the poor families, whose children are mostly engaged in manual, casual jobs or small and petty business which provides them ample of time to spend with their families.

Another important factor which is noted during the study, is that most of the middle class elderly women (having children) who are staying alone/ with husband alone/ with relatives alone report to have good and satisfying relationship with their children who are either staying abroad, outside the state/city or even within the city in a separate residence. On the contrary, in case of poor families women who are either living alone or with husband alone are found to have poor relationship with their children. In most cases they complain with regard to the denial of their children in providing them with any kind of support.

Relationship with spouse:

Needless to say that, a living spouse is an important source of economic and emotional support for an elderly person. During old age, spouses can provide the required emotional and psychological support. Physical and emotional support extended by spouses and spending time with them to a great extent lowers the feeling of loneliness and isolation during old age. Hence, while studying the social acceptance of the elderly women in her family with her kins, her relationship with her spouse is of utmost importance. In the present study the relationship of the elderly women with their spouse is assessed by studying the different activities performed by the elderly women with their spouse.

However, it has to be noted that, most of the elderly women covered under the present study are widows. Out of 50 elderly women studied from each class, only 22 i.e. 44% belonging to the middle class against 18 elderly women i.e. 36% belonging to the poor families are presently married. Analysis of the activities most commonly performed by the elderly women with their spouse shows, that irrespective of class, almost everyone spends time with their spouse by “*interacting with them*” and discussing on various matters, like discussion about family, about children, about relatives, on monetary matters, about the problems faced in life, on religious matters etc. This is followed by quite a large number of elderly women who reports that they “*go for walk*” sometimes with their spouses. This number is found to be higher in case of middle class elderly women than those belonging to the poor families. However irrespective of class “*sharing of problems*”, “*visiting relatives*” with spouses, are reported by another large proportion. Besides these, quite a large proportion of elderly women also state that they mostly spend their time by sitting together and “*watching television*” in the evening. This is followed by (73%) belonging to the middle class who report that they often “*visit religious institutions*” with their husband against 44% belonging to the poor families. Some elderly women belonging to the middle class report that they “*attend social gatherings/parties*” with their husband. The proportion of such elderly women is almost equal for each class. This is followed by some elderly women, almost 68% belonging to the middle class and 39% to the poor families who ‘*goes for shopping*’ with their spouses. On the other hand a smaller number, especially belonging to the middle class report that they usually ‘*go for an outing*’ with their husband. A very few elderly women, of the same class as compared to none of the poor families also report that they

'participate in social activities' together with their spouses (9%) / *'attend religious associations'* (18%) and *'go to watch movies/theaters/ cultural programmes'* with their husband (23%).

Comparative analysis reflects that the elderly women of the middle class families usually engage themselves in diverse activities with their spouses than the elderly women belonging to the poor category. While going out for walk/ visiting religious associations/ doing social activities together/ going for shopping/ outing/ going to watch movie, theater and cultural programme is most commonly noticed in case of the middle class elderly women, the elderly of the poor stratum in most cases are involved mostly in interaction/ sharing problems / watching television and in some cases in attending social gatherings/ visiting religious institutions/ relatives with their spouses. This can be explained by the differences in the economic and cultural back ground of the two classes, which often restricts an elderly woman belonging to the poor stratum in performing diverse outdoor activities with their spouses. Participation in diverse outdoor activities with spouse, are also found more among the elderly women falling in the 'young old' age group, with higher educational status and with 'good' and 'satisfactory' physical health. Unlike the poor elderly women in case of those belonging to the middle class families it is also found to be positively related to their participation in remunerative work/ welfare and community services.

In this context it is noteworthy that during the study a few 2 cases of physical and verbal abuse by husband are also reported by the elderly women of the poor families. However, inspite of this, irrespective of class husband/ spouse seems to acquire an important position in the life of these elderly women, whose presence are found to be very much associated with their social acceptance in the family and society.

Activities performed during the visit of guests:

In order to study the participation of the elderly women in various social affairs the activities performed by them during the visit of any guests are explored. Along with this, in order to assess their acceptance within their family, attempts are also made to investigate whether they are introduced to the guest by their family members, especially when the guest is unknown to them.

90% of the middle class elderly women against 72% of those belonging to the poor families report that they are introduced to the guest by their family members. Out of these, a number of them reports that they are rarely introduced to the guest, while some states that they are introduced to them only if the guest is someone among her relatives/ friends/ or someone connected to her. Colleagues/ friends / or someone who comes to visit their son/s, daughter-in laws or grandchildren are usually not introduced, as are reported by some elderly women. However the percentage of such women is more in case of poor families than those belonging to the middle class. On the contrary 8% and 24% belonging to middle class and poor families respectively reports that they are never introduced to any guest.

With regard to the activities performed by elderly women, during the visit of any guest, 76% of women belonging to the middle class against 62% of the poor families report that they usually welcome the guest and interact with them, while a much smaller proportion of the elderly women i.e. 24% of middle class and 38% belonging to the poor families report that they prefer not to talk to the person and hence withdraw from any kind of interaction with them. Such an attitude reflects withdrawal of these elderly women from these activities. Analysis of the data shows a greater acceptance and a greater participation of the middle class elderly women in these matters as compared to those of the poor families. However, irrespective of class, a welcoming and positive attitude of the elderly women are mostly found among those who participates in any remunerative work/ welfare services, with better educational qualification, among those belonging to the 'young-old' age group and those with 'good' and 'satisfactory' physical health.

Participation of the elderly women with friends and activities performed with them:

Friends have a significant role to play in the life of a person from his/her very childhood till his/her old age. Especially in old age, friends can provide a great help in reducing the emotional and psychological problems that a person generally faces at this age. At this age due to the shrinkage of many social roles, loss of job, loss of spouse, loss of decision making authority and hence reduced acceptance among the family members, elderly people are often faced with a feeling of social isolation, loneliness and insecurity. A proper platform for sharing of such feelings/ problems/emotions generally proves to be of greater help in reducing the feeling of

isolation/loneliness and the resultant depression that elderly persons are generally faced with. Hence in this section, the study comparatively analyses the percentage of elderly women who have friends, the frequency of meeting them and the activities that they generally perform with them. This will help not only to assess, the level of their social network outside their family but will also highlight the role of friends in their life.

Data in this section shows that majority of the elderly women; under the present study have friends. This naturally is an indication of wider level of social network, outside their family. The comparative analysis between the two classes in this regard shows a slighter difference, with approximately 66% for the middle class and 68% in case of the poor families. On the other hand almost 37% of the elderly women (34% of middle class and 33% of the poor families) report that they don't have any friends. Some of them even report that they used to have friends previously but none of them are alive now. However, it is to be noted that in few cases the elderly women who report to have friends inform that their friends group consist mainly of their relatives, like an elderly women in this context states that her sister-in laws (wives of husband's brother) are her best friends. Another woman belonging to the poor families states, '*my sister is my only friend; I share every problem with her*'. It can thus be concluded from this that even in case of choosing friends, few women tend to choose them from their family members or relatives which again reflects their higher level of association with her kins.

Table 4.9 (i): Frequency of meeting with friends (in percentage)

<i>Frequency of meeting</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Everyday	15	26	21
Often	33	56	45
Sometimes	24	18	21
Rarely	27	3	15
<i>Total</i>	33	34	67

Physical problems or disability at old age often tends to limit the movement of an elderly person outside his/ her home and this often proves to be a hindrance in case of meeting their friends and neighbours. In the present study, such incidences are reported in many cases. Some elderly women informs that even a few years back they used to meet their friends almost regularly but

now due to the deterioration of their health none of them are able to move out of their family and hence they can rarely meet. However, such cases are reported mostly in case of middle class elderly women (27%) than those belonging to the poor families (3%). Table 4.9 (i) shows that the frequency of meeting with friends is more in case of the elderly women belonging to the poor families than those of the middle class. 56% of the poor elderly women against 33% of the middle class report that they meet their friends ‘often’. Moreover, 15% and 26% of the elderly women belonging to the middle and poor families respectively report that they meet their friends almost daily/ every day. This is followed by 24% of the middle class and 18% of the poor elderly women who report to ‘sometimes’ get a chance to meet their friends. In this context it is also to be noted that, their friends are often from the same neighbourhood where they stay. Though it is true for both the classes, however, it is most commonly found in case of the elderly women belonging to the poor families.

<i>Table 4.9 (ii) Activities that are generally performed by the elderly women with their friends (in percentage)</i>			
<i>Activities generally performed with friends</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total%</i>
General interaction and discussion	100	100	100
Go out for walk	42	68	55
Participate in social activities together	3	9	6
Play indoor games	0	6	3
Attend any club or old people’s association	6	0	3
Go out for shopping	27	32	30
Watch T.V together	27	47	37
Go for outing	6	15	10
Go to religious places together	15	68	42
Attend social gathering/ parties together	27	44	36

It is to be noted that in case of almost all the elderly women, the most common activity that they usually perform with their friends mainly involve general interaction and discussion on various matters, specially related to their family, children, and sharing of problems. In some cases the elderly women are also known to engage themselves in religious discussion with their friends.

This is followed by quite a significant proportion, who report that they usually go for walks with them (55%). However, the proportion of such activity is reported to be more among the elderly women of the poor families than those belonging to the middle class. Another significant proportion i.e. 42% and 36% states that they generally visit religious institutions (like temples/ ashrams etc.) and attend social gatherings/ parties together with their friends. Their proportion is however more in case of the poor elderly women than those belonging to the middle class families. Another 37% inform that they prefer sitting together and watching their favourite serials in television with their friends. Moreover, 30% of the elderly women report that they go for shopping together. Besides these, a very small proportion of elderly women reports that sometimes go for a day's outing with them. Travelling to long distance accompanied by friends are also reported by few elderly women belonging to the poor families. Besides these very few of them report that they are involved in different social activities together with their friends/ playing of indoor games (especially ludo) and / attend club or old people's association. However a higher proportion of the poor elderly women are found to participate in all the above mentioned activities than their middle class counterparts.

It is thus reflected from the findings that the frequency of interaction with friends are more in case of the elderly women of the poor families than those belonging to the middle class. It is also found that elderly women belonging to the former category are engaged more actively and participates in diverse activities with their friends than those of the latter category. In this case it should be noted that the study reveals, that some elderly women of the poor families are also assisted by their friends, when it comes to monetary support (during any emergencies) and also in providing health and medical support. This fact, points out to the higher level of interaction and participation with friends, in case of the elderly women belonging to the poor families than those belonging to the middle class.

Elderly women's participation in various activities with their neighbours:

Much like friends, neighbours too play an important role in the life of a person. From general interaction on various issues, gossiping, spending time together to sharing of problems the role of neighbours is of immense importance. Much similarly, the present study discloses a greater role of neighbours in the life of the respondents.

Table 4.10 (i) shows that the frequency of interaction of the elderly women with their neighbours. As reflected in table 4.10 (i) much higher proportion of the poor elderly women as compared to the middle class interact with their neighbour on daily basis. A larger number of middle class elderly women however, state that they ‘often’ meet their neighbours. Rare interaction with neighbours is also reported more among the elderly women of the middle class than their poor counterparts. All these reflect a higher interaction of the poor elderly women with their neighbours than those belonging to the middle class. On the other hand, unlike the poor elderly women in middle class families the elderly women are more often found to restrict themselves in the boundaries of the four walls, especially in case of illness and disability. Hence in many cases, they have a rare chance to interact with their neighbours. However in these cases interaction is only possible when any neighbour visits them. These factors are not usually found to be a hindrance in case of the poor elderly women in meeting or interacting with their neighbours, where even in case of illness and disability of the elderly women their neighbours often visit them. Moreover, in some cases the neighbours even provide them with many needed assistance and support during illness. Predominance of non-formal relations existing among the members of this class is the probably the reason behind such facts.

<i>Frequency of interaction</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
Everyday	22	66	44
Often	56	28	42
Sometimes	4	2	3
Rarely	20	4	12
<i>Total</i>	50	50	100

Table 4.10 (ii): Activities that are generally performed with neighbours (in percentage)

<i>Activities generally performed</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total%</i>
General interaction and discussion	100	100	100
Go out for walk	18	30	24
Sharing problems	92	100	96
Going out for shopping	24	30	27
Watching T.V together	10	54	32
Go for outing	10	34	22
Go to religious institutions	48	56	52
Attend social gathering/ parties together	18	36	27

General interaction, gossiping, and discussion on various issues are the most common activities performed by the elderly women with their neighbours. Sharing of problems with neighbours is also reported by most of the elderly women, irrespective of their class. Besides these a significant proportion of the elderly women of both the classes are found to visit religious institutions with their neighbours, especially, during the evening to attend *aartis*, religious discussion, *puja*, *kirtan* etc. This is followed by a smaller proportion who report that they often watch television with their neighbours, when they visit them in the evening. However this proportion is much higher in case of the elderly women belonging to the poor families than those of the middle class. Besides these, going out for walk/ for outing/ for social gatherings and parties/ for shopping is also reported by a comparatively smaller number. However these activities are most commonly reported by the poor elderly women, suggesting their greater participation and involvement with their neighbours than their middle class counterparts.

Frequency of meeting with their friend and neighbours are also found to depend on the age group of the elderly women, their physical health and also on their participation in remunerative work and; in welfare and community services. Increasing age, deteriorating physical health and non-participation in remunerative work and their participation in welfare activities tends to reduce their frequency of meeting their friends and neighbours. It is also noticed during the study that neighbours and friends tend to play a significant role, in the life of poor elderly women than those belonging to the middle class families. Moreover, their frequency of interaction and indulgence in diverse activities shows that the poor elderly women are more frequently and

actively involved with their peer group and neighbours. In this context, it should be noted that the psychological and emotional support provided to the elderly women by their friends and neighbours are of great significance. Besides rendering them a platform to share their grief, feelings, emotion, problems as well as frustrations, the neighbours and peer group of the elderly women also provide a significant role in many cases in the provision of economic and health related support. This is especially true in case of elderly women belonging to the poor families. Many poor elderly women, whose children do not look after them report that they are living at the mercy of their neighbours. They also report that whenever they fall sick, their neighbour assist them and accompanies them to the doctors. In some cases during illness, they also assist them in performing household chores. Some of the elderly women also report that at the time of emergency or whenever a financial necessity arises, they usually approach their neighbours for monetary support. They state that their neighbours and friends provide them with the needed support, which is later paid off by these elderly women at their own convenience.

Participation in other social activities:

Going for walk, visiting religious institutions, visiting friends/relatives, going out with family members, going out for shopping/ attending social gathering are some of the activities that provide an opportunity to an elderly person to interact with other members of the society outside their family. Thus, studying these factors tend to highlight the participation of the elderly women in social activities and also their frequency of interaction with outside world. Moreover, frequency of going out with family members also reflects their acceptance among their family members. With this vision, data are gathered and analysed comparatively, in order to fulfill the objectives of the study.

Table 4.11: Frequency of performing other social activities (in percentage)												
Frequency of performing social activities	Going for a Walk		Visiting Religious Institutions		Going out with Family members		Visiting a nearby friends/ relatives		Going out for shopping		Attending social gathering	
	<i>Middle class</i>	<i>Poor families</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Middle class</i>	<i>Poor families</i>
Everyday	8	4	2	0	0	0	0	0	0	0	0	0
Often	38	30	42	24	6	2	20	26	20	4	16	4
Sometimes	18	46	24	58	28	6	34	44	24	20	20	30
Rarely	20	8	20	10	50	52	30	12	26	40	20	38
Never	16	12	12	8	16	40	16	18	30	36	44	28
Total	50	50	50	50	50	50	50	50	50	50	50	50

Table 4.11 reflects that 38% of the elderly women belonging to the middle class ‘often’ go for walk which is 30% in case of those belonging to the poor category; whereas majority of the poor elderly women (46%) report that they ‘sometimes go for walk. ‘Rarely’ going for walk is reported more among the middle class elderly women than their counterparts. However 16% middle class elderly women report that they ‘never’ go for walk against 12% of the poor elderly women. Physical disability and illness is the reasons given by most of these elderly women belonging to both the classes, who report that they ‘never’/ ‘rarely’ go for walk. Comparative analysis of this section shows a higher proportion of elderly women belonging to the poor section (80%) goes for walk “everyday’/ ‘often’/ ‘sometimes’ than the proportion of the middle class elderly women (64%) who does the same.

Religious institutions in this context are referred to temples/ ashrams/ missions and any other institutions having a religious affiliation. Visiting religious institutions, ‘often’ is reported by 42% elderly women of the middle class as compared to 24% belonging to the poor families. Besides these higher proportion of the elderly women (58%) belonging to the poor families against 24% of the middle class report that they ‘sometimes’ visit these places. On the other hand ‘rarely’/ ‘never’ visiting of religious institutions are reported more by the middle class women as

compared to those of the poor stratum. Analysing the situation comparatively, in this context shows a much higher proportion of elderly women belonging to the poor stratum (82%) visit religious institutions “everyday”/ ‘often’/ ‘sometimes’ than the elderly of the middle class (68%). This on the other hand also reflects higher dependency of the elderly women belonging to the poor stratum on religion as compared to their middle class counterparts.

As stated earlier, going out with family members besides reflecting their social participation, also reflects the extent of their social acceptance among their family members. In the present study, irrespective of the social class, the frequency of going out with family members among the elderly women is found to be quite low. However, this frequency seemed to be lowest in case of the elderly belonging to the poor families than those of the middle class. This however confirms the previous findings showing, comparatively lesser acceptance and poor relationship of the poor elderly women with their family members. However, poor economic background of the elderly women belonging to the poor families can also be a cause behind this difference. In this context, is important to note that the elderly women staying alone are also included in the present section.

Visiting friends/ relatives are also found to be more often among the poor elderly women than those belonging to the middle class. 26% elderly women belonging to the poor families as compared to 20% of the middle class report that they ‘often’ visit their friends/ relatives. Moreover, the proportion reporting ‘sometimes’ visiting friends/ relatives are 44% in case of poor elderly women against 34% of the middle class. Thus to sum up, 70% of the elderly women of the poor stratum as compared to 54% of middle class report to visit their friends/relatives ‘often’ and ‘sometimes’. Moreover, ‘rarely’ visiting them are reported by quite a larger proportion of elderly women of the middle class (i.e. 30%) as compared to their counterparts. However, 16% and 18% elderly women of the middle and poor families respectively report that they ‘never’ visit their friends /relatives. The data thus shows greater involvement of the elderly women of the poor families with their relatives/ friends than those of the middle class.

Going for shopping are reported to be more among the middle class elderly women than those of the poor families. 20% elderly women belonging to the middle class against 4% of those belonging to the poor families report that they ‘often’ go for shopping. In this context it is to be

noted that, here 'shopping' refers to buying clothes for own or for other family members, buying different household goods, items of daily use etc. Merely buying of vegetables and grocery items are not included in the present context. 24% of the middle class elderly women against 20% of the poor families inform that they 'sometimes' go for shopping. Moreover, a large proportion of the poor elderly (40%) report that they 'rarely go for shopping as compared to 26% of those belonging to the middle class. Besides this, 30% of the middle class elderly women and 36% of the poor category report that they 'never' go for shopping. This reflects lesser involvement of the poor elderly women in these activities, which is probably due to their poor economic/ financial status and hence their lesser capacity to spend in these activities.

