

The Unequal Lives of Older Women- A Review

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Abstract

The scholarship on gerontology, i.e. the multidisciplinary study of processes and problems of aging, is under-representative of problems of older women as they are the missing pieces of the bigger puzzle for navigating the development of an optimum support system for the growing older population in India and the world. The effectiveness of delivering an adequate support system to this vulnerable group of population is plagued by the deficiency of social welfare systems in accounting for and addressing the problems of deprivations and disadvantages faced by women which accumulates in their old age. This paper is a review of the status of older population in India through a gendered lens in an attempt to present the numerous vulnerabilities faced by older women and the greater exclusion that they suffer from due to faulty social protection mechanism.

1. Introduction

The population throughout the world is ageing more rapidly than ever. According to the United Nations (2018), the global population of 60 years or older, in 2017, was accounted at 962 million, and is expected to double by 2050 with an estimate of 2.1 billion elderly population. The developing world is experiencing the phenomenon on a greater scale and is home to two-thirds of the people aged 60 years or above. India as a developing nation has gained 21 years in life expectancy and has second largest number of older persons in

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the world. The population of 60 years and above in India is projected to increase from 71 million in 2001 to 179 million in 2031, and further to 301 million in 2051 (Rajan et al., 2003). This trend of demographic transition exacerbates income inequality among the population since the elderly are economically vulnerable because of the rise in economic insecurity, decline in health, increase in medical spending, weakening of family system, and low social protection (Mohanty et al., 2023). Estimates based on consumption expenditure indicate that approximately 18 million of the elderly population in India are living below poverty line and further suggest that age dimension should be integrated into social policies for evidence based planning (A. Srivastava and Mohanty, 2012).

Globally, population of elderly women is in majority than elderly men as studies conclude that women live longer than men. This phenomenon of increasing proportion of elderly women is referred as “feminisation of ageing”. The decadal growth rate of female elderly in India is 42.2 as compared to only 28.6 for elderly males which points towards the phenomenon (Gupta, 2013). This trend of increasing female elderly is significant for present and future research because of gender related socio-cultural and economic discrimination which influence women’s course of life and the impacts of which cumulate as they age (Serrao, 2015). In India, poverty, isolation, and weak institutional support pushes elderly women into severe vulnerabilities which necessitate targeted policy responses to improve their well-being considering their deprivations and dependence (Y. Kumar and Bhakat, 2021). Women’s longer life expectancy, higher illiteracy, lower lifetime earnings, and often informal and interrupted work histories pile up on their old age vulnerabilities and as a result gender neutral and poorly targeted social security mechanisms fail to address their unique challenges (Arza, 2017).

2. The Indian Context

India is undergoing a demographic transition resulting from an increasing lifespan and decreasing fertility rates. According to United Nations data, India's median age has been continuously increasing and is expected to continue to rise. The median age was approximately 28.4 years in 2021, and it is anticipated to increase to 38.5 years by 2050. By 2050, the proportion of India's population aged 60 and older is predicted to rise from 10% to 20%, putting pressure on the country's current social assistance system (Mubarish,

2025). As the Indian population ages, the feminization of the elderly increases. From 1950 to 1955, Indian women's life expectancy at age 60 was 0.07 years higher than men's. By 2010–2015, the disparity had quadrupled and is expected to increase to two years by 2050-2055 (Mubarish, 2025). Thus, age- and gender-related issues are projected to become more prevalent owing to demographic transitions, sex-based life expectancy inequalities, and widowhood. Evidence shows that only 26.3% of the elderly population in India is financially independent. Approximately 20.3% are partially dependent on others, while 53.4 % of the older population entirely depends on others for their economic security (Goli et al., 2019). Given the severity of economic insecurity among the elderly population, the presence of a well-designed social protection system becomes non-negotiable.

2.1. Vulnerabilities of Older Women

One of the most notable characteristics of aging is gender-biased longevity, that is, women live longer than men, which results in the “feminization of aging”. This must be considered in policymaking, owing to the vulnerabilities that women face (Serrao, 2015). Since women tend to live longer than men, the rate of widowhood among women is higher (71% women are widows and 29% men are widowers), which has implications for living arrangements, economic status, and health outcomes. Negative health outcomes in elderly women are exacerbated by reproductive morbidities, lack of access to nutrition compared to their male counterparts, and lack of economic independence in early life. However, these outcomes are even more severe in the case of widows due to their increased dependency (Gupta, 2013). Living with the family is the most common arrangement for elderly women (three out of four); however, in terms of the proportion of women living alone, 69% of the total prefer to live alone, showing a greater level of coping ability than older men (Giridhar et al., 2015). Living alone is also a popular preference among elderly women due to the prevalence of abuse (13% rural elderly and 9% urban elderly) after the age of 60. Evidence reveals that a higher proportion of older women are subjected to physical abuse by their daughters-in-law (Giridhar et al., 2015). Older women’s vulnerabilities result not only from post-ageing factors but also from limited power and accumulated deprivations in the life course, which negatively impact their capabilities, behaviour, and security later in life. Women face restrictions in

