

# Marginalized and Institutionalized Elderly Women: Issues and Concerns

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## ABSTRACT

Ageing women make up a significant proportion of the world's population and their numbers are growing. Poverty is inherently gendered in old age when older women are more likely to be widowed, living alone, with no income, with fewer assets of their own, fully dependent on the family for support and living in old age home. The present study attempts to offer some empirical evidence for understanding and explaining at the marginalization of elderly women. Data for this research work was collected from four old age homes in Chennai city. 60 years and above elderly women were interviewed. Male inmates, bedridden and mentally retarded were excluded from the study. Interview Schedule was used to collect data from female inmates. Low level of awareness and utilization of welfare schemes and programs and low-level social connections and networks, other socio-economic backwardness are the major causes of marginalization of elderly women. Results revealed that majority of female inmates were in the age group of 70 to 79 years (53%), widows (55.7%), illiterates (39.5%), unemployed (65.9%), not having any source of income (50.3%), staying with 6 to 10 roommates (44.3%) and staying above five years (53%) in the old age home. Some major factors influencing marginalization of elderly women are a) Socio-economic backwardness in education and occupation, b) lack of social support among relatives and c) Economic dependency of elderly women. It was analysed that only 0.5% of inmates were satisfied by the availability of money and only 16.2% of inmates were satisfied with the support given by their family members. 49.8% of inmates dissatisfied with health care services provided by the institution and 53.5% of inmates dissatisfied with the condition of their living place due to lack of privacy, narrowed dormitory system, etc.

**KEYWORDS:** Marginalization, Elderly women, Institutionalization, Social support, Economic dependency, Old age home

## INTRODUCTION

Ageing of the population has increasingly become an important issue and concern globally. These concerns grounded in emerging skewed economic futures, social imbalances and individual risks. As per the World Ageing Report, it is estimated that the number of elder persons could increase from 8 per cent in 2015 to 19 per cent in 2050 (United Nations, 2018). The projection also indicates that the number of 60 years and above elderly people in India will increase to 143.20 million in 2021 and 173.2 million in 2026 (Ministry of Social Justice and Empowerment, 2018).

The traditional socio-cultural norms and values of Indian society stressed on showing respect and providing care for the elderly. But with the rising prevalence of nuclear family setups in recent years, the elderly have been exposed to emotional, physical and financial insecurity and with fewer children in the family, the care of older persons in the families get increasingly difficult and facing social isolation. As a result of broad social changes such as migration, modernization, urbanization, late marriage, divorce, higher education and participation of women in employment have a great influence of functions of the family.

## Elderly women

Ageing women make up a significant proportion of the world's population and their numbers are growing. The number of women will increase from about 336 million in 2000 to just over 1 billion in 2050. Women outnumber men in older age groups and also in old age homes. Worldwide, there are some 123 women for every 100 men aged 60 and over. The fastest-growing group among ageing women is the oldest-old (aged 80 and above). Worldwide, by age 80 and over, there are 189 women for every 100 men. By age 100 and over, the gap reaches 385 women for every 100 men (World Health Report, 2016).

Many studies revealed that elderly women outnumber elderly men in many old age homes. They are more likely to live in poverty and to be affected by disability and restrictions of mobility. They are more represented among those living in residential care and are at the biggest risk of elderly abuse. Reher and Requena (2018) conducted a study from 61 societies around the world and revealed that the percentages of living alone ranged from as high as 45 to 50 per cent to as low as 5 to 10 per cent. Income insecurity is a significant source of vulnerability among older women. More than four out of five women have either no personal income

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at all or very little income, income insecurity increases with advancing age (India ageing Report, 2017).

**Review of Literature**

J. L Bruinsma, et al., (2017) emphasized the conflicts among institutionalized elderly women in the Southern Region of Brazil. The major objective of this study is to identify the interpersonal conflicts among institutionalized elderly women from the perspective of the nursing team and describe the strategies adopted by the nursing staff in conflict situations. Data were collected through semi-structured interviews. The study concluded that understanding the dynamics among elderly women can enhance nursing staff's interventions with this population by reducing conflict in number and intensity.

