

Family support related problems of older women living in Below Poverty Line (BPL) families in Lucknow City of Uttar Pradesh, India

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Abstract. The family is considered as the ideal scenario in providing care towards older persons. This is considered as the ideal treatment. It is within Indian ideal where family members are deeply attached towards their older members and leave no stone unturned in catering to their needs. It is the duty of each and every member of the family that they give sufficient time and listen to the needs of their older members. It is quite disturbing to say that because of the disintegration of joint families, a drastic decline in family support has occurred. The objective of the study was to understand the problems of familial support suffered by older women living in Below Poverty Line (BPL) families in Lucknow City of Uttar Pradesh, India. This study is based on primary data, where a diagnostic research approach has been used. Due to the target population being divided into different sub-groups and scattered in various geographical areas, a multi-stage sampling was used. In the first stage, among the 110 wards of the Lucknow, 20 wards were selected, and later in second stage, disproportionate stratified sampling method was used in selecting 10 women. In this manner, a total of 200 older women were selected. The collection of data had been done through the structured interview schedule. Major finding of the study shows that the old women living in BPL families are encountering higher levels of problems related to familial support. They are not receiving the appropriate help and cooperation from their family members.

Keywords: family support, problems, older women, BPL families.

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Introduction

At every stage of their life, older persons feel the need of familial support. However, at present conspicuous absence of such help and support is being witnessed. The older members of the family are facing a lack of sympathy from their kinsmen and their condition is becoming quite pathetic. The first and foremost characteristic of an ideal treatment of older persons in India is that their family members are deeply attached towards them and leave no stone unturned in catering to their needs (Gupta, 1998). This is also one of the positive aspects of the Indian idea of a good family. It is the duty of each and every member of the family that they give sufficient time and listen to the needs of their older members. It is quite disturbing to say that because of the disintegration of joint families, a drastic decline in family support has occurred. It is more prominent in the families who are in the BPL category where there are older members and where there is no proper source of income along with an uncertainty of employment (Lal, 2008).

Current government regulations indicate that the annual income limit for BPL families residing in rural areas is Rs 19884 and for those living in urban areas is Rs 25546. Moreover, if a family does not possess land less than 2 acres, a pukka house, colour T.V., refrigerator and a telephone as well as no proper employment, then such families are placed in BPL category (Ojha & Ojha, 2015). Older people living in BPL families need more family support in old age but at present they get this support negligible due to which their status in the family is of low type. In this regard, many studies have found that they do not get enough family support.

Sigling and Sitopu (2017), conducted an individual study on family support in the independence of older people in daily activities in the Indonesian city of Medan. The study revealed that there was a relationship between family support and daily activities carried out by older people. Most of the older people reported that the family supports them to live their lives with dignity. Thus, in conclusion, it can be said that the better the support of the family to the older member, the more freely they do their daily activities and are happy. Similarly, Sharma (2018) on the status of family support in long-term palliative care of the older persons, further clarified the United Nations survey that 62.1 percent of older people do not get proper care. The survey findings found that 52.4 percent of older people do not get family support. About 65 percent of the older persons reported that their social affiliation with the people is decreasing and their needs are being ignored by the family and society. In the above studies, it has been found that older persons get negligible family support and family members do not give them any importance in the family.

Objectives of the study

- (1) To study the problems of familial support suffered by older women living in BPL families and to study the variables that influence these problems.
- (2) To suggest solutions related to the problems of familial support faced by older women living in BPL families.

Methodology

This study, conducted a quantitative approach, based on primary data which looks at the problems of familial support faced by older women living in BPL families, and probable social work intervention has been suggested on the basis of the finding occurred. Therefore, in this study a diagnostic research design was used. As the universe was divided into different sub groups and scattered in geographical areas, therefore multi stage sampling were used in the first stage among the 110 wards of the Lucknow 20 wards were selected and then after in second stage using disproportionate stratified sampling method 10 women were selected. In this manner, a total of 200 older women were selected. In each word, Tipped Random Number Table has been used to select the desired sample. In this manner, a total of 200 older women were selected. The collection of data had been done through the structured interview schedule. During this study, 16 major aspects had been identified in relation to the issue of familial support and 16 aspects were given using three Point Scale Responses. Following this, absolute scoring was done and a Specially Consolidated Scale was constructed by the researcher, through which an analysis of the respondents' problems related to total familial support had been examined.

