

## Institutionalized Elderly Women-Issues & Concerns

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### ABSTRACT

The elderly not only face the problem of physical changes but also undergo emotional, psychological and social changes. Some individuals cope with these changes effectively but others will experience extreme frustration and mental agony. The family members should understand the psychosocial changes and stresses experienced by the elderly and fosters necessary care and concern to them. The biological age and chronological age are closely related but will not correlate. As the age advances, the health problems tend to increase with age and these problems also depend on economic condition and family and social support system. The main objective of this investigation is to study the plight of the elderly women in the institutional settings with the following broad objectives: To make a study of personal profile of the respondents; To understand the living arrangements of the elderly women in the institutions; To assess the extent of family relationship as well as the psychological condition of the respondents; To know and understand the social status of the elderly women in the institutions; and to study the coping patterns of elderly women. Total 80 respondents were interviewed from four care homes in the Udupi District through simple random sampling method. The study reveals that majority of the respondents are from rural area and economically poor status. They suffer from depression since they lack psychological and emotional support. They express their emotions by getting short tempered and irritable. Some try to cope up with indulging themselves more with religious activities like prayer and meditation. The healthy interaction in an institution will help in getting integration and healthy bond with other inmates. The study concludes by saying the most important aspect in every human being life is to have a financial plan for future at the middle age itself.

**Keywords:** Women, Old age, Institutional, Psychological, Elderly, Elderly and social support.

### 1. INTRODUCTION :

Old age though is not precisely chronological age; it is a universal phenomenon and a challenge to everyone, who reaches it irrespective of occupation, skill or learning. Individuals survive childhood, grow to maturity and become old in all societies. Several factors such as biological, psychological, social, and ecological factors influence aging. This old age is characterized by poor adjustment, sense of time and sense of life cycle; desire to leave a legacy, neurological and sensory changes, and change of roles and period of decline. As an individual attains the stage of old age all the organs and tissues of the body start degenerating. The rate

at which degeneration occurs does not strictly follow the chronological age. There are ethnic, racial and genetic differences amongst individuals. The major factor behind aging is the genetic make-up. Along with the environmental factors, the genetic factor determines the process of aging. However, ageing is a complex, degenerative, physiological process whose superficial symptoms appear in middle age like skin wrinkles, increased dryness, hair turning into white or gray, gaining weight, diminished muscle strength, stooping of shoulders, loss of agility and unsteadiness of the limbs, heart disease, hypertension, diabetes and arthritis, etc. They also experience a psychological

deterioration of the mind due to ageing of the brain, isolation, marginalization and stigmatization. The social issues which disturb them are breakdown of the family support systems and decrease in economic independence. Due to change in the role and other factors the elderly face the challenge of abuse in the family which takes several forms and ranges from psychological and even physical torment including mistreatment, humiliations, and partial or total denial at food clothing, shelter and medical help and emotional support. These problems are common in homes as well as institutions which affect their physical health as well as psych-social well being of the elderly. However institutionalized elderly suffers seriously due to lack of social support system [1, 2]. The studies say Institutionalized and non-institutionalized elderly and toured significant differences on social support, depression and loneliness. The study also returned negative and significant correlations between social support and loneliness. The results from the comparative study on 60 institutionalized and non-institutionalized elderly shows that institutionalized elderly face array of issues such as negative self concept, lower levels of self esteem and restricted interpersonal self. Hence, ageing has brought with it new and serious issues which are to be dealt from at national and international perspective. The WHO describes it as an important developmental element requiring emergency action [3].

## 2. IMPORTANT CONCEPTS :

**Elderly:** The traditional concept of old age is replaced by elderly or senior citizen. The dictionary meaning of a senior citizen is, “an older person especially somebody who has retired from work”. According to section 80 DDB of the Income Tax Act, “Senior citizen means an individual resident in India who is of the age of sixty-five years or more at any time during the relevant previous year”.

**Elderly women:** Women have a great role in society through family perspectives and Nation development as well. The nature is the second word of women who create and protect others. So, role of the women has been considered as greatly important in every part of human life. There have been many

researches taken place describing the important role of women in every sectors of human life. Hence the study on psycho-social issues of elderly women becomes imperative. Aging process appears to enhance the status of women in many societies in all over the world. Some of the scholars argue that older women acquire greater authority with the higher status due to their culturally androgynous status and the cessation of their sexual productive organs. They also become burden and are sent to institutions [4, 5].

**Psycho –Social Dynamics:** While elderly in the developed countries experience a problem of social status and psychological affinity, the elderly in the developing countries face the challenges of basic needs and security of life. Aging process varies considerably within and between cultures. In the process of aging the last phase is considered as decline and death. In this phase most of the aged are confronted with variety of problems which of course vary from individual to individual, culture to culture and society to society.

