E-ISSN No : 2456-5040 | Volume : 10 | Issue : 10 | October 2025

INTERSECTING INEQUALITIES: HEALTH, SOCIAL, AND ECONOMIC CHALLENGES OF GERIATRIC WOMEN IN INDIA

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Access Online

Article DOI:
10.5281/zenodo.17839358

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How to Cite:
Dr. Manju Lata Adhikari (2025), Intersecting Inequalities: Health, Social, and Economic Challenges of Geriatric Women In India, International Educational Applied Scientific & Research Journal (IEASRJ), Vol: 10, Issue: 10, 31-34

ABSTRACT

India's ageing population is expanding rapidly, with women comprising a substantial share of this demographic due to higher life expectancy. However, longevity often coincides with heightened vulnerability. Elderly women in India experience a convergence of socio-economic marginalization, health inequities, and systemic gender discrimination. This paper critically examines the multidimensional challenges confronting geriatric women, including economic dependency, chronic health conditions, social isolation, and cultural stigmatization. It further analyses the role of governmental and non-governmental initiatives in addressing these issues and proposes evidence-based recommendations to enhance the health, social inclusion, and dignity of elderly women in India.

KEYWORDS: Geriatric Women, Gender Inequality, Health Disparities, Socio-Economic Vulnerability, Social Exclusion, Interventions

AIMS AND OBJECTIVES

Aim:

The primary aim of this paper is to examine the key health, social, and economic challenges faced by the elderly population of women in India and to evaluate the effectiveness of existing policies and programs addressing geriatric care.

Materials and Methods

This research paper employs a descriptive and analytical approach to explore the health, social, and economic challenges faced by the elderly women population in India. The methodology combines secondary data analysis with a review of existing literature and policy

- published in journals such as BMC Health Services Research and Nature Scientific Reports.
- Media Reports and Case Studies: Supplementary insights were drawn from reputable media sources like The Times of India to provide real-world examples of geriatric healthcare initiatives.

1. INTRODUCTION

India is experiencing a demographic transition characterized by an increasing elderly population. According to the United Nations Population Fund (UNFPA), by 2050, the population aged 60 and above is projected to reach 300 million, with women forming a substantial proportion. Elderly women face distinct challenges shaped by lifelong gender disparities, patriarchal cultural norms, and economic dependence. While aging affects both men and women, women often encounter compounded vulnerabilities due to social, financial, and health-related inequalities.

This paper explores the major issues affecting elderly women in India, including socio-economic challenges, health disparities, social and cultural factors, discrimination, and policy interventions, with a focus on actionable recommendations for improving their quality of life.

Research Paper

2. SOCIO-ECONOMIC CHALLENGES

2.1 Economic Dependency

Economic insecurity is a primary concern for elderly women in India. Most women spend their lives as homemakers, with limited or no independent income or savings, resulting in dependence on family members, particularly sons. This dependency increases vulnerability to neglect, exploitation, and poverty, especially in rural areas where access to financial resources and property ownership is limited. Studies indicate that elderly women are nearly twice as likely as elderly men to have no income and face significantly less access to care than men have (Perianayagam et al., 2024).

2.2 Employment and Income Security

Limited participation in formal employment during their younger years leaves many elderly women without pensions, retirement benefits, or social security. Nearly 75% of elderly women are economically dependent on family members (UNFPA, n.d.). Employment in the informal sector does not guarantee benefits, further exacerbating financial insecurity and poverty in old age. Economic deprivation also impacts women's access to healthcare, nutrition, and social activities.

3. HEALTH DISPARITIES

3.1 Chronic Health Conditions

Elderly women often experience chronic health conditions such as arthritis, hypertension, diabetes, and sensory impairments. According to Perianayagam et al. (2024), 40% of older women report low vision, and 53% have oral health problems, negatively affecting daily functioning and independence. These conditions limit mobility and increase reliance on family or caregivers.

3.2 Mental Health Issues

Mental health problems, including dementia, depression, anxiety, and cognitive decline, are prevalent among elderly women. Widowhood, chronic illness, and social isolation contribute to higher rates of depression in women than men (Panda et al., 2023). Cultural stigma surrounding mental health further prevents women from seeking professional help, leading to untreated conditions that impair quality of life.

3.3 Access to Healthcare

Access to healthcare remains a critical barrier for elderly women, particularly in rural and semi-urban areas. Limited mobility, transportation challenges, financial constraints, and gender biases within healthcare systems restrict timely and appropriate medical attention (Ghosh & Roy, 2017). As a result, chronic illnesses may go untreated, increasing disability and mortality among elderly women.

4. SOCIAL AND CULTURAL FACTORS

4.1 Discrimination Against Elderly Women

Elderly women in India face intersecting discrimination based on age, gender, caste, and socioeconomic status. Lifelong gender inequalities restrict education, employment, and property ownership, leaving them vulnerable in old age (UNFPA, n.d.). Widows and marginalized groups experience compounded stigma, exclusion, and limited access to healthcare and social support (Chakraborty & Sengupta, 2024; IIM Bangalore, 2024). Gender bias in healthcare results in poorer treatment and delayed care, further worsening health outcomes (Ghosh & Roy, 2017). These systemic disparities deepen elderly women's social and psychological vulnerability.

