

## A Comparative Analysis Of Gender And Old Age Problems In Khyber Pakhtunkhwa, Pakistan

**Hamid Alam**

Department of Social Work  
University of Malakand

**Adnan Khan**

Department of Sociology  
University of Malakand

**Tahira Jabeen**

Department of Social Work  
University of the Punjab

### Abstract

The study of old age problems is an emerging field in Pakistan. Old age brings variety of problems for both males and females, however, the nature of the problems of elderly men and women are different. This paper compares and analyses the problems faced by elderly men and women. This research study has been conducted in the semi urban town of Timergara, the head quarter of District Dir Lower, Khyber Pakhtunkhwa. Data was collected from the respondents aged 60 years and above through in-depth interviews. The respondents were selected using convenient sampling technique. The study finds that because of gender discrimination and cultural factors, women have lower access to health services than men. Consequently health problems of elderly women are more severe than the health problems of elderly men. The study further finds that women at old age are poorer than men due to cultural restrictions on education, women employment, deprivation from property inheritance. Lack of old age pension and widowhood also plays role in poverty of elderly women.

**Keywords:** Old Age Pension, Property Inheritance, Informal Sector, Gender discrimination, Poverty

### تلخیص

مطالعہ ضعیف العمری پاکستان میں ایک ابھرتا ہوئی شعبہ ہے۔ ضعیف العمری، مرد اور خواتین دونوں کے لئے مختلف مسائل کا سبب بنتی ہے، تاہم ضعیف العمر مرد و خواتین کے مسائل کی نوعیت ایک دوسرے سے مختلف ہے۔ یہ تحقیق بزرگ مردوں اور عورتوں کے مسائل کا موازنہ اور تجزیہ پیش کرتا ہے۔ یہ تحقیقی مطالعہ خیبر پختونخواہ کے ضلع دیر کے ہیڈ کوارٹر ٹیمرگرہ جو کہ ایک نیم شہری قصبہ ہے میں

منعقد کی گئی ہے۔ جواب دہندگان سے تفصیلی انٹرویو کے ذریعے معلومات حاصل کی گئیں۔ جواب دہندگان کا انتخاب آسان نمونہ بندی کے ذریعے کیا گیا۔ اس مطالعے سے معلوم ہوتا ہے کہ صنفی تفریق اور ثقافتی وجوہات کی وجہ سے مردوں کے مقابلے کم عورتوں کو صحت کے خدمات تک رسائی حاصل ہیں۔ نتیجتاً مردوں کے مقابلے میں عورتوں کے صحت کے مسائل بہت سنگین ہیں۔ یہ مطالعہ مزید بتاتا ہے کہ عورتوں کے تعلیم اور روزگار پر ثقافتی پابندیوں اور حق وراثت سے محرومی کی وجہ سے ضعیف العمری میں عورتیں مردوں کے مقابلے میں زیادہ غریب ہیں۔

**کلیدی الفاظ :** ضعیف العمری کی پنشن، جائیداد میں وراثت، غیرروایتی شعبہ، صنفی تفریق، غربت

## Introduction

Gender roles of men and women serve as a guide to structure the gender relations from birth to death. Different gender roles bring different impact for men and women. Men and women experience old age differently which is considered the outcome of early life different circumstances such as opportunities, challenges and constraints (United Nations Division for the Advancement of Women Department of Economic & Social Affairs, 2002). Sex-disaggregated data shows that the process of ageing brings different physical, psychological and emotional impact for men and women (Cheung, 2000; Help Age International, n.d). Although there is a lack of consensus regarding the impact of ageing on elderly men and women, however, generally it is believed that older women are more prone to the problems that come as a result of old age.

Both elderly men and women may face age discrimination. However, besides age discrimination elderly women also face gender discrimination throughout their lives (International federation on aging, 2012). Because of being a patriarchal society, since childhood females are discriminated in different spheres of life among the Pakhtun population. Males are given more attention and heavy resources are spent on their education, health and other necessities. Similarly males have more opportunities and access to job market as compared to the females. It is mainly because of the low literacy rate among the female as well as because of the factor of seclusion that restricts mobility of women. Such discrimination contributes to their increased vulnerability during old age. A combination of age and gender discrimination put elderly women at risk and leaves them disadvantaged more than men (Help Age International, n.d.).

