SYNOPSIS OF THE THESIS ENTITLED
AGEING OF WOMEN IN KERALA –
AN ANALYSIS OF THEIR CONSUMPTION PATTERN

Introduction

The world population is increasing at an accelerated rate. Two distinct features of global population are ageing of older population and feminisation of ageing. The process whereby the proportion of children in the population decreases, and those of old persons increases is known as ageing. Women comprise 55 per cent of the population of older persons in the world.

In India population of the aged is fast growing. It has increased from 5.6 per cent to 7.7 per cent from 1961 to 2001. Taking India as a whole, the sex ratio is favourable to men but if we take the 60+ population, it is favourable to women. The percentage of males and females in the 60+ population was 5.46 and 5.80 in 1961 and 7.5 and 7.6 in 2001. The share of men in that age group also increased during the same period but, it is less than that of women.

In Kerala as per 2001 census, the percentage of 60+ was 10.48 , and it is 11.7 per cent in 2011 and is projected to be 15.6 per cent in 2021. The elderly women represent the fastest growing age group in the population of Kerala. The threat of population ageing is more severe in Kerala than the rest of the country. Gender dimension of ageing is very significant in Kerala and female population predominates at all the stages of older ages. Population ageing could have profound implication for the economies as well as the societies.

Significance of the Study

Among all the states in India, Kerala achieved a tremendous demographic transition well recognized all over the world .Kerala continues to be the only state where females outnumber males. This particularly aggravates the plight of the elderly women. Women above the age of 60, the marginalized group, have high life expectancy and low income which needs greater attention, concern and care.
Ageing in Kerala is disproportionately a female phenomenon and this gender dimension of ageing is a significant aspect. With the rising demand for medical facilities in old age, high medical cost could impose pressure on government and family budget, as ageing of population could lead to a drastic shift in consumption and saving behaviour not only of the elderly but also of all those whom they depend for their consumption.

Most of the studies on ageing in Kerala were centred on the health aspects, old age homes and socio economic problems of the elderly. But studies on the consumption pattern of elderly women in Kerala have not been undertaken till date. The present study is an attempt in this regard. The focal points of the study are to see how they consume with their own income, pension or family income, or to see how much they depend on their children, relatives or others and to analyze whether their income is sufficient or not to meet their requirements.

**Research Problem**

An overview of available studies revealed the fact that the majority of researches concentrated on the problems faced by the elderly women. A study based on the consumption pattern of elderly women has not been done. So the present study “Ageing of Women in Kerala-An Analysis of Their Consumption Pattern” is undertaken with a view to providing information to fill the existing research gap. It is hoped that such a study would be helpful to the policy makers and planners.

**Objectives of the Study**

1. To analyze the ageing scenario of women in Kerala.
2. To analyze the influence of socio economic and demographic variables on the consumption pattern of the elderly women in the study area.
3. To examine the pattern of consumption of elderly women in the study area.
4. To compare consumption pattern among young old, [60-69] old- old [70-79] and the oldest old [80-89] women living in rural and urban areas.
**Coverage**

Though the study is about the consumption pattern of elderly women in Kerala, three districts from three regions based on the highest concentration of elderly women are considered. Moreover, the study takes into account the consumption pattern of elderly women staying in the households only. The data was collected from November 2009 to December 2010.

**Methodology**

**Sources of Data**

The study uses primary data and secondary data. The primary data for the study have been collected through survey conducted among elderly women in three districts of Kerala with a structured schedule. The secondary data are derived from books, journals, reports, newspapers and online media on the subject.

**Sample Design**

In the selection of sample items, multi-stage random sampling technique is adopted. In the first stage, the entire state is divided into three regions, viz Southern Region, Central Region and Northern Region. Thiruvananthapuram, Kollam, Pathanamthitta and Alappuzha districts constitute the Southern Region. Palakad, Thrissur, Ernakulam and Kottayam comprise of the Central Region and Kasargod, Kannur, Wynad, Kozhikode and Malappuram are included in the Northern Region. In the second stage, three districts, Thiruvananthapuram, Thrissur, and Kozhikode each representing a separate region was selected after considering the concentration of elderly women in the constituent districts of each region (Census 2001). In the third stage, one taluk from each of the selected districts viz, Thiruvananthapuram taluk, Kodungalloor taluk in Thrissur district and Kozhikode taluk was selected on the basis of the highest density of population. (District Census Handbook, 2001). No reliable data about the number of elderly women in the taluks are available. Finally, for the purpose of field investigation, equal number of women (200) was selected on a random basis. For intensive study, elderly women population is divided into three age groups viz,
60-69, 70-79 and 80+. Based on the proportion of elderly women in each of the above categories, the selected sample consists of 57 per cent persons, 30 per cent persons and 13 per cent persons from the 60-69, 70-79 and 80+ categories respectively. Thus the sample used in this study comprises of 600 elderly women. Out of them 50 per cent (300) are selected from rural areas while the remaining 50 per cent (300) are from urban areas.