To understand and simplify the collected data, statistical tests such as mean deviation and standard deviation had also been carried out. In order to check the reliability of Specially Developed Consolidated Scale, Split Halves Method and Cronbach's Alpha Formula had been used whose value was found to be 0.959 which recognizes well the Consolidated Scale.

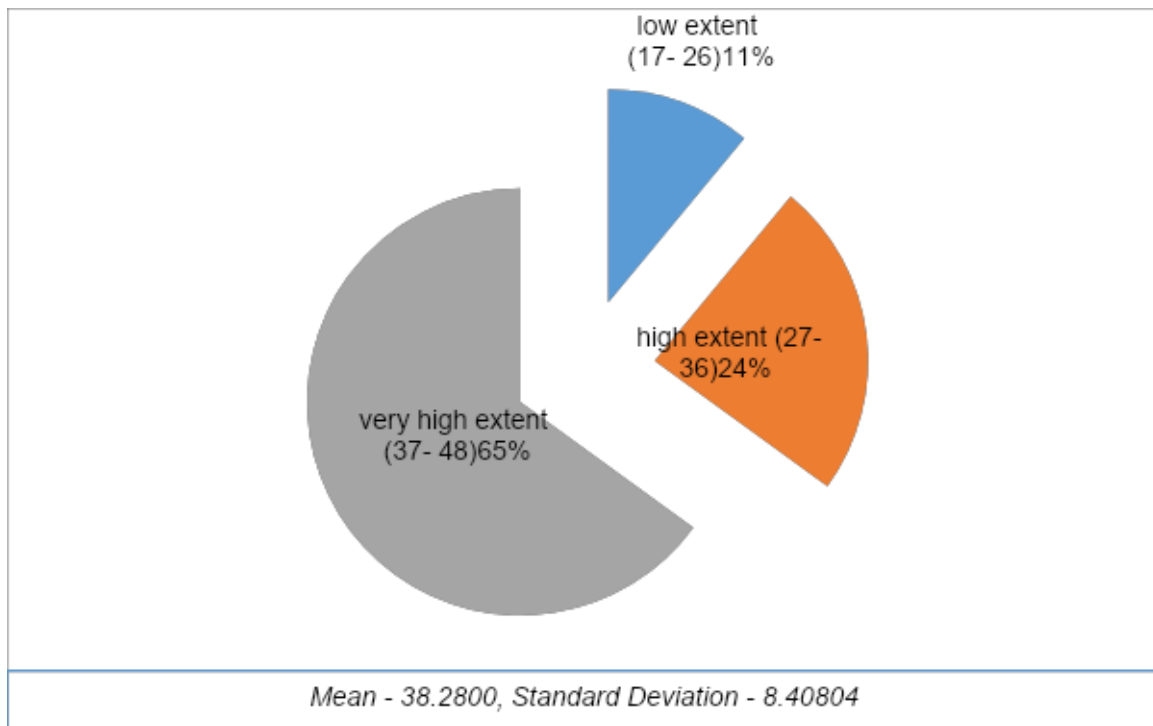
Results and Discussion

Figure 1 clearly reflects approximately two third 65.0 percent respondents were facing problems related to familial support to very high extent whereas, on the other hand, nearly one fourth 24.0 percent of respondents were facing this to high extent and remaining 11.0 percent respondents were facing it to low extent. The statistical test of scores on the scale of family support problems showed that the mean of total family support problems was found to be 38.2800 and the standard deviation was 8.40804. On the basis of the obtained facts, it can be proved that in terms of overall family support problems of the respondents, on an average 38.2800 (\pm 8.40804) scores received to the measurement scale which also falls in the category of problems in family support to very high extent. This situation creates the concern for the old women as it shows the vulnerable situation of them even in the family.

The better familial support given to older members in their old age is culture of India and also displays a healthy condition of old person in the family as well as in the society. Older persons have been receiving a lot of love and proper attention in joint families since ancient times but in present time, joint families have encountered disintegration and due to the ongoing trend of nuclear families, the older members have been encountering a lot of major changes (Ahuja, 2016). The results of the study show that most of the respondents are facing problems related to familial support at a very high level which signifies their pathetic condition. Because of the poor financial condition of the family, the personal needs of the respondents aren't getting fulfilled. The attitude of the family members towards the respondents is becoming careless.

In this way, the respondents are forced to live a life of contempt and insult in their own family. Because of constant negligence and unsatisfactory familial support, the respondents have become hopeless.