The major issue of women specifically elderly widows is poverty. After widowhood women are more likely to loose access to property. Moreover, weak educational background, poor nutrition as well as lack of access to services and labour market leave them with poor health and few resources in old age. Although, research suggests that compared to men women can properly manage their financial crisis and can contribute

towards income generation of the family. Men, on the other hand, tend to lose their breadwinner role as they reach old age. Consequently men are economically vulnerable because of their inability to financially contribute to the household economy (Help Age International, n.d).

Older women usually have stronger network of social relations than men. Women are also likely to receive more emotional and material support from their adult children for variety of reasons. Men play important economic role during their young lives. But after retirement from gainful employment they face various problems in the form of health and psychological issues (Behncke, 2009). On the contrary women are usually not experiencing such problem because they are engaged in traditional household roles which they continue even during old age. In the following section I shall highlight to what extent gender intersect with old age, in the context of discrimination, health issues, poverty, abuse and death of the either partner.

Many of the old age diseases or conditions are commonly experienced by both men and women. However, the concept of gender, developed through life long process, bring impact at old age. Women face gender discrimination during earlier life which generally put elderly women at disadvantageous position as compared to men (World Health Organization, n.d.). Gender is a powerful determinant of access to health facilities in combination with other factors. Women face more health problems as compared to men. Women health problems at old age have close association with earlier life discrimination such as:

- Gender discrimination against girl child at childhood lead to nutritional deficiency among them
- Girls/Women face restrictions to get education at all levels.
- Baby birth without proper health care facilities.
- Employment discrimination against women in the labor market.
- Women shoulder domestic as well as caring responsibilities in the form of mother, grandmother and wife. In addition, women also shoulder caring responsibility of the elderly family members. Such responsibilities prevent women from income generating activities and pension based employment.
- Violence and abuse against women may start at childhood and continue throughout life.
- Widowhood among women generally leads to economic vulnerability as well as social isolation and
- Cultural factors which restrict access to health care services at old age (WHO, 2007).

## Review of Literature

In Pakistan the population of senior citizens is rising while they are considered as economically unproductive and socially dependent on the younger generation. In addition, the general poor economic situation may further intensify the issues of elderly people in Pakistan. In the wake of increased poverty, the elderly are more exposed to adversities of life (Ali & Kiani, 2003).

In different countries of the world men are economically more stable than women (United Nations, Department of Economic and Social Affairs, 2015). Men are considered to have successful ageing process as compared to elderly women. The reason behind the satisfactory old age life of male is considered their economic contribution. However, when the financial contribution male senior citizens get decline, then old age problems start for such elderly people (Ali & Kiani, 2003).

In Pakistan children are considered the helping hands of their parents especially at the old age. However, this trend is changing rapidly due to the changing socio cultural environment including increasing number of nuclear families, materialistic attitudes of young generation and influence of Western media. As a result, elder family members are likely to face poverty. In rural Pakistan, male elder family members have been deprived of household headship in the name of affection which pushes them toward disempowerment and poverty (Alam, Ibrar & Khan, 2016). The economic contribution of the parents matter a lot in ageing process. In this context an elderly father filed a petition in District court of Indian province Rajasthan. The court ordered his sons to take care their old father. However, three of them refused to fulfil the needs of their old father and commented that during their childhood the father had ignored their needs. So, they cannot support their father at old age. As a result, the court sent the refusing sons to jail (BBC, 2012).

It is generally believed that elderly women are poorer than elderly men. Two major factors are considered responsible for elderly women's poverty i.e. Socio cultural factors and personal factors (United Nations, Department of Economic and Social Affairs, 2015). The personal factors of elderly women's poverty are considered the result of discriminatory socialization. As a result of discriminatory socialization women have limited opportunities to get the skills and experience which is considered necessary for employment and earning and resultantly women at their old age poorer than men (Lopata, 1973; Tarar & Pulla, 2014).

