



## Elderly Women Health Issues and Societal Perspective

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**Abstract:** *Women's health is an important topic area to guide a woman through the storage of life, as well as knowing the conditions and diseases that may occur. Educating yourself so that you can transition into different phases of life is key to a healthy, happy, and productive life. An ounce of prevention is worth a pound of cure. The economic problems also lead to sociological, psychological, and heart problems among the elderly women in India, more so those from rural and tribal areas. The health index of elderly women has not changed from a lower profile to a higher profile, though technological and advanced research have been carried out in the field of medicine. This paper is an attempt to study and understand the various factors influencing the aged, especially elderly women, during the process of senescence. Much data has been generated as an application to the Indian situation. The problems of ageing women are mostly not due to age but largely due to unfavourable psychosocial environments and changes in life situations.*

**Key Words:** *Elderly women, Health, Research, Physio -Social, Life expectancy, equality.*

### 1. INTRODUCTION:

Women are underemployed all over the world, a very big statement but at the same time a truth that cannot be denied. This is not just the issue of gender equality; this is the challenge for women to accept the system and pattern of the work world and fit themselves into the role with status and knowledge. Ladies' strengthening has been a main impetus to challenge the burdens that ladies have been carrying for quite a while in various parts of their lives. Among the various regions that are being enhanced are ladies' medical problems. With regards to ladies' medical problems, they affect their lives, their families, their work, and their funds. Despite the fact that women have a longer future than men in most countries, this does not mean they are without challenges. As a matter of fact, WHO (World Wellbeing Association) demonstrated that women experience the ill effects of various types of medical problems throughout the entire year compared with men. To assist with countering the various ladies' medical problems, there are a tonne of noble causes, non-benefits, and undertakings that are committed to aiding ladies' medical problems. Ladies' wellbeing alludes to the part of medication that spotlights on the treatment and determination of infections and conditions that influence a lady's physical and profound prosperity. Wellbeing is a significant component that adds to human prosperity and financial development. Right now, women in India need to confront various medical problems, which eventually influence the total economy's result. Tending to the orientation, class, or ethnic variations that exist in medical services and further developing the results can add to the financial addition through the formation of valuable human resources and expanded degrees of reserve funds and speculation.

### 2. RESEARCH METHODOLOGY:

The methodology used for this research is based on observation and secondary data. Also, being a part of the topic of study, the researcher has tried to conduct interviews of women employees in the education sector and especially above middle age, to understand the issues they face as women, employed, and their health and psychological perspectives. The total sample size is 100 respondent women employees selected as per convenience.

#### Objectives:

- To comprehend psychological-social issues concerning the health of female employees in their middle to advanced years.
- To enlist the opinions and views of employed women and retired women regarding health and peaceful living.

#### 2.1. Problem statement & scope:

Employed women play the dual role of homemaker and employee, and society, culture, and belief systems regarding health issues are still not regarded as important as gender equality. Women themselves are ignorant and dependent on the male leader of their home for decision-making on their health, physical fitness, diet etc. Some



diseases like cancer, diabetes, and thyroid, if detected earlier, can be treated. But regular expenditure on health checkups and dietary or physical exercise training is not a trend for women, at least in urban areas. Women with high professional values do practise healthy behaviour, but the percentile is low. Due to the limited time available for data collection for this paper, the scope of the study is limited to secondary data from India and the Maharashtra region, and the researcher has taken observations and views from colleagues and employed women around her. But it well covers the observations and facts in regard to employed and retired women's health issues.

### **3. REVIEW OF LITERATURE:**

For these reasons, Hussain and Singh (1996) concentrated on the change example of resigned and pre-retired employees, comparable to the family framework. For these reasons, 100 pre-resigned and the retirees from joint and family units filled in as an example of the review. Ringer's change design was controlled by every one of the subjects separately. Acquired information was examined by applying the examination of change and the t-test. " Discoveries of the review propose that the pre-resigned and the retirees varied fundamentally in their home and profound change designs. However, the score on the wellbeing and social change of the two gatherings didn't contrast altogether. The two types of families (joint and atomic) also showed significant differences in their change.

