



Socio-Economic-Demographic profile of elderly population: A study of Chandigarh

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Abstract

India has attained the label of an ageing nation. Increased longevity is not a proof for better health and less suffering as it brings along many ordeals. The aim of the present study is to analyse the social, economic and demographic status of the elderly living in Union Territory of Chandigarh which also happens to be the capital of two important states of Punjab and Haryana. Very few studies on this vulnerable population have been conducted in the city so far although they constitute more than 6 percent of the city's population. It was thought relevant to conduct the current study not only to understand the society in which we live but to also be alerted to certain processes and problems the society may face in times to come in lieu of the transition that is coming in the demography of elderly population. Elders living alone, 'Feminization of ageing', high widowhood, non-working population, disability demanding dual dependency on others are some of the major areas of concern among elderly.

Keywords: elderly, Chandigarh, disability, widowhood, non-workers, dependency

1. Introduction

Ageing is a universal process. For any country, the elderly people are in fact a valuable asset. On one hand, increase in ageing population represents the success of socio-economic development and good public health practices, but on the other hand, it also leads to economic and social crisis due to increased demand for health and welfare services.

A human being broadly passes through various stages in his life - childhood, adolescent age, adult age, middle age and old age. Old age is ideally the period for an individual to take retirement from all worldly duties, sit back and relax and seek the rewards of the efforts and hard work he has put throughout his adolescence, adulthood and middle age. However, ageing usually brings along several health, social and financial problems making it an issue to handle with much sensitivity.

The growing aged population (classified as those above 60 years of age) in the world is evident in demographic transition and has become an issue to draw attention of various disciplines and experts from all walks of life. The study of ageing is so imperative that there is a particular field known as gerontology, named in 1903 by noble prize winner Élie Metchnikoff. Gerontology is the study of the aging and the problems that elderly individuals might encounter. It comes from the Greek words *geron*, meaning "old man", and *-ology*, meaning "the study of". Gerontology is a multidisciplinary field. It involves the scientific study of physical, mental, and social changes that occur in older people. Gerontology, as defined in the Merriam-Webster dictionary, is "the comprehensive study of aging and the problems of the aged." *Social gerontology*, a subfield of gerontology aims to understand social aspects of ageing or growing old (Hooyman and Kiyak, 2011).

"Today, most people, even in the poorest countries are living longer lives. With advances in medicine helping more people to live longer lives, the number of people over the

age of sixty is expected to double by 2050 and will require radical societal change" (WHO, 2015). India is the second most populous country in the world. India has attained the tag of an ageing nation. According to a 2016 report by the ministry for statistics and programme implementation, India has 103.9 million elderly, people above age 60 which form about 8.5 per cent of the population. In terms of absolute numbers, the elderly population has increased from 24.7 million in 1961 to 97.24 million in 2011 as per 2011 census. The elderly population has grown at about 3.5 per cent per year, double the rate for the population as a whole. Help Age India (2014) report shows that while India will be the youngest country in the world by 2020, by 2050, as many as 325 million people, or 20 per cent of the population, will be 'elderly'. While the overall population of India will have grown by about 40 per cent between 2006 and 2050, the report adds, the elderly population will have grown by 270 per cent.

As per Help Age India Report (2018), India is surely undergoing a demographic transition. While eight percent of its population was recorded 60 years and above in 2011 Census, it is expected to increase its share to 12.5 percent and 20 percent by 2026 and 2050 respectively. Older people are living longer; households are getting smaller, causing stress in joint and extended families. Even where they are co-residing - marginalization, isolation and insecurity is felt among older persons due to the generation gap and change in lifestyle. Increase in lifespan also results in chronic functional disabilities creating a need for assistance required by the elderly to manage chores as simple as the activities of daily living. Also with the traditional system of the lady of the house looking after the older family members at home is slowly changing, as the women at home are also participating in economic activities outside home. The older persons largely feel that their children perceive them as a burden. Old Age has never been a problem for India where

a value based, joint family system is supposed to prevail. However, the coping capacities of the younger and older family members are now changing and presently with this kind of an ageing scenario, there is pressure on all aspects of care required for the older persons – be it financial, health or shelter.