Attending of social gatherings refers to attending parties/ wedding ceremonies/ religious ceremonies etc. In the present context 36% and 34% of the elderly women belonging to the middle and poor families respectively report that they 'often' attend social gatherings. However, 'rarely' attending to these gatherings are reported by 20% and 38% of both the classes of elderly women (middle and poor families respectively). On the other hand almost 70% of the elderly women belonging to both the classes report that the 'never' attend any social gatherings. This proportion is however found to be more in case of the middle class elderly women (44%) than those belonging to the poor families (28%). From this it can be concluded that irrespective of class, though the frequency of attending social gatherings by the elderly women is found to be quite less, their proportion is slightly lesser in case of those belonging to the middle class than the elderly women of the poor families.

To conclude, this section reflects lesser participation of the middle class elderly women in the activities outside their home (like going for walk, visiting religious institutions, visiting friends/ relatives/ attending social gatherings) than those belonging to the poor families. However, it also reflects greater social acceptance and participation of the middle class elderly women within their family than their poor counterparts. This is because a higher proportion of the elderly women belonging to the former category, report incidences of 'going out with family members' at a higher frequency than those belonging to the latter category. Higher frequency in case of 'going to shopping' also reflects better economic status of the middle class elderly women than those belonging to the poor families. On the other hand, a higher proportion of elderly women

belonging to the poor families, participating in various social activities outside their home (like going for walk, visiting religious institutions, visiting friends/ relatives and attending social gatherings) reflects their higher level of engagement with the outside world as compared to the elderly women of the middle class. However, the engagement of the elderly women of both these classes, in these activities are found to depend on various factors like their age-group, marital status, participation in remunerative work, source of income and physical health status of the respondents. Irrespective of the class, age group of the respondents is found to be inversely related to their frequency of going out for walk, going out with family members, visiting friends and relatives, going out for shopping and attending social gatherings i.e. with the increase in the age of the respondents their participation in these activities tends to decrease. Moreover, the physical health status of the respondents tend to influence their participation in the above mentioned activities (like going for walk, visiting religious institutions, visiting friends/ relatives and attending social gatherings) and also their frequency of visiting religious institutions positively i.e. respondents with better health status are known to participate in these activities more frequently than those who report to suffer from any disability /ailments. Much similarly participation in remunerative work/ welfare activities and having a source of income are known to affect their frequency of visiting friends and relatives and attending social gatherings. Participation in remunerative work though seems to positively affect their frequency of going out for shopping, in case of the middle class elderly women, these factors are not found to have any relation in case of the poor elderly women. This suggests that having a source of income or participation in remunerative work in most cases does not provide the elderly women freedom to spend money on their own or for others. Besides these, marital status of the respondents are also found to positively influence their frequency of going out with family members, visiting friends and relatives, going out for shopping and attending social gatherings i.e. it is found to be higher among those who are presently married than those who are widows, unmarried/single or divorced. However, higher frequency of visiting religious institution are found among elderly widows than the respondents belonging to other categories, which reflects greater dependence of the elderly widows on religion than those who are presently married.

Engagement with religious association/ institutions:

Studies reflect that engagement with any kind of religious associations/ institutions, visiting these associations and the various activities performed therein by an elderly person provide him/her, a space to interact with and participate in the activities of the outside world. It also has a greater role to play in their psychological wellbeing. Hence studying the same reflects the level of their participation in social activities and the level of their interaction with other members of the society.

The data gathered in this section reflects that, of the total respondents belonging to both the classes, only 37% are known to be engaged with some religious institution/ association. However, this proportion is found to be much higher in case of the elderly women belonging to the middle class (58%) in contrast to those belonging to the poor families (42%). In this context it is to be noted that, the elderly women belonging to the poor families are found to be mostly engaged with religious associations/ institutions like Ramakrishna mission, 'Janakalyan Ashram', 'Geeta Bhawan', 'Bharat Seva Ashram', 'Ashram of Anukul Thakur' etc. While some elderly women are also found to be associated with the 'Giridhari temple', situated in their neighbourhood. However, the poor elderly women mostly report their association with the 'Madanmohan temple' situated in their locality. In some cases their association with 'Ashram of Anukul Thakur' is also reported.

<i>Frequency of visit to the religious institution</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total</i>
Often	66	75	68
Sometimes	21	25	22
Rarely	14	0	11
<i>Total</i>	29	8	37

Table 4.12 shows that, majority of the elderly women who are associated with some religious associations/institutions reports that they visit there 'often'. This is however, true for both the classes. While only a few i.e. 22% reports that they 'sometimes' visit there only during any

occasion or festival. A very small proportion belonging to the middle class reports that they 'rarely' visit these associations. With regard to the activities performed by these elderly women in these institutions, it is reported by majority of them that they visit there to offer puja, attend evening 'aarti', attend 'satsang', attend 'kirtan', attend religious discussion and sometimes even participate in the programmes and join the procession organised by them.

The study finds higher level of participation of the elderly women belonging to the poor families with religious associations/ institutions than those belonging to the middle class.

Perception of the elderly women towards role loss and changing status, care and support received from family members, needs fulfillment and the changing societal system.

The present study also analyses the perception of the respondents with regard to the fulfillment of their needs and requirements by their family members and priority assigned to the same; fulfillment of their emotional needs; and care and support extended to them by their family members. Their perception with regard to their role loss, changing role and status in the family; their attitude towards the younger generation, toward the changing societal system, gender roles; and conflict management are also probed into. Their perception on the above mentioned issues will reflect their adjustment and satisfactions with regard to these factors. In this context, some statements are framed and the elderly women are asked to state their opinions against each statement as "Strongly agree", "Agree", "Indifferent", "Strongly disagree" and "Disagree".

For the purpose of studying the perception of the elderly women towards the fulfillment of their needs; and priority given to the same by their family members, their perception on the following statements are assessed (a) '*All my requirements are met by my family members*', (b) '*I get enough money from my family to meet my daily needs*' and (c) '*Whenever I ask for something or place my requirements before my family, my needs are urgently met*'.

The data gathered from the present section reflects that majority i.e. 56% of the elderly women of the middle class against 8% belonging to the poor families, 'strongly agree' with the statement that '*All my requirements are met by my family members*'. However, 32% and 36% of elderly women belonging to the middle class and poor families respectively 'agree' on the same. On the

other hand, none of the middle class elderly women against 16% of the poor elderly women 'strongly disagree' with it. However, 34% elderly women of the poor families against 12% of the middle class 'disagree' on the same. 6% respondents of the poor families on the other hand are 'indifferent' to this statement. The whole picture reflects that higher proportion of the middle class elderly women (88%) opines in favour of this statement which reflects their satisfaction with regard to the fulfillment of their needs by their family members. In contrast to this a higher number of the elderly women of the poor families (50%) have strongly disagreed and disagree to the statement, which reflects their dissatisfaction with the same.

26% elderly women of the middle class as compared to 2% of the poor families 'strongly agree' with the statement '*I get enough money from my family to meet my daily needs*', while 48% and 12% respondents belonging to the middle class and poor families respectively 'agree' to the same. On the contrary, a much higher proportion of the elderly women of the poor families i.e. 40% and 46%, 'strongly disagree' and 'disagree' respectively to the statement against 4% and 20% elderly women belonging to the middle class. 2% elderly women of the middle class are 'indifferent' on this issue. In this context it is to be noted that some of the elderly women who 'strongly disagree' to the statement report that they get no financial assistance from their family members and run all the expenses themselves. However, the data reflects that much higher proportion of elderly women belonging to the middle class (74%) have express their satisfaction with regard to the monetary support provided to them by their family members by 'strongly agree' and 'agree' with the statement as compared to only 14% of the respondents belonging to the poor families. On the other hand, majority of the elderly women belonging to the poor families (86%) 'strongly disagree' and 'disagree' with the statement, as compared to those belonging to the middle class (24%) which reflect the dissatisfaction of the poor elderly women in these matter. It thus shows higher level of satisfaction among the elderly women of the middle class with regard to the monetary support they get from their family members as compared to their poor counterparts.

Almost 12% elderly women of the middle class and 6% of the poor families 'strongly agree' with the statement '*Whenever I ask for something or place my requirements before my family, my needs are urgently met*' as compared to 42% and 6% of the elderly women belonging to the middle class and poor families respectively who 'agree' to the same. Besides these the proportion who 'strongly disagree' and 'disagree' to it, are 4% and 40% respectively in case of

middle class and 46% and 42% respectively in case of poor families. 2% elderly women of middle class are 'indifferent' on this. This shows that a higher number of elderly women belonging to the middle class (54%) feel that their needs and requirements are met with priority by their family members in contrast to 44% respondents of the same class who 'strongly disagree' and 'disagree' to the same. On the other hand higher proportion of the respondents (88%) belonging to the poor families 'strongly disagree' and 'disagree' to the same in contrast to only 12% of the same class who express their agreement to the statement. Much like previous findings, even in this case satisfaction of the elderly women belonging to the middle class is reflected than those belonging to the poor families, who are mostly found to be dissatisfied in this matter.

Thus it can be concluded from the data that higher proportion of the middle class elderly women feel that their requirements are always met with priority by their family members as compared to those belonging to the poor families. This reflects that the elderly women belonging to the former category are much well-adjusted than those belonging to the latter group, which is probably due to the better educational status of the middle class respondents, than their poor counterparts. This can however also be explained by the difference in the economic background of the families of these two classes, which often prevents the family members in fulfilling the needs and requirements of the elderly women belonging to the poor families. Moreover, an association is also noticed between their satisfaction in these matters and their educational and marital status. Irrespective of class satisfaction in these issues are noticed more among the elderly women with better educational status and among those who are presently married. Though, this is mostly found in case of the middle class elderly women than those belonging to the poor families. Occupational and earning status of the elderly women and their spouses are found to be associated with their satisfaction in these issues only in case of the middle class elderly women. However, such association is not found in case of the elderly women belonging to the poor families mainly due to the fact that these poor elderly women, even when earning, hands over her total income to the other members of her family and remains dependent on others for the fulfillment of their own needs. In such cases it is found that many of these women are denied of the monetary support at the time of their need, even from the person to whom she hands over all her earned money. On the other hand in some cases it is also due to the prevalent

gender biasness in these families which results in assigning less priority to the needs of the elderly women, sometimes even by her husband.

For the purpose of studying the perception of the elderly women with regard to the fulfillment of their emotional needs and the care and support extended to them by their family members, the respondents are asked to express their views on the following statements (a) '*At the time of illness or any other physical problem my family members take care of me and provide me with enough support*', (b) '*I am satisfied with the time, my family members spends with me*', (c) '*I am satisfied with the amount of time my grandchildren spends with me*', (d) '*I feel that my family members are too busy and do not have enough time to take care of me*', (e) '*I feel lonely as my family members are too busy and do not have sufficient time to talk to me*', (f) '*Whenever I am faced with any problem, I can always share it with my family members*'.

Equal proportion of the elderly women (24%) belonging to each class 'strongly agree' to the statement '*At the time of illness or any other physical problem my family members take care of me and provide me with enough support*'. However, a higher proportion of middle class elderly women 70% against 42% of the poor families 'agree' to the same. On the other hand, 2% and 4% elderly women, belonging to the middle class 'strongly disagree' and 'disagree' respectively to the statement. This proportion is however, is higher i.e. 4% and 30% respectively in case of the elderly women belonging to the poor families. Though higher proportion of respondents, irrespective of their class express their satisfaction with regard to the care taken and assistance provided by their family members at the time of illness, but comparative analysis shows a much higher proportion of the middle class elderly women (94%) expressing their satisfaction in this respect, as compared to the elderly women belonging to the poor families (66%).

26% and 56% of the elderly women belonging to the middle class 'strongly agree' and 'agree' respectively to the statement, '*I am satisfied with the time, my family members spend with me*' against 8% and 46% of the elderly women belonging to the poor families who 'strongly agree' and 'agree' respectively to the same. On the contrary, the proportion of elderly women who 'strongly disagree' and 'disagree' to the statement is 2% and 16% respectively in case of middle class against 18% and 28% of those belonging to the poor families. Though irrespective of class, a higher proportion of elderly women express their satisfaction with regard to the amount of time their family members spend with them, but their proportion is much higher in case of the middle

class elderly women (82%) as compared to those belonging to the poor families (54%). This reflects the satisfaction of the middle class elderly women as compared to their poor counterparts, with regard to the amount of time that their family members spend with them.

Similarly, 18% elderly women of the middle class against 6% of the poor families 'strongly agree' with the statement '***I am satisfied with the amount of time my grandchildren spends with me***'. This is however 'agree' by 52% of the middle class elderly women against 54% belonging to the poor families. The proportion of elderly women who 'strongly disagree' and 'disagree' to the statement is 2% and 20% respectively in case of middle class and 6% and 24% respectively in case of poor families. Thus it can be seen that irrespective of class a much higher proportion of the elderly women report their satisfaction with their grandchildren. However, the percentage is higher in case of the middle class elderly women (70%) than in case of the respondents belonging to the poor families (60%). In this context it is to be noted that 8% and 10% elderly women belonging to the middle and poor families respectively do not have grandchildren and hence the question is 'not applicable' for them.

On the other hand, 2% elderly women of the middle class as compared to 6% of the poor families 'strongly agree' to the statement, '***I feel that my family members are too busy and do not have enough time to take care of me***'. However the percentage of elderly women who 'agree' to the statement is 14% in case of middle class and 16% in case of the respondents belonging to the poor families. On the other hand, the percentage of the elderly women who 'strongly disagree' and 'disagree' to the statement is 40% and 40% respectively in case of the middle class elderly women against 24% and 44% in case of those belonging to the poor families. Besides these, 4% and 10% of the elderly women belonging to the middle class and poor families respectively are 'indifferent' while commenting on this issue. Thus, it can be seen from the above data that irrespective of class a higher proportion of respondents belonging to the middle class (80%) and poor families (68%) 'strongly disagree' and 'disagree' with the fact that their family members are too busy and hence cannot take care of them. This stands in contrast to a much smaller proportion i.e. 16% and 22% of the respondents belonging to the middle class and poor families respectively, who 'strongly agree' and 'agree' with the same. The present analysis thus shows that higher proportion of the respondents irrespective of their social class, are well-adjusted and are satisfied with regard to the care taken by their family members,

However, it tends to be higher in case of the middle class than the respondents belonging to the poor families.

4% elderly women of the middle class as compared to 12% of the poor families 'strongly agree' to the statement, '*I feel lonely as my family members are too busy and do not have sufficient time to talk to me*', whereas the percentage of elderly women who 'agree' to the same is 20% in case of middle class against 10% in case of the poor elderly. On the contrary, 38% of the middle class elderly women against 20% of the poor category, 'strongly disagree' to the statement. On the other hand, 36% belonging to the middle class against 54% of the poor families 'disagree' to it. However, 2 % and 4% of the middle class and poor elderly women are indifferent to the question. The data collected in this section reflects that irrespective of class a higher proportion of elderly women 'disagree' and 'strongly disagree' with the statement, their proportion being equal (74%) in case of both the categories. However only a slighter difference is noticed between the proportion of elderly women belonging to both the categories who 'strongly agree' and 'agree' with the statement. This proportion is 24% in case of middle class and 22% in case of poor families. Hence a bit lesser proportion of respondents belonging to the poor families, agreeing with the statement as compared to the respondents of the middle class reflects lesser feelings of loneliness among the poor elderly women than their middle class counterparts. This is probably due to the more involvement of the poor elderly with their friends and neighbours, who in many cases compensates for the company of their children and family members.

However, 36% and 50% of the elderly women of the middle class 'strongly agree' and 'agree' respectively to the statement, '*Whenever I am faced with any problem, I can always share it with my family members*' against 10% and 42% of those belonging to the poor families. This reflects greater support received by the middle class elderly women from their family members than their poor counterparts and higher proportion of the middle class elderly women expressing their satisfaction in this regard. On the contrary, the percentage of elderly women who 'strongly disagree' and 'disagree' are 4% and 10% in case of middle class and 6% and 36% in case of poor families. However, 6% elderly women of the poor families remain indifferent to the question. This shows that almost 86% respondents belonging to the middle class in contrast to 52 % belonging to the poor families 'strongly agree' and 'agree' that they get enough support from their family members whenever they are faced with any problems. On the contrary 14% and 42% respondents belonging to the middle and poor families respectively 'strongly disagree' and

'disagree' to it. It can thus be concluded that, though irrespective of class higher proportion of elderly women feel that they get enough support from their family members, whenever they are faced with any problem but their proportion is much higher in case of the elderly women belonging to the middle class than those belonging to the poor families.

Thus it can be concluded from the above analysis that irrespective of class, a higher proportion of the elderly women expresses their satisfaction with regard to the care and support extended to them by their family members especially during illness; sharing of their problems by the family members and the amount of time that their family members and grandchildren spend with them. However, comparative analysis reflects satisfaction in the above mentioned factors among a much higher proportion of elderly women belonging to the middle class as compared to their poor counterparts. Although a higher proportion of poor elderly women disagreed to suffer from the feeling of loneliness, which shows lesser feelings of loneliness among the elderly women belonging to this category. This is probably due to their higher level of engagement with the outside world (friends and neighbours) as compared to those belonging to the middle class. Moreover, satisfaction in these issues are found to be associated with the age group, marital status and educational status of the elderly women as irrespective of class, a higher level of adjustment is found among the elderly women who fall in the age group of 60-69 and is found to decline with the increasing age of the elderly women. Moreover, a higher proportion of respondents expressing satisfaction in these issues are found among those who are presently married as compared to those who are widow. Besides these, their educational status also tends to influence their satisfaction on these matters as majority of the elderly women expressing their satisfaction in these matters are found in case of those with higher educational qualification. This is however, most prominently visible in case of the respondents belonging to the middle class as compared to their poor counterparts.

Besides these, in order to assess their perception with regard to their loss of roles and changes in status experienced by them in the family; and attitude of the family members towards them, the respondents are asked to express their views on the following statements. These statements are: (a) *I feel dominated by the younger members of my family on every issue*, (b) *I feel that my family members misbehave with me and do not listen to me as they used to do previously*, (c) *I*

feel bad when my son and daughter-in law are going for a party, or for shopping leaving me alone at home’.

Comparatively higher proportion of elderly women belonging to the poor families ‘strongly agree’ and ‘agree’ to the statement, ***‘I feel dominated by the younger members of my family on every issue’***. The percentage who ‘strongly agree’ and ‘agree’ to the statement are 24% and 35% respectively in case of poor families against 10% and 30% in case of those belonging to the middle class. On the other hand, the proportion of elderly women who ‘strongly disagree’ and ‘disagree’ are 12% and 24% respectively in case of poor families, in comparison to 28% and 28% respectively in case of the middle class. The question being sensitive in nature could not fetch a proper response from 5% and 4% elderly women belonging to the middle class and poor elderly women respectively.

A higher proportion of the elderly women of the poor families i.e. 36% and 30%, ‘strongly agree’ and ‘agree’ respectively to the statement, ***‘I feel that my family members misbehave with me and do not listen to me as they used to do previously’*** as compared to 16% and 24% in case of those belonging to the middle class families. In contrast to this, 12% and 22% elderly women of the poor families ‘strongly disagree’ and ‘disagree’ to the same. However, 2% elderly women are reluctant to comment on this issue. Data gathered in this section on the one hand reflects, reduced or declined acceptance of the poor elderly women among their family members as compared to those belonging to the middle class families. It also reflects lesser number of poor elderly women showing adjustment with regard to the changing family relations than their middle class counterparts.

