

## Caring For Age –Management of Elderly People - Challenges & Community Stakeholdership

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**Abstract:** This paper examines the health issues of the aged people & focuses on the need to create awareness towards inheriting a healthy life style to avoid isolation & family disregard. Aged people especially women suffer several types of mental & physical agonies during their life. The faster urbanization process, faster living style transformations, faster declining health issues are entwined to make their life more miserable. Besides the psychological distancing & dis-engagement from family work which once they were involved with, have added to their miseries. While the generation gap has become more perceptible aged persons are becoming more insecure & apprehensive. There is a need to create awareness among aged people towards engaging in healthy hobbies to overcome seclusion. There are exigencies of making the aged people feel more secure & protected. The Community stake holders need to make the elderly feel more supportive & more inclusive. The growing distance between family members can be reduced by the community..

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### I. Introduction

At present 95 million people in India are above the age of 60, by the year 2025 nearly 80 million more will be added to this population bracket. Age wise Study on Human Rights of Older Persons In India- United Nations Department Of Economic & Social Affairs Economic & Social Council in 2011 stream lighted the issues relating to elderly people across the world. With improved life expectancy rate in our country, it's estimated that as many as 8 million people are currently above the age of 80 years in India .

1. Changing family value system,
2. Economic compulsions of the children & grand children,
3. Neglect and abuse
4. Seclusion
5. Failing health
6. Deteriorating societal values

All these has caused elders to fall through the network of family care. Homes for the Aged are ideal for elderly people who are alone, face health problems, depression and loneliness.

Due to growing educational needs & career prospects families have become more unitary. The elders or the aged people are not welcome in the family & there is a growing trend towards joining them to old age homes or leaving them in villages . The urban focus turn of the families have made the elderly people to become lonely & the mounting health disorders are leaving them to suffer alone. The ancient Indian family values a have disappeared & join families have become a thing of museum. Children are left at the mercy of aids, attendants & domestic helpers, when they are young & after education formalities they tend to grow single & love to be self centered.

Ancient Indian family life always nurtured good ethical values the presence of elders was considered a boon in the family because they had experience & their guidance always showered blessing for the younger ones. their familiarity with dealing with difficult situations , their knowledge of family management , their awareness on child up brining , their experience on traditions & customs played the role of a great master. Their decisions were final & constructive to family welfare. The family nurtured ethical values , spouse relationships ,sibling relationships, maternal relationships paternal relationships etc were honored & respected. Thus the elderly persons felt secure & sound inside the family network. But with the rise of unitary families, all these responsibilities disappeared & all relationships strained. Family became void of guidance, principles, ethics & values. Commercialization further fanned the thinning of relationships. Montessori's, play homes, kindergartens, were welcome. The child lost the fatherly directions of the grandfather & motherly guidelines of the grandmother.

The elderly people further suffered illness & ill health caused due to aging & changing climatic conditions. Urban aged people are suffering due to

1.	Congested Urban housing conditions,
2.	Increasing Urban pollution,
3.	Decreasing Urban hygiene & sanitation ,
4.	Crowded urban transport ,

These urban conditions are causing Asthma, respiratory problems, hyper tension, obesity & lever problems. illness caused due to fever , cold ,breathing , early aging, hair fall, visibility &hearing deficiency etc are all the more on the rise. All these ailments are leading to physical illness as well as psychological disorders. Hence temperamental transformations were nothing but confirmed which are further leading to additional medical expenses & operation costs. While rural aged people are suffering from rural isolation , poor health care access , poor sanitation , poor supportive mechanisms ,the spending on health care is increasing . This is a common situation in urban as well as rural India.

Health care researches on old age & old age behavior say that States such as Andhrapradesh, Karnataka, Kerala, Tamilnadu have huge number of aged population followed by Haryana, Himachal Pradesh, Maharashtra, Orissa & Punjab. Hence , the state governments are finding it difficult to make supportive budgetary allocation towards providing health security to aged people. Policy priorities are sidelined to make allocation for other infrastructural development.

**Health problems** -Old age cause several depressing issues which are physical as well as psychological-

**Physiological problems of the aged** - Psychological aging refers to decline in mental abilities which is linked to aging. But sociological aging is very important as the impact of aging as a member of the family is influenced to a great deal. Members of the family start treating the individual differently. Aged people suffer from following health problems Auto immune diseases Bone weakness related health issues , Depression , Hearing impediments, Obesity & metabolic syndrome , Cardio vascular health issues , Digestive disorders

**The sociological problems of the aged** - the following are the sociological problems of the aged people both in urban & rural societies

1.	Companion / spouse status	spouse dead / or suffering from long drawn illness or staying out
2.	Marital / familial status	( completely reliant / subdued reliance)
3.	old age blues	Lack of preparedness for old age
4.	psychological situations	Mental situation of being unaided or unsupportive as children are far away or abroad
5.	poor self esteem	Lowered self esteem caused due to declining physical health / reliance on continued to medications /
6.	increasing reliance on routine work	Loss of control over body routines like unable to move / unable to sit/ unable to clear routine toilet work / unable to listen / unable to see / unable to travel
7.	monotonous & tedious	growing monotony caused due to children are career conscious & are busy with their professional work & grand children are away with schooling / colleges / nobody to share their thoughts / experiences / pain
8.	poor adjustments to ne generation	Unable to adjust to new generation issues as children who are technologically advanced started segregating into broader technical inputs as they are mobile savvy / electronic gadget savvy , it becomes difficult to cope up with their fastness . They spend very less time with the elderly people cornering them as ignorant & unaware.

Several rich & upper middle class households have started taking the assistance of paid nurses to look of the elderly. Several of them have deliberately joined the elderly to old age homes or hired attendants to look after them in hired houses separately this segregation has furthered the problems of the elderly as they have becomes inmates to a professional hostel environment while their minds were longing for a family environment.

**The economic side of the management of the elderly people** -Besides elderly people declining labor force lower fertility increase in the age dependency ratio of working age to older age increases . These problems post a challenge to the fiscal stability & nation’s macro-economic stability is also challenged in the long run. This is so because government has to spend more on their pensions health care social benefits community projects, etc . These initiatives calls for higher budgetary allocation towards providing health care for elderly people . This additional allocated expenditure for providing health security for the aged people influences economic growth directly and economic growth naturally slows down as this hampers the government spending on basic education, health & other infrastructure.

The other side of the picture is also gloomy, because recession in economy, monetary depression and economic crisis calls for social protection and provision for social protection is leading to unsustainable public debts. India needs to increase spending towards infrastructure as well as for ensuring social protection. The increasing crime against the elderly people has already created a pandemonium in India. Government has to set priorities towards creation of policies enabling the elderly people a better life. Expenditure towards elderly has increased but at the same time crimes against the aged has also increased.

**Role of the Community:**

1. Community based health care units for the elderly people have been a success in other countries
2. Minimum standards for aged people in aged care homes
3. Visiting services can be provided
4. Home nursing & home medical aid can be prioritized
5. home care help can be provided
6. volunteering psychological support to elderly

**II. Conclusion**

Due to growing educational needs & career prospects families have become more unitary. The elders or the aged people are not welcome in the family & there is a growing trend towards joining them to old age homes or leaving them in villages . An aware community can be more supportive in restoring the traditional Indian family values & provide the elderly with psychological security &physical protection.

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