accessing education, which strips them of the capacity to secure adequate employment, contribute to savings, and access healthcare services, all of which add to their vulnerability in old age (Serrao, 2015). In terms of old-age income security, women must be the centre of concern and policymaking since they have lower labour force participation and withdraw earlier than men. Additionally, they are in a position of disadvantage due to inadequate or null ownership of ancestral properties, rendering them in dire economic status compared to the elderly male population (Bloom et al., 2010). Thus, elderly women are more vulnerable to income inequality due to their major presence in the informal sector, inadequate access and ownership of assets, lower mortality rates, and shorter working life, and therefore require greater social protection.

Given the vulnerabilities and the presence of a gender-biased labour market, contributory pension systems are often ill-equipped to offer old-age protection to women as they are to men. Research indicates that policies that separate pension entitlements from contribution records improve older women's access to pensions (Arza, 2017). Research carried out to assess the effectiveness of non-contributory schemes, such as IGNOAPS, are positive for improving welfare among elderly women by means of increased household consumption; however, evidence also suggests that changes incorporated in program specifications post 2007 may have resulted in weakened poverty and income inequality reduction effects (Unnikrishnan and Imai, 2020). Altogether, while IGNOAPS has been an important source for providing a social security net to vulnerable elderly women, its design and implementation induce inclusion and exclusion errors in targeting and exclude inflation-adjusted compensation, which limits the degree of effectiveness in reducing income inequality among the targeted beneficiaries (Narayana, 2019).

2.2. Social Protection Mechanisms

In India, economic security for the elderly has traditionally been provided by means of extended family and intergenerational support; however, with the trend of growing migration, industrialization, and nuclear family structures, the traditional system of old-age security is becoming insufficient and irrelevant (S. V. Kumar, 2003). Additionally, the traditional system also suffers from gender-biased provision of support, as evidence shows older women, especially widows, being constrained from income, health care, and

emotional support (Gupta, 2013). Consequently, India must strengthen its state-based social protection system, which comprises legal protections, welfare programs, and contributory and non-contributory pension schemes, to address the economic security of its growing older population.

Legal measures form an integral part of the overall social protection mechanism for the elderly population, as they help them acquire appropriate support and protection from the family and stakeholders involved, given the scenario of increasing cases of elder abuse and neglect. The introduction of “The Maintenance and Welfare of Parents and Senior Citizens (MWP) Act, 2007, and its amendment in 2019 reflect the legal efforts to protect the rights of the elderly and provide them maintenance support. The Act enables the provision to secure maintenance support through the tribunal with the powers of a Civil Court under the Act (Issac et al., 2021). The monthly financial cap of Rs.10,000 constrains the provision, along with the traditional stigma of carrying one’s child’s name to court to complain about care and support.

India implements various nationwide and state-specific welfare programs to address the day-to-day discomforts and deprivations of its elderly population. Rajan and Mishra (2020) critically examine welfare programmes and schemes available in the public and private sectors, like the Rashtriya Swasthya Bima Yojana (health insurance) for the unorganized sector workers, LIC Jeevan Akshay (annuity plan), ICICI Lombard Overseas Travel Insurance for unplanned medical and non-medical expenses when the person is abroad, and many more.

Contributory schemes dominate pension policy design in India, where support is based on financing through both employer and employee participation. The pension scheme in India can be divided into the Employees Provident Fund, Employees’ Pension Scheme, Special Provident Funds, and New Pension Scheme (NPS). The NPS is the primary defined contribution scheme for government and organized sector employees since 2004, which mobilizes savings through market-based investments, thereby reducing the fiscal burden of the government. However, the household savings and investment environment in India is not adequately built to achieve optimum outcomes from the design of the NPS (Mallavarapu, 2009). The system of contributory schemes links work and earnings to

benefit entitlements and therefore restricts social protection to a small percentage (7%) of the formal workforce in the organized sector.

Non-contributory schemes are funded by the government, and employees or retirees are not required to pay anything. Key programs include the Indira Gandhi National Old Age Pension Scheme (IGNOAPS) and the Annapurna Scheme. Unnikrishnan and Imai (2020) evaluate the welfare outcomes from the IGNOAPS and reveal that, on one hand, it results in an increased household consumption (5.5% on average) by increasing food and non-food consumption and household assets, and on the other, it reduces the household labour supply and induces no effect on poverty and non-pension income. The Annapurna Scheme is a sub-scheme of the National Social Assistance Program, where an older person covered under the IGNOAPS is entitled to receive 10 kg of food grains per month, free of cost, via the Public Distribution System (PDS). A review of the program (Irudaya Rajan and Mishra 2020) indicates that the implementation has been slow and only 612 million of the 991 million allocated funds have been released.