Socio-cultural factors are also considered responsible for elderly women's poverty. In Pakistani society, after getting retirement from informal economic sector, the elderly are more exposed to adversities of life. Under such circumstance the only hope for the

fulfilment of economic needs of elderly is the old age pension (Dildar, Saeed & Sharjeela, 2012). The need of old age pension is particularly realized by those elderly women/widows who are shouldering the financial responsibilities of the house (Ali & Kiani, 2003). However, due to weak economic position it is difficult for the government of Pakistan to offer old age pension to millions of poor elderly women (Dildar, Saeed & Sharjeela, 2012). In Pakistan about 0.85 million people, on retires are getting old age pension out of the total aged people of over seven million (Ashiq & Asad, 2017). A very large section of the ageing female population is pension less because they face hurdles to get government employment due to less education and limited employment opportunities (Kamal & Woodbury, 2016).

Cultural norms create hurdles in the way of women's employment. The impact of cultural restrictions on women employment is evident in the Labour Force Survey 2014-15, where the participation of men in labor force is 48.0%, 48.1% while for female 15.8%, 15.8% (Government of Pakistan, 2015). In the rural areas the participation of women in formal sector is usually not appreciated because in such employment women have to work outside of their houses. Only the poorest women engage in work as farm labourers, and agricultural labourers, and brick kiln workers among others (Khan, 2007; Kazi, 1999). As a result, women at their old age particularly after widowhood have no regular and formal source of income. If she is shouldering the caring responsibilities of her young children then she has to work as a servant in someone's house (Nnodim, Albert & Isife, 2012). Sometimes women have to avail employment in compulsion such as migration of male family members, high unemployment, poverty and widowhood (Bari, 2000). In Pakistan the practice of old age pension is lacking in informal sector where a majority of women are working. Such women face poverty at their old age (Afzal, 1997, 1999). In rural areas the cultural norms of *purdah* or the practice of wearing veil outside the home also restrict women employment in rural areas. In urban areas the practice of *purdah* is not as strong as in the rural areas; as a result more women in urban areas are engage in paid employment than rural areas (Khan, 2007). So in urban areas the economic position of elderly women is better than the elderly women of rural areas.

In patriarchal societies male family member is preferred over a female member in different spheres of life including education. The concerned family more concentrate on education of male child as compare to female child (Loomba Foundation, 2015). The preferential trend exists globally where 781 million people having age 15 years and above are illiterate. Among these illiterate people illiteracy is the highest among older people and specifically among women. Globally 30 per cent elderly women are illiterate as compare to 19 percent elderly men (United Nations, Department of Economic and Social Affairs, 2015). According to Pakistan Social and Living Standards Measurement survey 2015, the literacy rate among female was 49 percent while the literacy rate for male was 70% (Government of Pakistan, 2016).

On account of higher life expectancy, elderly women are expected to face more health problems as compare to elderly men (WHO, 2007). Furthermore, there are some illnesses which are faced by women only. In this regard in United States of America in 2018, 250,000 cases of breast cancer were diagnosed. Breast Cancer may affect women at any stage of life, however, at old age there are more chances of breast cancer as compare to young age (Aging in place, 2020).

Elderly women face certain barriers which prevent them from medical treatment. Such hurdles include expensive treatment, little or no family support for medical treatment and little information regarding medical services due to illiteracy of women (WHO, 2007). Moreover, the socio-cultural changes in Pakistani also negatively affect the health of elderly population. In Pakistani culture nuclear family is becoming a prevalent norm, as it is not possible for children to give proper time to various needs of parents including health (Rehman & Mohyuddin, 2015). As a result of family nuclearization the elderly women face different health issues. The son(s) are not willing to spend money on the medical treatment of their elderly mother. Moreover, in nuclear family set up the daughter-in-law are not willing to take care of their elderly mother-in-law (Malik & Azam, 2018).

