

## LOCATING AND REDEFINING THE SPACE OF ELDERLY IN INDIA

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### ABSTRACT

The world is experiencing exponential growth in the ageing population. Growing older often corresponds to the decline in the productiveness of an individual and with that comes the quest of finding a position to support survival. The elderly population does not primarily mean burden to the society rather the experience that they hold of the different spheres can be highly productive if channelized in a systematic sense. The advent of technology and modernization can be seen responsible for the decrease in the mortality rate, increase in awareness, nutrition, advancement in health care facilities and an increased life expectancy. The dynamic changes in the pattern of livelihood, lifestyle, family, work environment in India make it imperative to locate the existent space of the different sections of social framework. Today India is witnessing demographic dividend which to a greater extent signifies that the near future of India will witness a rise in elderly population. This research will highlight the shrinking space of elderly population and an attempt to relocate, redefine the space of elderly in the changing scenario of the nation.

**Keywords:** Space, Ageing, demography, social insecurity, financial dependency

## INTRODUCTION

Ageing is an inevitable natural phenomenon that comes both with opportunities and challenges. WHO has cited Census 2011 data that reports, India has 104 million older people (60+years) that almost constitutes 8.6% of the total population. Also the National Commission on Population highlighted the fact that the share of the elderly in India's population that was close to 9% in 2011, is growing at an exponential rate and may reach 18% by 2036. India's life expectancy has almost more than doubled since independence, it was approximately 32 years in the late 1940s and today it stands at around 70 years. In the due course of time the fertility rate has also declined to just two per woman from six children per woman, this indeed acted as a departure point from the existing social normative order of repeated child bearing and child care but it has created a new challenge that is the rising in the elderly population. India is witnessing a steep rise in its population, with rise in population comes various challenges, the challenge of employability, livelihood residence etc.. The current demographic scenario depicts more working age population than the non-working population in layman's terms more youth than ageing population, thus it also makes it apparent that India might witness increase in ageing population in the coming future. Old age is associated with various issues which includes physical, mental and social well-being. If India has to make sure that everyone, ageing population to be precise the decent quality of life in the coming future, systematic planning, and recognition of the challenges and providing for it must begin from today.

The slow, gradual demographic shift leading to rise in the ageing population makes it imperative to discuss the challenges that are associated with the elders. Indian social system is witnessing very speedy transformation under the influence of rapid industrialization, formation of urban villages or the urbanization, the rise in the technical prowess and change in technology, education system along-with rapid globalization. As the result of these the conventional values and traditional social institutions is in a gradual process of vanishing and acculturating, leading to the crippling of the inter-generational ties that earlier were the defining character of the traditional family system. On the other hand industrialization has also superseded the conventional family production units by the factory or the mass production units. The nuclearisation of family and the new evolving concept of functional family again create a sort of lack of social, psychological and physical space. There are other numerous

social problems that come due to the lacunae in the social institution of family like the ignorance by the children, the disenchantment and disillusionment caused due to retirement. The socio-psychological problems include feeling of isolation, insecurity, loneliness in elderly. The most challenging issue that creates conflict amongst the generation is the gap in the thought and livelihood that often deteriorate the psychological health of the elders. The dependency of elders on their children for basic necessity gets increased after retirement. The out-of-pocket expenses on the treatment of the illnesses due to old age add up to the increased financial constraints. The rapid urbanization and industrialization compel people to migrate from rural to urban areas have a considerable negative impact on the elderly as they are mostly compelled to live alone or only with the spouse that leads to a feeling of mental as well as social insecurity. As within the ambit of this research the primary aim is to talk about the space, space here implies both the real physical space and the imaginary psychological realm. A nation-wide survey conducted by a non-governmental organization 'HelpAge India' depicts that 47% of ageing population or the aged population is financially dependent on their families or children and approx. 34% are dependent on pensions and cash transfers, while according to the survey 40% of the elderly have shown desire to work as long as possible. The financial dependency highlights the major issue of lack of sufficient, adaptable housing facility. The anxiety to find a space can also be seen as associated with the health issues primarily the mental health issues, to put forward some; Neurosis that is a class of functional mental disorders involving chronic distress that is neither hallucination nor delusion, secondly a recent survey highlighted that 30% to 50% of ageing population had symptoms that are responsible enough to make them depressed. A vast majority of elderly are women mainly widows, being elder plus gender marginalized make them even more dependent thus leading to the psychological constraint. Depression is often seen as correlated with poverty, poor health, and loneliness.