Figure 1: Problems of respondents regarding familial support



If we are to look at the findings as represented in table 1, with the first aspect, titled *“The family does not support me in fulfilling personal needs*, at least 59.0% respondents highly agreed with this statement, whereas only 13% respondents agreed, while more than 1/4th, 28% of the respondents did not agree. It is clear from the data collected that most of the respondents’ family members were not helping them in fulfilling their personal needs. The respondents try to fulfil their needs by doing menial jobs.

In relation to the second aspect of table 1, titled *“Due to old age the family members consider me as burden”*, 50% respondents highly agreed with this statement, whereas 1/3rd 33% respondents agreed, and only 17.0% respondents were found not to agree. From the data collected, it is highlighted that most of the respondents are considered a burden on the family due to their old age and because they are dependent on the family for their personal needs. Moreover, due to the poor financial condition of the family, the family members are not taking proper care of the respondents.

In the third aspect of table 1 *“The family members use indelcent language towards me”*, nearly half of 47.0% respondents highly agreed with this statement, approximately 1/4th 22.0% respondents agreed while nearly 1/3rd 31.0% respondents were found not to agree. In this way,

it becomes clear from the results of the study that most of the respondents were of the view that they were subjected to condemnable treatment by their family members which portrays their sorry state in their family.

In the fourth aspect of table 1 titled "*Due to old age family members mistreat me*", nearly half 47% respondents were agreed to this statement, with 26.0% respondents highly agreeing, while more than 1/4th 27% respondents did not agree. It is clear from the study that most of the respondents are subjected to ill treatment by their respective family members. Under the category of ill treatment neglecting the needs of the family members because of the notion that they are a burden on the family due to their old age has been included; by beating them, abusing them or insulting them.

In context of the fifth aspect of the table, titled "*Not getting the love that was given to me by my family members prior to my old age*", nearly 2/3rd 62.0% respondents highly agreed with this statement, while 35.0% respondents agreed, and only 3.0% respondents did not agree. From this study, it can be inferred that most of the respondents were not getting the love used to receive from their kinsmen prior to their old age.

In context of the sixth aspect of table 1 titled "*Family members do not give me the same respect that I used to receive earlier before old age*", approximately 2/3rd 64% respondents highly agreed with this statement, whilst nearly 1/3rd 32.0% respondents agreed, and only 4.0% were found not to agree. Hence, from the result of the study, it can be inferred that most of the respondents were not getting the desired respect from the family members because of old age and that the family were also humiliating them.

In context of the seventh aspect of table 1, titled "*Due to old age family members are developing a negative attitude towards me*", more than 1/3rd 36.0% respondents agreed with this statement, whilst 33.0% respondents highly agreed and nearly 1/3rd 31.0% respondents did not agree. From the data collected, it was found that most of respondents are of the view that the negativistic attitude of the family members towards them was so because of their old age and that is the cause of their pathetic state in the family. Hence, it can be said that because of increasing age, dependence of the respondents on the family members is also increasing. As a result, the attitude of the family members towards them was worsening.

In context of the eighth aspect of the table 1, titled "*Due to old age my position within the family becoming inferior*", nearly half 46% respondents agreed with this statement, whilst approximately 1/3rd 30.0% respondents highly agreed, and 1/4th 24% respondents were found not to agree. Hence, from the data collected, it becomes clear that due to the old age of most of respondents, they are unable to perform their necessary tasks and are completely dependent on their family for the fulfilment of their needs.

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Table 1: Miscellaneous problems of respondents regarding familial support

