

Agewell Research & Advocacy Centre

AGEWELL MINORITY STUDY

STUDY ON THE PROBLEMS FACED
BY OLDER PEOPLE
IN MINORITY COMMUNITIES

With special focus on Delhi

September 2009

Agewell Foundation

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Introduction

Agewell is about celebrating old age, about respecting the elderly, about giving them support and about the confidence that growing old is natural and graceful.

Agewell Foundation was established in 1999 as an NGO dedicated towards the welfare of Older Persons across the country. Agewell is bringing about a change in the perception of old age and assist older persons to move towards confidence, respect and mutual caring.

Agewell is a consortium of over 1500 NGOs and 6500 volunteers spread across 540 districts of India, working on improving interaction and transaction between generations and extend support and strength to millions of older persons of India.

India is a multi-ethnic and multi-religious society of 1.1 billion people.

Research & Advocacy Centre at Agewell has been actively surveying, analyzing and reporting on multiple aspects & issues which reflect upon the life of an older person as an individual or as a member of the society in our country. This has been an ongoing exercise by Research & Advocacy Centre since its inception in 1999. Agewell continues to contribute to the citizens of India and its decision makers by highlighting the **Needs & Rights of Older People**.

Minority Parameters in India

With the issues of the safety and well being of the minorities in the country being debated at the international level, Research & Advocacy Centre at Agewell Foundation recently conducted an extensive nationwide survey to study, identify and classify the problems being faced by older persons of the minority communities.

Religious Minority communities	Total Population	(%)
Muslims	13,81,88,240	13.4
Christians	2,40,80,016	2.3
Sikhs	1,92,15,730	1.9
Buddhists	79,55,207	0.8
Jains	42,25,053	0.4
Parasis & others	66,39,626	0.6
Religion not Stated	7,27,588	0.1
Total	20,10,31,460	19.5

The Synopsis

According to the Government of India's population projection, the population in 60 years plus is expected to increase to 98 million by 2011. 19.5% of the total population (i.e. 20,10,31,460) is minority population.

Data also suggests that two-third of elderly live either below the poverty line or marginally over it. Nine out of ten elders are from the unorganized sector and have no social security to cover their basic needs.

Another problem with this segment of population is their access to health care and basic housing. Further, in the wake of urbanization and nuclearization of families, exacerbates the situation of the old as they are not entirely financially independent.

It is important to underline that the problems of the elderly are not uniform as they are not a homogenous group. There are many variations according to state and place of residence. Gender also plays a significant role, as it is projected that there will be more number of old women than men in 2011, with the gap continuing to widen over time.

A critical factor that cuts across the above demographic indicators is religion. The problems of the elderly in minority communities in India are not uniform across religions, given the heterogeneity within the minority community.

An objective of the **Prime Minister's 15 point programme**, *inter alia*, is "improving the conditions of living of minorities by ensuring an appropriate share for them in infrastructure development schemes". The 60+ population in the minority communities is vulnerable to economic and social insecurity. In the light of the above, a research study to assess the conditions of the elderly assumes greater significance.

Agewell Minority Study Research Objective

The broad objective of the study is:

1. To study the problems/issues faced by older people in minority communities

The specific objectives of the Agewell minority study are:

1. To understand the status of elderly people within their community and family.
2. To highlight the concerns of elderly in their community, categorized as:
 - a. Medical/Health related problems
 - b. Financial problems
 - c. Social /Family problems
 - d. Legal Problems
 - e. Security related concerns
 - f. Religious problems
3. Lastly, to assess the status of facilities/services available for the old in the specific area – to understand the existing gap in the services.

Methodology and Sample Design

Agewell conducted interviews by administering semi-structured schedules to collect information /impression from older persons.

For the survey a representative sample of 5000 older persons from Five major minority communities covering both rural and urban areas were interviewed spread across 25 states.

Community	Sample size	Urban	Rural
Muslims	1000	500	500
Christians	1000	500	500
Sikhs	1000	500	500
Buddhists	1000	500	500
Jains	1000	500	500
Total	5000	2500	2500

Sample Units

The sample units were selected based on purposive random sampling. Care has been taken to incorporate the representative views of the elderly in minority communities from five regions across India.

S. No	Type of sample			
	States	No of sample districts	No of sample blocks*	No of respondents
	Region 1 – North India			
1	Uttar Pradesh, Haryana, Punjab, Himachal Pradesh, Uttarakhand, Delhi	20 (Approx.)	40	1000
	Region 2 – South India			
2	Andra Pradesh, Tamilnadu Kerala, Karnataka	20 (Approx.)	40	1000
	Region 3 – East India			
3	West Bengal, Orissa, Assam, Mizoram, Nagaland, Sikkim	20 (Approx.)	40	1000
	Region 4 – West India			
4	Rajasthan, Maharashtra, Gujarat, Goa	20 (Approx.)	40	1000
	Region 5 – Central India			
5	Madhya Pradesh, Bihar Jharkhand, Chhattisgarh	20 (Approx.)	40	1000
	All India Total	100	200	5000

* 2 blocks were selected by Agewell from each district for the study randomly, one from block headquarters and the other from rural area.