Espirito and Daniel (2018) stated optimism and well-being among Institutionalized older adults. Result reveals that optimism correlates and to determine whether it predicts emotional well-being variables, after controlling for potential covariates, by assessing 66 Institutionalized elderlies. Optimism was low and associated with failure to do physical exercise, urinary inconstance, increased anxiety, depressive symptoms and feelings of loneliness and reduced satisfaction with positive affect optimism predicted emotional well-being, albeit not over and above some covariates.

**Results and Discussion**

**Table -1 Age Demographics of the female inmates**

Type of old age homes		60-69	70-79	80-89	90-99	Total
Free home	OAH1	17 (34.7)	34 (34.7)	11 (31.4)	1 (33.3)	63 (34.1)
	OAH2	8 (16.3)	16 (16.3)	7 (20.0)	1 (33.3)	32 (17.3)
Paid home	OAH3	18 (36.7)	36 (36.7)	12 (34.3)	1 (33.3)	67 (36.2)
	OAH4	6 (12.3)	12 (12.3)	5 (14.3)	0 (0.0)	23 (12.4)
Total		49 (100)	98 (100)	35 (100)	3 (100)	185 (100)

Table -1 reveals that the majority of inmates were in the age group of 70 to 79 years. 51.4% of female inmates were interviewed from free old age homes. 185 female inmates interviewed from four old age homes. There was no significant difference between the type of old age home and age group of inmates.

Table -2 clearly illustrates that 53% of female inmates (98) were in the age group of 70 to 79 years. Out of 185 female inmates, 103 were widows (55.7%). Only 27.5% of inmates (51 inmates) had got children. Majority of female inmates (39.5%) were illiterates. Out of 185 inmates, 122 were unemployed (65.9%). More than half of female inmates (50.3%) did not get income by any source and fully they depend on the institution. Majority of female inmates (44.3%) were staying with 6 to 10 roommates.

**Table -2 Socio- Demographic Data of female inmates (n=185)**

Variables		Female inmates	
		Frequency (N)	Percentage (%)
Age (years)	60-69	49	26.5
	70-79	98	53.0
	80-89	35	18.9
	90-99	3	1.6
Total		185	100
Marital status	Single	66	35.6
	Married	14	7.6
	Widowed	103	55.7
	Separated	2	1.1
Total		185	100
Number of children	None	68	36.8
	One	38	20.5
	Two	10	5.4
	Three	3	1.6
	Not applicable	66	35.7
Total		185	100

WHO (2018) reported that around one in six people 60 years and older experienced some form of abuse in community settings during the past year. Elder abuse can lead to serious physical injuries and long term psychological consequences. The global populations of people aged 60 years and older will more than double from 900 million in 2015 to about 2 billion in 2050. This is likely to be an underestimation, as only one in twenty-four cases of elder abuse is reported, in part because older people are often afraid to report cases of abuse to family, friends or the authorities.

**Methodology**

The universe of the present study comprised Institutionalized elderly women. The data were collected from four old age homes in Chennai city. Out of them, two were free homes and another two were paid homes. 60 years old and above, female inmates were interviewed. Male inmates, bedridden, mentally retarded were excluded from the study. Purposive sampling method was used. 185 female inmates were interviewed individually. Data were collected through interview schedules with face to face interviews from elderly women. The instrument was made without the inmate's name to ensure anonymity and confidentiality. Respondents consent was obtained after explanations about the nature and purpose of the study. Descriptive statistics in the form of frequency, percentages and chart was used to analyze the data.

<b>Education</b>	No schooling	73	39.5
	Primary	47	25.3
	Middle	10	5.4
	High school	7	3.8
	College	4	2.2
	Others	44	23.8
Total		185	100
<b>Employment</b>	Unemployed	122	65.9
	Agriculture	48	26.0
	Daily wages	6	3.2
	Govt employed	7	3.8
	Others	2	1.1
Total		185	100
<b>Sources of income</b>	Children	25	13.5
	Relatives	38	20.5
	Pension	29	15.7
	None	93	50.3
Total		185	100
<b>No. of roommates</b>	None	23	12.4
	1 to 5	16	8.6
	6 to 10	82	44.3
	11 to 15	27	14.7
	16 to 20	37	20.0
Total		185	100