**Old Age Home:** Old age homes are constructed to give care to the destitute and abandoned. In the recent times, a new trend is being observed among the aged population of India a numerous old age homes have sprung up across the length and breadth of the country where more and more senior citizens are seeking institutional support at their old age. States in India such as Delhi, Kerala, Maharashtra and West Bengal have developed good quality old age homes. There are paid old age homes with sophisticated facilities where an elderly is given care when the family members are not willing to cater their needs in the family.

## 3. ORIGIN OF THE PROBLEM :

The primary objective of the study is to explore the psycho-social and adjustment issues faced by the institutionalized elderly women. The attempts are made to understand the factors which shape the psycho-social well-being of elderly women especially in their old age. Efforts are also made to identify the typical psycho-social aspects influencing the lifestyle in the institutional set up; it is important to mention what factors shape socio-cultural and psychological course of human being. A person's activities, his attitude

towards life, his relationship to his family or to his work; his biological capacities, and his physical fitness are all conditioned by the status in which he lives. Hence age is the prime phenomenon that which contributes to the formation of psycho-social attitudes among people. Getting old is the result of the interplay of biological, psychological, social, and ecological factors. The adjustments depend on the type of support received by the elderly from their children or family members. Radical changes occurred into value systems, standards of behaviour and attitudes towards the aged. Large-scale industrialization and modernization however, brought about various social and cultural changes, weakening the family and community bonds [6, 7]. The care of the aged began to be viewed as a burden and stress by the family members as well as caretakers. The Indian society known for collective, normative and group-oriented behavior is heading towards individualistic frame of living. Social and moral obligations for the care of others including elderly persons is deteriorating in the growing consumerist society. Elderly people are being thrown out from the ambit of family. They have been abused in their families or in institutional settings which includes physical abuse (infliction of pain or hurt), emotional abuse (infliction of mental anguish and illegal exploitation), and sexual abuse, violation of human rights like abandonment, institutionalization without consent or wish and self-abuse [8]. Hence elders suffer from desires, psychological problems of usefulness and abundant. Women react in different ways in this diminishing role. They face the miserable conditions in their life, as they are family bonded and not ready to live in old age homes; they suffer aloof until their life ends [9,10].

#### 4. PROBLEMS OF ELDERLY :

Physical disability in the aged often gives rise to profound anxiety and a sense of apathy and helplessness. This situation is indeed very difficult, since the aged in such conditions invariably tend to be withdrawn, negative and inflexible. In such situation, the elderly requires a lot of physical and emotional support especially from the family or loved ones. When it comes to corrections, women

resist more than the men. Hence, it tends to alienate and push the elderly, especially women into a cycle of depression and social isolation. With the breakdown of traditions and family structures in many societies increasing numbers of elderly live alone or in home for the aged. Some of the social problems normally faced by the elderly persons include lack of contacts with friends, lowering of socioeconomic status, i.e., loss or decreased source of income may lead to inferiority complex for elderly in the society, incapability to involve himself in happier or sad moments of relatives, education and upbringing of children along with their settlement, feeling of isolation and neglect by children especially when the partner is no more. All these problems are likely to erode or damage the social status of an elderly person to a great extent [11, 12].

#### 5. PSYCHOLOGICAL REACTIONS :

The common psychological reactions of the elderly are; **Anxiety**: worry is the most common problem in the older people. They remain anxious and unsure. **Anger and Irritability**: Either due to poor adjustment or due to neglect by other, they become critical, negative and irritable. **Apathy**: Loss of interest, pessimism and withdrawal also may be seen. **Denial**: This is a common defense mechanism. They refuse to accept the fact that they are growing old. **Over Religiousness**: people think that they should become spiritual and may suddenly take up to rituals and practices. **Paranoid Reactions**: some start of doubting that family members or others are plotting against them and so on. **Sadness and depression**: Depression is a very common symptom in old age. This is due to losses and lack of power and control. **Suicidal attempts**: self neglect is more common [13-15].

#### 6. METHODS & MATERIALS :

The study was being carried out in the Udupi District purposively chosen because of its proximity as well as association of the researcher with the residential homes of the elderly. The idea is to facilitate valuable inputs on several aspects of the highly personal information relevant to the investigation. The sampling unit for the present investigation was women aged 60 years and above. Traditionally the sixtieth year has been considered to be

beginning of old age in India. Completion of 60 years is called 'Shastipurti' in Indian culture which is an important milestone in the life of an individual which many are not lucky enough to reach. Out of the total 80 respondents, the researcher interviewed 20 each respondent from each resident of the 4 care homes in the Udipi District. The participation was strictly voluntary and refusal would not affect residency status. The interview schedule was designed by the researcher to learn demographic characteristics. The selection of the respondents was based on the simple random sampling method where the investigator considered equal opportunity and each item in the entire population to have an equal chance of being included in the sample.