S. No.	Statements	No Opinion	Disagree	Agree	Highly Agree	Total
1.	<i>The family does not support me in fulfilling personal needs.</i>	00	56	26	118	200
		00.0%	28.0%	13.0%	59.0%	100.0%
2.	<i>Due to old age the family members consider me as burden.</i>	00	34	66	100	200
		00.0%	17.0%	33.0%	50.0%	100.0%
3.	<i>The family members use indelicate language towards me.</i>	00	62	94	44	200
		00.0%	31.0%	47.0%	22.0%	100.0%
4.	<i>Due to old age family members mistreat me</i>	00	54	94	52	200
		00.0%	27.0%	47.0%	26.0%	100.0%
5.	<i>Not getting the love that was given to me by my family members prior to my old age.</i>	00	6	70	124	200
		00.0%	3.0%	35.0%	62.0%	100.0%
6.	<i>Family members do not give me the same respect that I used to receive earlier before old age.</i>	00	8	64	128	200
		00.0	4.0	32.0	64.0	100.0
7.	<i>Due to old age family members are developing a negative attitude towards me.</i>	00	62	72	66	200
		00.0	31.0	36.0	33.0	100.0
8.	<i>Due to old age my position within the family becoming inferior.</i>	00	48	92	60	200
		00.0	24.0	46.0	30.0	100.0
9.	<i>Disobedience shown by family members towards me because of old age</i>	00	22	50	128	200
		00.0	11.0	25.0	64.0	100.0
10.	<i>Due to old age, I am not taken care of in the family as before.</i>	00	4	64	132	200
		00.0	2.0	32.0	66.0	100.0
11.	<i>Due to old age, the family members do not give proper time.</i>	00	2	60	138	200
		00.0	1.0	30.0	69.0	100.0
12.	<i>Due to old age, family members do not share their personal things with me.</i>	00	00	42	158	200
		00.0	00.0	21.0	79.0	100.0
13.	<i>Family members do not take proper care of me in case of illness.</i>	00	14	74	112	200
		00.0	7.0	37.0	56.0	100.0
14.	<i>In the event of an illness, I do not receive any financial aid for medical treatment.</i>	00	30	70	100	200
		00.0	15.0	35.0	50.0	100.0
15.	<i>I am not included in the decisions taken in the family.</i>	00	20	58	122	200
		00.0	10.0	29.0	61.0	100.0
16.	<i>they do not consult me for some special work in family.</i>	00	14	56	130	200
		00.0	7.0	28.0	65.0	100.0

In the Ninth aspect of table 1, titled *“Disobedience shown by family members towards me because of old age”*, nearly 2/3rd 64.0% respondents highly agreed with this statement, whilst nearly 1/4th 25% respondents agree, and only 11.0% respondents did not agree. It is clear from the obtained facts that due to old age, most of the respondents' family members do not listen to them because their rights and duties have also changed along with the decline of physical strength in old age. Before the impact of globalization on families, old aged use to get importance in all the spares of family and household, today most of the family members do not include them in any of their decisions and ignore them.

In the context of the tenth aspect of table 1, titled *“Due to old age, I am not taken care of in the family as before”*, more than 2/3rd 66.0% respondents highly agreed, and 1/3rd 32.0% respondents agreeing with this statement. In this way, from the result of the study it can be inferred that in changing environment, joint families are also changing. Noticeably and at the same time, due to increasing age, respondents feel that they are not being given the same treatment given by family members as they did before.

In the context of the eleventh aspect of table 1, titled *“Due to old age, the family members do not give proper time”*, more than 2/3rd 69% of the respondents highly agreed with this statement, whilst nearly 1/3rd 30% respondents agreed, and the number of respondents disagreeing was nearly zero. Hence, through this study, it becomes quite clear that due to the progressing age of the respondents, the family members are not at all taking interest in giving proper care to the respondents and also because of pathetic family conditions, the family members are busy in their own work.

In the context of the twelfth aspect of table 1, *“Due to old age, family members do not share their personal things with me”*, more than 3/4th 79.0% respondents highly agreed, and nearly 1/4th 21.0% agreed with this statement. Hence, from the study it becomes quite clear that the respondents were feeling neglected in the family because their family members were not at all taking interest in sharing their personal thoughts with them.

In context of the thirteenth aspect of table 1, titled *“The Family members do not take proper care of me in case of illness”*, more than half 56.0% of respondents highly agreed with this statement, whilst 1/3rd 37.0% respondents agreed, and only 7.0% respondents did not agree. Generally, due to physical weakness in old age, older persons become vulnerable to a lot of diseases, and because of this, they need special care and love from their family members, which was normally given to older members in joint families (Sharma, 2015). But on looking at the findings of the study, it becomes clear that the respondents are not getting the desired love and support from the family members.

In the context of the fourteenth aspect of table 1, titled *“In the event of an illness, I do not receive any financial aid for medical treatment”*, half 50.0% respondents highly agreed with this statement, whilst more than 1/3rd 35.0% respondents agreed, and only 15.0% respondents did not agree. Hence, it becomes clear from the study that the respondents do not get the desired financial help from the family members for the treatment of their ailments.