None of the respondents, covered under the present study, ‘strongly agree’ to the statement ***‘I feel bad when my son and daughter-in law are going for a party or for shopping leaving me alone at home’***. However, only 4% elderly women belonging to the middle class and 14% of the poor families ‘agree’ to it. On the contrary the proportion of elderly women who ‘strongly disagree’ and ‘disagree’ to the statement are 26% and 34% respectively belonging to the middle class as compared to 12% and 26% respectively belonging to the poor families. 8% middle class and 22% poor elderly women on the other hand is however reluctant to comment on this and hence are indifferent. In this context it is also to be noted that 28% and 26% elderly women belonging to both the middle and poor families do not have son/s /married sons or are not living with any married son/s and hence this issue is found to be non-applicable for them.

These findings again reflect that higher number of elderly women is well-adjusted with their loss of role and changes in status experienced by them in the family than those of the poor families. One of the reasons for this is naturally the differences in the cultural and educational background of the women of these two classes. Better education along with better economic status to some extent help the elderly women to adjust with the transitions in role and status at old age. This has been confirmed again by the fact that, adjustment in these issues is reported by a higher proportion of the elderly women with higher educational status than those who are either illiterate or have received only a non-formal education. Moreover, elderly women who were previously engaged into any job or who are presently involved in any job/ community or welfare service are found to show adjustment in these issues than those who are not engaged in such activities. However, this is not found to be true in case of the poor families to that extent as in these families women are bound to work in order to run their family or in some cases to contribute some money to their sons for their upkeep. Thus, in most cases even participation in work does not ensure them relief from economic crisis or boost up their confidence level. Many of them are found to consider their work as burden. In this context, some elderly women reports that they are bound to work at this age because according to them if they do not work they will not get to eat from the very next day. Few women in this context also report that they want some rest at this age; their fragile health does not permit them to continue their work. Moreover, irrespective of class, a higher proportion of elderly women who are presently married, having an earning spouse are found to show adjustment in these issues than those who are widows or having a non-earning spouse. Besides these, increasing age and physical disability are found to reduce the adjustment of the elderly women in these issues.

Efforts are also made to study the perception of the elderly women towards the members of the younger generation and their perception towards conflict management in the family. Besides these, their perception towards the changing societal system and gender roles are also studied by assessing their views on the following statements: (a) *'Nowadays young stars do not know how to respect their elders'*, (b) *'Working women cannot take proper care of their family, children and of the elderly members of their family. Thus women should not go out for work'*, (c) *'Children should not leave their parents and shift to some other town for their job and career'*, (d) *'Nowadays daughter-in laws do not listen to or respect their in-laws'*, (e) *'I feel insulted when*

the younger members of my family members says humiliating words to me', (f) 'Whenever there is an argument in your family between two younger members, you should keep mum and not interfere'.

22% and 48% of the elderly women belonging to the middle class families 'strongly agree' and 'agree' to the statement, ***'Nowadays young stars do not know how to respect their elders'*** against 40% and 50% elderly women belonging to the poor families. On the contrary, the proportion of elderly women who 'strongly disagree' and 'disagree' with the statement is 6% and 24% respectively in case of middle class and 2% and 8% respectively in case of poor elderly women. A higher proportion of the elderly women, strongly agreeing and agreeing to the statement, reflect rigid attitude on the part of the elderly women, which often affect their adjustment in these issues negatively which in turn also tend to negatively affect their social acceptance in the family.

Nearly 48% and 24% of the elderly women belonging to the middle class 'strongly agree and 'agree' respectively to the statement, ***'Working women cannot take proper care of their family, children and of the elderly members of their family. Thus women should not go out for work'*** against 22% and 36% of the elderly women of the poor families. Whereas 18% and 10% of the elderly women belonging to the middle class 'strongly disagree' and 'disagree' to the statement respectively against 10% and 32% elderly women belonging to the poor families. From the findings it can thus be concluded that, higher proportion of the middle class elderly women, agrees to the statement, which reflect rigid their attitude towards the changing role of women, as compared to their poor counterparts. In this context it is important to note that, though similar rigid attitudes are also noted among many elderly women of the poor families, (who has disagreed to the statement) but according to them 'the women of the poor families have no option, they have to go to work in order to support their family'. Moreover, it is also significant to note that higher number of women, who were previously / presently working, disagreed to the statement against those who were previously non-working/ housewives. Higher educational qualification of the elderly women especially belonging to the middle class also tend to have a positive affect on their perception of gender roles and towards the changing roles of women.

A larger number of elderly women belonging to the middle class i.e. 68% and 24% 'strongly agree' and 'agree' respectively to the statement, ***'Children should not leave their parents and shift to some other town for their job and career'***. However, in case of poor families, only 40%

of the elderly women 'strongly agree' and 44% 'agree' to the above statement. The proportion who 'strongly disagree' and 'disagree' to the statement is 6% and 2% among the middle class against 2% and 10% in case of those belonging to the poor families. However 4% of the elderly women remain 'indifferent' to the question. The difference between the perceptions of elderly women of these two classes is mainly due to the fact that in poor families, due to economic crisis elderly parents are often compelled to accept such separation from their adult children. In such cases they at least remain happy with the fact that their children are earning and contributing some amount to their parents. However, irrespective of class, majority of the elderly women agreeing to the statement reflect some rigidity and unwillingness on the part of elderly women to detach with their adult children at old age. It also reflects their emotional dependence on their adult children at this point of life.

A significant number of elderly women irrespective of their class, 'strongly agree' and 'agree' to the statement '*Nowadays daughter-in laws do not listen to or respect their in-laws*'. However their number is comparatively higher in case of the elderly women belonging to the poor families (44% and 46% respectively) than those belonging to the middle class (30% and 28% respectively). On the other hand, 14% and 24% elderly women of the middle class families 'strongly disagree' and 'disagree' to the above statement respectively in comparison to 4% and 4% in case of the poor elderly women. A significant proportion of the elderly women agreeing to the statement reflect their negative attitude towards their daughter-in laws, which often provides a hindrance in their acceptance among their family members and their adjustment within the family. This also often affects their relationship with their son/s in a negative way. However, this proportion tends to be higher in case of the poor elderly women than their middle class counterparts, reflecting lesser proportion of the poor elderly women showing adjustment in this issue. In this context it should be noted that 4% of the elderly women of the middle class and 2% of the poor families are non-willing to express their views on this issue. It is also to be noted that though few elderly women covered under the present study, do not have any daughter-in law/s but are not excluded from the present analysis. Their opinion with regard to the above mentioned statement, is simultaneously sought as this section seeks to explore their views with regard to various aspects and relationship within the family, which is found to be equally important in case of these elderly women.

Almost 60% and 22% of the elderly women belonging to the middle class and 70% and 24% belonging to the poor families 'strongly agree' and 'agree' with the statement, ***'I feel insulted when the younger members of my family members says humiliating words to me'***. While none of the elderly women 'strongly disagree' or 'disagree' with the statement. In this context it is to be noted that 14% of the middle class elderly women and 4% of those belonging to the poor families remark that their family members/children never say any humiliating words to them or never speak rudely with them. Hence the question is non-applicable for them. However, few of them (i.e. 4% and 2% belonging to the middle class and poor families respectively) are 'indifferent' on this issue.

Nearly 30% and 40% of the elderly women belonging to the middle class 'strongly agree' and 'agree' respectively to the statement, ***'Whenever there is an argument in your family between two younger members, you should keep mum and not interfere'***, against 8% and 44% of the elderly women belonging to the poor families. However, a significant number of elderly women of the poor families i.e. 10% and 38% 'strongly disagree' and 'disagree' respectively to the statement, in contrast to 12% and 18% belonging to the middle class. This shows lesser interfering attitude of the middle class elderly women in comparison to those of the poor families which helps them to manage conflicts in their families in a much better way.

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CHAPTER: 5

HEALTH CARE AND SUPPORT

Old age is often associated with deteriorating physical and mental health. With the increase in chronological age the health status of an individual starts declining which makes him susceptible to various kinds of health risk and diseases. Needless to say, that the health status of an individual is an important part of his/her well-being. Poor health status not only tends to make an individual dependent on others but also limits his/ her interaction with the outside world. Especially during old age, due to the loss of or reduced income a person becomes more dependent and helpless when she/he falls prey of different diseases and health issues. Moreover, his/her dependent status and the increasing burden of medical expenses often exert a severe economic pressure even on their family members.

The condition often becomes worst for women in such cases. Due to their less participation in work force, they often enjoy less security measures at old age. Biswas (1989) observes that irrespective of culture, and economic situations, it is the elderly women who generally face greater neglect with regard to the 'health care arrangements' and support received by their family members. Less participation in gainful employment also tends to negatively affect their rate of savings throughout their life. Thus at old age, the already dependent women become more dependent due to the declining physical health and increasing economic pressure, often because of the higher rate of medical expenses. Moreover, declining physical health is not only associated with increased medical expenses but it also means increased dependency of the elderly women on their family members for different kinds of physical support, like support for performing daily activities, support for movement etc. A study conducted by Panda (2005) reflects a clear association between physical health and social relationships of an elderly woman. The study points out that physical health tends to influence the roles and relationships of an elderly woman within her family and to a great extent it determines her interaction and active participation with other members of the society. Quite similarly, Nasreen (2009) has pointed out that economic and physical dependence are inversely related to the status of an elderly person and with the quality of their interpersonal relationships.

Due to modernisation and the changing family relations and structure, health care of an elderly person has become a serious concern for the members of the younger generation. Daughter-in-laws of the household who were once responsible for the care-giving of the elderly persons are now gradually moving out for job and career. Moreover, migration of adult children to other cities/ states leaving the elderly parents in their native places has also become a common phenomenon. Thus besides providing for medical expenses, providing physical support to the elderly persons has also become a problem for the family members in such situations. In such cases, economically well to do family often restore to paid help. However, in case of the poor families, the situations of the elderly persons are worse. Gowri, Reddy & Rani (2000) points out that 'feeling of burden' towards the elderly people is most common among the families of lower socio-economic strata". Moreover, Nasreen (2009) points out that the burden of medical expenses leads to the suppression of medical emergencies and denial of treatment especially by the elderly women, which in turn affects her well-being and health status adversely.

Thus in this context attempt has been made here to comparatively study and analyse the nature of health problems that the elderly women of both the classes generally suffers from, perception towards own health status; and the care and support provided to them by their family members.

Present health problems of the elderly women:

Almost 94% of the elderly women covered under the present study are found to suffer from one or more health problems at present. However, a slightly higher number of elderly women (96%) belonging to the middle class report to suffer from health problems as compared to those belonging to the poor families (92%). On the other hand 4% and 6% of the elderly women belonging to both the classes respectively, report absence of any health issues at present.

Data collected with regard to the kind of health problems that the elderly women mostly suffer from, reveals that a higher number of elderly women belonging to the middle class mostly suffer from Arthritis/ Body pain/ Joint pain/ Knee problem (62%) as compared to 52% belonging to the poor families. This is followed by a number of elderly women who report to suffer from High BP/ Low BP. This proportion is found to be 56% in case of middle class as compared to 40% in case of poor elderly women. Besides these, a significant number of elderly women are found to

be suffering from Diabetes, Heart problems and Thyroid problems. However, their proportion is reported to be more among the middle class than the poor elderly women. Cases of Insomnia are found to be significantly higher among the middle class elderly women (27%) as compared to the elderly women of the poor families (4%). Incidences of Osteoporosis are reported by 42% of the middle class elderly women as compared to 28% of those belonging to the poor families. On the other hand, elderly women of the poor families report to suffer most commonly from, Anemia (52%), Weakness (66%), Pulmonary disorders (42%), Urinary infection (45%), Liver/digestive problems (38%) as compared to the elderly women of the middle class. Cases of hearing and eye problems are also reported by a large number of elderly women belonging to the middle and poor families simultaneously.

However, irrespective of social class, suffering from Constipation/ loose motion, digestive problems, Cognitive disorders, Low potassium and sodium, Dementia and Neurological disorders are reported most commonly by the elderly women in the 'middle aged old' group (i.e. 70-80 years) and by the 'oldest old' group (80 years and above) . Besides these, Disability is found to be higher among the elderly women belonging to the age group of 80 years and above.

Self-perception of health status:

Self- perception of health status by the elderly women reflects that higher proportion of elderly women covered under the present study report their health status to be 'Bad'. However this proportion is slightly higher in case of the elderly women belonging to the poor families (46%) than those of the middle class (42%). This is followed by 28% elderly women who report their health status to be 'satisfactory'. This proportion however, is found to be significantly higher in case of the poor elderly women (26%) than those belonging to the middle class (18%). On the other hand, 22% of the elderly women report their health condition to be 'worse', whose proportion is also much higher in case of the middle class as compared to the poor elderly women. However, 6% elderly women, (4% of the middle class and 8% belonging to the poor families) report that they are presently enjoying 'good' health.

Comparative analysis of the data shows that rating of own health status as 'good'/ 'satisfactory' are more commonly among the poor elderly women as compared to their middle class counterparts. However, a higher number of elderly women belonging to the middle class rate

their health status as ‘bad’ / ‘worse’. This is probably due to the wider engagement of the poor elderly women in different socio- economic activities and their engagement in gainful employment even at this age.

Table 5.1: Elderly women’s perception regarding their present health status (in percentage)

<i>Present health status</i>	<i>Middle Class</i>	<i>Poor families</i>	<i>Total%</i>
Good	4	8	6
Satisfactory	18	26	28
Bad	42	46	44
Worse	36	20	22
Total	50	50	100

Medical Expenses:

Old age is often associated with reduced income and increased expenditure on medical and health related needs. In the present era, medical expenses often prove to be a burden not only for the elderly people but also for their family members. In most cases, due to non- participation in any gainful employment, elderly women often tend to depend on their kins and family members for these needs which also put a severe economic pressure on them. The situation is worst in case of families which are economically poor. Studies in this area reflect that many elderly women tend to suppress their health related emergencies, in order to curtail their medical expenses, which severely affect their well-being at this age.

Thus in the present section an attempt is made to enquire whether the economic status of the families to which the elderly women belong, have any association with the monetary help received by the elderly women to meet their medical expenses and whether the support is enough to meet their medical needs. In this context, the relationship of the elderly women with the person providing support for medical expenses is also investigated.

Findings reveal a significant difference between the elderly women of the two classes with regard to the monetary assistance received for medical expenses. Though, a large number of the respondents (73%) of the present study reports that they receive/ get enough money for medical expenses but the comparative analysis shows, that a significantly lower proportion of the elderly women of the poor families (52%) receive enough financial support for medical expenses, than

the elderly women of the middle class (94%). On the other hand 48% elderly women belonging to the poor families against 6% of the middle class report that they do not receive enough money for their medical expenses. This to some extent is definitely due to the differences in the economic condition of both the classes which in turn reflects a significant association between the economic status of the family and the level of health care and medical support received by the elderly women.

In this context attempt is also made to enquire about the relationship of the individual with the elderly women, who provide them the required monetary support for medical expenses. Data shows that in case of the middle class elderly women, a large proportion of them report to receive monetary support mostly from their son/s living with them. In case where the elderly woman is presently married, the support is mostly received from their husband (26%). It is however sometimes known to be jointly received from their son and husband, though in a very few case.

On the contrary, it is quite significant to note that, a much higher proportion of the poor elderly women (30%) report that they meet these expenses on their own. However this percentage is found to be quite low in case of the middle class elderly women (10%). Needless to say, meeting of these expenses on own are found only among the elderly women, who are either working at present or have any source of income. Moreover, jointly meeting of self-medical expenses by own together with husband and children are also reported by 4% of the middle class elderly women as compared to 12% elderly women of the poor families. This is followed by a higher proportion of the elderly women of the poor families who are found to be supported by their son/s co-residing with them. However the proportion of elderly women receiving support from their son/s in this regard is found to be much low in case of the poor elderly women (24%) as compared to those belonging to the middle class (38%). Husband's support in this regard is mostly received by the elderly women who are presently married and have an earning husband/ husband with some source of income (18%). However, this is found to be much lower in case of the elderly women of the poor families.

As compared to the middle class elderly women, daughters / son-in laws are found to play an important role for a higher proportion of poor elderly women, in relation to providing support for medical expenses. This proportion is 8% in case of poor families as compared to 2% for the middle class. However joint assistance by husband, daughter/s and son/s in this regard is reported

to be 14% in case of middle class as compared to those belonging to the poor families (4%). Moreover, unlike the middle class elderly women, the neighbours are also found to play a significant role in the life of the poor elderly women in the context of providing them monetary support at the time of emergency for meeting their medical expenses (4%). However, only 4% of the elderly women belonging to the middle class report the receipt of monetary support for meeting medical expenses, mainly from the relatives with whom they co-reside with.

All these findings suggest that poor elderly women tend to depend less on their family members for health related expenses than the elderly women of the middle class, as in most cases these needs are met by their own resources. Moreover, the significant role of neighbours in meeting the health related needs of the poor elderly women are also reflected from the present analysis.

Monetary support and assistance provided by family members for the treatment of the elderly women.

Visiting Doctors/ health centers for seeking treatment is one among many services sought in meeting health care/ medical needs. Elderly women often tend to depend on their family members, when it comes to visiting doctors. Besides their low confidence, their weak financial condition also in some cases proves to be a hindrance in seeking this service or deciding anything on this issue. Thus in most cases, especially where she is dependent economically, the elderly woman is found to be entirely depending on their family members for seeking these services.

In this section attempts are made to explore the frequency at which the elderly women are taken to the doctor by their family members whenever it is required. Data gathered in this section reveals that majority of the elderly women of the middle class (80%) report that they are 'always' or 'mostly' taken to the doctor whenever any requirement is felt, as compared to 48% elderly women of the poor families. However, the remaining 20% elderly women of the middle class against 24% of the poor families report that they are 'sometimes' taken to the doctor. Besides these, 16% and 12% elderly women of the poor families report that they are 'rarely' and 'never' taken to the doctor by their family members. It is important to note that in such cases, where they get no help from their family members in this regard, the elderly women are mostly are found to depend on their neighbours/ friends to assist or accompany them to the doctor

<i>Table: 5.2: Person who accompanies the elderly women to the doctor (in percentage)</i>			
<i>Person who accompanies the elderly women</i>	<i>Middle class</i>	<i>Poor families</i>	<i>Total%</i>
None/Self	8	2	5
Husband	24	14	19
Son/s	50	30	40
Daughter/s	34	42	38
Daughter-in law	20	8	14
Son-in laws	2	0	1
Relatives	8	0	4
Friends	0	12	6
Neighbours	0	16	8
Grand children	2	2	2
<i>Total</i>	50	50	100

Table 5.2 reflects that daughters play a very important part when it comes to health care and support of the elderly women. This is especially reflected in case of the poor families. While accompanying the elderly women to the doctor, the role of daughters is found to be significantly high among the poor elderly women (42%) than the elderly women of the middle class (34%). This is followed by 30% of the elderly women who are accompanied by their sons. However the proportions of elderly women who are often accompanied by their sons to the doctor are higher in case of middle class elderly women (50%) than those belonging to the poor families.

Husband's assistance in this regard is enjoyed by a higher proportion of the elderly women belonging to the middle class (24%) than the poor elderly women (14%). Company of daughter-in law/s in this regard is received by a higher proportion of the elderly women 20% belonging to the middle class than those belonging to the poor families (8%).