Sample Respondents

The populace of 60+ years of minority communities was randomly selected among the minority communities in 4 categories as given under;

- Category 1 : Rural older persons
 1. Rural older women
 2. Rural older men

- Category 2 : Urban Older Persons
 1. Urban older women
 2. Urban Older Men

In each group the target was to include every sections of the society, specifically –

- Retired older persons
- Non-pensioners/labourer farmers
- Literate
- Illiterate
- Financially secure
- BPL family

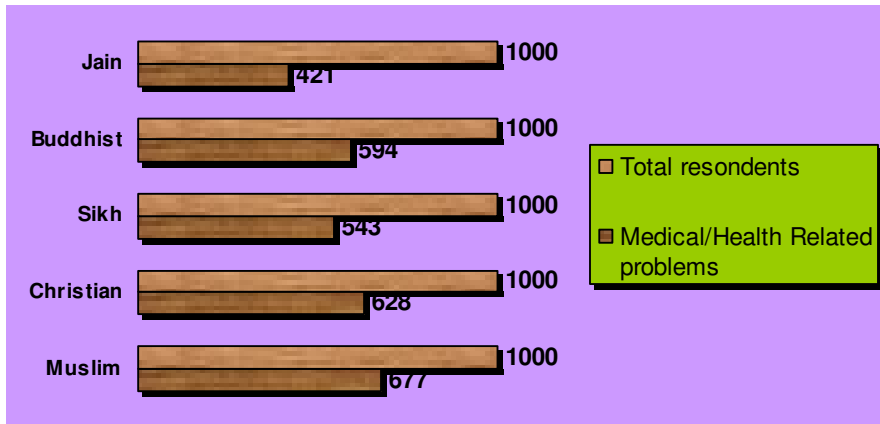
Volunteers' network spread across the country worked as interviewers for the survey. The interviews were conducted during the 1st & 2nd week of August 2009.

Medical/Health related problems of Minority Communities

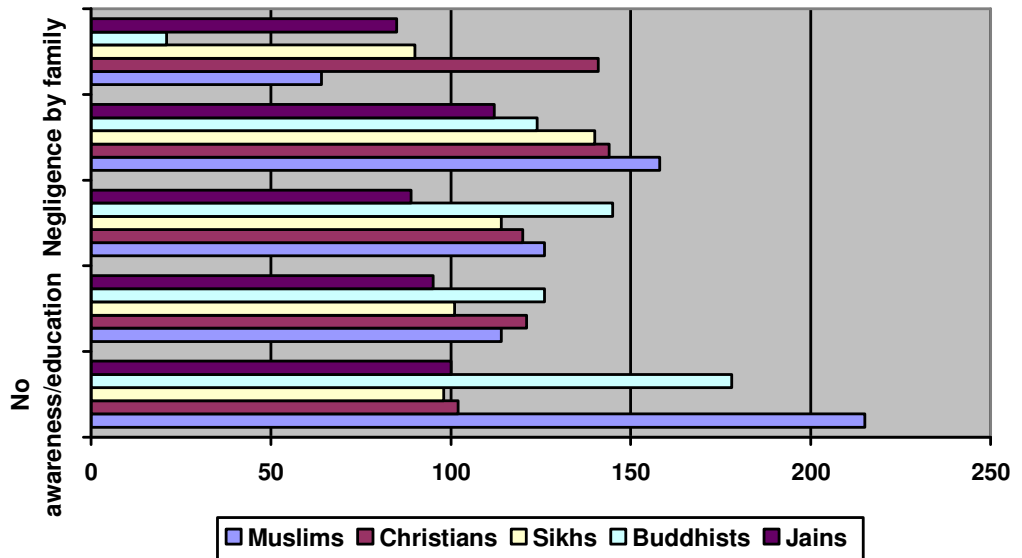
Health related problems are one of the most common problems of older persons of minority communities in India.

Major Findings – National Level

- As per the Agewell minority study report, 58.46% of the respondent elderly were facing medical problems. Most affected community was Muslim community, where 67.7% older persons said that they have medical problems. 62.8% older persons from Christian community also agreed that they are suffering from at least one disease.



- Due to lack of education and public health awareness almost half of total respondents (56.72% older persons) were facing health related problems. Awareness about public health and education was found poor in Muslim community. 2/3rd Muslim community told that they are not aware of the causes of their illness. The other major causes of medical problems were –
 - Non-availability of medical facilities in the area
 - No money for treatment/medication
 - Negligence by self/ family members

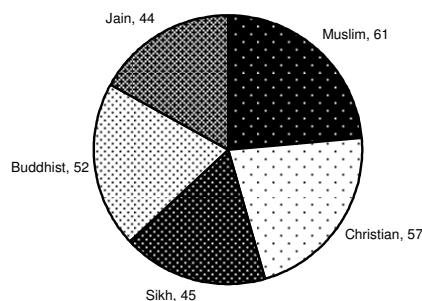


- In comparison to older men health condition of older women was critical. According to survey, 74% of older women from minority community were facing health related problems. Percentage of medically affected women was higher in Muslim community (81%).

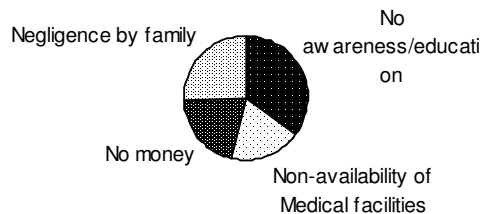
- Health conditions of older persons living in rural areas are grim. Here again lack of education, lack of health awareness, health facilities and money are main reasons for ever worsening health condition of rural older people.