### **Methodology**

This topic has remained under researched in Pakistan, especially Pakhtun context and hence required a great deal of effort and in-depth details in order to bring forward a comparative analysis of the issues faced by men and women. In order to get a detailed picture of the situation, this research has been qualitative in nature. The issues faced by elderly men and women often remain within the four walls of the house because any leakage of information can bring shame to the honour of the family. Such issues are not discussed openly, mainly because the parents who face issues are considered as not having good luck while the children are considered as cursed and even a stigma for the parents. However, the elderly usually discuss such problems with their relatives, some neighbours and others who could help them in the solution of their problems. For the present study the main town of Dir lower, Timergara has been selected as universe of the study. Semi urban and urban areas are considered as least elderly friendly because of the environment (Muhammad, Jan, Shah & Ahmad, 2009). Before data collection a pilot study was conducted to identify key informants who could be helpful in identification of the informants as well as someone who would have firsthand knowledge of the issue. After choosing the informants, convenient sampling technique was used. Pakistani culture is gender sensitive (Bhattacharya, 2014), and it is difficult for male researcher to collect data from female respondents. In order to avoid such complications during data collection, a female research assistant was involved in data collection process after the necessary training regarding the tool and techniques of data collection. In-depth interviews were conducted, taking on average 1 hour. The data were then processed through coding and categorizing. From those categories, a number of themes emerged. In every sphere of life a

distinctive patterns was observed on the basis of gender. Out of many themes that emerged during the course of the fieldwork, the current paper focuses only on the comparative analysis of economic condition and health related issues faced by men and women.

## **Results and Discussion**

### **Relation between gender and health problems of elderly population**

This study found relationship between gender and health problems at old age. Cardiovascular diseases are one of the main reasons of deaths in the world. It is prevalent among both male and female elderly. However, it is generally considered the disease of men and resultantly this disease is generally undiagnosed among women of lower and lower middle-income countries. On the other hand, men seek medical help, once their health condition worsens or when diagnosed (Gao, Chen, Sun & Deng, 2019). In urban areas better and easily accessible health facilities for senior citizens, however, as a result of overpopulation and lack of sufficient resources, the health facilities available at the District headquarter hospital Timergara are insufficient to address the health needs of a large number of patients. In Pakistan only one doctor is available for a population of 6,325 persons (Dawn, January 28, 2018). Both men and women are expected to experience health problems at old age. The health problems of elderly women are severe as compared to elderly men. Besides many other factors, the socio- economic environment also play role in weak health status of elderly women. In the context of Pakhtun culture, which is patriarchal in nature, and where seclusion is common, access to health facilities is already a problem, the poor situation of health services adds to the already poor health of women.

Due to honour and seclusion, Pakhtun culture does not allow women to visit alone a public place such as hospital. In comparison men are free from this restriction and resultantly the elderly women are facing more health problems than men. This leads to deteriorating conditions of women's health as they have to wait for some male members to accompany them to the doctor. This was revealed by one of the female respondents that;

*“Once I had to wait a week when I was ill, because my sons were out of the city and I was not allowed to go on my own, the fever got severe and I was on bed for a whole month because of that”.*

With the passage of time, Pakhtun culture is changing in different ways. The older women experienced a more rigid society and cultural values which allowed them minimum exposure to the outside world. Such lack of exposure has resulted in them being least confident in the public spaces and hence unable to communicate with any outsiders. Visiting hospitals require coming across and communicating with strangers who mostly happen to be men. Because of such lack of confidence the older women prefer staying inside their houses. For example, one of our respondents said;

*“It is not just going to see the doctor, who in most of the cases is a male, but also the people in the laboratory, the drivers, and conductors. For us, it is difficult to communicate with them and it is not just that reason but also how and why would one communicate with a stranger, we were taught since our childhood not to do so”.*

As discussed earlier during the young age of now female senior citizens, Pakhtun culture was more rigid and gender sensitive. Females were not allowed to get education. Women were considered responsible for house management responsibility while men were considered responsible for bread winning (Alam, 2012). As a result most of the female respondents of this study were illiterate and economically dependent. The economic dependency adversely affects the health status of elderly women. In contrast to women, usually men have education, familiarity and confidence to face public places including hospitals. Resultantly, men are in a position to avail health services.