Assistance provided by son-in law/s and relatives in this regard is reported by only 2% and 8% elderly women belonging to the middle class. Moreover, friend's company in this regard is sought by almost 12% of the poor elderly women. However such cases are not reported by the elderly women belonging to the middle class families. Besides these, almost 16 % of elderly women belonging to the poor families as compared to none of the middle class elderly women report to receive assistance from their neighbours in this regard. Assistance of grandchildren in

this regard is sought by 2% elderly women belonging to each class. However, going to the doctor alone is reported more among the middle class elderly women i.e. 8% as compared to 2% of the poor families.

Findings reveal that in case of visiting the doctor, the elderly women of the middle class tend to depend more on their kins than those belonging to the poor families, a significant proportion of whom depends on their neighbours and friends for this. Moreover, this also reflects greater acceptance and wider involvement of the poor elderly women in their wider social network than their middle class counterparts. However, self-dependency in this respect is reported to be more among the middle class elderly women than those belonging to the poor families. Self-reliance in this respect is found to be linked to the educational status of the elderly women as most of these elderly women (belonging to the middle class) who are self-dependent in these matters are found to be educated above High school. Moreover, the role of daughters is found to be significantly high in case of the poor elderly women in providing them assistance in this respect.

Paying of doctor's fees is also a part of the medical expenses that the elderly people are faced with. Failure to arrange sufficient money to provide the doctor's fees often restrict them from going to the doctor/ health center for treatment and thus compel them to compromise with their health. In this context it is to be noted that in case of a much higher proportion of elderly women, belonging to the middle class, it is the son who pays the doctor's visit(48%) , followed by the husband(32%). This is followed by very small proportion who report that the fees are paid mostly by their daughters (6%), son-in laws (4%). However, 6% elderly women report to receive assistance from their relatives in this regard. In most cases these are the relatives that they co-reside with. Moreover, 10% of the elderly women of the same class report that they pay the fees themselves with their own money. In contrast to this, a greater number of elderly women belonging to the poor families (30%) are found to be self-reliant in this issue. This is naturally due to their higher rate of participation in the work force. However, monetary support received from daughter/s in paying doctor's fees is found in case of a higher number of elderly women belonging to the poor families than the middle class elderly women. On the other hand, support received by son (36%) and husband (18%) in this regard is found to be much less among the poor elderly women than their middle class counterparts.

Health care and support provided by family members:

In this section the health care and support provided to the elderly women by their family members during illness are studied and analysed comparatively. The matters that the present study tries to explore are whether they are looked after by their family members at the time of illness, whether any assistance is provided by the family members during illness in performing daily activities, whether they are given medicines on time, diet provided to them etc. Moreover, their relationships with the person providing support in all these activities are simultaneously enquired into.

Table 5.3 reflects that a higher number of elderly women covered under the present study report that their family members look after them during illness. However, the percentage is much higher in case of the poor families (92%) than the middle class elderly women (88%). Most the elderly women belonging to the middle class, who deny to this fact report that they are looked after by maids during illness, while one elderly woman states that she has no one to take care of her and thus she has to help herself in this regard. However the poor elderly women, who are not looked after by their family members during illness report that they often stay at the mercy of their neighbours for assistance.

<i>Care and support during illness</i>	<i>Middle Class</i>			<i>Poor families</i>		
	<i>Yes</i>	<i>No</i>	<i>Indifferent</i>	<i>Yes</i>	<i>No</i>	<i>Indifferent</i>
Whether looked after by family members at the time of illness.	88%	12%	0	92%	8%	0
Whether any assistance provided by family members during illness in performing daily activities.	88%	12%	0	92%	8%	0
Whether satisfied with the diet being provided by family members.	98%	2%	0	56%	10%	34%
Whether given reminder for medicines by the family members during illness.	82%	18%	0	54%	46%	0
Whether the family members come and sit beside to enquire about health, during illness.	96%	4%	0	80%	18%	2%
<i>Total</i>	50			50		

In this context the study finds that irrespective of the social class, a higher number of elderly women are looked after by their daughters during illness. This proportion however, is much more in case of the elderly women belonging to the poor families than the middle class elderly women. Another significant proportion is found to receive assistance from their daughter-in laws in this regard, which shows slightly higher proportion for the elderly women belonging to middle class than the poor elderly. Some elderly women report that they receive assistance both from their daughters and daughter-in laws during illness. Besides this, assistance from husband/sons/relatives/grandchildren is found to be received by quite a smaller proportion of elderly women. Husband's assistance is provided mainly in case where the elderly woman is staying with her husband alone.

Similarly, table 5.3 shows that majority of the elderly women under the study report that during illness, their family members do provide them all the necessary assistance in performing their daily activities. However, their number is more in case of the poor elderly women than their

counterparts. In middle class families, during illness the daily activities of most of these elderly women are usually performed by maids whereas elderly women belonging to the poor families who are not assisted by their family members report that during illness they are supported by their neighbours, who not only help them to perform their daily activities like washing their clothes, cooking food for them, bathing them but even feed them when needed.

The findings that are revealed in this section are quite similar to the previous analysis. The findings show that daughters are the main provider of assistance for a majority of elderly women, when it comes to health care and support. However, their percentage is more in case of poor elderly women than those belonging to the middle class. This is followed by a significant number of elderly women, who are assisted by their daughter-in laws during illness in performing their daily activities. However, a smaller proportion of elderly women belonging only to the poor families report that they are helped by their husband in performing these activities. Besides these a few elderly women reveal that the relatives co-residing with them assist them in performing these activities.

In case of their satisfaction with regard to the diet provided to them in the family, a very large proportion (98%) of the elderly women belonging to the middle class express their satisfaction with regard to the same, in contrast to a much lower proportion (56%) belonging to the poor families. 34% of the elderly women belonging to the poor families are however indifferent to the question and hence proper answer could not be fetched from these respondents.

Quite a significant number of elderly women belonging to the middle class report that they are mostly reminded by their family members for taking medicines and the family members generally keep an eye on, whether they are taking their medicines properly on time. But this proportion is significantly less among those belonging to the poor families. Quite a significant proportion of the poor elderly women, as compared to their middle class counterparts report that they have to take their medicines by themselves. This is due to the fact that they do not get any support from their family members in this regard. The findings however, reveal that irrespective of the social class of the elderly women, the role of their daughters is found to be much significant in this issue. However, much like previous findings their percentage is found to be

more in case of the elderly women belonging to the poor families than those belonging to the middle class. Besides these, in this respect a significant number of elderly women belonging to the middle class are also known to receive support from their husband and sons, however the proportion of these elderly women is comparatively less in case of the poor elderly women. Assistance received from daughter-in laws in this respect is found to be very less in case of both the classes. However, very few elderly women are known to receive assistance from their relatives and grandchildren in this regard.

Irrespective of class a higher proportion of elderly women report that during illness their family members, come and sit beside them to enquire about their health which is again higher in case of the middle class elderly women(96%) than those belonging to the poor families(80%). Besides these, 2% of the poor elderly women are indifferent to the question.

Thus, from the comparative analysis of the present section it can be concluded that the elderly women of the middle class are found to enjoy greater support from their family members than their poor counterparts in case of health care and medical support. Though in few cases, mostly due to the nature of work of the family members and also due to better economic condition, paid help is appointed to look after them but a much higher proportion of these elderly women as compared to their poor counterparts report to get emotional support from their family members during illness like give them reminder for medicines and keeping an eye on it, sitting beside them to enquire about their health etc. Satisfactory diet, company of their family members while visiting doctor, sufficient monetary support from family members for medical expenses are also reported by a higher proportion of the elderly women belonging to this class. Moreover, the poor elderly women generally depend on their neighbours and friends in case of absence of health care and support from family members. In this context it is also to be mentioned that in case of physical disability, the health care and support received from the family members depends to a large extent on the earning status of the elderly women. This is however found to be true in case of the elderly women belonging to the poor families, while in middle class families, in case of disability, the elderly women are found to receive satisfactory care and support from their family members, even when they are non- earning. Working and earning status of husband are also found to have an impact on the extent and nature of health care and support received by them

from their family members. Irrespective of class, an earning or a working husband goes a long way in ensuring care and support from the family members, whether in the form of monetary support for medical expenses, taking to the doctor/health centers for treatment, or in case of the care and assistance provided to them during illness. However, it is found to be true and is mostly visible in case of poor families.

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CHAPTER: 6

SUMMARY AND OBSERVATIONS

The study of sociology of ageing has recently attracted the attention of many social researchers. This is mainly due to the growing number of 60 plus population throughout the world. This demographic phenomenon has been commonly termed as the '*greying of the population*'. In the present era, this phenomenon has not only restricted itself to the developed countries but is increasingly becoming a common feature even of the developing countries of the world, including India. Due to the diminishing fertility rate as a result of the adoption of small family norms and decreasing mortality rate as a result of improved medical and technological advancements, resulting in the increased life expectancy of the population, the number of the aged in the general population is rising.

For a country like India, this increase in the number of aged population has far reaching consequences. On the one hand, India being a developing country, the increasing number of dependent population will not only have a serious impact on its economic and social structure but will also prove to be a burden for its working population. Moreover, the increase in the number of the oldest old who are generally in need of long term care and medical treatment is also a serious challenge. Huge medical expenses accompanied by the need for care and support places a heavy burden on the members of the family. This not only proves to be detrimental for the society but also has an adverse impact on the condition of the elderly people.

Besides this, these demographic changes in Indian society is accompanied by other socio-economic and cultural changes associated with the process of industrialisation, urbanisation, modernisation, like the disintegration of joint family, eroding social values, advancement of technology, competitive job market, changing role of family as an agent of socialisation, change in gender roles etc. These factors tend to have a serious impact on the condition of the elderly people, which often results in declining their status and position in the society and leave them more dependent on the younger generation.

In this context, the condition of elderly women is more vulnerable. Due to the greater life expectancy of females, their number in the ageing population is found to be more, than their

male counterparts, resulting in the phenomenon of '*feminisation of ageing*'. Moreover, due to their greater life expectancy than their male counterparts a larger number of widows are found in the ageing population, especially in the middle aged old and the oldest old (i.e. 70-79 and i.e. 80+) group. The conditions of this group of elderly women are most vulnerable. In a patriarchal society, women are often deprived of many of the basic amenities of life since their very childhood. Gender roles prevalent in patriarchal societies, expect a woman to deliver her services, primarily for her family and restricts her within the boundary of the four walls. Concept of freedom and economic self-sufficiency is generally not accepted in case of women and hence they are expected to remain dependent on the male members of her family at least when it comes to financial and economic matters. Thus still today, inspite of the effect of modernisation and the resulting changes in gender roles, many women continue to restrict themselves within the unpaid domestic chores and often give up their career as a sacrifice for their family. These results in lower participation of women in the general work force of the country and in economically gainful activities. Besides these, it also results in their interrupted career graphs, which results in low and insufficient earning. Moreover, a larger participation of women in the unorganised sector results in the absence of any economic security at old age. All these factors make women the most dependent and vulnerable group among the elderly population. Various studies conducted on elderly women has proved that due to their non-participation in any economic gainful activities in the early years of their life and low rate of savings, this group suffers more from financial crisis and poverty than their male counterparts.

Besides this, women are often taught to give prime importance to their roles within their family and hence are often faced with role loss during their old age, when these roles are taken over by the members of the younger generation. Moreover, during old age due to the role losses and due to increased dependency on the younger generation, a woman too often considered to be a burden for the other members of the family. However, her active participation in household chores and a gainful contribution to her family often accelerates her acceptance among her family members and determines her social relationships within her family. Here, adjustment is also another important variable which play a greater role in determining the social acceptance and social relationship of an elderly women.

Health care and support received from the family members is also an important determinant of well-being during old age. Due to the lower rate of savings and lower economic security at old

age, elderly women are often faced with economic crisis when it comes to health care needs and expenses. Health care and support sought by the elderly women at this age almost doubles their dependency on the younger members of the family. Moreover, at times it places a huge pressure on the members of the family, especially when the family does not have sufficient financial and manpower resources to cope with the expenses and demands. In such cases the condition of the elderly women becomes worst.

In this context, it is worth mentioning that the social class, to which the elderly women belong to, go a long way in determining their condition at this age. Social classes have been categorised on the basis of occupation, level of income and other resources enjoyed by the member of each class. Hence the elderly women belonging to middle classes often enjoy better economic position and more resources than the elderly women belonging to the poor stratum. Moreover, apart from the economic resources, the social and cultural resources enjoyed by the women of the middle classes like the better educational and employment opportunities prove to be important factors in determining the well-being, status and position of the women at old age both within and outside their family. Moreover, they also prove to be important factors in determining the level of adjustment and the coping pattern of the elderly women with the crisis faced at this stage of transition.

In this context the condition of elderly women in urban areas tend to attract more attention. This is because urban areas though on the one hand offer many facilities for the elderly person like improved medical facilities, opportunities for development, income etc. but on the other hand, it experiences more effect of industrialisation, modernisation and westernisation. Due to the more impact of these phenomena in urban areas, the elderly person often fail to compete with the present generation and the generation gap are often more prominently visible in these areas. Several studies indicate that, in urban areas the status and position of the elderly persons are often found to be much low, than that of the rural areas. Moreover, rural areas offer more space for the elderly people. Due to the predominance of informal relationship, rural areas offer more scope to the elderly person for social participation in contrast to that of the urban areas, where due to the predominance of formal relationship, they are more often restricted within the boundaries of the four walls of their home and family.

During the review of the previous literatures and studies available on elderly people, it is found that though many studies are conducted on elderly women, exploring the various dimensions of their life but comparative studies on elderly women belonging to various classes are hardly found. Few studies though have attempted to make such comparisons in their study but such attempts are very limited and narrow in nature. Hence in the present study, an attempt has been made to comparatively study and explore the various aspects and dimensions of the life of the urban elderly women, belonging to two different social classes. The aspects that are mainly focused on and explored are the nature and extent of their economic problems; their social acceptance within and outside their family, extent of role loss and their adjustment towards it; and the nature and extent of health care and support received by them from their family members. For the purpose of comparison, the two social classes which are chosen are the middle class and poor families. Looking at the socio-economic and cultural differences; and the differences in the resources enjoyed by the members of the above mentioned classes, these classes are selected for the present study.

The sampling unit for the present study are women aged 60 years and above. For the conduction of the study attention is focused on the Municipality areas of Siliguri, in the Darjeeling District of West Bengal. The rapid pace of urbanisation in this city and the resulting rapid socio-economic and cultural changes that the city is experiencing currently has attracted attention for the conduction of the present study. Hence some areas from the city are selected from where sufficient number of representatives of the middle class and poor families can be drawn. The sampling size of the present study is 100. Equal proportion i.e. 50 samples are selected from each category purposively on the basis of class, economic status, marital status, educational status, age group, pattern of living arrangements, physical condition and participation in work. Data are collected through intensive field work and personal interviews using interview schedules and observation techniques.

The age structure of the respondents reflects that majority of the respondents (61%) falls in the age-group of 60-69 years i.e. in the young old group. While for the other age groups like the middle aged old and the oldest old, the proportion shows to be 27% and 12% respectively.

The marital status of the respondents reflects that the numbers of widows are relatively much higher than the elderly women falling in other categories, their total number being 57%, (with 52% and 62% belonging to the middle class and poor families respectively). This category is followed by the women who are presently married (40%), followed by small proportion who are unmarried and divorced/separated

The caste group of the respondents reflects that majority of the elderly women belonging to the middle class (92%) belong to the 'General Caste' group, while respondents belonging to the 'Scheduled Caste' are more in case of poor families (70%), followed by few (28%) falling in the 'General Caste' group and another very small number (2%) belonging to 'Other Backward Class' (OBC) group.

While looking at the Educational differences between the respondents of the two classes, it is observed that the number of Illiterates in the poor families is much higher (60%) when compared to the number of Illiterates in the middle class families (16%). The number of respondents who are just literates or who have received only non-formal education is 26% in case of the poor families and 6% in case of middle class. Contrastingly, formal education below std. X is found to be received by a higher number of middle class elderly women (42%) as compared to the poor families (12%). High School Education is received by only (16%) of middle class respondents as compared to an insignificant proportion of respondents of the poor families. Moreover, education till Graduation and Master degree are found to be received by only 12% and 8% elderly women respectively belonging to the middle class as compared to none of the elderly women of the poor families.

Income structure of the families to which the respondents belong to, reflects the economic background of their families, which to a large extent determines the economic condition of the elderly women and the care and support provided to her. The data found during the study shows that majority of the middle class families under study, have a monthly income in the range of 55000 and above, whereas this range is 5001-15000 in case of poor families. This definitely reflects the difference in the economic status of the families belonging to both these classes.

Data collected with regard to the main profession of the family to which the respondents belong to, also reflects a profound difference between the two classes. In case of majority of the poor families the members are engaged in manual/ casual jobs. This is followed by some who are self-employed like petty shopkeepers, petty business man running small street side dhabas, tea stall etc. A few elderly women belonging to the same class are engaged in semi-skilled and non-skilled jobs, while a lesser proportion are engaged in private jobs. 4 % however, run their family with income from some other sources. In contrast to this in case of the majority (46%) of the middle class family the members are self-employed like doctors, lawyers, and business entrepreneurs etc., followed by 22% who are engaged in government jobs. Few women are engaged in private jobs followed by few who run their family with income from some other sources. Very small proportions i.e. 6% are engaged in contractual jobs.

Majority of the elderly women (44%) covered under the present have 1-2 living children, follow by a larger number (38%) having 3-4 living children. However the percentage of elderly women having 1-2 living children is more in case of middle class elderly than those belonging to the poor families. This shows the adoption of small family norms more by the women of the middle class than their poor counterparts.

The study shows that majority of the respondents, irrespective of their class, reside with their children and spouses (if presently married). Though the number residing with their married children with or without spouse both in the middle class and poor families is much more (i.e. 50% and 46% respectively) as compared to the number of elderly women residing with their unmarried /separated/divorced children with or without spouse. While comparatively analysing the situation, it is revealed that co-residence of the elderly women with their married children in case of both the classes are mostly found in case where she is a widow. This shows higher dependence of the elderly women on their married children for care and support and especially in the absence of her husband. Moreover, a much higher number of presently married elderly women belonging to the middle class families, co-residing with their married children along with their spouse (26%) as compared to only 8% of the poor elderly, falling in the similar category reflects much better relationship and acceptance of the elderly women of the former category among their children as compared to those falling in the latter category. In this case it is

significant to mention that presently married elderly women belonging to the poor families are mostly found either to co-reside with their husband alone (12%) or with their husband along with their unmarried/separated/divorced children (16%), as compared to a much smaller proportion of those belonging to the middle class (4%), who are co-residing with spouse and unmarried/separated/divorced children. A significant number of presently married elderly women i.e. 14% and 12% belonging to middle and poor families respectively are found to be living with their husband alone. Besides these quite a smaller number of elderly women are found to be living alone.

Economic status and problems of elderly women:

The study reveals that quite a smaller proportion of the elderly women covered under the present study are engaged in economically gainful activities or some sort of remunerative work. This proportion is however, much higher for the elderly women belonging to the poor families (52%) than the elderly women of the middle class (12%). Participation in some sort of remunerative work can be seen as an indicator of economic self-sufficiency and hence it can be concluded that more elderly women belonging to the poor families are economically self-sufficient than those of the middle class. It also points out to the fact that the elderly women of the poor families are more active in their old age than their middle class counterparts as a higher proportion of them are able to maintain the activity patterns of their adulthood by continuing their work even at this age. Occupational differences are also noticed between the elderly women of the middle class and poor families. While the elderly women of the poor families are mainly engaged in manual and blue collar jobs, like factory workers, construction site workers, housemaids, vendors, cooks, petty shopkeepers, the elderly women belonging to the middle class are mainly engaged in teaching jobs, while few are also self-employed.