This research paper will study the demography as well as demographic shift via the statistical analysis of the data available to highlight the challenges associated with the ageing population. Within the ambit of this research the issue of locating and defining geographical space for elderly will be discussed. This paper will further discuss the concept as highlighted by social geographer that is the concept of 'third space' as the defining space for elderly.

## REVISITING THE EXISTING LITERATURE

There is a wide arena of scholarly research work on the issues associated to the ageing population and the demographic shift still there is a scarcity of the research available on the issue of space, how the elderly construct, adapt, locate or access the space. The researchers have indeed discussed on the issues of the lack of sufficient housing facility or the issue of old age homes but there is a paucity of research discussing about the negotiation with the socio-cultural constructs.

WHO in the years 1990s and 2000s has come up with the concept of "Active Ageing", the word active here primarily implies to the "continuing participating in social, economic, cultural, spiritual and civic affairs, not just the ability to be physically active or to participate in the labour force", having as a final and highest goal to "extend healthy life expectancy and quality of life for all people as they age" (WHO, 2002).

The relation between elderly citizens and cities could in a positive sense be formed by developing a lively and dynamic age-friendly community. The social intermingling and activeness via participating in its events is mainly associated with physical and psychological well-being, in older life as during the entire lifetime; it refers to the interaction and engagement of people with others within a society, whether it is a defined group of people or an urban neighborhood. Activities such as work, volunteerism, leisure activities, and living in the community are central to civic participation. A sense of belonging and trust in people and places strengthens social networks and forms new bonds (Manju et al., 2000, Sundar et al., 2000, Anandan et al., 2019, Ashok et al., 2018 & 2019, Vasanthy and Jeganathan 2008 & 2009).

City software, eg. The services, relationships and networks provided are tailored to a particular context, just as important in transforming a city into an age-friendly city. Hirsch et al. (2000) identified two main factors affecting the quality of life of the elderly: independence (ability to take care of one-self by making decisions) and cohesion (ability to communicate with others and share your experiences and friendships).

Rapidly urbanizing environments can challenge social inclusion and increase the risk of social exclusion in older people. In India, urban spaces are considered dangerous and inaccessible

for elderly people with reduced mobility. (Chao, 2017; Prattley et al., 2020; Van Hoof et al., 2018). Demographic changes are accompanied by socio-economic phenomena such as globalization, liberalization, urbanization and migration. These changes bring with it changes in the traditional cultural norms that govern such support, as well as a concomitant change in the ability of families to support many older people. (Kumar, 1997). These changes have made seniors think about alternatives to self-care. As a result, most seniors who need alternative care go to institutions because they cannot afford paid home care or because there are no alternatives available in their area. (Bhat & Druvarajan, 2001). As a result, nursing facilities for the elderly (nursing homes) are developing rapidly. (Huang, Yeoh, & Toyota, 2012; Peace, Kellaher, & Willcocks, 2007; Watt et. al. 2014). The question is how many of these elderly people are cared for in nursing homes and, more importantly, how this affects their quality of life and ability to live with dignity and independence in these settings. (Coons & Mace, 1996)

Currently, family elder care is preferred in India. It is rooted in cultural notions of caring and in communal family systems that promote family cohesion and functioning. (Brijnath, 2012). These cultural practices are complemented by legal provisions that give primary responsibility for family care. Additionally, compliance or non-compliance is associated with family encouragement and punishment. For example, the Senior Citizens Act 2007 provides tax breaks for families caring for elderly relatives and imposes sanctions such as fines and three months in prison for families who refuse to do their duty. (Ministry of Law & Justice, 2007). This is supported by politicians and opinion makers who are ideologically hostile to any recognition of the potential limitations of families caring for the elderly. (Brijnath, 2012). In most primary surveys of the elderly population, respondents indicated a preference for being with their children or family members. (Brijnath, 2012). In this situation, nursing homes are perceived with deep ambivalence, and the elderly entering them are stigmatized. The source of this stigma is believed to be “violating traditional cultural norms” when older people are being cared for by their children. (Blyth & Moore, 2001).

