Asian Journal of Home Science (June, 2008) Vol. 3 (1): 90-93

## A Case Study:

## REACTIONS AND BURDEN OF CAREGIVERS TO THE AGED IN WESTERN RAJASTHAN, INDIA

KUNJAN TRIVEDI AND SHWETA BOHRA

See end of the article for authors' affiliations

## Correspondence to : **KUNJAN TRIVEDI**

Department of Home Science, Faculty of Science, Jai Narain Vyas University, JODHPUR (RAJASTHAN) INDIA

Accepted: March, 2008

## **ABSTRACT**

The quality of life of the aged, depends, to a large extent on their position and the care they receive within the family. Family care of the aged has been corner stone in Indian societies though of late, this task of caregiving is increasingly becoming difficult. Caregivers' role has both an emotional and practical impact on the member providing the care. The social positioning, geographical location and gender etc. are some of the factors that mediate the needs, impact and feelings of the caregivers. An explorative study on the reactions and burden felt by the male and female caregivers of the aged was undertaken in the urban and rural areas of Western Rajasthan. Data was collected using two standardized questionnaire and results were analyzed using percentage and 't' values and are presented in tabular and graphical format. Reviewed literature is used to discuss the results.

Key words: Caregiver, Careseeker, Reaction, Burden

The aging process is a biological reality, which has its own dynamics; largely beyond human control. It is a fact for most of the aged that the physical, mental, economic and social conditions decline gradually making them unable to take care of themselves and turning them into care seekers who are increasingly dependent on their caregivers. Caregivers are people who take care of aged people, most often parents or spouses who are ill or disabled and need help in completing their basic daily tasks.

In India the family model of care of the aged is prevalent. Mostly spouses, children and friends take care of the aged. Typically the entire family is not directly involved in providing care, rather, a single, principal caregiver, has the responsibility. By and large women provide the care, though men, particularly husbands whose wives are incapacitated, often assume major burden of care giving responsibilities. But with time, like other social and familial structures and practices, a great change is taking place in home based care of the aged (Dhooper, 2004).

Instead of multilayered family of yore, in today's nuclear or extended families there are fewer members to share the burden of the care of the aged. The caregivers, usually female members, are overworked, and bored with the redundancy of the tasks. The old are changing too, and so is their care. Today they have become demanding of all modern amenities, involved and desirous of attractive life styles, fun and frolic and have become self centered,

creating a wider bridge between generations and their care is becoming more of a task than an honour. The young family members are unable and unwilling to provide care to the elderly (Prasad and Sonar, 2004) and therefore the care giving of the aged of the family is becoming not only economically difficult but socio emotionally too.

The situation in rural area is assumed to contrasts with what is happening in the cities. It is assumed that clashes between generations that distress the old in the cities are taken in their stride as natural by their rural counterparts and hence many of the problems facing the urban elderly might not exist for the villagers and rural caregivers are all a satisfied lot.

Caregivers are individuals who, because of their social positioning, geographical location, cultural compulsions and gender may vary in their needs and reactions to the rigors of the caring tasks and responsibilities of special importance is the fact that men and women who care for the elderly specifically the sick or disabled elderly differ in their type of need (Lebowitz, 1985). The principal need for women caregivers is respite or time for themselves. A time off for work, education, relaxation or some such activities is what they need the most. Men on other hand report the need for skill and training in providing personal care and in household management tasks such as cooking, cleaning and laundry aspects of living with, which elderly men in their traditional cohort have had little experience with (Devi, 2005).

Caregiving tasks are exhaustive and greatly impose on one's time, energy, money and temperament. The person who takes care of the aged has to forego, organized