Past occupational nature and status is important, as on the one hand it reflects the level and nature of security benefits that one has received after retirement or loss of job and the opportunity they had to save for their old age. Data reveals that only 41% of the total respondents were engaged in some sort of gainful employment during their life time. However, this

proportion is too meager in case of the middle class elderly women (16%), as compared to the elderly women of the poor families (66%). However the findings also reveal that the elderly of the poor families are mostly engaged in unorganised sectors and casual jobs which leave them with no economic security and benefits at old age. On the other hand the middle class elderly women were mainly engaged in Government and organised sectors which provide them with more option for savings, security and retirement benefits at old age.

Source of income is an indicator of economic self-sufficiency at old age. The study reflects that almost 51% of the elderly women covered under the present study have at least one source of income. However this percentage is significantly higher in case of poor elderly women in comparison to those belonging to the middle class. A common cause for this difference is the higher level of participation of the poor elderly women in remunerative work than their counterparts. Moreover, the Government security schemes to which the elderly women of the poor families are entitled to is also another reason for the same. The most common source of income of the elderly women belonging to the poor families is the remunerative work that they are engaged with. This is followed by a significant number of elderly women (44%) who draw some amount from Widow Pension/ Old age pension, which is quite irregular and the amount received is too little for the elderly to meet the necessities of their life. Only a small proportion (9%) earns money by renting their property. On the other hand majority of the elderly women belonging to the middle class (42%), depend on their deceased husband's pension, followed by 32% who depend on some sort of remunerative work and an equal proportion depend on the amount that they earn by renting their property. Besides these a small proportion of elderly women depend on their own pension and a similar proportion on some Private pension schemes/Monthly income schemes.

Ownership of property and asset is a determinant of economic security at old age. A much higher proportion of elderly women i.e. 86% belonging to the middle class families against 34% belonging to the poor families report that they own some amount of property and assets. The property and assets owned by these women ranges from some Savings/Fixed deposits, Jewelleries to immobile properties like houses, flats, shops, plot of land etc. However it is

reported by the elderly women belonging to the poor families, that the amount of money they have as savings is very small. This shows that in terms of economic security, the middle class elderly women are in a better position than the elderly women of the poor families.

Possession of Bank account often is an important factor in indicating the nature of savings and financial assets of the elderly women. Moreover, awareness related to the account and its operation indicates the level at which the elderly women can handle and manage the financial matters independently. This is because, dependency of the elderly women on others for the management of financial and monetary matters often make them more dependent on others and make them more vulnerable to crime and cheating. In the present study, 74% of middle class elderly women report that they have bank account/s against 56% of elderly women belonging to the poor families. In this context it should be mentioned that a number of elderly women have a zero balance account which are mainly opened to apply for gas connection. This is though true for a number of elderly women belonging to both the classes, however it is more often found in case of poor elderly women. In this context, it is also found that among the elderly women who possess bank account/s, 76% of the middle class against 82% of those belonging to the poor families, report that they are aware of the amount of money they have in their account. However, with regard to autonomy in the operation of their own account, it is known that only an insignificant proportion of elderly women (who have an working account in bank) i.e. 19% belonging to middle class and 25% belonging to the poor families are able to operate their account independently. This reflects higher dependency of the elderly women on others for the management of their account. However, this dependency is again found to be slightly more among the elderly women of the middle class than their poor counterparts. Majority of the elderly women report that the reason for their dependency in this issue is their unawareness about the process to operate bank accounts. This is followed by some who report lack of confidence in this issue. While few respondents report physical problems, like eye problem or problems restricting their movement, to be the reason for their dependency. In this regard the person on whom most of the elderly women depend on are their primary kins i.e. their son/s, husband and daughters. However a smaller proportion is also found to depend on their son-in laws and daughter-in laws and relatives.

86% of the elderly women belonging to the middle class and 74% belonging to the poor families report to receive monetary support from others. Though irrespective of class, living arrangement and marital status dependency on monetary support is found to be higher among those who are either non-working or whose income is not sufficient to meet their expenses or needs. In case of poor families however, such dependency is also reported among a significant number of elderly women who are presently engaged in any remunerative work. This is mainly due to their compulsion to surrender all their earned money to either their husband or their sons which leaves them with almost no money to spend on own needs and hence make them dependent on others. Moreover, irrespective of class, receipt of monetary support is also found to be positively related to the earning/income status of husband however, this is more prominently visible in case of middle class elderly women than their poor counterparts. Besides these, in case of elderly widows having a source of income is more positively related to the receipt of monetary support in case of elderly women belonging to the poor families than their middle class counterparts.

In majority cases the main source of monetary support are their son/s, daughters and husband (in case of married elderly). Irrespective of class, in case of presently married elderly women, the primary source of monetary support are their husband, while in few cases the support is received jointly from their husband and children. In very few cases the elderly women, especially who co-resides with their daughters, receives support solely from their daughters. However, a higher proportion of the elderly women who do not receive any monetary support from their family members reports, that they meet their expenses with their own source of income. Moreover, few poor elderly women who do not have any source of income or whose income is not sufficient to meet their needs, report that they seek the help of their neighbours and friends. This reflects their wider social network outside their family. However, a higher proportion of elderly women receiving support from their children suggest that the children are the primary source of economic support for the elderly women, especially in the absence of their husband.

While examining the level of satisfaction of the elderly women with regard to the amount of monetary support received by them from their family members, it is revealed that majority of the elderly women who receive such support are satisfied with it. However, percentage of elderly women who have report to receive satisfactory monetary support is much less in case of poor elderly women (38%) against (79%) belonging to the middle class families. Moreover 5% of the elderly women belonging to the middle class and 24% of the poor families express their

dissatisfaction with regard to it. However, low level of satisfaction of the poor elderly women with regard to the amount monetary support received are in many cases due to the poor income of their family members. Thus satisfactory monetary support to a great extent is found to depend on the economic background of the family to which the elderly women belong to. Moreover, in case of elderly women belonging to the poor families, satisfactory monetary support to a large extent is found to depend on the source of income and working status of the elderly women. On the other hand middle class elderly women, irrespective of their income and working status, in a larger number continue to receive satisfactory monetary support from their family members. However, satisfactory monetary support to a great extent is found to be positively related on a living spouse and also on the income status of the spouse. This is though found to be true for the both the classes but is most commonly visible in case of the poor families. Moreover, unlike the presently married elderly women belonging to the poor families, in case of middle class elderly women falling in the same category, co-residence with children and husband is found to be positively related to the receipt of satisfactory monetary support, inspite when they are non-earning/ or without any source of income. However, irrespective of class and living arrangement of the elderly widows, receipt of satisfactory monetary support is found to be positively related to their earning/ income status.

A higher proportion of the elderly women belonging to the middle class reports that their needs are 'always' and 'mostly' met by their family members, as compared to the elderly women belonging to the poor families, whose proportion is much less in this regard. Poor elderly women more often report that their needs are 'sometimes' met. However, a substantial number of elderly women belonging to the same class report that their needs are 'rarely' fulfilled, (24%) followed by few whose needs are 'never' met (8%). The proportion of middle class elderly women falling in these above mentioned categories is too insignificant (2%). Irrespective of class, the working status and income of the elderly women are found to be positively related to the fulfillment of their needs in the family. However, it is found to be more frequently visible in case of elderly women belonging to the poor families than those belonging to the middle class. Even in case of elderly widows of the poor families, those belonging to the middle class are in a better position when it comes to the fulfillment of their needs. Moreover, unlike the poor elderly women, co-residence of the middle class elderly women with husband with or without children ensures

fulfillment of needs of the elderly women at a higher frequency inspite when they are non-earning. In contrast to this, co-residence with husband fails to ensure the fulfillment of the needs of the poor elderly women even when they are earning.

Similarly in the matter of priority assigned to their needs, a much higher number of middle class elderly women (40%) state that their needs does 'mostly' get priority from their family members as compared to 5% of the elderly women of the poor families. However, differences between the elderly women of these two classes with regard to the priority given to their needs are highly reflected in the study. Findings reveal that, while majority of the middle class elderly women report that their needs are 'sometimes met with priority, a large number of the poor elderly women report that that their needs are 'never' met with priority. Unlike the middle class elderly women, the working status and income of the elderly women belonging to the poor families are found to be positively related to the priority assigned to their needs. Even in comparison to the elderly widows without source of income, belonging to the poor families, the middle class elderly women are in a better position when it comes to meeting their needs with priority. Besides these, irrespective of class an earning spouse is positively related to the priority assigned to their needs in the family. Moreover, unlike the poor elderly women, the middle class elderly women's co-residence with husband, with or without children ensures the meeting of their needs with priority at a higher frequency, inspite when she is non-earning. In contrast to this, irrespective of class, source of income is found to determine the level of priority given to their needs by their family members in case of elderly widows co-residing with their children and relatives.

It is revealed during the study that majority of the elderly women approach their son/s and daughter/s for the fulfillment of their needs, when it is beyond their affordability. However, a higher proportion of presently married elderly women, approach their husband for the fulfillment of the same. Role of daughter-in law, son-in law, grandchildren and relatives are also found though in a very small proportion. A significant number of poor elderly women (almost 22%) are however, found to approach their relatives, neighbours, friends and their employers for support.

A higher proportion of elderly women belonging to both the classes report that they are not free to spend money on their own requirements. This proportion is more in case of elderly women belonging to the poor families as compared to those belonging to the middle class. Though the

restrictions with regard to spending of money are mainly reported among the elderly women with no source of income, but in case of elderly women of the poor families in many cases, having a source of income even does not grant them any freedom to spend money on their own needs. Findings reveal that freedom of the elderly women to spend money is positively related to having a source of income (especially if the elderly woman is a widow), an earning spouse, a living spouse and engagement in gainful employment.

Data also reveal differences among the two classes with regard to the nature of spending of the elderly women. Findings reveal that more elderly women of the middle class 'mostly' and 'sometimes' spend on buying gifts for their grandchildren/ children / family members, on travelling expenses, on religious purposes than the elderly women of the poor families. A higher number of the poor elderly women on the other hand report that they 'mostly' spend on the requirements of their family, on buying commodities of daily needs, on own medical expenses, spend on substances that they are addicted to and contribute money to the family for own upkeep.

Frequency of travelling is an important factor which reflects the interaction of the elderly women with the outside world and with members outside their family. Data shows that majority of the elderly women report that they 'rarely' travel. This is true for the elderly women belonging to both the classes. However, 16% middle class elderly women as compared to none belonging to the poor families report that they travel 'frequently'. Moreover, 36% poor elderly women as compared to 18% elderly women of the middle class state that they 'never' travel. The reason for their low frequency of travelling as are reported by most of the elderly women are their poor physical health, dependency on others for travelling and its related expenses, and monetary crisis for meeting the travelling expenses. However, financial crisis are reported to be more among the elderly women belonging to the poor families than those belonging to the middle class. Data also reveal that majority of the elderly women belonging to the middle class depend on their family members for travelling (71%), its number being quite less for the poor elderly women (53%). However, a higher number of the poor elderly women report that they travel alone/ with friends// with neighbours/ relatives as compared to the middle class elderly women. Dependency on family members (especially on son/s and husband) for travelling expenses is also found to be

more among the elderly women of the middle class, where as poor elderly women in a larger number are found to depend on their own income for the same.

Differences are also seen with regard to the most commonly visited places by the elderly women of both the classes. It is found that elderly women of the middle class mostly visit religious places and even sometimes go out for a tour with their family members and visits their children. The proportion of elderly women, mostly visiting such places is found to be quite low in case of poor families.

Social acceptance of the elderly women, degree of their role loss and their perception towards these issues.

An active participation in decision making gives elderly women a sense of importance in her family. Moreover, the level and frequency of the elderly women's consultation sought by her family members also provides her a sense of being accepted by her family members. In this context the study has enquired about whether any changes have been experienced by the elderly women with regard to the decision making power of the household and their perception and adjustment in relation to the changes. The study reveals that 26% and 28% of the elderly women belonging to middle class and poor families participate in the decision making of the family, in few cases alone and in some cases together with other members of her family. In case of middle class higher number of elderly women participating in the decision making are mostly found in cases where the elderly women resides with her husband. This however is not found true for the poor families. Participation in decision making of the elderly women is found to be reduced in case of co-residence with children, with or without spouse. Though absence of spouse, a non-earning spouse and absence of own source of income (in case of elderly widows) tends to reduce their role in decision making further. Moreover, irrespective of class it is also found to inversely related to the age group of the elderly women and positively related to their educational status. It is also found to be positively related to their active participation in work and household chores in case of elderly women belonging to both the classes. However, the influence of these factors is higher in case of those belonging to the middle class families in comparison to their poor counterparts whose participation in the remunerative work and household chores in most cases do not ensure their participation in decision making.

It is found that though majority of the respondents are well-adjusted to the changes experienced by them with regard to the role loss in decision making but their number is more in case of middle class elderly women than those belonging to the poor families. This however, can be explained by their educational and cultural differences.

Majority of the elderly women studied i.e. 55% (56% in case of middle class and 52% in case of poor families) are 'always'/ 'mostly' consulted by their family members at the time of decision making followed by some who are 'sometimes' and 'rarely' consulted. On the other hand 18% and 24% of the elderly women belonging to middle class and poor families respectively report that they are 'never' consulted in any matter. However, comparative analysis shows that higher proportion of the elderly women belonging to the middle class are given much importance by their family members as compared to the elderly women of the poor families in this matter which is a reflection of their acceptance among their family members. However, irrespective of class, the frequency at which their consultations are sought by their family members depends on the educational status of the elderly women, their participation in remunerative work and household chores and having a source of income (in case of elderly widows). On the other hand it is also found to be inversely related to their age-group and positively related to their co-residence with their spouse rather than with their children, with or without spouse. It is also known that the matters in which consultations are mostly sought from the elderly women are matters related to religious affairs/ rituals, marriage of younger members of the family, followed by some who are consulted in property related matters, buying gifts for relatives and purchase of household goods. Few elderly women are also consulted in matters of child rearing, which again depends on their relationship with their daughter-in laws. However in the matters of education and jobs of family members, they are found to be given less importance as their consultations are rarely sought in these matters. Findings related to their adjustment, with regard to the changes experienced by them in this matter reveal that majority of the respondents possess positive attitude in case they are not consulted in any matter. However, their number is much higher in case of middle class (50%) than the poor elderly women (34%).

Data shows that majority of the respondents are 'always'/ 'mostly' informed when any decisions are taken in the family. However, much like previous findings, their number is more in case of middle class elderly women than those of the poor families. Moreover, a higher number of poor

elderly women reveal that they are 'never' informed about any decisions taken in the family. The attitude of the elderly women, in case they are not informed about any decisions taken, reveal less positive attitude among the respondents belonging to the poor families than those belonging to the middle class.

The study reveals that irrespective of their class, majority of the elderly women was the sole authority in the management of household affairs in the past. However, data reveals transfer of authority of the management of the household in the hands of the younger members of the family (especially the daughter-in laws) in a considerably large number of cases. However, in some cases the authority is known to be shared by the elderly women with other younger members of the family. In almost 26% of cases, belonging to middle class and 26% belonging to poor families, the authority is found to rest solely in the hands of the elderly women. However comparative analysis shows greater participation of the poor elderly women (60%) in the decision making and management of household affairs than the elderly women of the middle class (54%). Analysis of data shows that their participation in the decision making and management of the household affairs on the one hand is inversely related to their age-group, on the other it is found to be positively related to the educational status of the respondents, their participation in remunerative work and in household chores and having a source of income (especially in case of elderly widows) and co-residence with their spouse. However, assessment of their perception with regard to their loss of role in this matter reveals higher proportion of middle class elderly women showing adjustment in these matters than those belonging to the poor families.

Data with regard to the frequency of consultation sought from the elderly women by their family members in the management of household affairs shows that majority of the respondents are 'always' and 'mostly' consulted by their family members in this regard. However, their number is more in case of middle class (60%) than the poor elderly women (56%). This is followed by some elderly women who report that their consultations are 'sometimes' and 'rarely' sought. On the other hand 12% middle class elderly women and 16% of the poor elderly report that their consultations are 'never' sought in these matters. Frequency of consultation in these affairs are found to be positively related to the educational status of the elderly women, their participation in remunerative work and household chores, an earning spouse and co-residence with spouse.

However, it is found to be inversely related to their age-group. Moreover, unlike the middle class elderly widows, having a source of income tends to positively influence the frequency of consultation in case of the elderly women belonging to the poor families. Assessment of their attitude in case they are not consulted by their family members in these matters also reveal that only 36% of the respondents (42% and 30% of the elderly belonging to middle and poor families respectively) shows positive attitude towards it. Though 14% and 26% elderly women of the middle and poor families respectively state that in their case such situation do not arise. On the other hand a considerable number of elderly women show withdrawal and negative attitude towards such situations.

‘Retirement’ is the reason for the loss of job for majority of working elderly women belonging to the middle class. However, majority of the previously working elderly women of the poor families reports ‘Physical problems’ to be the cause for their loss of job, against a small proportion (14%) of elderly women belonging to the middle class families. Besides this, ‘family pressure’ and ‘sudden close down of the institution’ are reported to be the cause for the loss of employment for a few elderly women belonging to both the classes

The overall data in this section reveal that, awareness related to the loss of job in old age and the necessity associated with it are higher in case of middle class elderly women than those belonging to the poor families. However, willingness to get involved in some gainful employment or some community service has been expressed more by the middle class elderly women than those of the poor families. This in most case it is due to the poor physical health of the elderly women belonging to the poor category. Moreover, data reveals that larger proportion of the elderly women of the poor families show their negative attitude towards the loss of their employment as compared to the middle class elderly women. On the other hand, a higher proportion of the middle class elderly women feel that after the loss of their job, it has become difficult for them to spend time. This however is due to the more involvement of the poor elderly women in household chores, which often prove to be a substitute for their engagement in some job, when it comes to spending of time.

Irrespective of the class, the proportion of elderly women presently engaged in welfare and community services is found to be very less. However it is revealed that engagement in these services provides them a higher amount of satisfaction. A higher proportion of the respondents (58%) belonging to the middle class against 23% of the poor families express their interest to get involved in such services. Interest not shown by the elderly women in this matter, as are stated by the elderly women are mainly due to the lack of time, poor health condition and more interest in income generating work etc.

A major proportion of the respondents report that all they need at this age is the love/care/support and company of their children and family members. This is followed by the need for medical support which quite a significant number of elderly women are faced with. Their percentage is a bit higher in case of middle class than those belonging to the poor families. The need for good food and the things that they are addicted to, are also felt by some elderly women, whose percentage is much higher in case of poor elderly women. Some elderly women, especially belonging to the middle class families also report that they want to travel to different places or visit their friends and relatives and socialise with people. A similar number of elderly women especially, belonging to the poor families and few belonging to middle class report the need for some physical rest and a comfortable life. A much lesser number of elderly women however, state that they need enough money to spend on themselves and their family members, the need for mental happiness for themselves and their children, need for a security at old age. A quite insignificant number of elderly women belonging to the poor families report the need for a good living condition and the need for physical and mental fitness.