### 7. RESULTS AND DISCUSSIONS :

**Personal Variables:** The personal profile shows that 54 percent were in the age category of 60-70 years and 44 percent were illiterate. The marital status revealed that 84 percent were married among whom 32 percent were widows, 8 percent were divorced and 14 percent were separated. The family type 92 percent of the respondents are from nuclear family. Distribution of the religious affiliation shows that majority 56 percent of them are Hindus and the rest forming the minority. Majority 56 percent of the respondents were from rural background. With regard to the previous occupational status majority of 60 percent respondents were unemployed. The length of residing at the care home shows that 54 percent were resided for 6 – 10 years.

**Social Variables:** The social profile explores the opportunities of the respondents to attend religious functions, social functions, attend parties, meet friends, etc. The results show that 22 percent of respondents are able to take part in religious functions followed by 50 percent of the inmates had an opportunity to attend the social functions. Further, the results pertaining to social life point out 12 percent respondents are visiting their friends or relatives and attend any parties. With regard to the economic status is concerned, 76 percent of the respondents were from poor economic status, followed by average status category 24 percent. Data regarding health status shows 60 percent inmates possessed good health status.

**Psychological Variables:** The results indicate that 36 percent inmates were experiencing a severe depression due to the absence of psychological and emotional support while 11 percent of the respondents were able to manage with their feelings. Among others, 18 percent of the respondents were experiencing frequent anger and irritability while 14 percent of them were displaying paranoid reactions and 10 percent were over religious in their behavior.

### 8. RELEVANCE & IMPLICATIONS :

Every society tends to view its aging population within the structural and functional constructs, which operates for perpetuation and efficient conduct of that society. Elderly enjoyed highest respect from the youngsters when the joint family system was in force. The older and aged have also enjoyed social security against infirmities, losses, privileges of being heard and more importantly the decision making of the family matters were lied with the elderly. However, things witnessed a reverse order during the time of transition of culture from rural to urban way of life, the increase in standard of living, etc made the traditional obligations increasingly difficult. The hard hit by changes are the older people who contributed a lot throughout now when it is their turn to receive from their family they are now met with cold treatment. Whatever the reasons, all women, children and men have the right to live their lives in a healthy way without emotional, physical or sexual abuse or the fear of abuse.

Some of the recommendations are proposed below:

1. School syllabus should take care of issues of the aged and Public Health Authorities should carry the message of healthy ageing.
2. The major remedy in all cases is to make the old less dependent on the family, empower them through monetary or material grants, and provide them the facilities for medical help.
3. Culturally relevant activities towards their socio-economic and psychological empowerment through community development activities like senior citizens club, forming volunteer force and development of neighborhood network

programs need to be planned to gain meaning in their life and to improve their quality of life.

4. The mere setting up of old age home cannot ensure a life of dignity for the elderly people. For these homes to become more than mere shelter, there needs to be a change in the societal mindset that considers the old particularly women, unwanted and burden. There should be proper facilities to them and should provide complete security to the elderly people.
5. To create and awareness among general public particularly the elderly for regular medical checkups to ensures prevention and early detection of the disease.
6. More local NGOs should come forward and volunteer to work in the area of health, security for the elderly.

## 9. CONCLUSION :

The problem of aging has a special significance in contemporary societies. In the past, old age was not a problem at all. Elderly persons were respected, they were the chief patrons of the family, they hold the authoritarian position in the family and community, and played significant role in decision making processes. The stable joint family system in traditional Indian society ensured them protection and security during their late life. They exercised power because they owned and controlled property and had freedom to dispose of this property. At the community level, the elders used to be the leaders in such affairs as political, religious and legal activities.

However, things began to change in recent years. With the onset of industrialization and urbanization changes began to take place in the family system, community administrations, property relations, occupational structure and so on. Increase is the size of population; migrations of youth from rural to urban areas, increase in the size of elderly population, the disintegration of joint families and the employment of women are the some of the important factors that brought about the so called problems of the aged.

The social workers, sociologists and psychologists in the west are concerned about the needs of the older people, their increasing

presence affecting the groups and society, and the new relationship coming in between young and the old. Social workers are experimenting with new types of services for older clients; adult educators are seeking ways for serving the older as well as the young adult; recreational workers are trying new programmers for older people; a few law schools are turning attention to the special legal problems that arise. Business corporations are concerned with the nagging questions of arbitrary or flexible retirement, the vesting of pension funds, and ways of preparing middle aged workers for the adjustment they will make after retirement. Commissions, committees and public agencies are proliferating at local, state and national levels to cope with problems of old aged people.

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