Major Findings – Delhi

- As per the Agewell minority study report, **53.61% of the respondent elderly were facing medical problems. Most affected community was Muslim community, where 61.1% older persons said that they have medical problems. 57.3% older persons from Christian community also agreed that they are suffering from at least one disease.**



- Due to lack of education and public health awareness almost half of total respondents (46.24% older persons) were facing health related problems. Awareness about public health and education was found poor in Muslim community. 1/3rd Muslim community told that they are not aware of the causes of their illness. The other major causes of medical problems were –
 - No money for treatment/medication
 - Negligence by self/ family members
 - Non-availability of medical facilities in the area



- In comparison to older men health condition of older women was critical. According to survey, 64.1% of older women from minority community were facing health related problems. Percentage of medically affected women was higher in Muslim community (71.5%).
- Health conditions of older persons living in rural areas are grim. Here again lack of education, lack of health awareness, health facilities and money are main reasons for ever worsening health condition of rural older people.

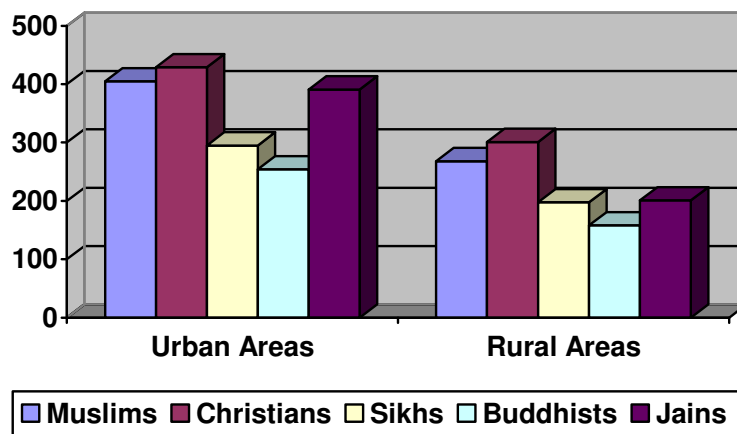
Social /Family problems of Minority Communities

Agewell minority study found that older persons of minority communities in India have been facing different types of social problems. Although people from minority communities prefer to live in areas dominated by their community, but with ever-changing socio-economic structure of the country they have to live in areas dominated by other communities.

Generally, their social interaction is restricted to their community members and they could not adjust themselves in other societies. Loneliness, interpersonal relations, etc are among major social problems.

Major Findings – National Level

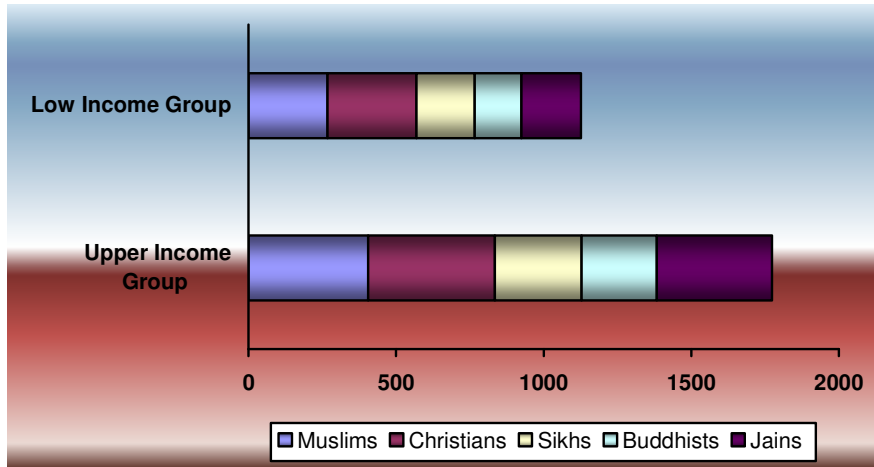
81.5% of urban minority older persons are facing social problems. In rural areas this percentage is quite low as 55.4%.



Study shows that Christian community is most (77%) affected with social/family problems. Migration of their children and less social interaction is among major reasons of their loneliness problems.

Major Findings – Delhi

79.8% of urban minority older persons are facing social problems. In low middle income group areas this percentage is quite low as 59.1%.



Study shows that Christian community is most (81%) affected with social/family problems. Migration of their children and less social interaction is among major reasons of their loneliness problems.

Financial problems of Minority Communities

Financial problems vary from community to community so far as minority communities are concerned. Fastest growing Muslim community is facing more financial problems due to their low educational standard, age-old traditions and religious thinking.

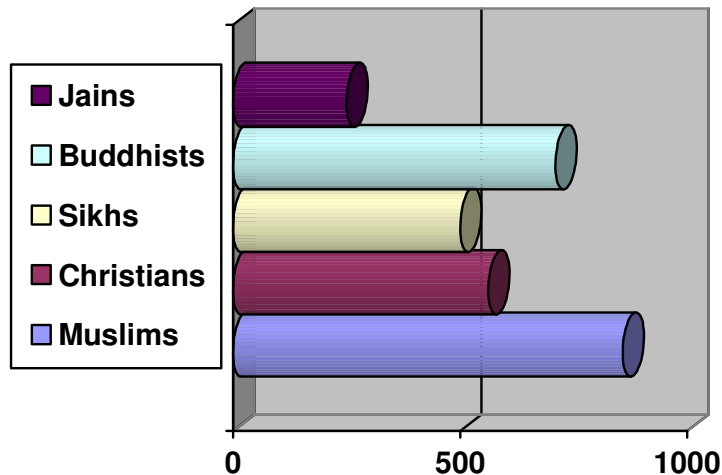
Jain & Christian community has less financial problems in comparison to other community.