Kumar (1997) contemplated pre-retirement plans and post-retirement changes. The review was done in three phases with a precise examination and philosophy. On the principal stage, 150 government representatives working in various divisions situated in Hyderabad city on a purposive example premise talked with each other to figure out their discernment on change before a half-year to one-year of retirement and pre-retirement plans. During the subsequent stage, the example was again utilised in interviews, and these meetings were led by multi-week to fifteen-day olds before their retirement date. This phase of meetings was expected to be aware of the number of representatives that were truly ready to accomplish their pre-retirement plans. They communicated at the main phase of the meetings. For the last check returns to be made to the inhabitants of the above expressed example following one year from the date of the second stage interview, to evaluate their living status. However, the findings revealed that every single respondent agreed that pre-retirement plans are extremely important for adapting to the pre-retirement stage. Around 43.4 percent had given significance to the substantial plans, and the rest had not given a lot of significance. People who organised their plans in a coordinated manner completed more than half of their arrangements, with the remainder having the option to complete 25% to 50% of their pre-retirement plans. Around 30.4 % of the respondents under class "B" prevailed with regards to accomplishing two or three plans and the larger part, i.e., 69.6 %, accomplished retirement without any planning.

This is principally a result of two reasons: (1.) absence of legitimate consciousness of arranging and (2.) absence of legitimate open doors. At the post-retirement stage, it is observed that up to 80% of respondents are experiencing mental despondency as a result of the sudden loss of work and change in the jobs they hold. A large portion of the respondents expressed that after their retirement they lost their importance in the general public and in their families too. They further said that their youngsters' ways of behaving towards them is step by step changing. Anyway, this may not be valid in all cases and due to the unexpected loss of work, spare energy, and a need for legitimate mingling, it is very normal among most retirees who foster a negative disposition towards their relatives. Pre-retirement and post-retirement socialisation is crucial for making a positive resigned life.

The ladies' representatives and those who resigned from business face a move of balance between fun and serious activities because of medical problems. The test of the populace maturing and the need to guarantee the manageability of the general wellbeing and annuity frameworks, most nations in Europe have made strides towards expanding retirement qualification ages. Understanding the effects of a single workforce exit on SOA on their mental well-being is thus extremely important. Until the last ten years. The standard writing in the field zeroed in on concentrating on the retirement of male specialists, with almost no consideration paid to ladies' retirement. Simultaneously, anyway, the rising workforce interest pace of females, along with the way that ladies' life span outperforms that of men, has led to various examinations inspecting the impact of work force exit on ladies' personal wellbeing. (For example, see Bound and Waidmann (2007).) Fawaz and Clark (2009)

With the test of the populace maturing and the need to guarantee the maintainability of the general wellbeing and benefits frameworks, most nations in Europe have made strides towards expanding retirement qualification ages. This, thus, makes understanding the outcomes of a singular labour force's exit on their mental prosperity critical. Until the last ten years, the standard of writing in the field zeroed in on concentrating on the retirement of male specialists, with almost no consideration paid to female specialists' retirement. Notwithstanding, the rising labour force supports the pace of women.