The effects of technology, industrialization, urbanization and globalization have brought about rapid social change in India. As a result, traditional values and institutions are increasingly giving way to intergenerational coexistence in favor of nuclear life. So society

is in the process of eroding and adapting to old values. (Jeffery, 2014; Samanta, 2017). Population pressure acts as a driving factor, while the opening up of new economic opportunities and the scale of modern communications encourage young people to migrate from the countryside to the cities. (Jamuna, 1998; Ramamurti & Jamuna, 2010). One of the reasons for the breakdown of joint families and kinship ties is work far from the place of residence. Women's equal participation in economic activities is increasing. (Bhat & Druvarajan, 2001) These changes have adverse effects on elder care. Working couples are a dual situation in which, on the one hand, the presence of aging parents is emotionally connected and helps to care for the children, and while on the other hand, they find financial aspects such as high costs. Housing and medical care is difficult for them. so that their parents can live with them. The National Policy on the Older Persons of 1999 puts it: "Due to shortage of space in dwellings in urban areas and high rents, migrants prefer to leave their parents in the native place. Changing roles and expectations of women, their concepts of privacy and space, desire not to be encumbered by caring responsibilities of old people for long periods, career ambitions, and employment outside the home implies a considerably reduced time for care giving." (Ministry of Social Justice and Empowerment, 1999)

According to Kumar (1997), opportunities to care for the elderly are being weakened by changes in the economic structure, increased mobility of people, changing attitudes, and an increase in part-time families. This undermines the traditional norms underlying that support. Bhat and Druvarajan (2001) discuss changes that make single older people (single, separated and bereaved) particularly vulnerable to poverty, inadequate care and neglect. According to them, single elderly people are more vulnerable in old age, since few are ready to support non-linear relatives. Additionally, there are a growing number of underreported cases of abuse and neglect within families.

In addition, domestic abuse and neglect, although underreported, are increasingly present in families in India. (Patel & Prince, 2001). Therefore, given the decline in home care, abuse and lack of adequate social safety nets, nursing homes are seen as the only alternative to accommodate the growing number of victims. Elderly are abused and not cared for at home. (Datta, 2017; Jadhav, Ghongte, & Ughade, 2017; Johnson, Madan, Vo, & Pottkett, 2018; Samanta et al., 2015). Consequentially, stigma associated with referrals to care homes due to



higher levels of social outcry related to the lack of home care services (Prakash, 1999). Goffman (1963) shows how moving away from the ordinary and the ordinary, in this case living with one's family, is discrediting and growing old.

The above literature reflects a range of initial reactions upon entering the home, including despair, hopelessness, helplessness, abandonment, stigma and anxiety about the future. Stories reflect unique experiences tied to an individual's personal identity. The results show that the elderly are caught between changes in the family system on the one hand and the absence of an adequate social security system on the other. This research paper will examine demographics as well as demographic changes through statistical analysis of available data to highlight the challenges associated with aging populations. As part of this study, questions about the location and definition of geospatial for older people will be discussed.

## DESCRIPTIVE STATISTICAL ANALYSIS

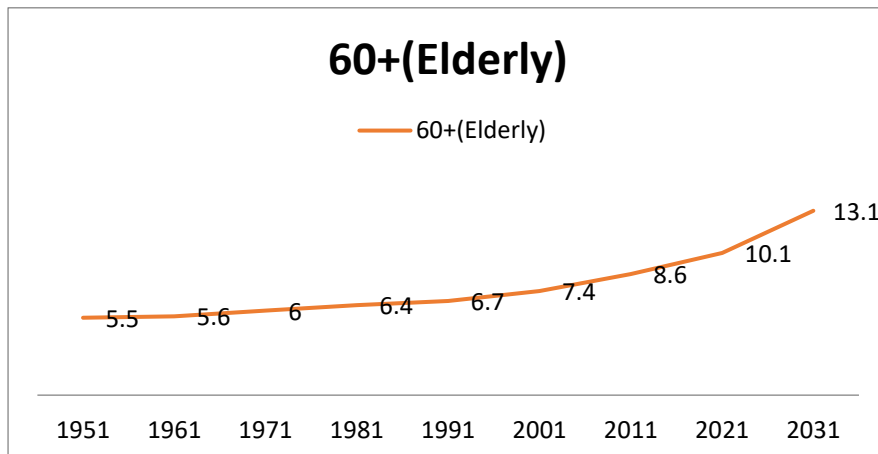
As mentioned above and also many of the literature discussed above has argued that India is currently witnessing demographic dividend which implies that the working age population is more as compared to dependent population which also make it evident that the future India will have more ageing population. The data below is depicting the rise in the share of elderly population in India.