**Data Management and Analysis**

Several statistical tools have been used for the analysis of the data. SPSS (Statistical Package for Social Science) is employed for analysis of data and testing the level of significance. Apart from simple averages, percentage, t-test, F-test, chi-square test, one way analysis of variance (ANOVA) etc have been used. These statistical tools have effectively conveyed the interrelationship between the variables under study.

**Schematic Arrangement**

The entire study is divided into seven chapters.

- The first chapter gives an introduction to the study, presenting the significance, objectives, methodology, selection of the study area, sampling frame, limitations etc.
- The second chapter reviews the available literature on the subject and identifies the research gap.
- The third chapter provides an overview of ageing of women in Kerala. It delves deep into the problems of the elderly women in the state.
- The fourth chapter deals with socio economic and demographic profile of elderly women in the sample area.
- The fifth chapter is the empirical analysis which is the heart of the present study where the consumption pattern of elderly women in Kerala is analysed in a detailed manner.
- The sixth chapter presents statistical analysis and interpretations of the data.
- The seventh chapter includes findings and suggestions.
Major Findings

Socio Economic and Demographic Conditions

Age wise distribution of the elderly women in the sample reveals that 57 per cent belongs to the age group of 60-69, 30 per cent belongs to the age group of 70-79 and 13 per cent belongs to age group of 80+.

Regarding education, 59 per cent of the elderly women in the sample have primary education, 23 per cent have secondary education, 13 per cent have education up to the degree level, 3 per cent have above degree level of education and 2 per cent are illiterates.

Marital status of the respondents shows that 59.3 per cent are widows, 36 per cent are married, 3 per cent are separated and 1.7 per cent are unmarried.

Occupational structure of the sample shows that 70 per cent of the elderly women fall in the category of housewives, 16 per cent are government pensioners, 11 per cent are employed in the private sector and 3 per cent are self employed.

The study shows that 53.7 per cent of them do not have any assets, 46.3 per cent of the elderly women have some sort of income but the amount is negligible to meet their consumption requirements. It is found that 15.6 per cent have widow pension, 7 per cent have family pension, 5 per cent have old age pension and 3 per cent have agricultural pension.

With regard to diseases they were prone to, arthritis, diabetes, blood pressure, cholesterol etc. are the major ones of the elderly in the sample area. 40.2 per cent have diabetics, 35.65 per cent have arthritis, and 52.5 per cent have cholesterol. For the treatment of the diseases, 34.7 per cent depend on government allopathy, 36.5 per cent on private allopathy and the rest depend on ayurveda and homeopathy. The study also reveals that 65.2 per cent of the elderly have no medical insurance and 34.8 per cent have insurance facilities.

Considering the physical problems and the use of physical aids, 95.2 per cent have vision problems but only 71 per cent use spectacles, 64.6 per cent have dental problems but only 52 per
cent use dentures, 13.8 per cent have problems of locomotion but only 6.7 per cent use walking aids and 5.7 per cent have hearing problem but only 2.8 per cent use hearing aids. This shows the disparity in requirements and the use of physical aids.

**Consumption Pattern of the Elderly Women**

To analyse the consumption pattern of the elderly women in Kerala, the entire consumption items are grouped into two broad categories—food and non food items. The food items are cereals, pulses, vegetables, fruits, oil, meat, fish, egg, processed food, food supplement, soft drinks, coffee, and others. The non food items are clothing, footwear, travel, outing, medical, physical aids, entertainment and others. In the age group of 60-69 and 70-79 category, food consumption is high in rural areas and non food consumption is high in urban areas. Among food items, consumption of food supplements, processed food, soft drinks and others is high in urban areas. In the 80+ category, medical expenses are higher than food expenses.

**Influence of Socio Economic Variables on Consumption Pattern**

Based on the information gathered from the respondents, this study has identified several socio economic factors influencing the consumption pattern of the elderly women. Socio economic variables like age, rural-urban status, family income, district or region, education, occupation and marital status have been chosen to identify the factors influencing the consumption pattern of elderly women in Kerala. While examining these variables it is clear that all these are interrelated.