The statistics ministry report shows that the old-age dependency ratio, a measure of the pressure on the economically productive section of the population increased from 10.9 per cent in 1961 to 14.2 per cent in 2011. In spite of 41.6 per cent of the elderly population still working, majority of them feel financially insecure although there a significant differences between rural and urban, men and women. A large majority of the elderly i.e 66.4 per cent in the workforce are rural men compared to just 11.3 per cent urban men and formal pension coverage is limited and largely inadequate. A 2016 survey by the Agewell Foundation covering 15,000 rural and urban respondents revealed 65 per cent respondents themselves as either financially dependent or facing a financial crisis. Nearly 80 per cent of those in financial trouble said it was due to medical costs. Meanwhile, a 2015-16 AISCCON survey shows that 60 per cent of elderly people living with their families face abuse and harassment, 66 per cent are either 'very poor' or below the poverty line and 39 per cent have been either abandoned or live alone.

Thus, increased longevity is not an evidence for better health and less suffering but rather and it brings along many other challenges as well.

NSSO (2004) reveals that 65 percent of the aged persons has to depend on others for their day-to-day maintenance. The situation is worse for elderly females as only 14 percent and 17 percent are economically independent in rural and urban areas respectively, while the large proportion are dependent on others - either partially or fully. The condition of elderly males is better as majority of them i.e. 51 and 56 percent in rural and urban areas respectively do not depend on others for their livelihood.

The population Census 2011 data highlight that more than 56% of elderly persons in India live with their spouse and 32% of aged persons live with their children. About 5% of elderly persons live alone while another 4% live with other relations and non-relations. An estimated population of 113377 aged persons are living alone or with spouse only, as per NSSO 60th round report.

Ramamurti (2002) in their study reveals that the joint family, kinship and value system in the past in India ensured emotional help, physical security and social support to the aged but now the situation varies according to the economic condition and the social status of the aged in the family and society. Bakshi and Pathak's study (2016) revealed that the participation of older men in household activities is higher than that of their female counterparts. In addition, widows were found less involved in the household activities than the married older people. As far as financial matters are concerned, the elderly people in possession with property or other similar assets were found to be more confident because of their being financially independent while the financially dependent older adults especially older females were vulnerable and more exposed to face various kinds of abuse.

The phenomenon of elderly in India has been documented by some scholars who bring out the dark side of their lives. Mishra (2011) however, after evaluating the situation of the elderly dependency in different states of India from the perspectives of demography, economy and the changes in the life expectancy concluded that elders are not burdens but assets from social point of view even though they contribute at very low mark to the economy.

A large majority of the studies bring out that older persons are not a homogenous group and the challenges they face in the protection or enjoyment of their human rights vary greatly. This caught the attention of the researcher and made her realize that there are very few studies on elderly in Chandigarh which is the first 'planned' city of India and serves as a capital of two important states, Punjab and Haryana. So a strong urge was felt to assess the status of elderly in this city and to understand their socio-economic and demographic status.

Chandigarh, the City Beautiful was once envisaged by Nehru to be "an expression of the nation's faith in future". The census data on age group revealed that nearly 17 per cent of Chandigarh's total population are in 0- 9 years age group, 17 per cent are adolescent (10-19 years), 72 per cent are adults (18 years and more) and 6.1 percent are elderly (60 years and more). Chandigarh has registered an increase in adult population (18 years and more), working age population and elderly population and a decline in percentage of persons in 0-9 years, adolescent (10-19 years) and youth (15 to 25 years) in 2011 as compared to census 2001. There is a need to note that the city is experiencing demographic transition and the elderly population is growing in the city.

2. Objectives

The aim of the present study is to analyse the social, economic and demographic profile of elderly living in Chandigarh. Very few studies on this vulnerable population in the city have been conducted so far. The current study aims to draw attention to this important segment of society in the planned city, which not only has one of the highest GDP but is also the capital city of two major states. The current study of elderly in Chandigarh will help in understanding the society in which we live and will provide a background to understand the transition that is coming in the demography of population. It will also alert to certain processes and problems the society may face in times to come with increase in elderly population.

3. Research Methodology

Secondary sources of data collection are used for the present study. Attempts have been made to cull out data on different aspects of elderly population in Chandigarh from different sources and put them together at one place. The various parameters on elderly such as age - sex distribution, literacy rate, educational level, marital status, employment, work participation, living arrangement, health status and disability are analysed to reach conclusions. Data on these parameters has been collected from official and research sources, Internet, Census Reports, Statistical Abstracts, NSSO, Journals, books, government reports and other published and unpublished material.