Data with regard to the participation of the elderly women in household activities reveal that a higher proportion of the poor elderly women participate in household activities more actively than those belonging to the middle class. Irrespective of their class, the most common activities performed by the respondents are offering puja, followed by dusting and cleaning the house, buying vegetables and items of grocery, cooking, washing clothes and utensils etc. A considerable number of elderly women belonging to the middle class report that they perform light work in the household. However, almost 10% respondents, i.e. 14% belonging to the

middle and 6% of the poor families report that they do not participate in any household activities. This in major case is due to the poor health of the elderly women, whereas, presence of daughter in law and paid help in the family is also a reason provided by a few middle class elderly women for the same.

Assessment of their perception towards the importance given by the family members to their contribution reveals that a majority of the elderly women belonging to the middle class (52%) in contrast to 36% of the poor elderly women 'strongly disagree' and 'disagree' to the fact that their contributions are not given importance by their family members where as a considerable number of elderly women belonging to the poor families i.e. 40% against 22% of the middle class elderly women 'agree' and 'strongly agree' to the statement "***I feel that my contributions are not given enough importance by my family members***". The data however, reveals greater acceptance of the middle class elderly women in their families, as compared to the elderly women of the poor families.

It is found that 50% and 33% elderly women belonging the middle and poor families respectively, who have grandchildren spends time with their grandchildren 'often' followed by a considerably large number of elderly women who report that they 'rarely' spend time with their them. This again is followed by few who 'sometimes' spend their time with grandchildren. On the contrary, nearly 9% elderly women belonging to the poor families state that their grandchildren 'never' spend any time with them. Such cases in majority are mostly reported by the elderly women having poor /strained relationship with their children and daughter-in law. It is also known that the most common activity performed with the grandchildren are interacting and gossiping, watching television together etc. while comparatively younger grandchildren are entertained by narrating stories, playing with them, taking them to parks and for walk etc. Few elderly women are known to participate in the rearing of their grandchildren. A very small number also accompany them to school and provide assistance in their studies.

While assessing the relationship of the elderly women with their children, efforts are made to analyse the frequency of time spend with at least one of their children, (whether residing or not

with them) and also with the children co-residing with them. In this context assessment is also done on the differences in the frequency of time they spend with their son/s and daughter/s co-residing with them. Findings show that in majority cases the respondents reveal that they 'rarely' spend time with their children, their proportion being more in case of poor families than in case of the middle class. However, frequency of time spend with one of their children, as 'often' and 'sometimes' are reported more by the elderly women of the middle class than the poor elderly women. It is to be noted that both face to face interaction and interaction with children over telephone or other electronic medium are counted upon to assess their frequency of interaction with their children in this context.

Comparative analysis of the data with regard to the frequency of time spend with the children co-residing with them on the other hand shows that a higher number of elderly women belonging to the poor families report to spend time as 'often' and 'sometimes' with their children than the elderly women of the middle class. This, however points out to the higher rate of face to face interaction among the members of the poor families than among the members of the middle class families. In this context it is also revealed that irrespective of their social class, the frequency of time spend with daughter/s is more than the frequency of time spend with son/s.

With regard to the common activities performed with their children, majority of the respondents report that they spend time with them 'often' by interacting about different family related matters followed by a considerable number who shares their problems with their children. However, sharing of problems with children is noted more with daughters and among higher number of elderly women belonging to the middle class. Besides this, a comparatively smaller number of elderly women are found to spend time with their children by watching different programme on television, in this case however daughter's company are most commonly sought. Apart from these, a very few elderly women are found to go out for outing with their children which are most commonly found in case of middle class elderly women . However, going for shopping with children, visiting religious institutions, going for a walk, attending social gatherings with children are common for a very small proportion of elderly women of both the classes.

Apart from this, irrespective of class, good and satisfying relations are reported more with daughters than with sons. Moreover, it is reported more by the middle class elderly women than those belonging to the poor families, who in few cases are faced with verbal and even physical abuse by their children.

Analysis of the relationship of the elderly women with their husband reflects that the elderly women of the middle class usually engage themselves in diverse outdoor activities with their spouses than the poor elderly women, who report to often spend time together at home and in some cases attend religious institutions and social gatherings together. Moreover, satisfying relationship with husband though are reported by all the married elderly women of the middle class, a few belonging to the poor families report incidence of torture and abuse by husband.

Higher number of middle class elderly women as compared to the poor elderly women report that they are introduced to the guest by their family members. On the contrary 8% and 24% elderly women belonging to middle and poor families respectively report that they are never introduced to guest. Moreover, higher number of respondents report that they usually welcome the guest and involve in interaction with them, while a much smaller proportion of the elderly women prefer to withdraw from any kind of interaction. Analysis of data shows a greater involvement and participation, and a more positive attitude of the middle class elderly women in these matters as compared to those belonging to the poor families.

Friends are often a major source of emotional support at old age. Involvement with friends and sharing of feeling with them can prove to be of great help in curbing social isolation or feeling of loneliness among the elderly women. The findings of the present study reveal that a considerable number of respondents have friends at present; however the percentage is slightly more in case of poor families (68%) than those belonging to the middle class (66%). Moreover, findings also reflect a greater interaction and higher frequency of meeting with friends among the elderly women belonging to the poor families than those of the middle class. In some cases however, physical problems and disability often limits their meeting with their friends.

The most common activity performed with their friends involves some indoor activities like general interaction, discussion on various matters, watching favorite serials in television etc. This is followed by a quite significant proportion of elderly women, who go for walks, visit religious institutions together with their friends, attend social gatherings and parties and go for shopping. Few reports playing of indoor games and / attending to club or old people's association with

them. Besides these, outing with them and even travelling with friends to long distance are also reported by a few. Comparative analysis shows that participation with friends in diverse activities; especially outdoor activities are noticed in a higher proportion among the elderly women of the poor families than those belonging to the middle class.

Findings on their involvement with their neighbours reveal higher frequency of meeting and interaction of the poor elderly women with their neighbours, than those of the middle class. This is often due to the higher participation of poor elderly women in different social activities outside their family and their higher level of participation in gainful employment. General interaction, sharing of problems gossiping, discussion on various issues, watching television are the most common indoor activities performed by the elderly women with their neighbours irrespective of their class. Besides these a significant proportion of the elderly women of both the classes are found to visit religious institutions, followed by some who go out for walk/ for outing/ for social gatherings and parties/ for shopping with their neighbours. However, comparative analysis reflects greater participation of the poor elderly women in these activities than those of the middle class.

Assessments are also done with regard to the participation of the elderly women in various social activities, which provide them an opportunity to interact with people outside their family, like going for walk, visiting religious institutions, visiting friends/relatives, going out with family members, going out for shopping and attending social gatherings. Data in this section reflects lesser participation of the middle class elderly women in the activities like going for walk, visiting religious institutions, visiting friends/relatives, attending social gathering than those belonging to the poor families. However, greater participation of the middle class elderly women with their family members in activities outside their home are reflected from the study, as compared to their poor counterparts. Frequency of going for shopping is also found more among the elderly women of the middle class than their poor counterparts.

Findings show that, quite a large proportion of the elderly women belonging to the middle class are engaged with some kind of religious associations/ institutions. This proportion is very less in case of the elderly women belonging to the poor families. Majority of these elderly women,

report that they 'often' visit these associations/institutions which they are associated with. This is however, true for both the classes. The activities performed by these elderly women in these institutions/associations are mostly offering puja, attending evening 'aarti', attending 'satang', attending 'kirtan', attending religious discussion and sometimes even participating in the programmes and joining the procession organised by them in various occasions.

Findings reveal higher proportion of middle class elderly women showing satisfaction with regard to the fulfillment of their needs and requirements and priority given to their needs by their family members. Moreover, greater proportion of middle class elderly women reveal their satisfaction with the care taken by their family members during illness, amount of time spend with them and also with regard to the sharing of their problems by their family members. On the other hand almost equal proportion of elderly women belonging to both the classes, report their satisfaction with regard to the amount of time that their grandchildren spend with them and with regard to the care taken by their family members. However, a comparatively lesser number of poor elderly women complain of loneliness due to the busy schedule of their family members as compared to the elderly women of the middle class. Besides these, data shows that more proportion of the poor elderly women as compared to the middle class, feel dominated by their family members, feel that their family members misbehave with them, and feel bad when younger members of her family are going out, leaving her alone at home. On the other hand it is also revealed that irrespective of their class, the proportion of respondents showing positive attitude towards the members of the younger generation, conflict management; and adjustment toward the changing societal system and gender roles are not satisfactory. However, the proportion is much less in case of the elderly women belonging to the poor families than those belonging to the middle class. The proportion of elderly women showing positive attitude towards the changing role of women fetched much positive response from the poor elderly women than their middle class counterparts. This however, is due to the greater participation of the poor elderly women in the work force and their poor economic background which often forces the women to come out of their house and which in many cases has influenced their perception in this regard.

Health care and support received by the elderly women:

Majority of the elderly women (94%) covered under the present study are found to suffer from one or more health problems at present. However, a slightly higher proportion of the middle class elderly women report to suffer from health problems more as compared to the elderly women of the poor families. On the other hand 6% of the elderly women belonging to both the classes report absence of any health issues at present. It is known that the kind of health problems that the elderly women mostly suffer from, are Arthritis/ Body pain/ Joint pain/ Knee problem in case of (62%) of the middle class elderly women as compared to 52% belonging to the poor families. This is followed by a number of elderly women who report to suffer from High BP/ Low BP (56% in case of middle class as compared to 40% in case of poor elderly women). Besides these a significant number of elderly women are found to suffer from Diabetes, Heart problems and Thyroid problems. However, their proportion is reported to be more among the middle class than the poor elderly women. Cases of Insomnia, Osteoporosis are found to be higher among the middle class elderly women as compared to those belonging to the poor families. On the other hand, elderly women of the poor families report to suffer most commonly from, Anemia, Weakness, Pulmonary disorders, Urinary infection, Liver/ digestive problems as compared to the elderly women of the middle class. Cases of hearing and eye problems are also reported by a large number of elderly women. Digestive problems, Cognitive disorders, Low potassium and sodium, Dementia and Neurological disorders and even disability are reported most commonly by the elderly women in the 'middle aged old' group (i.e. 70-80 years) and by the 'oldest old' group (80 years and above).

Findings shows that rating of own health status as 'good' and 'satisfactory' is more commonly found among the poor elderly women as compared to the elderly women of the middle class. Whereas a higher number of those belonging to the middle class report their health status to be 'bad' and 'worst'. This is probably due to the active engagement of the poor elderly women in various works within and outside their family, even at this age.

Comparative analysis shows, a significantly higher proportion of the elderly women of the middle class families receive enough financial support for medical expenses, than those belonging to the poor families. This to some extent is definitely due to the differences in the

economic condition of both the classes which in turn reflects a significant association between the economic status and the level of health care and medical support received by the elderly women. In this context it is also revealed that the monetary support for medical expenses received by the elderly women in this regard, are mostly from their son/s, co residing with them. In case where the elderly women are married, the support is mostly received from their husband. On the contrary, it is quite significant to note that unlike the middle class elderly women, a much higher proportion of the poor elderly women (30%) report that they meet these expenses on their own, this however is due to the greater number of poor elderly women, having a source of income and also due to their greater participation in gainful work. Comparative analysis shows that elderly women receiving support from their son/s and husband in this regard is found to be much low in case of the poor elderly women. However, in their case the role of neighbours is worth mentioning. In few cases support is also received from their daughters/son in-laws and in few cases from the relatives co-residing with them. All these findings suggest that poor elderly women tends to depend less on their family members for health related expenses than the elderly women of the middle class, as in most cases these needs are met by their own resources.

Majority of the elderly women of the middle class (80%) report that they are 'always' or 'mostly' taken to the doctor whenever any requirement is felt, as compared to 48% of those belonging to the poor families. However, the remaining 20% elderly women of the middle class against 24% of the poor families report that they are 'sometimes' taken to the doctor. 16% and 12% elderly women of the poor families however, report that they are 'rarely' and 'never' taken to the doctor by their family members. It is important to note that these elderly women are mostly found to depend on their neighbours/ friends for assisting them in this regard or for accompanying them to the doctor.

Daughters play a very important role in providing company to the elderly women, while visiting doctor/ health centers especially in case of the elderly women belonging to the poor families. This is followed by 30% of the elderly women who are accompanied by their sons. However, assistance of son/ husband in this regard is enjoyed by a higher proportion of the elderly women belonging to the middle class than those of the poor families. Even the company of daughter-in law and son-in law in this regard is received by a higher proportion of the elderly women

belonging to the middle class than the poor elderly women. However assistance of friends and neighbours are sought by a higher proportion of the poor elderly women. Assistance of grandchildren in this regard is sought by few elderly women belonging to both the classes. However, going to the doctor alone is reported more among the middle class elderly women i.e. 8% elderly women as compared to 2% of the poor elderly women. Thus the findings reflect more dependence of the middle class elderly women for this purpose on their family members as compared to the elderly women of the poor families, who in most cases seek the assistance of their friends and neighbours.

Higher proportion of elderly women, belonging to the middle class, depend on their family members like, son (48%), followed by husband (32%) for the payment of doctor's fees. This is followed by very small proportion who report that the fees are paid mostly by their daughters (6%), son-in laws (4%), and relatives (6%). Moreover, self-reliance in this regard is reported by only 10% of the elderly women in contrast to, a greater number belonging to the poor families (30%). Thus seeking the help of family members in this regard is found among a higher proportion of the middle class elderly women as compared to their poor counterparts. However, self-reliance in this issue is found to be much less in case of middle class as compared to those belonging to the latter category.

Data in this section reflects that a higher number of the respondents report that their family members look after them during illness. However, the percentage is higher in case of the poor elderly women (92%) than those belonging to the middle class (88%). In this context it is to be mentioned that irrespective of class, a higher number of respondents are looked after by their daughters during illness. Though assistance provided by their daughter-in laws in this regard, is also worth mentioning, this shows slightly higher proportion for the elderly women belonging to middle class than the poor elderly women. Assistance from husband/sons/relatives/grandchildren in this regard is found to be received by quite a smaller proportion of elderly women.

Moreover a higher number of elderly women belonging to the poor families report that during illness, their family members do provide them all the necessary assistance in performing their

daily activities. However, assistance from paid help is reported by the middle class elderly women in cases where they do not receive any assistance from their family members, whereas in case of the elderly women of the poor families who are not assisted by their family members, such assistance are mostly received from neighbours.

A very large proportion (98%) of the elderly women belonging to the middle class express their satisfaction with the diet being provided to them by their family members as compared to those belonging to the poor families (56%). This is mostly due to the poor economic condition of the latter class. Besides these quite a significant number of elderly women belonging to the middle class report that they are mostly reminded by their family members for taking medicines but this proportion are significantly less among the elderly women of the poor families. Moreover, a higher proportion of elderly women agree that during illness their family members, come and sit beside them to enquire about their health which is again higher in case of the middle class elderly women 96% than their poor counterparts (80%) .

As have been discussed earlier, Activity theory is built on the functionalist's perspective which assumes a positive relation between Activity, Equilibrium, and Adaption to role loss and Life Satisfaction. It suggests that the activity pattern of the middle years should be maintained in the old age in order to maintain equilibrium and stability. In other words the theory suggests that in order to maintain the equilibrium, the lost activities, and roles should be replaced and substituted for new roles which would not only enhance social contact and interaction of the elderly person but would also in turn lead to better life satisfaction in old age.

According to the Activity theory of ageing, maintenance of activity patterns of the middle age leads to the meeting of functional needs which in turn leads to stability and life satisfaction in old age. The findings of the study point out to the fact that the elderly women of the poor families are more active in their old age than their middle class counterparts. This is because a higher proportion of them are able to maintain the activity patterns of their adulthood by continuing their work even at this age. Moreover, even in case of participation in household chores, a higher proportion of elderly women belonging to this group are found to actively participate than those belonging to the middle class families.

The findings on the one hand reveal a higher level of awareness among the elderly women of the poor families with regard to the resources they have in their bank account. It also reflects a higher degree of self-reliance in the operation of their accounts, as compared to their middle class counterparts. This shows higher level of autonomy enjoyed by the elderly women of the poor families with regard to the management of their resources. This can be attributed to their participation in work force or their continuation of work even at this age because irrespective of class a higher proportion respondents participating in remunerative work, report awareness and self-reliance in this issue. Thus it can be stated that continuation of activities at old age help the elderly women to remain active and maintain autonomy and self-reliance in many issues rather than being dependent on others. This in turn also helps them to meet their functional needs and cope up with many of their problems and role losses. Hence the above findings are naturally in congruent with the activity theory of ageing, according to which maintenance of activity patterns of the middle age lead to the meeting of functional needs which leads to stability in old age.

However, on the other hand, irrespective of class, participation in remunerative work is found to lower the dependency of the elderly women on monetary support from others. This fact is however found to be true for a higher proportion of elderly women of the middle class than those belonging to the poor families. In case of the latter category, some instances are also found where even when the elderly woman is working she has to rely on others for financial support to fulfill her needs. This is because the earnings of these women are either insufficient to meet their needs or these women are compelled to hand over their total earnings to either their husband or son/s without keeping a single penny with them.

Moreover, unlike the middle class elderly women, in case of those belonging to the poor families, participation in remunerative work often ensures satisfactory monetary support, fulfillment of needs and priority assigned to the same by their family members. Moreover, in case of spending money freely on own needs the elderly women of the poor families are found to face restrictions even when she is earning or participating in any gainful work. For the elderly women of the middle class however, satisfactory monetary support, fulfillment of needs and priority assigned to the same by their family members in majority cases does not depend on their participation in remunerative work. Even in case of spending money on own requirements, comparatively lesser proportion of these women are found to face restrictions as compared to their poor counterparts.

Hence, it can be concluded that the findings of the study does not fully support the assumptions of the activity theory of ageing. The findings reflect that stability, life satisfaction and social acceptance do not always depend on the maintenance of activities and roles of the middle age. It also suggests that positive relation between these factors is also not always found to be true for every individual. Moreover factors like social class, husband's previous and present occupation/ income, marital status, economic background, educational status and living arrangement of the elderly women are also found to have a significant impact on the above factors and play a decisive role in influencing the status of elderly women.

In the present study, though due the higher rate of participation in remunerative work, the elderly women belonging to the poor families are economically more self-sufficient, than the elderly women of the middle class but the low income from their job often results in their economic crisis and their dependence on others for financial support. Moreover, their engagement in unorganised sectors throughout their life results in the absence of any financial security at old age. Unlike, the middle class elderly women none of the spouse of poor elderly women were previously engaged in organised sectors, which again leave them without any financial security after their husband's death. Though, a number of them avail the benefits of the security schemes like widow pension and old age pension, but these are quite irregular and as is reported by some of the respondents, the amount provided is insufficient to meet their requirements. On the other hand the elderly women of the middle class families are more economically dependent than those belonging to the poor families, mainly due to their lower rate of participation in gainful employment. However, due to the nature of their previous occupation and their husband's occupation they are often entitled to some retirement benefits during their old age and even after the death of their husband. Moreover, higher number of middle class elderly women, possessing property, assets and holding bank accounts also signify better economic security of the middle class respondents than their poor counterparts.