As one of our respondents Amir, mentioned that;

*“Male can go anywhere, be it a hospital, polling station, or any other place, we can take better care of ourselves than our women. They are restricted, their movement is restricted, they cannot go from one place to another without the male members of the family, they face issues we have never heard of.”*

The issues that are faced by the female are even acknowledged by the male members. They know that women go through tough times, especially during older age. Other factors such as relationship with children, economic status of children, and nature of senior citizens also play role in availing health facilities. Sometimes the elderly mother avail health facilities on account of their loving and caring attitudes, however, some of the elderly women do not avail health facilities on the ground that their treatment may cause inconvenience for children. They express their health needs only in case of serious health issue.

A respondent informed that;

*“Once I had a minor kidney issue, I did not want to bother my sons, and hence I kept quiet, the issue increased and after two weeks, I had severe pain, I was taken to the hospital, and while taking history, I said that the issue has been there for more than two weeks, hearing this one of my sons, asked me as to why I did not inform him. It is because we do not want to be a burden on them; we cannot ask them for small things”.*

Keeping quiet and suffering is common among majority of the old women. It is because they try not to be a burden on the shoulders of their sons and their daughters in law. Such silence often leads to serious health issues. Men on the other hand are more expressive



and vocal, they, because of their authoritative nature ask their children and they avail such facilities at the earliest.

### **Gender and Poverty**

The financial autonomy of senior citizens is gradually declining in Pakistani society due to various socio cultural reasons such as family nuclearization, influence of Western media and decline of religious values. In this regard a male respondent said;

*“My son took the household headship responsibility at the beginning of my old age. After retirement from house hold headship responsibility my economic needs are unmet. I am dependent upon my son who usually ignores my needs”.*

Generally, elderly men lead successful old age as compare to their female counterpart. The reason of elderly men successful aging is considered their economic contribution. In this regard a male respondent said;

*“Children are obedient towards their parents as long as they may expect financial gains from parents, once the financial contribution stops, the children are less caring, and they are more focused on their own children rather on their own parents”.*

The cultural norm of *Purdah* also creates hurdles in the way of women's access to different services including education. Due to the cultural norm of *Purdah*, it is usually difficult for majority of women to get standard education. Resultantly, illiteracy/ low level of education makes it difficult for women to get employment in formal sector where the practice of old age pension is there. Consequently elderly women are lacking old age pension. In this regard, a respondent said;

*“I have no job and salary. My weak physical condition as well cultural norms do not allow me to get employment out of the house. Hence economically I am dependent upon my children and live a substandard life”.*

Like the other rural parts of the country the elderly women in the universe are specifically illiterate because the ruler (*Nawab-e- Dir*) of District Dir, previously known as Dir state was no in favor of modern education. There was no concept of education even for men. As a result of illiteracy most of the elderly widows are illiterate and unemployed (Shah, 2013). This is how one research participant put it;

*“During our school going age neither school was there, nor the parents and community encourage female education, particularly female education was considered a violation of social and religious norms”.*

Usually most of elderly widows are economically dependent upon their children and families. If the family is not cooperative in terms of financial assistance, then old age means an endless financial crisis. The employment skills learned by elderly women are not applicable in the modern time. They have experience in livestock, sewing of clothes and making traditional Pakhtun white caps. Regarding the marketing of the elderly women's employment skills a female respondent said;

*“People do not use the products which we can produce. The raw material for the production of such product is also expensive.”*

Due to increase in population as well as discrimination and inequalities against elderly widows, old age is viewed from the feminine perspective. Feminization of aging means that older women tend to have fewer resources. The feminization of ageing has many outcomes including poverty (Rehman & Mohyuddin, 2015). At older ages, women in developed countries are more likely than men to be poor, particularly when living in one-person households (United Nations, Department of Economic and Social Affairs, 2015). Women's poverty is considered the result of early life discriminatory treatment. As a result of early life deprivations and gender imbalance, women usually lack the required employment skills and hence unemployed. Mostly women are economically dependent on husbands because they are considered to be the breadwinner for their wives and families. A female respondent commented as;

*“During young age I shouldered the house management responsibility while my husband was earning. However he lost his earning capabilities due to old age and resultantly our economic position is not stable like the past”.*