4. Findings and Discussions

Before analysing the status of elderly in Chandigarh in-depth, it is thought pertinent to understand the proportion of elderly in our country.

a) Elderly Population in India

According to Population Census 2011, there are nearly 104 million elderly persons in India; 53 million females and 51 million males. The percentage growth of elderly population in different decades is given below:

Table 1: Percentage Distribution of India's elderly population aged 60 and above (1961-2011)

Years	Persons	Sex		Area	
		Male	Female	Rural	Urban
1961	5.6	5.5	5.8	5.8	4.7
1971	6.0	5.9	6.0	6.2	5.0
1981	6.5	6.4	6.6	6.8	5.4
1991	6.8	6.7	6.8	7.1	5.7
2001	7.4	7.1	7.8	7.7	6.7
2011	8.6	8.2	9.0	8.8	8.1

Source: Census of India, 1961-2011. Note: Assam and J&K were exempted from census 1981 and 1991 respectively.

The above table reveals that in India in 1961, there were 5.6 percent population in the age bracket of 60 years or more. This proportion of elderly persons is ever increasing since 1961 and has reached 8.6 per cent in 2011 in our country. The growth in elderly population is due to the longevity of life attained because of economic well-being, improved medicines and medical facilities and decrease in fertility rates. Further, the data also reveals that although the proportion of elderly has increased in both urban and rural areas, there has been more growth in urban areas (3.4 per cent points) than rural areas (3 per cent points) from 1961 to 2011. However, the difference of percentage share of elderly population in whole population in rural and urban areas is narrowing. In rural areas, the proportion of elderly has increased from 5.8 per cent to 8.8 per cent, while in urban areas it has increased from 4.7 per cent to 8.1 per cent during 1961 to 2011.

Sex wise data reveals that the elderly population for males is slightly lower (8.2%) than that of females (9.0%) i.e elderly females outnumber the elderly males. This is a major concern for policy makers as elderly women are more vulnerable on all fronts compared to elderly men.

b) Socio-Economic and Demographic Profile of Elderly Population in Chandigarh

i) Elderly Population in Chandigarh

Table 2: Aged population in Chandigarh

Age Category	Population
Total Population (all ages)	1055450
Total (60+)	67,078
Percentage of Aged	6.4

Source: Census of India, 2011

Table 2 exhibits that Chandigarh has 67,078 population out of the total 1055450 population in all ages and thus the 60+ form 6.4 percent of the total population in the city.

ii) Elderly Population by residence and sex

Table 3: Population Aged 60 and above out of the total population in Chandigarh by Residence and Sex

		All ages (Total Chd)	60-80+	% of 60-80+
Total	Persons	10,55,450	67078	6.4
	Male	5,80,663	34833	6.0
	Female	4,74,787	32245	6.8
Rural	Persons	28,991	1098	3.8
	Male	17,150	611	3.6
	Female	11,841	487	4.1
Urban	Persons	10,26,459	65980	6.4
	Male	5,63,513	34222	6.1
	Female	4,62,946	31758	6.9

Source: Census of India, 2011

As already said, the elderly in Chandigarh constitute 6.4 percent out of the total population in Chandigarh. The elderly in rural and urban areas constitute 3.8 and 6.4 percentage of the total rural and urban population in Chandigarh respectively. Again elderly males comprise six percent of the total males and elderly females constitute 6.8 percent of the total female population in Chandigarh. Interestingly, the proportion of females in elderly age group out of total females in all age groups in both rural (4.1 %) and urban areas (6.9%) in Chandigarh is higher than the proportion of male elderly out of total males in all age groups in both rural (3.6%) and urban areas (6.1%).

Table 4: Aged Population by Sex and Residence in Chandigarh

Age-group	Sex			Residence	
	Person	Male	Female	Rural person	Urban person
60-80+	67,078 (100.0)	34,833 (51.92)	32,245 (48.07)	1,098 (1.6)	65,980 (98.4)

Source: Census of India, 2011

Table 4 given above reveal sex wise and residence wise distribution of 67078 elderly in Chandigarh. The sex-wise distribution reveals that out of the total 60 plus population in Chandigarh, there are 52 percent male elderly in comparison to 48 percent female elderly. Further, as far as the residence is concerned, since the city is highly urbanized, a large majority (98%) of old age people are urban dwellers. Less than two percent elderly reside in rural areas.