**Table -3 Descriptions of joining reason and staying years of female inmates in old age homes**

Variables		Female inmates	
		Frequency (N)	Percentage (%)
<b>Joining reason</b>	Nobody to take care	94	50.8
	Children are not willing	51	27.6
	Want to live independent	38	20.5
	Financial problem	2	1.1
Total		185	100
<b>Staying years</b>	Less than 1	12	6.5
	1 to 5	75	40.5
	6 to 10	91	49.2
	Greater than 10	7	3.8
Total		185	100

Table -3 reveals the joining reason and staying years of female inmates in old age homes. Out of 185 female inmates, 94 stated that nobody was there to take care of them. For 51 inmates (27.6%), children were not willing to take care. 20.5% of inmates wanted to live independently and they earned some money. More than half of the inmates (53%) were staying above five years in the old age homes 40.5% of inmates (75) were staying one to five years. There is a correlation between the duration of Institutionalization and age group of inmates.

**Table -4 Factors influencing marginalization of elderly inmates**

Explanatory Variables		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	Total
Availability of money	N	41	39	104	1	0	185
	%	22.2	21.1	56.2	0.5	0.0	100
Social support	N	4	38	113	30	0	185
	%	2.2	20.5	61.1	16.2	0.0	100

The above table (4) reveals the factors responsible for the marginalization of elderly female inmates. Out of 185 inmates, 41 inmates were very dissatisfied, 39 inmates were dissatisfied and 104 inmates were neither satisfied nor dissatisfied with the availability of money. On the whole, more than 100 inmates had not got money for their expenditure. Economic conditions are the most important determinant of life satisfaction among the elderly (Jung et al., 2010). According to the 52nd round of the National Sample Survey Organization, nearly half of the elderly are fully dependent on others, while another 20 per cent are partially dependent for their economic needs.

The above table (4) also reveals the level of satisfaction of inmates about social support. Majority of inmates were not getting support from their family members, relatives and friends. The female inmates are marginalized for various reasons. The children of inmates were not visiting their parents once in a month, 61.1% of inmates neither satisfied nor dissatisfied and

20.5% of inmates dissatisfied with the social support given by their family members. Social support acts as a buffer to stresses and also extends practical help in facing challenges of ageing. Lack of social support may have negative effects on the mental health of elderly, as social support is believed to play a key role in moderating the effects of stress, lack of social support was a significant predictor of depression for women, while this was not the case for men (Huang et al., 2011).

**Table- 5 levels of satisfaction of female inmates in health services and home environment**

Explanatory Variables		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	Total
Access to Health services	N	9	83	93	0	0	185
	%	4.9	44.9	50.2	0.0	0.0	100
Home environment	N	0	99	69	3	14	185
	%	0.0	53.5	37.3	1.6	7.6	100

Out of 185 inmates, none of them reported that they were satisfied and very satisfied with health care services of old age home. 4.9% of inmates were very dissatisfied, 44.9% of inmates were dissatisfied and 50.2% of inmates neither satisfied nor dissatisfied about the health services provided by the old age homes. Some paid homes collect more money from the inmates but they were not providing quality of health services. There was a lap in proper nursing and timely medical treatment in old age homes.

Table- 5 also reveals the dissatisfaction of inmates about the old age home environment. More than half of inmates (53.5%) were dissatisfied with the condition of their living place due to lack of privacy, narrowed dormitory system, etc. 37.3% of inmates neither satisfied nor dissatisfied with the home environment. Kashyap (2011) stated that neglect of ergonomic principles brings pain to the inmates in the home environment. He highlighted the essential key factors that should be considered as the main criteria when designing the old age home.

### Conclusion

Ageing of women is accompanied by low work participation, low earning and high economic needs. The situation was even worse for elderly females (GOI, 2011). Economic dependency among elder women is high. One-third of older women do not own any assets. An age-friendly community promotes healthy ageing through the existence of appropriate housing, transportation options and neighbourhoods where older people can maintain an active and healthy lifestyle (Ball and Lawyer, 2014). Thus, an important goal in health promotion is to create home environments that support healthy ageing. Females depend on others, given economic dependency, lower literacy and higher incidence of widowhood among them. Migration of youth, lack of proper care in the family, insufficient housing, economic hardship and the break-up of joint family have made the old age homes seem more relevant even in the Indian context. The elderly must be sensitized on legal protections offered by the government of India and improve accessibility to various social welfare policies.

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