In developing countries where the concept of formal social security is lacking, property inheritance from one generation to the other can play an important role in economic security at old age (Ahmad, Bibi & Mahmood, 2012). The practice of property control by senior citizens is getting weaker. In Pakistani society, women are usually deprived of their share in property inheritance. According to International Property Rights Index 2008, Pakistan secured 93<sup>rd</sup> out of 115 countries regarding property protection rights. According to a survey of 1,000 household in rural Punjab, only 36 percent women got their share in property while National Commission on the Status of Women reported that only 3 percent women get share in property inheritance. In many parts of the country, the feudal families did not allow their family girls to get married because such marriages may lead to division of family property (Rehman, 2010). Regarding the share of women in inheritance, a female respondent said;

*“In our culture property related matters are considered a masculine domain. Women have no concern with and hence experience in property matters. Women are even deprived of their due share in property by male family members”.*

In Pakistani society, most of women are either deprived of their share in family property or they surrender their legal share in property to male family members. In Pakistani society it is considered a sign of sincere women and sisters to withdraw from their legal property share in favour of their brothers. If the women make demand for their property then it may lead to their abandonment by parental side. This trend regarding women share in property exist because the dowry which is received by daughters at their marriage, is considered a substitute of their property share. Moreover, women are told that their brothers are going to take care of them and the gifts given to them on different occasions are considered their share in property (Ahmad, Bibi & Mahmood, 2012). However, after the spread of education and weakening social proximity the concept of women's share in property is gradually emerging. In this connection a female respondent said;

*“My brother did not grant me share in parental property under property inheritance law. I requested him for property inheritance but he refused. This I filed a suit in a court of law and got my share in parental property”.*

In Pakistani society, women are usually lacking the actual control over their inherited property. In this regard, Kamal (1999), also found that usually male family members manage the property matters of their female family members even that case where women are the actual owner of the property. As Pakistani society is a male dominant society, so women face problems to dispose off their own property without the consent of their household. Only male family members are authorized in the context of property buying and selling. Female family members only can get their share in production and income of property. In several cases women's names are registered for the transfer of inherited property, however, despite of that usually women cannot get its control (Ahmad, Bibi & Mahmood, 2012). In rural Punjab, Pakistan it is a common practice that the male family members particularly brothers develop an understanding with land revenue official (*Patwari*) not to register property in the name of sisters among owners of the property. Under the pretext the sisters have surrendered their shares in favor of brothers. Otherwise, as soon as a woman's name is entered in the transfer papers, a gift is made in favor of the brothers (Rehman, 2010).

The death of a spouse can put women at more disadvantageous position than men. Elder men are likely to remarry (Raju, 2011). Elder women usually do not prefer to get remarriage. Widows and unmarried women particularly are at risk of poverty and social exclusion because in many societies such as South Asia, the status of women depends upon the status of their husband. Poverty in old age has a strong gender dimension. Older women, especially widows and those without children are particularly vulnerable, both economically and socially. A study of WHO (2007) notes that elder women are more at risk of poverty in all countries, including those who are widowed, divorced or with disabilities, and those caring for grandchildren and children (United Nations Population Fund & Help Age International, 2012).

## Conclusions

Elderly men and women both face health and economic problems. The health of elderly population has close association with their economic status. Those senior citizens who have control over economic resources are well off from health point of view. Those senior citizens who are either personally poor or their family economic background is unstable, are facing health discrimination and health problems. Moreover, elderly women face more economic problems than elderly men. Women usually face gender discrimination in their earlier life which lead to poverty among them at their old age. They face discrimination and restriction in education as well as employment and resultantly they are considered unfit in the labour market. In addition, most of the elderly women are lacking old age pension. Further, deprivation from inheritance in property as well as widowhood further intensify the economic problems, and consequently, health problems of women as compared to elderly men.

## Recommendation

- Parents need to avoid discriminatory treatment of male and female child (ren).
- Being female, mothers should focus upon proper education and socialization of daughters.
- The government of Paksitan should concentrate on the provision of affordable health services at the door step particularly in rural areas.
- The parents should express and discuss their problems with their children
- The Social Workers should workers in coordination with various government and nongovernmental organizations should work for the introduction of planned social changes with references to family nuclearization.
- Pakistani women need to raise their voice for their due share in property. Moreover, the religious leaders need to motivate the society regarding women's' property rights.
- Father need to have close association with their children. This close association may address the problem of social isolation among men at the time of old age.
- Parents should possess a source of economic security in their control till the last movement of life.
- The religious leaders should educate and motivate the society regarding the Islamic perspective of parents' rights.