Major Findings- National

- When asked about their financial problems, 57.6% of respondents said that they are facing financial problems. In Muslim community alone 85.8% older

persons had no or less regular income. They were dependent on their family members or govt. reliefs like Old Age Pension, etc.

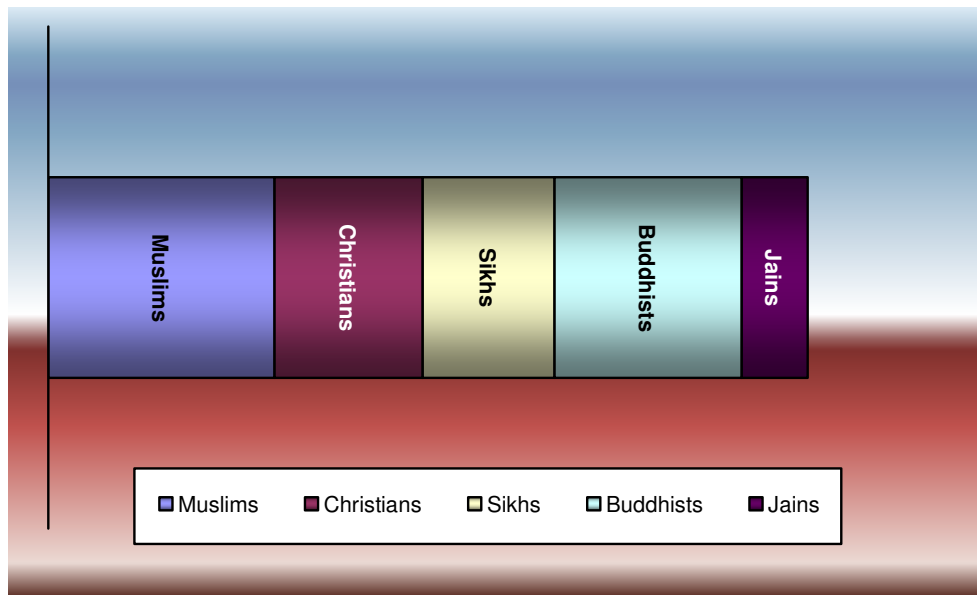
Financial Problems of Minority Communities



- Older Persons from Jain community were found more financially secure. Only 23.1% Jaini older persons agreed that they are in financial crisis.
- Majority (60.9%) of older persons from minority community (74.2% old women and 47.6 old persons) was dependent on their family members and others for their basic daily needs.
- Dependency level in rural areas was found higher (75.3%) among older persons from minority community.
- 53.8% of Rural older persons in minority community (84.2% Muslim, 75.1% Buddhist, 45.2% Christian, 39.5% Sikh & 25.0% Jain) told that they belong to BPL Families.

Major Findings- Delhi

- **When asked about their financial problems, 45% of respondents said that they are facing financial problems. In Muslim community alone 63.8% older persons had no or less regular income. They were dependent on their family members or govt. reliefs like Old Age Pension, etc.**



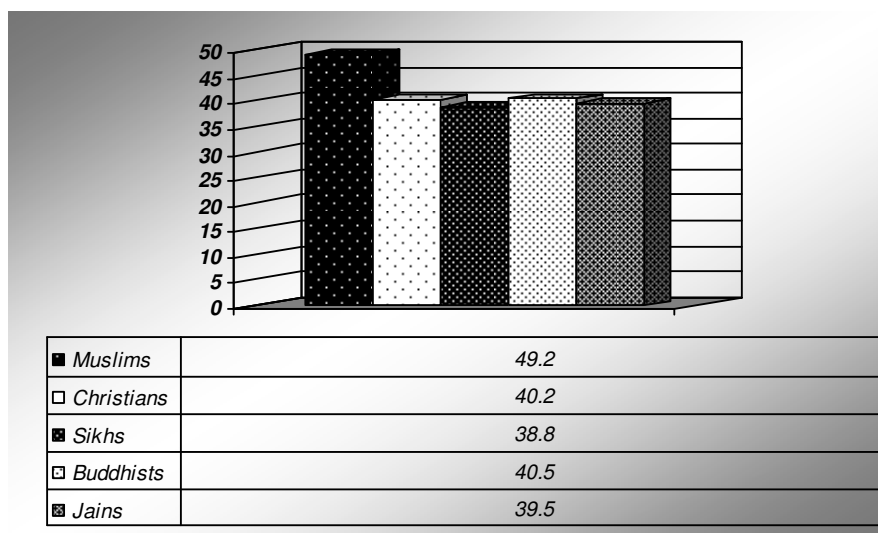
- **Older Persons from Jain community were found more financially secure. Only 19.3% Jaini older persons agreed that they are in financial crisis.**
- **Majority (51.5%) of older persons from minority community (64.6% old women and 37.9 old persons) was dependent on their family members and others for their basic daily needs.**
- **Dependency level in low income group areas was found higher (55.8%) among older persons from minority community.**
- **33.1% of Rural older persons in minority community (54% Muslim, 35.4% Buddhist, 25.2% Christian, 13% Sikh & 12.0% Jain) told that they belong to BPL Families.**

Legal problems of Minority Communities

India has a strong constitution and legal provisions granting various religions and social freedom to its citizen. However, with legal system burdened with litigation, the elderly are at a disadvantage with the minority community were affected.