Moreover a slightly higher proportion of elderly women belonging to the poor families report absence of any diseases or ailments and rate their own health to be 'good' and 'satisfactory' than their middle class counterparts which suggest satisfaction in case of the elderly women falling in the former category with regard to their health status. However, unlike middle class elderly women, in case of those belonging to the poor families, those participating in remunerative work have frequently complained of their poor health status and report to suffer from different

ailments as compared to the middle class elderly women, falling in the same category. Some of them even report the need for some relaxation from work as according to them their deteriorating health condition does not permit them to continue their work at this age. On the other hand, irrespective of class, a higher proportion of elderly women engaged in welfare and community services report satisfactory health status and absence of any ailments as compared to those who are not engaged in any such activities. Moreover, though satisfaction regarding health status and absence of ailments are also found to be associated with their active participation in household chores but this can also be explained by the fact that disability/ ailments and poor health status often restricts or limits their participation in household chores. However, in some cases, especially in case of poor elderly women, even with various ailments and poor health, they are compelled to participate actively in the household chores. These findings thus also provide little support for the assumption that activity produces greater well-being and satisfaction in old age. Rather the study reveals that activity produces satisfaction, only when it is carried out spontaneously and willingly. Compulsion of any kind not only affects their health adversely at old age but also sometimes creates depression among them.

Another postulate of the Activity theory of ageing is that social acceptance at old age can be achieved through active involvement in family and community and by maintaining social roles and interaction with the social world and not by withdrawing oneself from these activities. Moreover, it also maintains that successful ageing depends on and can be achieved either by maintaining the roles and relationships of the early years or by the replacement of the same.

In the present study, higher rate of participation of the elderly women belonging to the poor families in remunerative work and household activities suggests, that these elderly women are more active than those belonging to the middle class. The findings in this section shows that though a slightly highre proportion of the poor elderly women participate in the decision making of the family but when it comes to seeking their consultation and providing them information about any decisions taken in the family, the elderly women of the middle class families are found to be consulted more often than those belonging to the poor families. This shows that inspite of their higher participation in remunerative work and household chores; and inspite of their more interaction with their family members, the poor elderly women who does not participate in decision making are less frequently consulted by their family members and are less frequently informed about any decesions taken in the family as compared to their middle class counterparts.

This again stands in contrast to the Activity theory of ageing. This can again be confirmed by the findings that though, irrespective of class, participation in remunerative work ensures participation of the elderly women in decision making and seeking of their consultation by their family members but their proportion is not equal in case of both the classes. The above factors are found to be true in case of a higher proportion of middle class elderly women presently participating in remunerative work as compared to those belonging to the poor families. Hence, this suggest that in case of poor elderly women, an active participation in remunerative work does not always ensure their participation in decision making of the family; seeking of their consultation by their family members; information regarding any decisions taken within the family; and even in case of ensuring health care and assistance from family members.

Moreover, in case of management and decision making of the household, more or less similar findings are reflected. Higher proportion of elderly women belonging to the poor families participating in the management and decision making of the household, as compared to the middle class elderly women confirms the assumption of the Activity theory on the one hand. However, on the other hand, it is reflected that inspite of their higher rate of participation in household chores the proportion of elderly women whose consultations are 'always' and 'mostly' sought by their family members in this regard is much less in case of poor elderly women as compared to those belonging to the middle class. This reflects lesser social acceptance of the women belonging to the poor families among their family members; which again stand in contrast to the theoretical assumption of the activity theory of ageing that suggest a positive relation between participation in the activities of the social world and social acceptance. Moreover, when it comes to the provision of medical needs and health care and support during illness, it is the middle class elderly women, a higher proportion of whom (irrespective of their participation in remunerative and household work) receives the assistance of their family members as compared to their poor counterparts. This naturally reflects higher acceptance of the middle class elderly women in their family than those belonging to the poor families.

Besides these, as reflected from the findings a higher proportion of elderly women of the poor category having friends, their higher frequency of interaction with friends and neighbours and a range of outdoor activities performed by them with their friends and neighbours as compared to the elderly women of the middle class, suggest a much wider range of social network and higher level of participation of these elderly women than their middle class counterparts. It also reflects

that unlike the middle class elderly women the social network of most of those belonging to the poor families are not confined within the boundaries of their family and kins, even at old age. Hence, continuation of the roles and relationships of the early years and in a wider range and an active involvement in the same is found to be true in case of the poor elderly women than those belonging to the middle class. This wider range of social network of these elderly women belonging to the poor families is found to play a significant role, in their life. The psychological and emotional support provided to them by their friends and neighbours renders them a platform to share their grief, feelings, emotion, problems as well as frustrations. Moreover, they also play a significant role in many cases in the provision of economic and health care support to these elderly women as many of them report that they live at the mercy of their neighbours, especially in case of receiving health care assistance during illness and also sometimes in assisting and accompanying them to the doctor. Some of the elderly women even report to receive financial assistance from them at the time of emergency or whenever a financial necessity arises. These findings naturally support the activity theory of ageing which suggests a positive relation between maintenance of roles and relationship and social acceptance in the later years.

Moreover, the perception of the elderly women belonging to both the classes reflects that a lesser proportion of the poor elderly women show adjustment with regard to the role loss experienced by them in decision making of the family and management of the household affairs. Even in case of loss of their job, fulfillment and priority given to their needs and fulfillment of their emotional needs; and care and support extended to them by their family members, a lesser proportion of poor elderly women show adjustment as compared to those belonging to the middle class. Thus the findings reflect adjustment and satisfaction of higher proportion of middle class elderly women as compared to those belonging to the poor families. These findings thus do not support the postulates of the Activity theory which assumes a positive relation between staying active or continuation of activities and better adjustment in the later years of life.

Hence to conclude the findings of the study provides little support for the assumptions of the Activity theory of ageing. Though to some extent and in some cases the assumptions are found to be true but many variations of these assumptions are found between individuals, social classes, having or not having a source of income, economic background, educational status, marital status and even living arrangements of the elderly women. In other words, besides, the active

participation in activity and maintenance of roles and relationships of the middle age, factors like social class, source of income, economic background, educational status, marital status and even living arrangements of the elderly women are also found to have a much significant impact on the meeting of functional needs and stability; adjustment to role losses and social acceptance of the elderly women within their family and community. Moreover, it can also be concluded from the findings of the study that ageing as a social phenomenon, and the experiences and problems associated with it are interplay of many varied factors. Hence it cannot really fit into such an 'one-size-fits-all' theory which hardly takes into account an elderly person's inability to reconstruct or create roles or activities, according to their wish especially in a phase of life which is often marked by decline in income, deteriorating health or a sudden and dramatic change in his environment, social condition and status due to retirement or widowed.

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**APPENDIX A:
(Interview Schedule)**

IINTERVIEW SCHEDULE

A. General Information

1. Name:
2. Age:
3. Marital Status:
4. Caste:
5. Religion:
6. Educational Qualification:
7. Present occupational status:
 - i. Retired/ non-working
 - ii. Govt. employee
 - iii. Pvt. Employee
 - iv. Self Employed/ Business
 - v. Any part time / casual skilled job
 - vi. Manual work
 - vii. Any other unskilled / semi-skilled job
 - viii. Any other
 - ix. Never worked/ Housewife
8. Occupational status in the past:
 - i. Govt. Job
 - ii. Pvt. Job
 - iii. Self Employed/ Business
 - iv. Any Part time/ casual skilled job
 - v. Manual work
 - vi. Any other unskilled/ semi-skilled job
 - vii. Others
 - viii. Never worked/ Housewife

B. Family Background:

Details of your family members (Details of spouse, children, their spouses and Grandchildren and others if staying with you)

C. Economic Aspects:

1. Whether you have any present source of income? Yes / No
If yes, Give details:
2. Whether you own any Assets/ Property/ Plot of Land/ Jewellery/ Shop /House /Flat /Garden/ Fixed money/ LIC/ Other savings.
3. Do you have a Bank Account? Yes/ No
If yes,
 - a. Are you aware of the amount of money in your Account? Yes/ No
 - b. Whether you are able to operate the Account yourself? Yes/ No
If no, give reasons:
 - i. You are not aware of the ways to operate bank account.
 - ii. You have some physical problem and thus need someone to accompany you.
 - iii. Due to the lack of confidence
 - iv. Any other

Also state your relationship with the person who helps you in this matter:

- i. Husband
 - ii. Son
 - iii. Daughter-in law
 - iv. Daughter
 - v. Son in law
 - vi. Grand children
 - vii. Relatives
 - viii. Neighbours
 - ix. Friends
 - x. Any other
4. Whether you are monetarily supported by any of your family members who provide you money for your general expenses: Yes/ No
- If yes, provide the details of the person:
- i. Husband
 - ii. Son
 - iii. Daughter-in law
 - iv. Daughter
 - v. Son in law
 - vi. Grand children
 - vii. Relatives
 - viii. Neighbours
 - ix. Friends
 - x. Any other

Also state whether the amount provided to you is sufficient or not?

- i. Yes, it is sufficient.
 - ii. No, it is not.
 - iii. I have to manage somehow.
 - iv. Indifferent
5. In case you have a source of earning or ever have a lump sum amount of money in your hand, how do you usually spend the amount? State the frequency at which you spend for the following:- (*Give your answers as Always- A Mostly- M, Sometimes – SM, Rarely - R, Never –N,, Not Applicable- NA*)
- i. For buying gifts for your Grandchildren.
 - ii. Spend on your children or on other family members
 - iii. Spend on other requirements of your family
 - iv. For buying commodities of daily needs, including food items for yourself.
 - v. On buying medicines for yourself and other health related issues.
 - vi. On your travelling
 - vii. Contribute to your family for your own upkeep.
 - viii. For religious purposes.
 - ix. Spend on addiction, like betel leaf, gutka, tobacco, others.
 - x. Any other purpose
6. Are you free to spend money on yourself? Yes/ No
If No... state the reasons:
7. In case you require something and cannot afford to buy it for yourself...whom do you generally approach?
- i. Husband
 - ii. Son
 - iii. Daughter-in law
 - iv. Daughter
 - v. Son in law
 - vi. Grand children
 - vii. Relatives
 - viii. Neighbours
 - ix. Friends
 - x. Any other
8. Do your family members always get you or buy the things that you wish to have?
- i. Always
 - ii. Mostly
 - iii. Sometimes
 - iv. Rarely

- v. Never
- vi. Not- Applicable

9. Do you think that your needs are always met with priority?

- i. Always
- ii. Mostly
- iii. Sometimes
- iv. Rarely
- v. Never
- vi. Not Applicable

10. Are you free to travel to places of your choice? Yes /No
If yes, State the places where you generally travel.

- i. A religious place,
- ii. To visit a friend
- iii. To visit a relative.
- iv. To visit children
- v. Go for a tour.
- vi. Others

State the frequency at which you travel.

- i. Always
- ii. Mostly
- iii. Sometimes
- iv. Rearly
- v. Never
- vi. Not- Applicable

Do you travel...?

- i. Alone or
- ii. Accompanied by someone

In case you are accompanied by someone...state your relationship with the person.

- a. Husband
- b. Son
- c. Daughter-in law
- d. Daughter
- e. Son in law

- f. Grand children
- g. Relatives
- h. Neighbours
- i. Friends
- j. Any other

Who generally provides you the travelling expenses?

- i. Husband
- ii. Self
- iii. Son
- iv. Daughter-in law
- v. Daughter
- vi. Son in law
- vii. Grand children
- viii. Relatives
- ix. Neighbours
- x. Friends
- xi. Any other

D. Social Aspects:

Degree of Role loss:

1. Who is the decision maker of the family that you are presently staying in?
Who was the decision maker of your family previously (may be in a different family where you used to stay.)?

If there is a change...state your feelings towards the change:

- i. It's normal.
- ii. You have no other option but to compromise with the present situation.
- iii. The previous person as a decision maker was better than the present one.
- iv. The present person is more capable as a decision maker
- v. Your authority is lost due to the change.
- vi. Your authority or position is not affected.
- vii. You feel relieved.
- viii. Indifferent.
- ix. Not Applicable

2. Mention the frequency at which your family members consult you or include you in the discussion when any decisions are being taken in the family:

- i. Always
- ii. Mostly
- iii. Sometimes

- iv. Rarely
- v. Never

State the matters in which you are consulted:

- i. Matters related to Property
- ii. Matters related to Marriage
- iii. Matters related to the Education of children.
- iv. Matters related to their jobs
- v. Matters related to buying furniture or any durables for the household
- vi. Matters related to buying gifts for any relatives or friends.
- vii. Religious affairs
- viii. Matters related to rituals
- ix. Matters related to Child rearing
- x. Any other....please mention

In case your consultation is not sought in any matter what are your feelings towards it?

- i. Its normal
- ii. You have no interest to be a part of the discussion
- iii. You feel that you are not capable to give them a better suggestion
- iv. If given a chance you can suggest them something better, for being more experienced
- v. You feel insulted and feel that your position is lost.
- vi. Indifferent.
- vii. Not Applicable.

3. Mention the frequency at which your family members inform you about any decisions being taken in the family:

- i. Always
- ii. Mostly
- iii. Sometimes
- iv. Rarely
- v. Never

In case you are not informed, state your feelings towards it?

- i. It's normal.
- ii. You have no interest to know.
- ii. You feel that you are worthless.
- iii. You feel insulted and feel that your position is lost.
- iv. You feel bad.
- v. Indifferent.
- vi. Not Applicable.

4. Who is the decision maker of your family with regard to household affairs.....like managing the kitchen affairs, deciding matters related to the interior of the house, items of daily consumption that is to be brought from the market etc.

Who was the decision maker of these affairs in the past (may be in a different family where you used to stay.)?

If there is a change...state your feelings towards the change:

- i. Its normal.
- ii. You have no option but to compromise with the present situation.
- iii. The previous person used to manage the household affairs better than the present one.
- iv. The present person is more capable.
- v. If given a chance you can manage these affairs better than anyone else.
- vi. Your authority is lost due to the change.
- vii. Your authority or position is not affected.
- viii. You feel relieved
- ix. Indifferent.
- x. Not Applicable

Mention the frequency at which you are consulted by your family members with regard to these household affairs:

- i. Always
- ii. Mostly
- iii. Sometimes
- iv. Rarely
- v. Never

In case you are not consulted, state your feelings towards it?

- i. It's normal.
- ii. You have no interest to know.
- iii. You feel that you are worthless.
- iv. You feel insulted and feel that your position is lost.
- v. You feel bad.
- vi. Indifferent.
- vii. Not Applicable.

5. If you were a working women but not working presently....state the reasons for the loss of your job.

- i. Retirement
- ii. Physical Problem
- iii. Due to family pressure

- iv. Lost interest in job
- v. Any other reasons...please mention

State your feelings towards the loss of your job by expressing your opinion towards these statements: (Answer with *Strongly Agree/ Agree/ Disagree/Strongly Disagree/ Indifferent*)

- i. "Loss of job with old age is natural and inevitable".
- ii. "Retirement is healthy because after struggling for the whole life, old age is the period when one needs some rest".
- iii. "After retirement or loss of job it is difficult to spend time".
- iv. "If given an opportunity I would like to join job again and do something productive".
- v. "Loss of job has affected my position in the society and also in my family".
- vi. "I feel to be a burden to my family members due to economic dependence".
- vii. "Loss of job has shattered my self-confidence".
- viii. "I feel depressed due to the loss of an earning source and increasing economic dependence".
- ix. "I want to engage myself in some social and community service".

6. Are you presently engaged in some welfare activities or social or community services?

If So...please give details and state your level of satisfaction by being a part of these services.

If No...Would you like to get yourself engaged in such activities?

7. What are the needs that you are generally faced with, apart from the basic needs of a two square meal, clothing and shelter?

8. What are the services that you generally provide to your family?

- i. Looking after Grandchildren
- ii. Feeding grandchildren
- iii. Take them for bath
- iv. Take them to school
- v. Helping them to do their homework.
- vi. Taking them to parks and for walk
- vii. Dusting and cleaning the house
- viii. Washing clothes
- ix. Washing utensils
- x. Helping in the kitchen
- xi. Cooking
- xii. Buying vegetables and other items of grocery
- xiii. Offering puja
- xiv. Any other...mention
- xv. None

9. State your feelings towards “I feel that my contributions are not given enough importance by my family members” (Answer with *Strongly Agree/ Agree/ Disagree/ Strongly Disagree/ Indifferent*).

Extent of Social Acceptance (both inside and outside the family):

1. What amount of time do you generally spend on your Grandchildren?
- i. Mostly
 - ii. Sometimes
 - iii. Rarely
 - iv. Never
 - v. Not Applicable
2. What are the activities do you generally perform with them?
- i. Looking after them
 - ii. Feeding them
 - iii. Taking them for bath
 - iv. Take them to school
 - v. Helping them in their studies
 - vi. Playing with them
 - vii. Story telling
 - viii. Going out for walks with them
 - ix. Interacting/ Gossiping
 - x. Go for outing
 - xi. Go for shopping
 - xii. Watching T.V together
 - xiii. Any other
 - xiv. Not Applicable
3. What amount of time do you spend with your Children (any one of your living children, both residing and non-residing with you)?
- i. Mostly
 - ii. Sometimes
 - iii. Rarely
 - iv. Never
 - v. Not Applicable

What are the activities do you generally perform with them?

- i. Interacting/ Gossiping
- ii. Sharing Problems
- iii. Discussion about family
- iv. Go for outing

- v. Go for shopping
- vi. Go for walk
- vii. Going to religious places
- viii. Playing games
- ix. Watching T.V together
- x. Attend social gatherings together
- xi. Any other
- xii. Not Applicable

What amount of time do you spend with your Children (co-residing with you)?

- i. Mostly
- ii. Sometimes
- iii. Rarely
- iv. Never
- v. Not Applicable

4. Do you have any friends from your neighbour or outside? Yes/ No
If Yes, how often do you generally meet or interact with them?

- i. Everyday
- ii. Often
- iii. Sometimes
- iv. Rarely
- v. Never
- vi. Not Applicable

What do you generally do when you meet them?

- i. Sit and Gossip
- ii. Go out for walk
- iii. Sharing Problems
- iv. Religious Discussions
- v. Do social activities together
- vi. Discuss about family
- vii. Playing games
- viii. Attending any club or old people's association
- ix. Going out for shopping
- x. Watching T.V together
- xi. Go for outing
- xii. Go to religious places together
- xiii. Attend social gathering/ parties together
- xiv. Any other
- xv. Not Applicable

5. How often do you generally meet or interact with your neighbours?
- i. Everyday
 - ii. Often
 - iii. Sometimes
 - iv. Rarely
 - v. Never
 - vi. Not Applicable
6. What are the activities that you generally do when you interact with your neighbours?
- i. Sit and Gossip
 - ii. Go out for walk
 - iii. Sharing Problems
 - iv. Religious Discussions
 - v. Do social activities together
 - vi. Discuss about family
 - vii. Playing games
 - viii. Attending any club or old people's association
 - ix. Going out for shopping
 - x. Watching T.V together
 - xi. Go for outing
 - xii. Go to religious places together
 - xiii. Attend social gathering/ parties together
 - xiv. Any other
 - xv. Not Applicable
7. What do you generally do when any guest visit your home?
- a. Welcome the person and interact with him/ her
 - b. Prefer not to talk to the person and thus withdraw from any kind of interaction.
- Do your family members introduce that person to you? Yes/ no
8. In case you have your spouse...how do you usually spend time together?
- i. Sit and Gossip
 - ii. Going for Walk
 - iii. Sharing Problems
 - iv. Religious Discussion
 - v. Doing Social Activities together
 - vi. Discussion about family
 - vii. Playing games
 - viii. Attending any clubs or old people's association
 - ix. Going out for shopping
 - x. Watching T.V Together
 - xi. Go for outing
 - xii. Go to religious places together

- xiii. Attend social gathering/ parties together
- xiv. Any other
- xv. Not Applicable

9. Mention the frequency of the following as : *Everyday/ Often/ Sometimes/ Rarely/ Never/ Not Applicable*

- i. How often do you generally go out for a Walk?
- ii. How often do you generally go out for Shopping?
- iii. How often do you generally go out to Religious institutions?
- iv. How often do you generally go out with your family members?
- v. How often do you generally visit a nearby friend?
- vi. How often do you generally attend Social gatherings?