3. Theories of Aging and Inequality

Cumming and Henry's (1961) disengagement theory is one of the earliest theories in sociology of aging. It argues that aging is not merely a biological process but involves an inevitable, gradual, and universal process of withdrawal from interaction and participation in social roles. The theory makes a case for mutual withdrawal, that is, both the aging individual and society withdraw from each other through mechanisms of declining health or choice on the part of the individual and through retirement norms or reduced opportunities on the part of society. This process of disengagement is viewed as an inevitable part of preparing for the final stage of life and not as a lingering problem that needs to be addressed. The theory propagates the idea that dissatisfaction or psychological stress among the elderly stems from the denial of this withdrawal or disengagement process and not from social rejection.

Hochschild (1975) argues that the disengagement theory is not a universal and inevitable outcome of aging and separates aging and disengagement, stating that aging is a psycho-biological process, whereas disengagement relates purely to a change in social position.

Hochschild views disengagement as a variable process resulting from health status, gender roles, widowhood, and access to meaningful work, and not only from the biological process of aging. His theory works from the perspective of engagement, which works on two dimensions: social and normative, where social engagement relates to actual participation in work, family, and leisure, and normative engagement translates from the meaning an individual imputes to social bonds. Furthermore, the level of social and normative engagement is believed to vary across society types (pre-industrial, industrial, and post-industrial). Thus, Hochschild presents an alternative hypothesis where disengagement theory is falsifiable, and the major variables (social and normative engagement) are independent of each other and aging.

Havighurst (1961) developed the activity theory of ageing, which directly opposes the disengagement theory, arguing that older adults are physically active and healthy because of their social engagement. Research supports the validity of both theories and links them to unique sets of socio-economic and demographic factors; however, these factors have not been discussed in any identifiable study, which leads to the criticism that they are often subjected to (Asiamah, 2017). Social theories of aging have evolved from individual theories of role, disengagement, activity, and continuity to recent theories on modernization, feminism, and interactionism, along with a methodological shift from quantitative to qualitative and now to mixed methods for precision and validity in capturing the aging experience (Rosenberg, 2022).

In disengagement theory, inequality is treated as a by-product of aging rather than a structural concern, whereas cumulative disadvantage theory emphasizes that inequalities observed in later life are the outcome of the systematic accumulation of positive and negative economic and social positions experienced by individuals in their early lives (Crystal et al., 2016). Cumulative inequality theory builds on the idea of cumulative disadvantage and integrates the role of social systems and family dynamics in generating and perpetuating inequalities. It further states that structural factors that create unequal exposures lead to divergent aging experiences and their outcomes (Gilligan et al., 2018). The cumulative disadvantage adds to the vulnerability of elderly women who are already poor, divorced, or victims of abuse and have faced a lifetime of deprivation in nutrition, education, and employment. Thus, greater institutional preparedness is required for

ageing women, who often face years of financial, social and psychological subordination (Serrao, 2015).

Gender relations and patriarchal structures intensify older women's vulnerabilities, as their well-being depends on husbands and sons, and the absence or insufficiency of this support structure dramatically heightens their risk of poverty, especially where state social safety nets are weak (Olmsted, 2005). Chant (2008) explores the thesis of the "feminisation of poverty" and how policies exacerbate the situation instead of alleviating it. This study addresses the failure of social programs to be inclusive of the responsibilities and obligations (unpaid caregiving role) faced by women throughout their lives, most and sometimes all of which are unpaid and unaccounted for, and have a bearing over their careers, lifetime earnings, and social and income security potential. Thus, cumulative gender disadvantages and the failure of pension system design to target vulnerable beneficiaries and make provisions for the "cost of caring" leaves older women with far lower income security and exaggerated income inequality in their later years of life (O'Rand, 1996).

4. The Intersection of Social Protection and Aging

Social protection refers to a system of programs and policies designed to reduce inequality and poverty, manage social risks, and promote the well-being of vulnerable populations. The system comprises three core components: social assistance (social pensions and non-contributory transfers, such as cash benefits), social insurance (contributory schemes and unemployment insurance for protection against specific risks), and labour market policies (wage subsidies and training) (Midgley, 2020). Social protection can be delivered through state mechanisms or informal family and community networks. The growing trend of migration and nuclear families has weakened the structure of familial support, thereby resulting in greater vulnerability for the aging population, especially women who depend on husbands and children (G. Srivastava et al., 2025). Moreover, the intersectionality of social protection and aging complicates the situation for older women as policy frameworks tend to treat older population as a

homogenous group, failing to correct for the greater deprivations that cumulates for the female population and their unequal socio-economic situation which is only amplified.