Major Findings- National

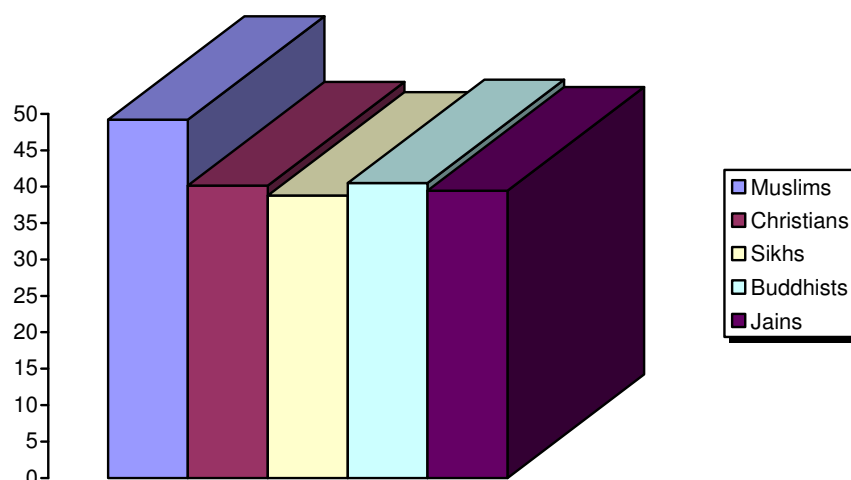
According to survey conducted by Agewell Foundation, 37.6% of the total older persons from minority communities (49.2% Muslim, 20.1% Buddhist, 40.5% Christian 38.8% Sikh & 39.5% Jain) was facing legal problems.



It is also found that almost 95% legal cases of older persons were started years back when they were under 60. Most of the legal problems were related to property/ancestral properties.

Major Findings- Delhi

According to survey conducted by Agewell Foundation, 47.5% of the total older persons from minority communities (59.9% Muslim, 35.5% Buddhist, 45.7% Christian 42.3% Sikh & 41.5% Jain) was facing legal problems.



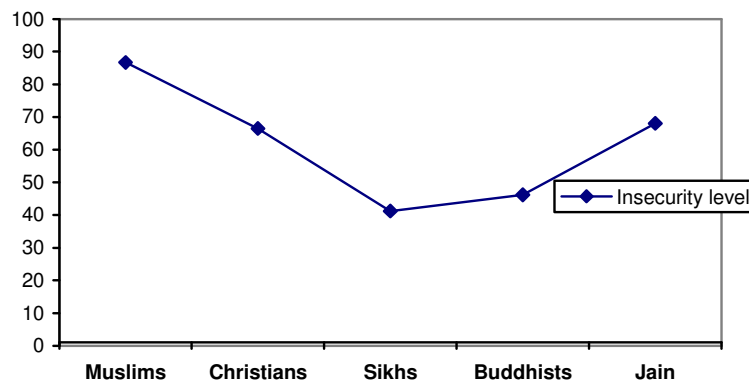
It is also found that almost 87% legal cases of older persons were started years back when they were under 60. Most of the legal problems were related to property/ancestral properties.

Security related Concerns of Minority Communities

Fear of anti-social elements is another main concern of older persons of minority community.

Major Findings – National

61.7% of older persons in minority community (86.7% Muslim, 46.2% Buddhist, 66.5% Christian 41.2% Sikh & 68.1% Jain), responded that they don't feel themselves secure.

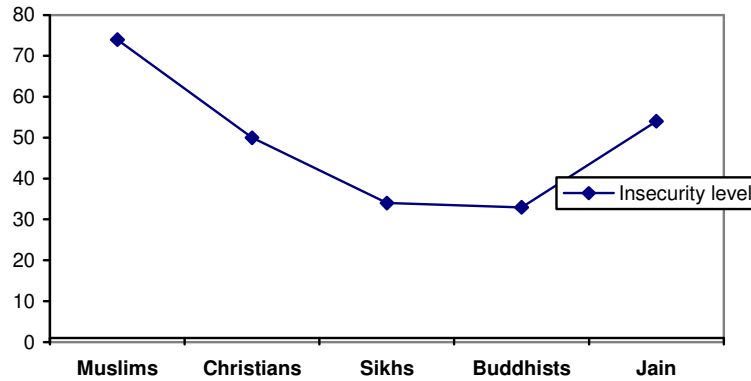


Over all 37.5% of older persons, (75.8% among Muslim & 71.4% among Christian community) want security from religious fanatic groups. This fear factor was found less in rural areas and urban areas dominated by minority communities.

32.2% (73.5% Jain) wanted security of their property from anti-social elements. Fear of anti-social elements was higher in urban older persons.

Major Findings – Delhi

45.4% of older persons in minority community (74.1% Muslim, 33.8% Buddhist, 50% Christian 34% Sikh & 54.5% Jain), responded that they don't feel themselves secure.



Over all 22.0% of older persons, (55.1% among Muslim & 61.1% among Christian community) want security from religious fanatic groups. This fear factor was found less in rural areas and urban areas dominated by minority communities.

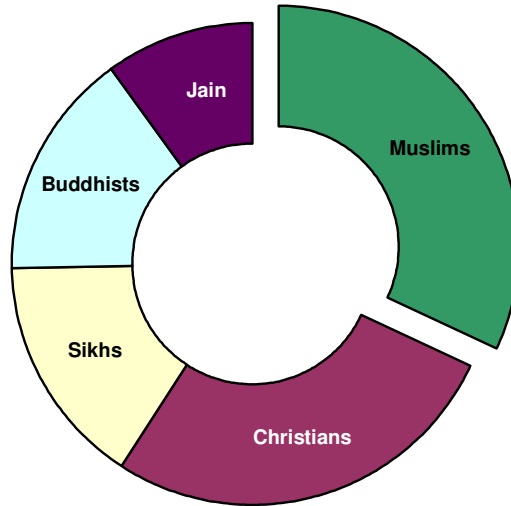
22.5% (45.6% Jain) wanted security of their property from anti-social elements. Fear of anti-social elements was higher in urban older persons.