iii) Distribution of Elderly Population in Five year age-group

Table 5: Elderly Population in Five Year Age-group in Chandigarh vis-a-vis India

Age-group	India	Chandigarh
60-64	37663707 (36.3)	25801 (38.5)
65-69	26454983 (25.5)	15839 (23.6)
70-74	19208842 (18.5)	11385 (17.0)
75-79	9232503 (8.9)	6422 (9.6)
80+	11289005 (10.9)	7631 (11.4)
Total	10,38,49,040 (100.0)	67,078 (100.0)

Source: Census of India, 2011

Elderly population in five year age-group reveals that 80.3 per cent of the elderly in India are less than 75 years of age

and 19.7 are in the age group of 75 plus. On the other hand, in Chandigarh, there are 79 per cent elderly population in less than 75 age group and 21 per cent in 75 and higher age group highlighting relatively higher proportion of elderly in the oldest old age group in Chandigarh as compared to the national level. Although the difference between Chandigarh and at the all India level is only by 1.3 per cent points but this gap indicates a lot.

Table 6: Sex-Wise distribution of Elderly Population in Five Year Age-group in Chandigarh

Age-rroup	Total		
	Person	Male	Female
60-64	25801(100.0)	13530(52.4)	12271(47.6)
	38.5	38.8	38.1
65-69	15839(100.0)	8250(52.0)	7589(48.0)
	23.6	23.7	23.5
70-74	11385(100.0)	5998(52.7)	5387(47.3)
	17.0	17.2	16.7
75-79	6422(100.0)	3255(50.7)	3167(49.3)
	9.6	9.3	9.8
80+	7631(100.0)	3800(49.7)	3831(50.3)
	11.4	10.9	11.9
Total	67,078(100.0)	34,833	32,245
	(100.0)	(51.92)	(48.07)

Source: Census of India, 2011

Sex-wise data reveals that the female elderly population is higher in 75+ age group than that of male elderly population in Chandigarh. This shows longer life of women in the oldest age group than men. This phenomenon of ‘feminisation of ageing’ is one of the major challenges that Chandigarh faces like other states in India. Although a little raise is observed in the elderly population of women than that of elderly men, but this gap holds a lot of significance as vulnerabilities and dependence normally grows higher with old age. UN Population Fund, India in its report ‘Caring for our elders: Early response Ageing Report 2017’, notes that the section that deserves maximum attention remains old women, who are more vulnerable than men due to their longer life expectancy and inadequate or no income. “The sex ratio of the elderly has increased from 938 women

to 1,000 men in 1971 to 1,033 in 2011 and is projected to increase to 1,060 by 2026,” the report said, adding that “currently all the states have higher life expectancies at old ages for women than for men.” The report also noted that between 2000 and 2050, the population of 80 plus people would grow 700% “with a predominance of widowed and highly dependent very old women” and so “the special needs of such oldest old women would need significant focus of policy and programmes”.

iv) Literacy and education among elderly

Table 7: Chandigarh: Sex and Area-wise Literacy Rate for Elderly Population

Category	Total Literate	Male Literacy	Female Literacy
Total	50062 (74.6)	29366 (84.3)	20696 (64.2)
Rural	513 (46.7)	382 (62.5)	131 (26.9)
Urban	49549 (75.1)	28984 (84.7)	20565 (64.8)

Source: Census of India, 2011

According to the census 2011, the overall literacy rate of Chandigarh is high i.e. 86.05 percent. Male literacy is 89.99 percent while female literacy stands at 81.19 percent. Talking about the literacy rate of elderly (60+), in UT Chandigarh (given in the above table), it is found that three-fourths of them are literate. The data highlights that literacy rate among males is 84 per cent points as compared to low rate among women (64%) indicating a huge gap between male and female literacy rates. Although more elderly women than men are illiterate both in urban and rural areas, however there is a wide rural-urban gap in literacy as the share of literate women is only 27 percent in rural areas as compared to 65 percent in urban areas indicating relatively high literacy rates in case of elderly women in urban areas than rural areas. The gender gap in literacy is only 19.9 percent points in urban areas as compared to 35.6 percent in rural areas. The data thus confirms that there is a clear cut gender bias in society and in the attitude of people towards education of women, especially in rural areas. The education status of the elderly population in detail is given in the table below:

