

SYNOPSIS OF THE THESIS

The present study has dealt with the demographic, socio-economic aspects as well as reported ailments and Activities of Daily Living (ADL) of the Muslim elderly people living in rural areas of West Bengal in some particular localities.

For the present study, at first stage 10 villages have been sampled (using S+ random sampling table) from Nandigram-I CD Block of Purba Medinipur district. After selection of the villages, ten elderly male and ten elderly female have been selected from each of the sampled village in the same method used for the selection of the villages.

To make an understanding of the demographic and socio-economic aspects of the elderly under study the data have been collected with the help of different standard anthropological methods like Participation Observation, Scheduled Questionnaire, in-depth interview, focus group discussions, case study etc. However, data on the health profiles of studied population have been collected on the basis of the Assessment of ADL status and Self-reported ailments.

The study revealed that economically the woman elderly are more marginalized compared to their male counterpart in terms of working status, ownership of landed property, monthly income, ownership and quality of domicile house, receipt of Government pension, etc. On the aspect of literacy status and educational standard, female elderly are much behind their male counterpart. It is also revealed that male elderly are ahead of their female counterpart in terms of mobility, frequency of pilgrimage, listening of radio etc.

The study further revealed that the female elderly are in better situation compared to their male counterpart in terms of overall ADL status, source of health care, scope of rest, leisure and recreation.

Finally, the present gerontological study conducted among the Muslims living in rural areas may be helpful to the grassroots level planners to formulate some policy on the issues like economic support, pension scheme, welfare of the widowed, implementation of non-formal adult education, health care system as well as social justice and empowerment of elderly female.