Religious Problems of Minority Communities

In India people of minority communities across the country have limited opportunities to involve in religious and spiritual activities in comparison to majority community.

Major findings – National

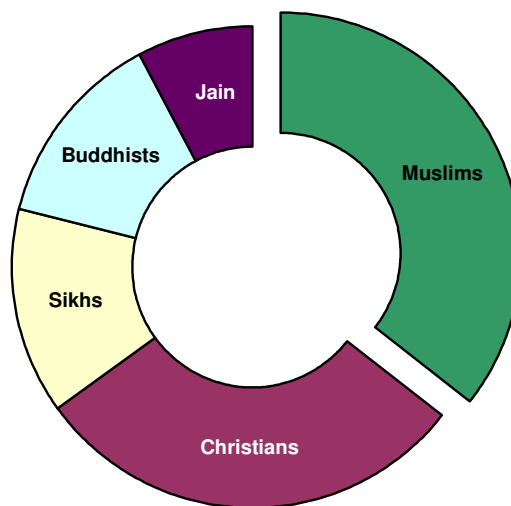
Over all 41.36% of older persons from minority community (**66.1% Muslim, 31.8% Buddhist, 56.3% Christian 32.1% Sikh & 20.5% Jain**), asserted that their religious rights are not protected. People don't show respect towards their religious activities.



47.9% older persons (including 76.2% among Muslim, 70.3% among Christian), living in majority community dominated areas said that they have no religious freedom. They can't celebrate their religious rituals in open.

Major findings – Delhi

Over all 30.6% of older persons from minority community (55% Muslim, 21.2% Buddhist, 45 % Christian 21.5% Sikh & 15.2% Jain), asserted that their religious rights are not protected. People don't show respect towards their religious activities.



37.1% older persons (including 65.5% among Muslim, 60.1% among Christian), living in majority community dominated areas said that they have no religious freedom. They can't celebrate their religious rituals in open.

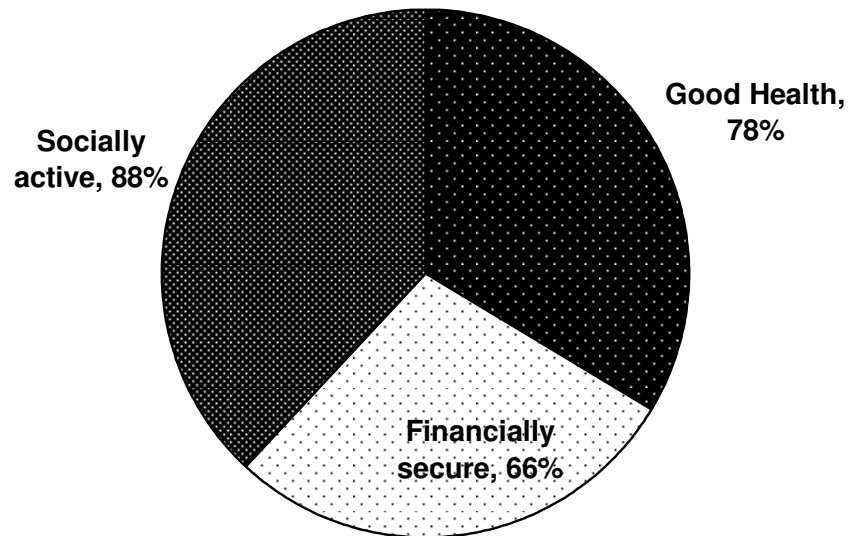
Status of Older Persons in Minority Communities

Status of older persons in India is reaching crisis point due to breaking of joint family system and fast changing socio-economic conditions in the country.

To understand the impact of social changes with status of minority older persons, sample size of 5000 older persons was further classified in 3 age groups i.e. young older persons (60-69 years), old older persons (70-79 years) and senior older persons (above 80 years).

Major findings

- In the age group of 60-69 years **health status of older persons** in all minority communities was found comparatively well. In this age group 78% of older persons ((75.1% Muslim, 76.8% Buddhist, 77% Christian 78.1% Sikh & 81.5% Jain) said that they are enjoying good health.
- In the age groups of 70-69 years & 80 years & above health condition of older persons in minority communities was found critical. In these age groups only 38% & 25% older persons told that they have no major health problems.
- Over all **financial status of older persons** in minority communities in the age group of 60-69 years was found good in comparison to higher age groups. In this age group almost two-third (66%) older persons ((54.1% Muslim, 56.8% Buddhist, 60% Christian 65.1% Sikh & 92.5% Jain) agreed that they are not facing financial crisis.
- Financial condition of older persons in the age groups of 70-69 years & 80 years & above was grim. In these age groups 33% & 21% older persons have no or less money to address their needs.