#### 4. FINDINGS AND DATA ANALYSIS:

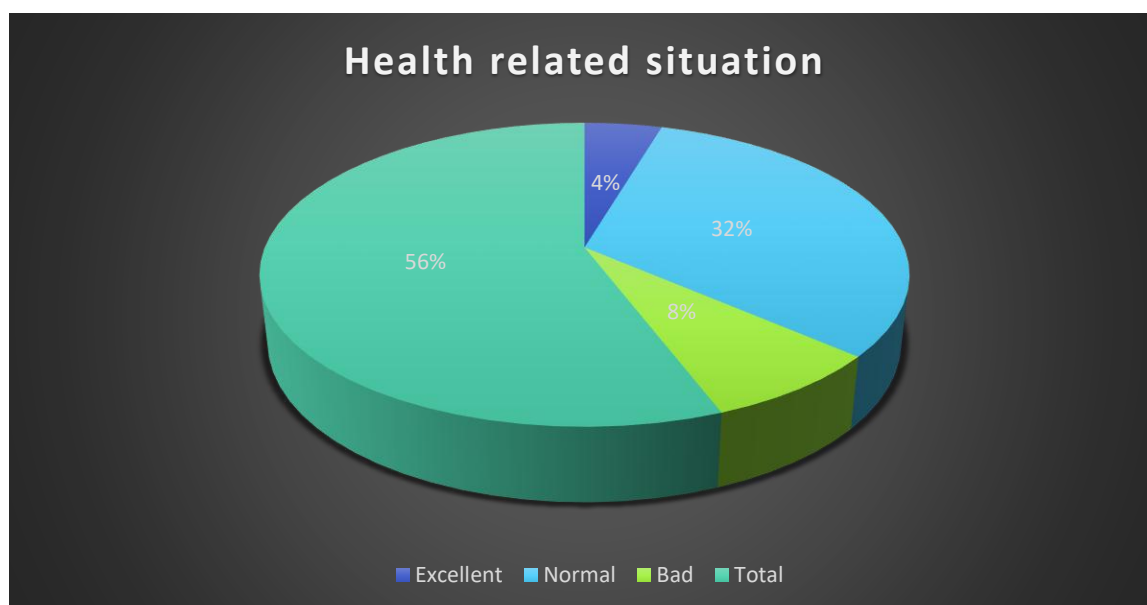
1. The opinion of a respondent person about health-related problems

**Table 1. The opinion of a respondent person in a health-related situation**

Sr. no.	Health Related situation	Total
1.	Excellent	29
2.	Normal	57
3.	Bad	14
	Total	100

Table 1. It shows us that among 100 respondents, the health situation of 29 people is excellent. The health of 57 people is normal, while 14 people have a bad health situation. On the basis of this, out of 100 respondents, the health of 57 respondents is normal.

**Fig 1. Health related situation**



Source: Researcher's primary data

#### Diseases of respondent.

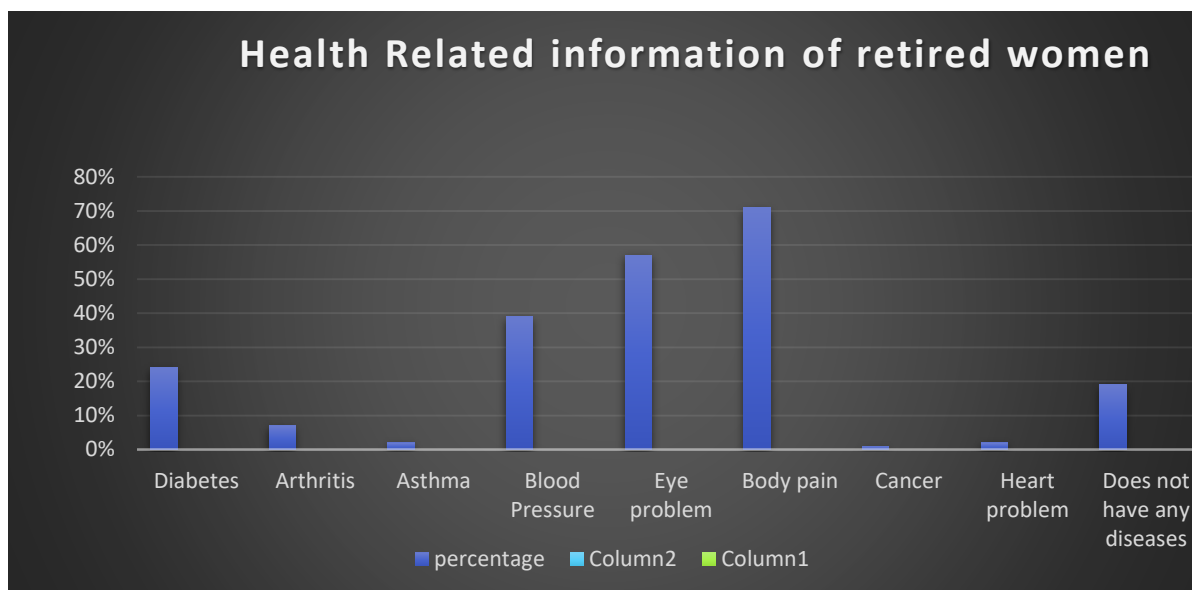
**Table 2. Contains the health related information of retired women.**