In context of the fifteenth aspect of table 1, titled “*I am not included in the decisions taken in the family*”, nearly 2/3rd 61.0% respondents highly agreed with this statement, while more than 1/4th 29.0% respondents agreed, and only 10.0% respondents did not agree. Normally, the senior most member of the family had the privilege of participating in discussions related to family matters and his decision was considered final. His authority was cordially accepted and respected by the other family members. However, fast forward to present time, due to change in societal and familial relationships, this notion is diminishing. Hence, from the study, it becomes clear that older persons are no longer considered important and are excluded from discussions relating to familial matters.

In context of the sixteenth aspect of table 1, titled “*They dont consult me for some special work in family*”, nearly 2/3rd 65.0% respondents highly agreed with this statement, with more than 1/4th 28.0% agreeing, and only 7.0% respondents disagreeing. The opinion/consultation of the older family members in the family has always been given priority from the point of view of family security. Yet findings from this study indicate that, no opinion is taken from most of the respondents for any particular task in the family.

Table 2: Relation between the marital status and total familial support related problems of respondents

Marital status	Total familial support related problems of respondents			Total
	To some extent (17- 26)	To high extent (27- 36)	To very high extent (37- 48)	
Married	16	28	28	72
	22.2%	38.9%	38.9%	100.0%
Widow	6	20	100	126
	4.8%	15.9%	79.4%	100.0%
Abandoned	0	0	2	2
	.0%	.0%	100.0%	100.0%
Total	22	48	130	200
	11.0%	24.0%	65.0%	100.0%

Through Table 3, it becomes clear that 77.8% respondents suffer from problems related to familial support at both high and medium levels whereas 95.3% widow respondents suffer problems related to familial support at both high and medium levels, while in comparison to this, problems related to familial support are at very high level among abandoned respondents.

It is quite sad to note that abandoned women and widow’s have still not got the desired love and care in the family as well as in the society till date. Through the results collected from the study, it can be concluded that widows and abandoned women, face a lot of problems related to familial support and they are looked upon as being inferior in the family.

Conclusion

It can be conclusively said that the old women living in BPL families are encountering higher levels of problems related to familial support. They do not get appropriate help and cooperation from their family members. Their personal needs are not catered for and since they do not have any contribution in the family income, they are considered a burden on the family. They do not get the love they used get earlier from the family members and the members display unfavourable behaviours towards them especially the use foul language. The family members have a negativistic attitude towards them and do not take proper care of them. Even when the older women are unwell, the family members do not bother to help them or bear their medical expenses. They are excluded in discussions and decisions related to family matters. The members do not ask for their advice in family matters.

Proposed social work Intervention and related suggestions:

Welfare of older persons is known as an important field of social work in which the challenges faced by older persons are studied. The following are the possible suggestions and possible social work intervention:

1. Through social work intervention, problems and adversities faced by old women in BPL families can be solved. In this respect, primary methods of social work such as casework and group work can be used for sensitizing people towards the needs of old women living in BPL families and societies. Apart from this, through massive public awareness, misconceptions related to old widows and women can be eliminated to a large extent.
2. For solving problems related to familial support, family therapy can be used for some particular families. Family therapy is a type of psychological counselling which can help the family members in resolving conflicts arising within the family. This counselling can be given by a psychiatrist, solution-oriented social worker or licensed doctor. Family support problems of older women living in BPL families can be solved through family therapy.
3. For solving financial problems related to older women in the BPL families and tackling the issue of negligence of older women, governmental and NGOs should also intervene. For this task, the secondary method of social work i.e., social welfare administration should be used for framing separate policy-based directives and welfare schemes aimed at ameliorating the status of widows and older women.

The following suggestions have been included on the basis of the results collected:-

1. Since ancient times, discarded women and widows have been through an eye of contempt. Regrettably this still is present where no serious change has been witnessed in this regard. Today, the mentality of the society and people need to be challenged. For this, issues surrounding gender such as women education, and women empowerment must be emphasized upon. Awareness should also increase about widow-remarriage and the act based on this.
2. Steps should also be taken at the governmental level to ameliorate the condition of older women living in BPL families and who are facing problems related to familial

support. For this, there is a need to framing policy-based directives separately for older widows living in BPL families who are facing ill-treatment. Welfare schemes should also be made available for the older widows (Insa & Sivach, 2016).

3. To eradicate the problems related to familial support faced by older women living in BPL families, moral values and ideals should and must be inculcated in children at early age, so that they learn to respect older women and treat them with extreme love and care.
4. Self-employment should be arranged for those older women living in BPL families who are desirous of working and who are also physically strong so that they are able to earn some money for bearing their medical expenses instead of depending on other family members for financial assistance and at the same time, contribute in the family income.

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