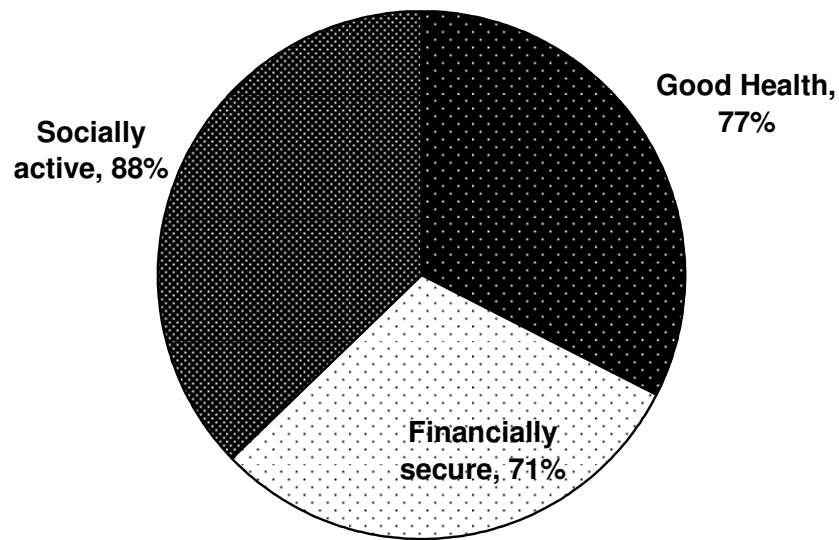
**Status of Older Persons in Minority Communities
(Age group 60-69 years)**

- After retirement from service majority of older persons in minority older persons i.e. 57% are still head of their families. In the age group of 60-69, 88% of older persons ((89.1% Muslim, 86.8% Buddhist, 75% Christians 84.1% Sikh & 79.5% Jain) were found as their families' head.
- Due to their good health and financial conditions, almost 58% older persons in 60-69 years age group were also found socially active. They were associated with at least one social/cultural/welfare organization of their area.
- When asked about some gainful re-employment and voluntary services 85% of older persons in the age group of 60-69 years told that they are looking for such opportunities.

Major findings - Delhi

- **In the age group of 60-69 years health status of older persons in all minority communities was found comparatively well. In this age group 82% of older persons ((77.5% Muslim, 81.2% Buddhist, 79% Christian 81% Sikh & 83.2% Jain) said that they are enjoying good health.**
- **In the age groups of 70-69 years & 80 years & above health condition of older persons in minority communities was found critical. In these age groups only 31% & 24% older persons told that they have no major health problems.**

- Over all financial status of older persons in minority communities in the age group of 60-69 years was found good in comparison to higher age groups. In this age group almost three-fourth (77%) older persons ((64.4% Muslim, 62.1% Buddhist, 70.5% Christian 75% Sikh & 93% Jain) agreed that they are not facing financial crisis.
- Financial condition of older persons in the age groups of 70-69 years & 80 years & above was grim. In these age groups 31% & 19% older persons have no or less money to address their needs.



**Status of Older Persons in Minority Communities
(Age group 60-69 years)**

- After retirement from service majority of older persons in minority older persons i.e. 61% are still head of their families. In the age group of 60-69, 75% of older persons ((79% Muslim, 77% Buddhist, 61% Christians 81% Sikh & 75% Jain) were found as their families' head.
- Due to their good health and financial conditions, almost 56% older persons in 60-69 years age group were also found socially active. They were associated with at least one social/cultural/welfare organization of their area.
- When asked about some gainful re-employment and voluntary services 85% of older persons in the age group of 60-69 years told that they are looking for such opportunities.

Status of Assets ownership in older persons in minority communities

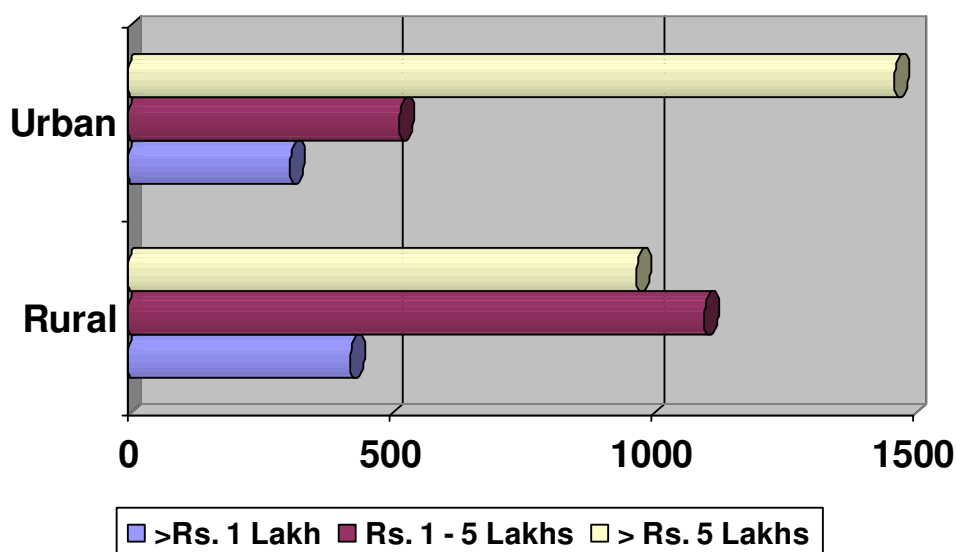
Status of assets ownership among older persons was on an average dismal in rural areas but in urban areas they have good control over assets and properties. Status of amenities & facilities was also not satisfactory in rural areas, whereas in urban areas availability of basic amenities and facilities was not a problem for older persons.

For getting information about assets ownership, their assets & properties like land, house, bullock cart, tractor, scooter, hand pump, electronic items, cars even foreign visits including Haj were included.