Table 8: Educational Level of Elderly in Chandigarh

Educational Level	Total		
	Total	Male	Female
Illiterate	17016(25.4)	5467(15.69)	11549(35.8)
Literate without Educational Level	1301(1.9)	531(1.5)	770(2.4)
Below Primary	1498(2.2)	825(2.4)	673(2.1)
Primary	6736(10.0)	3022(8.6)	3714(11.5)
Middle	4965(7.4)	2440(7.0)	2525(7.8)
Secondary	10182(15.2)	6202(17.8)	3976(12.3)
Higher Secondary	2790(4.1)	1731(4.9)	1059(3.2)
Non Technical Diploma or Certificate not equal to degree	1059(1.6)	425(1.2)	634(1.9)
Technical Diploma or certificate not equal to degree	2287(3.4)	1301(3.7)	986(3.0)
Graduate and Above	19627(29.2)	13139(37.7)	6488(20.1)
Unclassified	224(0.3)	91(0.2)	133(0.4)
Total	67078(100.0)	34833(51.92)	32245(48.07)

Source: Census of India, 2011

As already stated, the overall education status of elderly reveals that one-fourth of the 60 plus population in Chandigarh is illiterate. Another two percent are literate without educational qualification. The poor education levels among elderly make them dependent on others and

increases their vulnerability. 30 per cent of aged population have studied upto graduation level or above followed by 15 percent who have attained education upto secondary level only. The table reveals that although the maximum proportion in both males and female elderly had studied

upto graduate or above level but the proportion among males (37%) is higher than females (20%). In fact, not only at the graduation level, the proportion of elderly males educated upto middle, secondary, higher secondary levels is much more than female elderly. On the other hand, there were more elderly females who were literate without educational level or studied upto primary or below primary

levels than elderly males. More females than males had qualified in technical diploma/ non technical diploma or certificate not equal to degree. 35 percent females in comparison to only 16 per cent males were completely illiterate. On the whole, there is a wide gender gap in educational levels and male elderly are relatively more educated than aged females.

v) Matrimonial Status

Table 9: Marital Status of Elderly Population in Chandigarh

Age-group	Total	Marital Status				
		Never married	Currently married	Widowed	Separated	Divorced
Total (60-80+)	67078(100.0)	1502(2.2)	47775(71.2)	17522(26.1)	164(0.2)	115(0.2)

Source: Census of India, 2011

The marital status depicts that majority of elderly are currently married. There are 26 per cent aged who are widowed or those whose spouses are not alive followed by two percent who are single or never married. A negligible proportion of elderly population are separated and divorced. Data reveals high proportion of widowhood, which is a cause of serious concern among the already vulnerable population.

important role in development. More the workforce, greater is the potential for economic development of the city. According to census 2011, the dependency ratio in Chandigarh is nearly 350 per 1000 persons revealing a high proportion of persons whom the persons in economically active age group need to support.

Table 10 describes the participation of elderly population in economic activities in Chandigarh which have been categorized into main workers, marginal workers and non workers. Sex and residence-wise details on workers are also given below:

vi) Employment

Work force participation of the population plays an

Table 10: Status of Work Participation among elderly in Chandigarh

Type of workers / Non workers	Total			Rural			Urban		
	Person	Male	Female	Person	Male	Female	Person	Male	Female
Main Workers	12,839	11041	1798	228	209	19	12611	10832	1779
	19.1	31.7	5.6	20.8	34.2	3.9	19.1	31.7	5.6
Marginal Workers	829	560	269	36	27	9	793	533	260
	1.2	1.6	0.8	3.3	4.4	1.8	1.2	1.6	0.8
Non Workers	53410	23232	30178	834	375	459	52576	22857	29719
	79.6	66.7	93.6	76.0	61.4	94.3	79.7	66.8	93.6
Total Population	67,078	34833	32245	1098	611	487	65980	34222	31758

Source: Census of India, 2011

Out of the total aged population, a vast majority (80%) of elderly comprise non workers or non participants in any economic activity. This presumes the dependency of elderly population on younger population on economic fronts. Various research studies exhibit that the economic dependency acts as major source of lack of confidence, insecurity and uncertainty among many aged people. In comparison to males, women hold a major share in the category of non-workers. Male-female work force participation ratio is clearly in favour of male. Only 19 percent elderly population have been reported as main workers, among which majority are men. It is apparent

from the data that elderly women have low participation in economic activities in comparison to elderly men both in rural and urban areas which makes them economically dependent on others. Furthermore, a very less number of aged persons are reported as marginal workers or seasonal workers.