Welfare economics vouches for social protection as a tool for redistributing resources to improve social welfare and reduce income disparities. Evidence proves that strong social protection institutions aid in times of crisis by absorbing shocks and lowering poverty and inequality, especially in low- and middle-income countries (Carraro and Marzi, 2021). The empirical literature further demonstrates that pensions, health insurance, and cash transfers are important tools for addressing income inequality in old age by helping maintain the standard of living when work income ceases but the extent of the optimum outcome is a product of policy coverage and design (Li et al., 2020). However, social protection designs in India are gender biased and fail to produce similar outcomes for women and men.

The exclusion of compensation accruing to unpaid care work from social protection design is the most consequential source of gender inequality in pension outcomes. Unpaid care, that is childcare, elder care, and domestic labour, constitutes around 10 to 39 percent of GDP at market rates in many countries but yet cumulates to zero pension entitlement under contributory schemes (Addati et al., 2018). The financial costs of this exclusion fall overwhelmingly on them and are compounding in nature resulting from opportunity costs in the form of forgone advancement in career and wage rates, and the long-term cost of forgone pension contributions that cannot easily be recuperated upon labour market re-entry (Femmes, 2015). Thus, women who interrupt careers for caregiving face a kind of penalty upon return to work in form of reduced hours and lower wages which further diminishes the capacity to rebuild pension entitlements in the later years of their working lives. Germany (2024) presents an outstanding example of accommodating the unpaid care economy by making considerations for child-rearing period and short-time employment under its Pension law which helps to strengthen the women's pension rights and can be followed by the developing countries to converge the income gap of its older men and women.

In most countries, women are less likely to receive pensions owing to gendered labour markets and life course deprivations in education, health, and opportunities. The lower rates of pension coverage are not accidental but are the predictable outcome of systems

that designates male members as breadwinner and assumes continuous, full-time, formal employment as the basis for social protection entitlement. The fundamental components of social protection design create gender pension gaps and lead to greater inequality among older women. For example, stronger links between contributions and entitlements cause greater penalties for women, and excluding compensation for unpaid care entails costs in the form of financial obligations, lost opportunities, and foregone wages (Femmes, 2015). Therefore, non-contributory social pensions are becoming popular pension policy tools in lower- and middle-income countries attempting to achieve universal coverage. Universal pension systems combining social pensions and contributory pensions have been developed in Argentina, Belarus, Botswana, Cabo Verde, China, Georgia, Kenya, Kyrgyzstan, Lesotho, Maldives, Mauritius, Mongolia, Namibia, Seychelles, South Africa, Swaziland, Timor-Leste, Trinidad and Tobago, Ukraine, Uruguay, Uzbekistan and Tanzania (Ortiz and Juergens, 2019). Evidence from Nordic countries also show that the gap in gender pension is substantially lower in Denmark and Iceland where a greater proportion of the total pension is derived from non-contributory benefits as compared to the other Nordic countries (Andersson, 2023). However, such cross-country evidence is still scarce, and more studies need to be conducted to study and navigate the persisting income inequality among elderly women, especially in developing countries like India.

5. Conclusion

The literature collectively establishes that population aging in India builds a status of income inequality among the elderly and due to a lifetime of deprivations faced by women, they face an even more intense degree of income inequality (Rajan et al., 2003; Srivastava & Mohanty, 2012; Mohanty et al., 2023). Thus, feminisation of aging is a concept of growing importance as a result of gendered inequalities in education, employment and negligence of the unpaid care economy. Survey across the literature on Social Protection System in India reveals that the majority of old age pension schemes cater to old-age care and protection for organised sector employees dominated by male beneficiaries, whereas the female elderly make up for the vulnerable population group due to poorly targeted schemes, and designs dominated by contributory pension-system

(Gupta, 2013; Serrao, 2015; Arza, 2017). Empirical evidence seldom discusses the distributional outcome of vulnerable groups especially older women (Beramendi, 2007; Priyadarshee & Hossain, 2010; Aiyar & Kapur, 2019) but the limited evidence reveals that non-contributory schemes like direct cash transfers can smoothen income inequality among elderly women (Li et al., 2020; Unnikrishnan & Imai, 2020). The overall situation of inequality provides numerous opportunities for future empirical research on socio-economic inequalities suffered by older women in India and the world. For now, the government must focus on methods to incorporate the economic vulnerabilities of older women in their research and policy designs, along with focusing on minimizing targeting errors in the non-contributory pension schemes to enable welfare delivery to the last mile.

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