## References

- Afzal, M. (1997). *Population ageing issues in Pakistan: A Further Analysis, Some Problems and Issues of Older Persons in Asia and Pacific*. New York: United Nations. ESCAP Asian Population Studies. pp. 44-80.

- Afzal, M. (1999) *Growing Old in Pakistan: Challenges for the New Millennium; International Year of Older Persons*. UNFPA.
- Ageing in Place. (2020). *Top health conditions affecting elderly women*. Available online at: <https://www.aginginplace.org/top-health-conditions-affecting-elderly-women/> [Accessed on 2020, May 15]
- Ahmad, E., Bibi, A., & Mahmood, T. (2012). Attitudes towards women's rights to inheritance in District Lakki Marwat, Pakistan. *The Pakistan Development Review*, pp 197-217.
- Alam, A., Ibrar, M., & Khan, P. (2016). Socio-Economic and Psychological Problems of the Senior Citizens of Pakistan. *Peshawar Journal of Psychology and Behavioral Sciences (PJPBS)*, 2(2), pp 249-261.
- Alam, A. (2012). Women Role and Status in Pukhtoon Society (A Case Study of Village Sufaid Dheri, Peshawar). *International Journal of Learning & Development* Vol. 2, No. 3, pp 313-324.
- Ali, S.M., & Kiani, M.F.K. (2003). *Ageing and Poverty in Pakistan* (No. 2003: 18). Pakistan Institute of Development Economics.
- Arif, U. and Ahmed, E. (2010). *Pension System Reforms for Pakistan: Current Situation and Future Prospects*, Pakistan Institute of Development Economics, Islamabad.
- Ashiq, U., & Asad, A. Z. (2017). The rising old age problem in Pakistan. *Journal of the Research Society of Pakistan–Vol, 54(2)*.
- Bari, F. (2000). Country briefing paper: Women in Pakistan. *Asian Development Bank Programs Department (West) & Office of Environment and Social Development*.
- BBC (2012). Three sons sent to jail for not caring their father [translated from Urdu]. Available At: [www.bbc.co.uk/urdu/india/2012/11/121101\\_three\\_sons\\_jailed\\_mb.shtml](http://www.bbc.co.uk/urdu/india/2012/11/121101_three_sons_jailed_mb.shtml), retrieved on 06-06-2013.
- Behncke, S. (2009). *How Does Retirement Affect Health*. IZA Discussion Paper No. 4253. Available at: <http://ssrn.com/abstract=1426740>
- Bhattacharya, S. (2014). Status Of Women In Pakistan. *J.R.S.P.*, Vol. 51, No. 1, pp 179-211 available at ([http://pu.edu.pk/images/journal/history/PDF-FILES/7v51\\_No1\\_14.pdf](http://pu.edu.pk/images/journal/history/PDF-FILES/7v51_No1_14.pdf)) retrieved on 11-06-2019.