4.2 Widowhood and Social Isolation

Widowhood is a common experience among elderly women in India, often leading to social exclusion and emotional distress. Cultural norms frequently marginalize widows, restricting their participation in community activities and limiting their social support networks (Chakraborty & Sengupta, 2024). Social isolation increases vulnerability to mental health issues and reduces access to family or community assistance.

4.3 Family Dynamics

Traditional joint family systems historically provided support to elderly women, but urbanization, nuclear family structures, and migration have weakened these networks (IIM Bangalore, 2024). Consequently, many elderly women experience feelings of neglect, loneliness, and lack of purpose, which can exacerbate health problems and emotional distress.

5. INSTITUTIONAL AND POLICY INTERVENTIONS

5.1 Government Initiatives

The Indian government has implemented various programs targeting elderly citizens, such as the Indira Gandhi National Old Age Pension Scheme (IGNOAPS) and the National Programme for Health Care of the Elderly (NPHCE). While these initiatives aim to provide financial and healthcare support, implementation challenges, limited coverage, and lack of awareness reduce their effectiveness, especially for elderly women who may lack documentation or access (UNFPA, n.d.).

5.2 Role of Non-Governmental Organizations (NGOs)

NGOs play a vital role in addressing the needs of elderly women by providing healthcare, legal aid, social support, and advocacy for policy reform. Organizations such as HelpAge India and the Agewell Foundation facilitate access to government benefits, promote awareness, and create peer-support programs (UNFPA, n.d.). Community-based interventions by NGOs have been shown to reduce social isolation, improve mental health, and enhance the overall quality of life for elderly women.

RESULTS AND DISCUSSION

1.Demographic Trends

India's elderly population (60+) was 104 million in 2011 (8.6% of the population) and is projected to reach 400 million by 2050 (Census, 2011). Elderly women slightly outnumber men but face higher socio-economic vulnerability, including widowhood and financial dependence (NCBI, 2015). This rapid ageing underscores the need for targeted healthcare, social security, and support, especially in rural and disadvantaged areas.

2. Health Challenges

- Chronic Diseases: Non-communicable diseases such as diabetes, hypertension, and cardiovascular conditions are highly prevalent. LASI data indicate 16.2% of adults aged 60+ have undiagnosed diabetes (Times of India, 2025).
- Geriatric Syndromes: Frailty, falls, urinary incontinence, and osteoporosis are common and often co-occur with chronic diseases.
- Mental Health: Depression and cognitive impairment affect a significant proportion of the elderly population. Up to 20% of elderly Indians experience depressive symptoms, and dementia prevalence is rising (BMC Health Services Research, 2024).

These findings highlight the dual burden of physical and mental health issues in India's elderly population. The coexistence of chronic diseases and geriatric syndromes necessitates integrated care approaches, including routine screenings, rehabilitation, and mental health support.

3. Socio-Economic Challenges

- Economic Dependency: Approximately 70% of elderly Indians rely on family support for daily needs, and only 22% have access to pensions or formal social security schemes (NITI Aayog, 2024).
- Gender Disparities: Elderly women are disproportionately affected due to widowhood, lack of financial independence, and limited access to healthcare (NCBI, 2015).
- Economic vulnerability and gender disparities compound health challenges, limiting the elderly's access to healthcare and social participation. Social policies must address pension coverage, financial inclusion, and gender-specific needs.

4. Healthcare Access and Infrastructure

- Urban-Rural Divide: Urban centers provide relatively better geriatric services, whereas rural areas face shortages of trained professionals and facilities (Emerald Insight, 2024).
- Government Programs: Initiatives such as NPHCE, the establishment of the National Centre for Ageing, and dedicated geriatric OPDs (e.g., Nagpur GMCH serving 31,000+ seniors) demonstrate increasing focus on geriatric care (Times of India, 2025).

While policy initiatives have improved access to geriatric healthcare, gaps in coverage, workforce capacity, and rural outreach remain. Strengthening primary healthcare and integrating geriatric care with mental health and rehabilitation services is critical.

5. Policy and Institutional Insights

- Government programs and institutional

initiatives, including the National Centre for Ageing and state-level geriatric OPDs, have improved awareness and service availability.
- However, implementation challenges, such as inadequate infrastructure, uneven geographic distribution, and limited funding, persist.

7. CONCLUSION

Elderly women in India face a complex set of challenges that include economic dependency, chronic health issues, mental health vulnerabilities, social isolation, systemic discrimination, and inadequate institutional support. Addressing these challenges requires multi-dimensional interventions encompassing policy reforms, community-based support, and healthcare improvements. Effective geriatric care in India requires comprehensive policies, including sustainable financing, workforce training, community-based care models, and monitoring mechanisms to ensure uniform implementation across regions.

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