**Table-1: Ageing in India: Rise Share of Elderly in India in Percentage**

Years	Age Group in Years		
	0-14	15-59	60+(Elderly)
1951	38.4	56.1	5.5
1961	41.1	53.3	5.6
1971	42.0	52.0	6.0
1981	39.7	53.9	6.4
1991	37.6	55.7	6.7
2001	35.3	56.9	7.4

<b>2011</b>	<b>30.8</b>	<b>60.3</b>	<b>8.6</b>
<b>2021</b>	<b>25.5</b>	<b>64.0</b>	<b>10.1</b>
<b>2031</b>	<b>21.7</b>	<b>65.2</b>	<b>13.1</b>

**Source: Elderly in India (2021), National Statistical Office (NSO).**



The above data depicts that in the year 1951 that was exactly just after the independence the population share of age group between 0-14 years was 38.4% and of age group 15-29 was 56.1% whereas the share of the elderly population during that area was 5.5%. Since then all the subsequent census till 2021 has shown the gradual rise in the ageing population. The line graph above has depicted that the share of elderly people in the year 1951 was 5.5%, in 1961 was 5.6, in 1971 it was 6%, in 1981 it was 6.4%, 1991 it was 6.7%, in the year 2001 it was 7.4 which raised to around 8.6 % in the year 2011 and 10.1% in the year 2021 and expected to be 13.1% in the year 2031. This data clearly raises an alarm regarding the accommodation and well-being of the rising population.

### ***Financial Dependency:***

Another important defining marker to access the accommodation and assimilation of elderly in the changing social scenario is to access the financial dependency of the elderly. India's traditional family system supports the notion of taking care of the elderly in a wholesome manner that primarily contains providing financial security. The data below is giving an assessment of the dependent elderly population of the urban and rural India.



**Table-2: Financial Dependency of Urban Elderly in India in Percentage**

Years	Fully Dependent	Partially Dependent	Not Dependent
1995	53	14	31
2004	52	11	36
2017	47	20	33

Source: Elderly in India (2021), National Statistical Office (NSO).

The above data is depicting the condition of Urban Elderly. In the year 1995, 53% of the Urban Elderly was fully dependent, 14% was partially dependent and 31% were self- dependent. In the year 2004, 52% of the Urban Elderly was fully dependent, 11% was partially dependent and 36% were self- dependent. In the year 2017, 47% of the Urban Elderly was fully dependent, 20% was partially dependent and 33% were self- dependent.

**Table-3: Financial Dependency of Rural Elderly in India in Percentage**

Years	Fully Dependent	Partially Dependent	Not Dependent
1995	51	16	30
2004	52	14	33
2017	47	25	28

Source: Elderly in India (2021), National Statistical Office (NSO).

The above data is depicting the condition of Rural Elderly. In the year 1995, 51% of the Rural Elderly was fully dependent, 16% was partially dependent and 30% were self- dependent. In the year 2004, 52% of the Rural Elderly was fully dependent, 14% was partially dependent and 33% were self- dependent. In the year 2017, 47% of the Rural Elderly was fully dependent, 25% was partially dependent and 28% were self- dependent.

### ***Social Insecurity:***

To adjust and accommodate in any place or to make a pace of oneself the most important marker is the sense of social security. The level of social insecurity decides whether that particular person is going to be in peace with the assigned space. The social insecurity can be

assessed by taking into account the employed and not in labor force. The data below depicts social insecurity among Elderly in India in percentage.