On the whole, among elderly, 80 percent are non-workers followed by 19 percent main workers and a negligible proportion i.e. one per cent as marginal workers. More females are in the category of non workers.

An attempt was further made to understand the activities in which the non-working elderly population is involved.

Table 11: Activities Carried-out by Non-Working Elderly in Chandigarh

Activities	Total 60+	Rural	Urban
Non workers	53410	834	52576
Students	732 (1.8)	81.0	724 (1.4)
Household duties	17399 (32.6)	225 (27.0)	17174 (32.7)
Dependents	10768 (20.2)	307 (36.8)	10461 (19.9)
Pensioners	21131 (39.6)	209 (25.1)	20922 (39.8)
Rentiers	1010 (1.9)	40 (4.8)	970 (1.8)
Beggars/ vagrants etc.	33 (0.1)	0 (0.00)	33 (0.1)
Others	2337 (4.4)	45 (1.9)	2292 (98.1)
Total	53410	834	52576

Source: Census of India, 2011

The data reveals that 40 per cent of the non-working elderly population are pensioners. Urban inhabitants have a greater share as pensioners as compared to rural dwellers. Nearly 32

percent aged people are engaged in household duties. Furthermore, 20 percent aged people are reported as dependents (more in rural areas), which is a matter of concern.

vii) Health Status

Table 12: Per cent distribution of aged men/ women with illness or otherwise by their perception about current state of health in States /UTs

India/UT	% aged persons reporting illness	aged person with illness own perception about current state of health				aged person without illness own perception about current state of health			
		Excellent /very good	Good /fair	Poor	Total	Excellent/very good	Good /fair	Poor	Total
Men									
Chandigarh	19	10	81	9	100	5	87	8	100
India	31	2	59	37	100	8	73	13	100
Women									
Chandigarh	36	0	75	25	100	8	83	8	100
India	31	2	54	42	100	5	74	17	100

Source: National Sample Survey, 60th Round, (2004)

The above survey reveals that a very high proportion of aged women i.e 36 percent reported illness as compared to only half the proportion (19%) men in Chandigarh. The proportion of females reporting illness was also higher in the city than at the national level but the situation was opposite in case of males. Further, among the elderly persons, it is observed that despite illness, more elderly men perceived to have good/ fair health as compared to their women counterparts.

viii) Disabled Population

Disability or impairment is that state where the effected persons are not only unable to carry out their routine works like other normal persons do; they are instead dependent on others for their survival. The International Classification of Functioning, Disability and Health (ICF) explain the term disability as an umbrella term for impairments, activity limitations and participation restrictions. The nature of disability also plays a significant role as it ascertains the degree of dependency of the effected person on the care givers. The matter of concern here is that old age already amounts to dependency on others, in addition, when the old aged person is disabled; this corresponds to dual

dependency on others. The elderly persons constitute one of the most vulnerable groups, who have more chances of developing chronic disease, infections, and subsequent disabilities (Agrawal, 2016). The table given below gives details on the disabled elderly population in Chandigarh.

Table 13: Proportion of the Disabled Population of elderly in Chandigarh

Age-group	Total		
	Persons	Males	Females
Disabled 60+	2,403(3.58) (100.0)	1,263(3.6) (52.6)	1,140(3.5) (47.4)
Total 60+	67078(100.0)	34833(100.0)	32245(100.0)

Source: Census of India, 2011

Data reveals that approximately four percent of the elderly population is disabled from the total 60 plus population in Chandigarh. Among them, 53 percent are males and 47 percent are females. Further, an effort was made to understand the disabled elderly population (60+) out of the total disabled population (of all ages).