Sr. no.	Diseases	Percentage
1	Diabetes	24%
2	Arthritis	7%
3	Asthma	2%
4	Blood pressure	39%
5	Eye problem	57%
6	Body pain	71%
7	Cancer	1%
8	Heart problem	2%
9	Does not have any diseases	19%

Table 2. It shows that of all the respondents (100), 24% had diabetes. 7% of respondents have arthritis, 2% have asthma, and 39% of respondents have high blood pressure. 57% of respondents have eye-related problems, 71% of respondents have body pain, 1% of respondents have cancer, 2% of respondents have heart problems, and 19% of respondents do not have any diseases.

From this, we can see that most of the respondents have body pain, eye problems, high blood pressure and diabetes.

**Fig 2. Health related information of retired women.**



Source: Researchers own survey report.

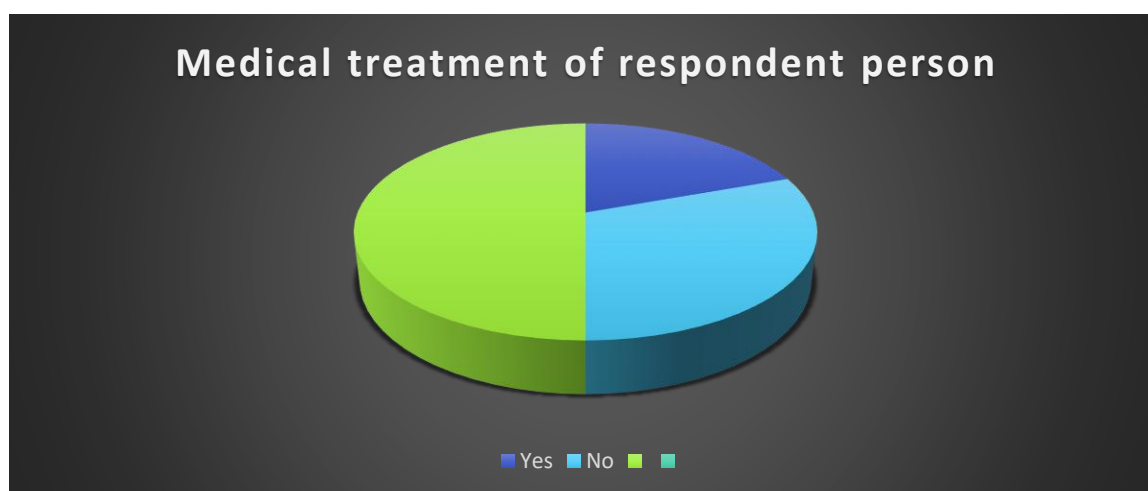
The Medical Treatment of respondent person.

**Table 3. It is noted that whether the medical treatment of respondent is start.**

Sr. no.	Medical Treatment is start	Total
1	Yes	39
2	No	61
	Total	100

From Table 3. It shows that of 100 respondents, medical treatment of 39 respondents has started and the medical treatment of 61 respondents has not started. From this, we can say that 61 respondents are not undergoing any medical treatment.

**Fig 3. Medical treatment of respondent person**



Source: Researcher's primary data

#### 4. CONCLUSION:



With the test of the populace maturing and the need to guarantee the supportability of the general wellbeing and benefits frameworks, most nations in Europe have made strides towards expanding retirement qualification ages. This, thusly, makes understanding the results of a singular work force's exit on their mental prosperity of impressive significance. Until the last ten years, the standard writing in the field zeroed in on concentrating on the retirement of male specialists, with practically no consideration paid to ladies' retirementsimultaneously, be that as it may, the rising labour force support pace of females.

The emotional wellness impacts of retirement have significant ramifications for the well-being of the elderly and may have importance for strategy-making. To elaborate further, evidence of high mystic costs of workforce exit would imply that raising retirement ages would safeguard the close-to-home well-being of female representatives.

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