10. Are you engaged with any Religious institutions or some other kind of association?

If so ...Give details

How often do you visit there?

What are the activities you generally perform there?

Perception on the following matters:

Express your opinion towards the following statement: (**Answer with Strongly Agree/ Agree/ Strongly Disagree/ Disagree/ Indifferent/ Not Applicable**)

- i. "All my requirements are met by my family members".
- ii. "I get enough money from my family to meet my daily needs".
- iii. "Whenever I ask for something or place my requirements before my family, my needs are urgently met".
- iv. "At the time of illness or any other physical problem my family members take care of me and provide me with enough support".
- v. "I am satisfied with the amount of time my family members spend with me".
- vi. "I am satisfied with the amount of time my Grandchildren spends with me".
- vii. "I feel that my family members are too busy and do not have enough time to take care of me".
- viii. "I feel lonely as my family members are too busy and do not have sufficient time to talk to me".
- ix. "Whenever I am faced with any problem, I can always share it with my family members".
- x. "I feel dominated by the younger members of my family on every issue".
- xi. "I feel that my family members misbehave with me and do not listen to me as they used to do previously".
- xii. "I feel bad when my son and daughter-in law are going for a party, or for shopping, leaving me alone at home".

- xiii. “Now a day’s young stars do not know how to respect their elders”.
- xiv. “Working women cannot take proper care of their family, children and of the elderly members of their family. Thus women should not go out for work”.
- xv. “Children should not leave their parents and shift to some other town for their job and career”.
- xvi. “Now a day the daughter-in-laws do not listen or respect their in-laws”.
- xvii. “I feel insulted when the younger members of my family say humiliating words to me”.
- xviii. “Whenever there is an argument in your family between two younger members, you should keep mum and not interfere”.

Care and support from family members:

1. Do you face generally with any health related problems? Yes/ No
If yes, Give details.
2. How would you describe your health status at present? Good/ Satisfactory/ Bad/ Worse.
3. Do you get enough money for your medical expenditures? Who provides you the money for your medical needs?
4. Do your family members take you to the doctor whenever it is required? Who generally accompanies you while going to the doctor? Who pays the doctor’s visit?
5. Do your family members look after you whenever you are sick or are suffering from any health problems?
6. Whenever you are suffering from any physical problems, does any of your family members helps you in performing your daily activities like washing clothes, taking bath, feeding you etc. Yes/ No
7. Are you satisfied with the diet being provided to you by your family members?
8. During illness who generally gives you the medicine or keep an eye on it?
9. Do your family members come and sit beside you to ask about your health status?

APPENDIX: B

(Publication)



A sociological study of ELDERLY Women in URBAN middle class and poor families

Suravi Dutta Roy

Siliguri, West Bangal

Abstract:

This paper attempts to make a comparative study of the extent of economic problems, level of social acceptance, degree of role loss and their adjustment towards it; and the extent of health care and support received by the elderly belonging to the middle and poor class. Role of factors like marital status, present working and income status of the respondents as well as their spouses, their contribution in the family, living arrangements are also assessed in analyzing the above factors. The study was conducted in the Municipal areas of Siliguri in Darjeeling district, West Bengal among 100 samples, 50 belonging to each category. The findings of the study show that the level of economic problems and health care and support received by the elderly is determined by their economic class, marital status, occupational status and income of the respondents and their spouses. However the degree of their role loss and social acceptance is largely determined by their living arrangements and participation in activities in their family, in addition to the above factors.

Key words: *Elderly, Middle class, Poor class*

INTRODUCTION:

The growing number of elderly, in the population of the world has posed some serious challenges not only for the demographers but also for the economist and policy makers. In the present era, this phenomenon has not only restricted itself to the developed countries but is increasingly becoming a common feature even of the developing countries of the world, including India. Another dimension of this phenomenon is the sex ratio of this population which shows a larger proportion of females than males. This phenomenon, which is often referred to as 'feminization of the aged population' will have some significant consequences, especially for a country like India. India being a patriarchal society, often attributes low status to its female population. Old age, associated with deteriorating physical and psychological health further aggravates her problems and drags them to a more dependent position. Social classes play a major role in influencing the experience of old age. Factors like Occupation, Education, Income, Ownership of Property, Resources held by the person in old age etc associated with social class are important in determining their Power, Authority, Opportunities, Social Acceptance, Family support and care etc.



Review of literature:

Bhadra(2011) has highlighted that decline in physical activity results in dependency, loss of social status, loss in decision-making power, role loss, decreased social interaction, and neglect of the elderly women both inside and outside the family. **Yadava, Yadava and Sharma (1996)** have reported that there is a significant association between the working status of the elderly, economic contributions made by them, educational status, prior occupation and the caste group and their acceptance by the family members. **Nasreen (2009)**'s study revealed that dependency has a direct relation with the age and gender of the elderly. Moreover, the study reflects that economic and physical dependence are inversely related to the status of an elderly and with the quality of their interpersonal relationships. **Panda (2005)**'s study concluded with the findings that elderly females who accept changes in roles and age related changes, not only shares cordial relations with her family members but also feel satisfied with her life. **A.G.Arivukarasu's (2011)** in his study among the elderly found that the living arrangements of the elderly have a great impact on their physical and psychological wellbeing. **Maruthakutti (2011)**' study revealed that Age, Sex, Education, Marital status, Occupation, Income and Living Arrangements are some of the important determinants of the well being of the elderly. **Ushashree (1997)** found that economic position of the family and the elderly and their gender some important factor that determines the position of the elderly and the social supports available to them. **Audinarayana (2012 a)**'s study revealed that the co-residence with their children served as a major factor in the provision of care and support extended to them by their children.

During the review of the previous literature it was found that hardly any studies assessed the status of the elderly based on the social class. Hence in the present study, an attempt has been made to make a comparison of the elderly women in the urban areas belonging to two different social classes i.e. the middle class: families whose members belong to professional and intellectual groups and whose primary source of income comes from non-manual works; and poor class: who are mostly slum dwellers, pavement dwellers, earning their livelihood on daily basis in informal sectors and whose primary source of income come from manual works.

Objectives:

In this context, the study will look into and comparatively investigate:

- The extent of economic problems and their adjustment towards it.
- The degree of Role loss of the elderly and their adjustment to it. Their level of Social acceptance within their family.
- Access to health care services and care and support extended to them

***Methodology:***

The present study was conducted in the municipal areas of Siliguri in the district of Darjeeling, West Bengal. The sampling unit for the present investigation are, women aged 60 years and above. Efforts were made to study 100 samples, with equal proportion of sample belonging to each category. Samples were drawn through Random sampling method. Stratified Random sampling was also used as the samples were stratified based on Class, Marital status, Working and income status, Educational status, Pattern of Living arrangements,. Necessary data and information was collected through direct contact with the target group, through intensive field work, observation, personal interview with the help of interview schedule, Data were also be collected from secondary sources. Data processing involved various manipulations necessary for preparing the data for analysis. The data was analyzed qualitatively and report was prepared.

Findings:***Profile of the samples:***

Data shows that large majority of the respondents' falls in the age group of 60-69 years, followed by a smaller number belonging to the age group of 70-79, while a much smaller number of elderly i.e. 12% belongs to the age group of 80+. The marital status of the respondents reflects that the numbers of widows are relatively much higher. Their total number is 57%, (with 52% and 62% belonging to the middle class and poor class respectively). This category was followed by the number of women who falls in the married status (40%), followed by small proportion who are unmarried and divorced/separated.

While looking at the class differences with regard to Educational status it is observed that the number of Illiterate in the poor families is much higher when compared to the number of illiterates in the middle class families. Simultaneously, non-formal education was received by 26% of the elderly of the poor families, whereas in case of middle class families the percentage is 6%. Contrastingly, formal education till std. x was found to be received by a higher number of middle class elderly as compared to the poor class. High School Education was received by a very small number of elderly in the middle class whereas in case of the poor class this number is more insignificant. Moreover, education till Graduation and Master degree were found to be received by only 12% and 8% of the elderly of the middle class as compared to none of the elderly of the poor class.

Living Arrangements of the Elderly:

The study shows that majority of the elderly of the studied area, irrespective of their class, resides with their children and spouses (if married). Though the number residing with their married children and spouse (if



married) both in the middle class and poor families is much more (i.e. 50% and 46% respectively) as compared to the number of elderly residing with their unmarried children with or without spouse. While comparatively analyzing the situation, it was revealed that co-residence of the elderly with their married children in case of both the classes were mostly found in case where she is a widow. A significant number of married elderly i.e. 14% and 12% elderly belonging to middle and poor class respectively were found to be living with their husband alone. Besides these quite a small number of elderly were found to be living alone.

Economic status: Extent of economic problems and their adjustment towards it:

Present occupational status:

The study reveals that quite a small proportion of the elderly covered under the present study are engaged in economically gainful activities or some sort of remunerative work. This proportion is however, much higher for the elderly belonging to the poor class (52%) than the middle class elderly (12%).

Table 1 : Present Occupational Status (in percentage)

Categories	Middle Class	Poor Class	Total %
Working	12%	52%	32%
Non-working	88%	48%	68%

Source of income:

The study reflects that almost 51% of the elderly covered under the present study has at least one source of income. However this percentage was significantly higher in case of poor class elderly in comparison to the elderly belonging to the middle class.

Monetary support:

86% of the elderly belonging to the middle class and 74% belonging to the poor class reported to receive monetary support from others. In majority cases the main source of monetary support are their son/s, daughters and husband (in case of married elderly). In case of married elderly belonging to both the classes, the primary source of monetary support are their husband, while in few cases support is received jointly from their husband and children. However 3% of the elderly belonging to the poor class reported that at the time of need, they receive monetary support from their neighbours, as their own children doesn't provide them with any kind of support.

It was revealed that the percentage of elderly reported to receive satisfactory monetary support is higher in case of middle class and married elderly. This reflects greater satisfaction among the middle class elderly with regard to the support received, than the elderly of the poor class.



Spending of money:

Freedom to spend money on own needs were reported more by the elderly of the middle class, married elderly with earning husband and widows with a source of income. In contrast to this, 44% of the elderly belonging to the middle class and 64% belonging to the poor class reported to have restrictions in such matters.

Needs:

The study reflects that a much higher proportion of the elderly (64%) belonging to the middle class reported that their needs are 'mostly' and 'always' met by their family members as compared to only (12%) of the elderly belonging to the poor class.. However, as compared to none of the elderly of the middle class, 24% and 8% elderly of the poor class reported that their needs are 'rarely' and 'never' met.

Majority of the elderly of the middle class elderly covered under the present study reported that their needs does 'mostly' and 'sometimes' respectively get priority by their family members/children. This percentage is much less in case of poor class elderly. Looking at the total picture it can be concluded that the middle class elderly are in a much better position when it comes to prioritising and fulfillment of their needs. Fulfillment of needs and the level of priority assigned to the needs, besides class are found to depend on the marital, income and working status of the respondents and their spouses

Degree of role loss and their adjustment towards it:

Participation in Decision making:

The study shows lesser participation of the elderly women in the decision making of the household. However, comparative analysis suggests higher participation of poor class elderly women in decision making than the middle class elderly. The decision making power in most cases were found to rest in the hands of the husband where the elderly is married and co-residing with him. It should be noted that the number of elderly accepting the change in decision making as normal are found to be more in case of middle class families than in case of poor class.

Almost, 32% of the middle class elderly and 18% of the poor class elderly are 'always' consulted by their family members when any decisions are being taken in the family, these elderly are mostly married and are co-residing with their husband with or without children or where the elderly is herself the decision maker of the family. On the other hand 18% and 24% of the elderly belonging to middle class and poor class respectively are 'never' consulted in any matter. This to a great extent reflects their acceptance of the middle class elderly among the family members.



Participation in the management and decision making of household affairs:

However, the study shows that the role of management of household affairs in majority cases have been transferred to the daughter-in laws of the family, though in case of a considerable proportion of cases the authority still rests with the elderly (i.e. 26% in case of each class). Besides these, in few cases the elderly are seen to participate jointly with their daughter-in laws/ daughters in the management of these affairs. In this context the number of elderly participating in the management of household affairs is higher in case of poor families (60%) than in case of middle class families (54%). In this context, the attitude of the elderly towards the change in the management of household affairs was also studied. The assessment revealed that elderly showing positive attitude was comparatively much more in number (80%) in case of middle class than in case of poor class (59%) elderly.

The data related to the frequency of seeking their consultation by their family members in these matters revealed that nearly 60% of the respondents belonging to both the classes are consulted 'always' and 'mostly' by their family members in these matters. Majority of the elderly stated that 'it is quite normal' and they don't feel bad if they are not consulted on these issues. However the proportion of women having such attitude is much higher in case of middleclass than the poor families.

Participation/ Contribution in household work/ chores:

Contribution in household activities provides the elderly a sense of contribution to her family. Data shows that, 14% respondents belonging to the middle class and 6% belonging to the poor class does not participate in any household activities. Like poor class, though in few cases poor health and disability of the middle class elderly are a reason for their non-participation in household chores but in other cases, due to presence of daughter-in law and maid in the family the elderly are almost left with no work to perform. Comparative analysis shows that higher proportion of the elderly belonging to the poor families performs these activities than the elderly of the middle class families.

Social Acceptance of the elderly within the family:

This factor is assessed by studying the level of their participation with their grandchildren and children.

Extent of participation and involvement with Grandchildren:

In case of 44 elderly of middle class and 45 elderly of the poor class who have grandchildren, it was found that 50% and 33% elderly belonging the middle and poor class respectively spends time with their



grandchildren 'often'. On the contrary, nearly 9% elderly belonging to the poor class stated that their grandchildren 'never' spend any time with them. Such cases in majority were mostly reported by the elderly having poor /strained relation with their children and daughter-in law.

Extent of participation and involvement with Children:

Comparative analysis of the table shows that a higher number of elderly belonging to the poor class spends time 'often' and 'sometimes' with their sons than the elderly of the middle class. The reason for spending less time, as stated by most of the middle class elderly is the nature of their son/s job, which leaves them with little time to spend on their family. Moreover, 9% of the middle class elderly as against 28% of the poor class reported that their sons 'never' spend time with them. As revealed by the elderly, in most of such cases the elderly is not having a cordial relation with her son/s.

Extent of the participation of the elderly with their children and grandchildren were however found to depend on the level of their participation in household activities and their living arrangements.

Health Care and Support extended by the family members:

Present health problems of the elderly:

Almost 94% of the elderly covered under the present study were found to suffer from one or more health problems at present. However, a slightly higher number of elderly belonging to the middle class reported to suffer from health problems as compared to the poor class elderly.

Self-perspective of health status:

Self- perspective of own health status as 'Bad' was reported by a slightly higher in case of poor class elderly (46%) than the elderly of the middle class (42%). On the other hand, 22% of the elderly reported to have 'worst' health condition, whose proportion is also much higher in case of the middle class. Comparative analysis of the data shows that rating of own health status as 'good'/ 'satisfactory' was more commonly reported by the poor elderly as compared to their counterparts.

Medical Expenses:

Comparative analysis shows, a significantly lower proportion of the elderly of the poor class receiving enough financial support for medical expenses, than the elderly of the middle class. This to some extent is definitely due to the differences in the economic condition of both the classes which in turn reflects a significant association between the economic status and the level of health care and medical support received by the elderly.



Data also shows that in case of the middle class elderly, the monetary support is received mostly from their son/s co residing with them. In case where the elderly is married, the support is mostly received from their husband. On the contrary, it is quite significant to note that unlike the middle class elderly, a much higher proportion of the poor elderly (30%) reported that they meet these expenses on their own. Comparative analysis shows that elderly receiving support from their son/s and husband in this regard was found to be much low in case of the poor elderly. However, neighbours role is worth mentioning role in case of poor elderly. All these findings suggest that poor class elderly tends to depends less on their family members for health related expenses than the elderly of the middle class, as in most cases these needs are met by their own resources.

Monetary support and assistance provided by family members in the treatment of the elderly:

Data gathered reveals that majority of the elderly of the middle class (80%) reported that they are 'always' or 'mostly' taken to the doctor whenever any requirement is felt, as compared to 48% elderly of the poor class. It is important to note that in these cases the poor class elderly were mostly found to depend on their neighbours/ friends to assist or accompanying them to the doctor. The study reflects that daughters play a very important part when it comes to health care and support of the elderly especially in case of the poor class. While accompanying the elderly to the doctor, the role of daughter was found to be significantly high among the poor elderly (42%) than the elderly of the middle class (34%). This was followed by 30% of the elderly who are accompanied by their sons. Husband's assistance in this regard is enjoyed by a higher proportion of the elderly belonging to the middle class (24%) than the poor class elderly (14%). However, going to the doctor alone was reported more among the middle class elderly i.e. 8% elderly as compared to 2% of the poor class. Thus in this regard, a higher dependence on their kins were found among the middle class than their poor counterparts, a significant proportion of whom depends on their neighbours and friends for this.

For a much higher proportion of elderly, belonging to the middle class, it is the son who pays the doctor's fee (48%), followed by husband (32%). This was followed by very small proportion who reported that the fees are paid mostly daughters (6%), son-in laws (4%), and relatives (6%). Moreover, 10% of the elderly reported that they pay the fees themselves with their own money. In contrast to this, a greater number of elderly belonging to the poor families (30%) were found to self-reliant in this issue, followed by son/s and husband.

Health care and support provided by family members:

Data in this section reflects that a higher number of the elderly covered under the present study agreed that their family members look after them during illness. However, the percentage is much higher in case of the poor class (92%) than the middle class (88%) elderly. In this context the study found that irrespective of



the social class, a higher number of elderly are looked after by their daughters during illness. Another significant proportion was found to receive assistance by their daughter-in laws in this regard, which shows slightly higher proportion for the elderly belonging to middle class than the poor elderly.

The proportion of the elderly belonging to the poor class who expressed their satisfaction with regard to the same is much lower (56%). Besides these quite a significant number of elderly belonging to the middle class reported that they are mostly reminded by their family members for taking medicines but this proportion is significantly less among the poor class. A higher proportion of elderly agreed that during illness their family members, come and sit beside them to enquire about their health which is higher in case of the middle class elderly 96% than the poor class 80%.

Conclusion:

The study thus reveals lesser economic problems and more care and support received by the elderly of the middle class than their poor counterparts. Moreover, social acceptance and adjustment to economic problems and role loss were also found to be influenced by class factor. Besides these, working status and income of own and spouse, marital status and living arrangements were also found to influence above mentioned factors to a large extent.

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