Table 14: Disabled Population of elderly out of the total disabled population by Sex in Chandigarh

Age-group	Total		
	Persons	Males	Females
Total disabled of all ages	14796	8743	6053
60-69	1156 (48.1)	638 (50.5)	518 (45.4)
70-79	722 (30.0)	376 (29.8)	346 (30.4)
80-89	411 (17.1)	204 (16.2)	207 (18.2)
90+	114 (4.7)	45 (3.6)	69 (6.1)
Total	2,403(16.3)	1,263(14.4)	1,140(18.8)

Source: Census of India, 2011

Sixteen percent of the elderly population in Chandigarh is disabled. The proportion is 14 percent for elderly males from the total disabled males of all age groups and 19 percent aged females from the total disabled women of all age groups. Further, sex-wise disability also varies according

to age group i.e. there were higher proportion of disabled females in comparison to elderly males in 70-79,80-89 and 80+ five year age-groups while it was opposite in 60-69 five year age group. This clearly reveals that the proportion of elderly women getting disabled grows higher with age.

Table 15: Disabled population and Marital Status of the Elderly in Chandigarh

Total disabled population	Marital Status				
	Never married	Currently married	Widowed	Separated	Divorced
2403	91(3.8)	1445(60.1)	850(35.4)	11(0.5)	6(0.2)

Source: Census of India, 2011

The marital status of the elderly disabled revealed that 60 percent are married, 35 per cent are widowed, four percent are single and less than one percent are separated or divorced. It seems that life would be tougher for disabled

elderly who are living without spouse at present i.e. for widow/separated/never married/divorced.

Details on the different kinds of disability among elderly in Chandigarh is given below:

Table 16: Types of Disabilities among Elderly by Sex in Chandigarh

Forms of Disability	Total disabled population		
	Person	Male	Female
In-Seeing	389 (16.2)	206 (16.3)	183 (14.5)
In- Hearing	442 (18.4)	233 (18.4)	209 (16.5)
In-Speech	89 (3.7)	48 (3.8)	41 (3.2)
In- Movement	824 (34.3)	422 (33.4)	402 (31.8)
Mental Retardation	33 (1.4)	20 (1.6)	13 (1.0)
Mental illness	73 (3.0)	39 (3.1)	34 (2.7)
Any other	285 (11.9)	155 (12.3)	130 (10.3)
Multiple Disability	268 (11.1)	140 (11.1)	128 (10.1)
Total	2403 (100.0)	1263 (52.6)	1140 (47.4)

Source: Census of India, 2011

The above table categorises the sex wise disabled elderly population according to the nature of impairment i.e. seeing, hearing, speech and movement as well as mental retardation. The data reveals that the share of disabled elderly population is higher among men than women. The data shows that body movement disability is the most common form of disability. The in- movement disability is followed by hearing disability and then by seeing

impairment among elderly. About 11 percent of the elderly also reported mental retardation as a form of disability suffered by them. In all types of disabilities, there is a higher proportion of elderly men than elderly women.

Data reveals that locomotor disability and hearing disability are the most prevalent disabilities among elderly persons. In fact, more than half of the elderly disabled population is reported to be suffering from these two types of disabilities.

ix) Type of living arrangement of Elderly

Table 17: Percent distribution of persons aged 60 years and above by type of living arrangement in select states and India

State/UT	Type of living arrangement				
	Alone	With spouse only	With spouse and other members	With children	With other relations and non-relations
Chandigarh	5.7	18.6	45.6	25.0	4.8
H.P	3.8	10.2	41.3	36.6	5.6
Punjab	2.9	9.5	53.9	30.2	2.5
Haryana	1.0	7.3	58.1	30.5	2.5
All India	5.2	12.0	44.8	32.1	4.4

Source: National Sample Survey Organisation, 60th Round (2004)

Surprisingly, the proportion of persons aged 60 years and above living alone in Chandigarh is very high in comparison to all India level and other northern states like Haryana, Punjab and Himachal Pradesh. Further, the proportion living with spouse is high but those living with children are less in

Chandigarh as compared to all India level and other northern states. Only one- fourth live with their children in comparison to 37 per cent in Himachal Pradesh, 30 percent in Punjab and Haryana.

Table 18: Per cent distribution of aged persons living alone or with spouse only by location of residence of any child /grand child or sibling

UT/India	Elderly living alone/with spouse and location of child /grandchild/sibling				Total
	Within the same building	Within the village/ town	Outside village/ town	Not applicable	
Chandigarh	21.5	26.2	43.8	8.5	100
All India	18.5	36.9	29.4	11.9	100

Source: National Sample Survey Organisation, 60 th Round (2004)

Shockingly, as per NSSO 60th round, among the elderly persons living alone or with spouse, in 22% cases, their child/grandchild/sibling is residing within the same building and 27% cases are such in which their child/grandchild/sibling reside within the same village/town. The proportion of elders where child/grandchild/siblings are living in the same building in Chandigarh is more (22%) as compared to only 19 per cent at the national level.