Major findings – National

- In rural areas only 60.5% of the surveyed older persons were living in pucca or permanent houses. Where as in urban areas 95% of older persons were living in pucca houses.
- There is a huge gap in the status of household assets and properties of older persons. Majority of (53.4%) older persons had household assets worth below Rs. 5 lakh in rural areas, whereas in urban areas almost two-third of (67.8%) older persons had properties worth > Rs. 5 Lakh.

Status of household assets and properties of older persons in minority communities

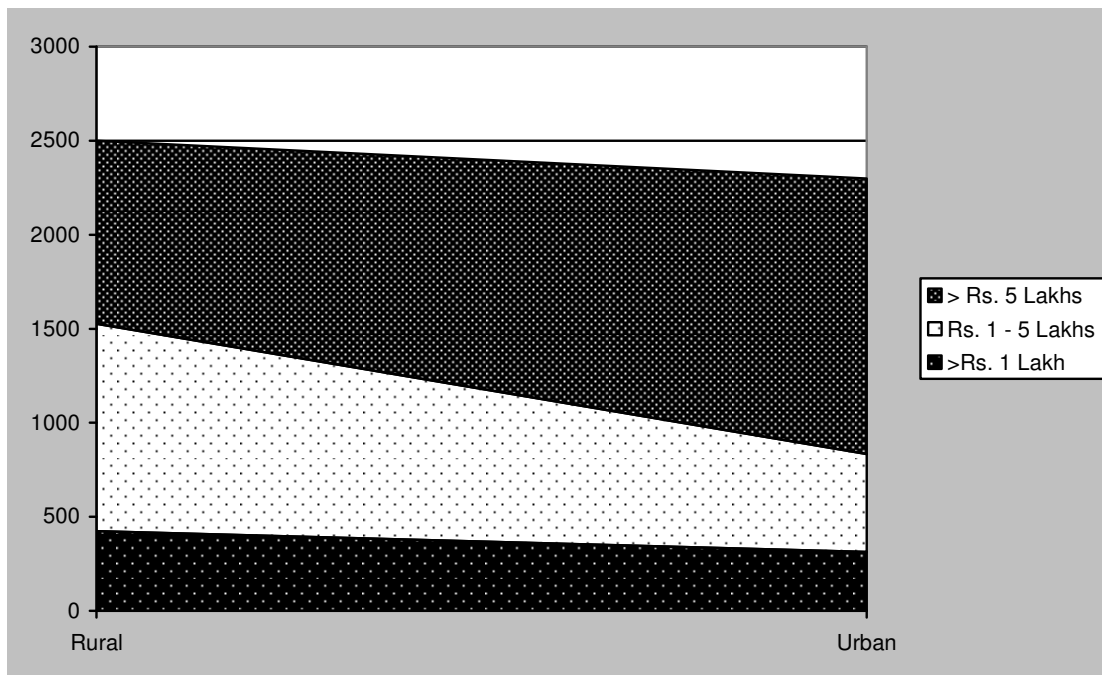


- In rural areas basic amenities /facilities like drinking water at home & electricity were available to only 40.5 % of older persons' families, modern facilities like telephone and TV were accessible to 33.5% older persons' families and banking facility was benefiting only 22.2% of older persons.

Whereas in urban areas status of these facilities was found very well. More than half older persons surveyed had access to banking facilities.

Major findings – Delhi

- In rural areas only 60.5% of the surveyed older persons were living in pucca or permanent houses. Whereas in urban areas 91% of older persons were living in pucca houses.
- There is a huge gap in the status of household assets and properties of older persons. Majority of (52.6%) older persons had household assets worth below Rs. 5 lakh in rural areas, whereas in urban areas almost two-third of (66.1%) older persons had properties worth > Rs. 5 Lakh.



In rural areas basic amenities /facilities like drinking water at home & electricity were available to only 30.5 % of older persons' families, modern facilities like telephone and TV were accessible to 31.5% older persons' families and banking facility was benefiting only 20.2% of older persons. Whereas in urban areas status of these facilities was found very well. More than half older persons surveyed had access to banking facilities.

Agewell Minority Study
Salient Observations & Recommendations

→ Status of older persons in minority communities varies from age-group to age-group. Older persons in the age group of 60-69 years are very much active, physically as well as socially.

This age group has to be given opportunities to involve themselves in social development activities in the area. They should be encouraged to participate in voluntary/ self-help group activities.

→ Older Persons in the largest minority communities, Muslim and Christian's primary concern is security and safety.

There is an urgent need to develop social security net for minority older persons of these communities.

→ Financial backwardness is yet another main concern of Muslim minority older persons.

Efforts should be made to cover all financially weak older persons of Muslim as well as Christian community under government's financial assistance schemes like Old Age Pension, etc.

Agewell Minority Study Road Map

1. Undertake a survey and documentation of NGO's and Civil Society Associations operating within the minority communities
2. Start a specific public advocacy program and campaign for sensitization about the problems of the elderly in minority communities
3. During the campaign, identify regional or district wise peer group of elderly among the minority communities to engage in a dialogue towards larger inter and intra community participation about the problem of the elderly.
4. Start a public communication through these partners to enhance -
 - a) Sensitization towards medical needs of elderly in the minority
 - b) Legal aid counseling for the problem of the elderly within the minority
 - c) Program to engage the well established members of the minority towards fundraising for the elderly for financial aid
 - d) Build constant dialogue between law keepers and minority in the elderly for enhanced safety
 - e) Initiate programs to increase information sharing and enhanced interaction between the elderly within minority communities towards participation in mainstream
 - f) Work towards generating self-worthiness amongst older persons in minority communities.