**Table-4: Social Insecurity among Elderly in India in Percentage**

Years	Age Group:60-64 Years		Age Group: 65 +Years	
	Employed	Not in Labour Force	Employed	Not in Labour Force
2011-12	49.3	50.6	28.9	71.1
2018-19	40.9	59.1	21.2	78.8

**Source: Elderly in India (2021), National Statistical Office (NSO).**

The data above depicts that in the year 2011-12 amongst the age group 60-64 years; the employed were around 49.3 % and not in the active labor force was 50.6% and amongst the age group 65+ the employed were 28.9% and not in active labour force was 71.1%. In the year 2018-19 amongst the age group 60-64 years; the employed were around 40.9 % and not in the active labor force was 59.1% and amongst the age group 65+ the employed were 21.2% and not in active labour force was 78.8%.

## CONCLUSION

The gradual demographic shift leading to rise in the elderly population makes it apparent to talk about the challenges that are associated with the elders. Indian social system is undergoing transformation under the influence of rapid industrialization, urbanization, the rise in the technical prowess, change in education system along-with rapid globalization. As the result of these the conventional values and traditional social institutions is in a gradual process of vanishing and acculturating, leading to the crippling of the inter-generational ties that earlier were the defining character of the traditional family system. On the other hand industrialization has also superseded the conventional family production units by the factory or the mass production units. The nuclearisation of family and the new evolving concept of functional

family again create a sort of lack of social, psychological and physical space. The data above discussed that the elderly population of India is rising substantially. The line graph above has depicted that the share of elderly people in the year 1951 was 5.5%, in 1961 was 5.6, in 1971 it was 6%, in 1981 it was 6.4%, 1991 it was 6.7%, in the year 2001 it was 7.4 which raised to around 8.6 % in the year 2011 and 10.1% in the year 2021 and expected to be 13.1% in the year 2031. This data clearly raises an alarm regarding the accommodation and well-being of the rising population. Also the dependency rates in both urban and rural areas are considerably high and most importantly social insecurity is also at peak as assessed by the data above. This research showcased that how the various factors in the society is creating an anxiety to assess, relocate and redefine space both in terms of physical real space and mental space.

## **SUGGESTIONS**

### ***Protection from Poverty:***

1. The first step towards a decent life for older people is to protect them from poverty and all of its deprivations.
2. Annuity cash can help you cope with many health problems and avoid loneliness.
3. This is why old-age pensions are an important part of social security systems worldwide.

### ***Emulate the pioneers:***

1. Southern states and poorer states in India such as Odisha and Rajasthan have achieved near-universal social security pensions. Their actions are worth emulating.
2. It would be much easier for all states to do the same if the central government reconsidered the NSAP.

### ***Focus on pension system reform:***

1. Another important area is social security pension reform.
2. They also need other supports and facilities such as health care, disability support, help with daily tasks, recreational opportunities and a good social life.

***Transparent 'exclusion criteria':***

1. Considering all widows, elderly or disabled persons eligible if simple and transparent 'exclusion criteria' are met is the best approach.
2. Eligibility may be self-declared and the burden of time-limit confirmation rests with the local administration or Grampanchayat.
3. Although preferential households are likely to benefit, some inclusion errors are far preferable to perpetuating large-scale exclusion errors as they are today.

**EXISTING INDIA'S AGING POPULATION POLICY**

India is committed to achieving the Sustainable Development Goals and gradually streamlining global indicators into national development indicators.

India's Social Assistance Program:

India's National Social Assistance Program (NSAP) has a wide range of non-contribution pension schemes for the elderly, widows and the disabled. It is administered by the Ministry of Rural Development. Complicated procedures are particularly burdensome for low-income or uneducated older people, who need a pension the most.

Other relevant policies for the elderly:

1. Pradhan Mantri Vaya Vandana Yojana (PMVVY): This is a pension scheme for the elderly.
2. Integrated Program for the Older Persons (IPOP): The main objective of this policy is to improve the quality of life of the elderly. Provide various basic amenities such as food, shelter, medical care, and recreational opportunities.
3. Rashtriya Vayoshree Yojana: This is a central sector program funded by the elderly welfare fund. All unclaimed funds from small savings accounts, PPF and EPF have been moved into this fund. The aim is to provide support and assistive equipment to the elderly below the poverty line (BPL).

4. SACRED Portal for Elderly: The Ministry of Social Justice and Empowerment has developed a portal for older people.

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