5) Summary and Conclusion

Ageing is a universal process. India has attained the tag of an ageing nation. Increased longevity is not an evidence for better health and less suffering as it brings along many challenges. The aim of the present study is to analyse the social, economic and demographic profile of elderly living in Union Territory of Chandigarh which also happens to be the capital of two important states of Punjab and Haryana.

Very few studies on this vulnerable population have been conducted in the city so far. It was thought relevant to conduct the current study of elderly in Chandigarh not only to understand the society in which we live but to also be watchful to certain processes and problems the society may face in times to come. Secondary sources of data collection are used for the present study. Attempts have been made to cull out data on different aspects of elderly population in Chandigarh from different sources and put them together at one place. The given socio-economic-demographic profile of the elderly in UT Chandigarh analyses the transition that is coming in the demography of elderly population. Chandigarh has registered an increase in adult, working age and elderly population and a decline in persons in 0-9 years, adolescents and youth in 2011 as compared to census 2001. Chandigarh has 6.4 percent of total elderly population. Since the city is highly urbanized, a large majority (98%) of old age people are urban dwellers. Surprisingly, the proportion of elderly in the 75 + (oldest old) age group is more in Chandigarh than at the national level. Further, the female elderly population is higher in 75+ age group than male elderly population in Chandigarh. This shows longer life of women in the oldest age group than men. Although a little raise is observed in the elderly population of women than that of elderly men, but this gap holds a lot of significance as vulnerabilities and dependence normally grows higher with old age. This phenomenon of 'feminization of ageing' in Chandigarh as in many other states of India brings about a lot of challenges.

There is a wide gender and rural-urban gap in literacy and education among elderly. Marital status exhibits high widowhood. On the work front, most elderly are less indulged in work. Majorly women in both rural and urban areas are found to be unengaged in work which culminates in high dependency on others.

The proportion of persons aged 60 years and above living alone in Chandigarh is very high in comparison with other northern states of India e.g. Haryana, Punjab and Himachal Pradesh. In many cases among the elderly living alone or with spouse only, their child/grandchild/sibling is residing not with them but within the same building.

Most vulnerable are the disabled elderly. Disability also varies according to age group i.e. higher proportion of females in 70+ age group was found to be disabled than elderly males in the same age group. Body movement disability followed by hearing disability and then seeing impairment were the most common forms of disability among elderly. A substantial proportion of the 60+ were mentally retarded. Old age already amounts to dependency on others, in addition, when the old aged person is disabled; this corresponds to dual dependency on others and in today's era, with lack of time among children, this is a matter of great concern.

The above socio-economic basic profile of elderly in Chandigarh brings out key emerging issues on ageing in Chandigarh. Some of them are: relatively higher proportion of elderly in the oldest old age group in Chandigarh as compared to the national level; elderly females outnumbering the elderly males in Chandigarh (feminization of ageing); the proportion of persons aged 60 years and above living alone in the city being very high in comparison to all India level and other northern states like Haryana, Punjab and Himachal Pradesh; the proportion living with spouse is high but those living with children being less in

Chandigarh as compared to all India level and other northern states; the proportion of elders where child/grandchild/sibling are living in the same building but not with them being more in Chandigarh than at the national level; and women reporting illness being higher in Chandigarh than at the all India level. Another issue concerns income security of the elderly population particularly in light of a vast majority of non-workers among elderly especially aged women. Economic dependence makes the already helpless elderly more vulnerable.

With a massive trend towards nuclear families in Chandigarh and lack of social support, a basic issue for current and future elders centres on government versus family responsibility for their support and the current study throws open the need for viable public-private options for management and maintenance of huge numbers of elders, particularly the oldest old, women, disabled and dependents. With higher life expectancies at old ages for women than for men, the 80 plus people would grow with a high proportion of widowed and extremely dependent very old women and so there is a need for planning for special needs of such oldest old women in government's policy and programmes. Further, the coping capacities of the younger and older family members are now changing and presently with this kind of an ageing scenario and changing family structure, there is going to be pressure on all aspects of care required for the older persons – be it financial, health, social support or shelter, which the policy makers need to assess and keep in mind while framing policies for aged in Chandigarh.

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