Age poses one of the most important factors determining consumption pattern of the elderly women. The study highlights that as they progress in age, consumption is reduced, but their consumption with regard to non-food items is increasing especially medical and physical aids. The analysis also shows that there is a significant difference in the consumption of food and non food items among the different age (60-69, 70-79, and 80+) groups in three districts.

Rural-urban variations are visible in the three age groups. High mean scores shows that consumption expenditure is more in urban areas.

Marital status and consumption are also related. The present study makes it clear that
elderly women who are married or living with children have high consumption. Elderly women, whose husbands are alive, spend more on travel and outing compared to widows and those who depend on their children or in-laws.

Women who are educated have more employment opportunity, exposure and opportunities for social security. Hence educational attainment affects the consumption pattern of the elderly women. The study reveals that those who are educated have high consumption.

Occupation, very clearly affects the consumption pattern of the elderly women. Those who had occupation in the past have access to income and pension and are able to consume according to their tastes and preferences.

It is observed that consumption of elderly women depends on the income of the family because most of them do not have any independent sources of income. The elderly women are classified into four categories- poor, lower middle class, middle class and the rich based on income of the family in which they live. The study shows that those who are rich have high levels of consumption.

Regional differences in spending pattern also is analysed. District-wise analysis of the data shows that southern region is found to be more advanced in terms of lifestyle, education, employment, exposure etc. Central region comes second and northern region comes third. The study also shows that there is a regional difference in consumption pattern among elderly women in three districts.

Rural- Urban Differences in Consumption Pattern

The analysis shows that the above mentioned socio economic variables also influence the consumption of the elderly women in both rural and urban areas.

Age wise analysis shows that women in the age group of 60-69 have a tendency to consume more food items in rural areas and non food items in urban areas. A similar trend is visible in the age group of 70-79 also. But the 80+ spend more on non-food items like medicines and physical aids than for food items in both rural and urban areas.
A comparative analysis of the rural urban differences in consumption of different age groups under study shows that the rural elderly women spend comparatively more on food items than their urban counterparts. Urban women in both 60-69 and 70-79 spend significantly more on non food items such as travel, outings, telephone, entertainment, leisure etc. compared to the elderly women in rural areas. Among the 80+ category, medical expenses are high in both rural and urban areas.

The result of the chi-square analysis shows that there is significant difference in the consumption and marital status of elderly women in rural and urban areas. Among the age group of 60-69, more widows are in the urban areas and married elderly women are more in the rural areas. Among the age groups of 70-79 and 80+ widows are more in rural areas and married and separated are high in urban areas.

The study also reveals that there is significant difference in the education and consumption of elderly women in the rural and urban areas. In the age group of 60-69 all are literate. Rural women dominate in primary and secondary level of education. But the urban counterparts have higher level of education ranging from degree to degree and above. But in the 70-79 age groups rural women are either illiterates or just have primary education. But most of the urban ones have secondary, degree and above degree education. In the 80+ category also the above pattern holds right.

Considering the family income of the elderly women, poor and lower middle class are found more in the rural areas and the middle class and the rich are found more in the urban areas of the three age groups in the three districts

The study also shows that there is significant difference in the occupation and consumption of elderly women in the rural and urban areas. Among the age group of 60-69 more women are employed in urban areas but most of the rural women are housewives. In the 70-79 category, the study shows that the percentage of employees are more in rural areas compared to urban counterparts. But in the age group of 80+ the percentage of employees is more in rural areas in
Thiruvananthapuram and Thrissur districts but in Kozhikode all are housewives

There are significant regional differences in the consumption of the age group of 60-69 elderly women in the rural and urban areas of Thiruvananthapuram, Thrissur and Kozhikode districts. The analysis also makes it clear that the urban women consume more compared to the rural ones. In the age group of 70-79 consumption is high in the urban areas of the three districts. In the 80+ category also consumption is high in the urban areas of Thrissur and Kozhikode but it is high in the rural areas of Thiruvananthapuram district, as well.

Conclusion

The study has attempted to assess the consumption pattern of elderly women. The study of the consumption pattern of the aged women in Kerala throws light on many crucial issues. From the study it is clear that consumption is influenced by socio economic variables other than the income of the elderly women. It invites direct attention to the need for income security, reforms of the social security measures for the aged and the increased role of Government, NGOs and the society in taking care of the aged women. The present study illustrates the need to formulate a complete health care programme for the aged women. Action should be taken to alleviate the financial dependence, poor health and impaired functional status of the women. The public response to these issues should be sounded.

References:

2. Census of India 2001
3. District Census Handbook