- Cheung, F., (13-15 April, 2000). *Ageing population and gender issues*. Paper presented at the 10th Anniversary conference on “Into the 21st Century: Challenges for Hong Kong and Asia- Pacific region”. The Chinese University of Hong Kong. Available at ([https://www.researchgate.net/publication/237303385\\_Ageing\\_Population\\_and\\_Gender\\_Issues](https://www.researchgate.net/publication/237303385_Ageing_Population_and_Gender_Issues)); retrieved on 10-06-2019.
- Daily Dawn (January 28, 2018). *Doctor-population Ratio*. available at [https://epaper.dawn.com/DetailImage.php?StoryImage=28\\_01\\_2018\\_009\\_003](https://epaper.dawn.com/DetailImage.php?StoryImage=28_01_2018_009_003)
- Dildar, S., Saeed, Y. & Sharjeela. (2012). Exploratory Study of the Nature of Violence Against Elderly in District Gujrat, Pakistan. *Academic Research International*. Vol. 2, No. 3. Pp 661-669.
- Gao, Z., Chen, Z., Sun, A., & Deng, X. (2019). Gender differences in cardiovascular disease. *Medicine in Novel Technology and Devices*, 4, 100025.
- Government of Pakistan. (2014-15). Pakistan Bureau of statistics, 2014-15. *LABOUR FORCE SURVEY 2014-15 Thirty-third issue*. Available at <http://www.pbs.gov.pk/content/labour-force-survey-2014-15-annual-report>
- Government of Pakistan. (2016). Pakistan Bureau of Statistics, *Pakistan social and living standards measurement survey (2014-15)* [http://www.pbs.gov.pk/sites/default/files/pslm/publications/PSLM\\_2014-15\\_National-Provincial-District\\_report.pdf](http://www.pbs.gov.pk/sites/default/files/pslm/publications/PSLM_2014-15_National-Provincial-District_report.pdf)
- Help Age International. (n.d). *Gender and Ageing Briefs*. Available at <https://www.helpage.org/silo/files/gender-and-ageing-briefs.pdf> retrieved on 06-05-2019.
- International Federation on Aging. (2012). *Revera Report on Ageism, A Look at Gender Differences*.
- Kamal, A., and Woodbury, L. (2016). *Emerging Opportunities for Women in Khyber Pakhtunkhwa Growth Sectors*. International Growth Centre, Pakistan Program available at <https://www.theigc.org/wp-content/uploads/2016/04/Kamal-Woodbury-2016-Working-paper.pdf>
- Kamal, S. (1999). *Effects of the Interplay of Formal and Customary Laws on Women in Tribal Cultures*. Paper Presented at The 7th Interdisciplinary Congress on Women, Women’s Worlds, No. 99.

- Kazi, S. 1999. "Gender Inequalities and Development in Pakistan," in Shahrukh Rafi Khan (ed). *50 Years of Pakistan's Economy: Traditional Topics and Contemporary Concerns*. Karachi: Oxford University Press. 376-414.
- Khan, A. (2007). Women and paid work in Pakistan., *Karachi: Collective for Social Science Research*.
- Loomba Foundation (2015). *The Global Widows report*. Available at <http://www.theloombafoundation.org/images/The%20Global%20Widows%20Report%202015.pdf>
- Lopata, Z.H. (1973). Self identity in marriage and widowhood, *The Sociological Quarterly*, Vol. 14, No. 3 pp 290–439.
- Malik, R., & Azam, F. (2018). Nuclearization of family and the status of elderly women: A case study of District Sargodha. *Journal of the Research Society of Pakistan*, 55(2), pp 121-130.
- Muhammad, N., Jan, M. A., Shah, M., Ahmad, Z. (2009). Old Age People: A Socio-Economic View of their Problems in Peshawar City, Pakistan. *Pakistan Journal of life and Social Sciences*. Vol. 7(2).pp.126-130.
- Nnodim, A., Ibert, C. & Isife, B. (2012). The effect of widowhood on the income generation and well-being of rural women in Rivers State, Nigeria. *Developing Country Studies*, Vol. 2, No. 11, pp 135-143.
- Raju, S. S. (2011). *Studies on Ageing in India: A review*, Institute for Social and Economic Change. Bangalore United Nations Population Fund, New Delhi Institute of Economic Growth, Delhi.
- Raju, S.S. (2002). *Health Status of the Urban Elderly: A Medico-social Study*, Delhi: B. R. Publishing Co.
- Rehman, I & Mohyuddin, A. ( 2015). Social issues of senior citizens. The Explorer Islamabad: *Journal of Social Sciences*. Vol-1, No.8, pp301-306
- Rehman, S. (2010). Denial of Women's Right of Inheritance: Enhancing their Vulnerability to Domestic & Societal Violence. *Awaz Foundation Pakistan: Centre for Development Services*. Available at <http://awazcds.org.pk/Downloads/rstudies/Inheritance%20Rights.pdf>

Tarar, M. G., & Pulla, V. (2014). Patriarchy, gender violence and poverty amongst Pakistani women: A social work inquiry. *International Journal of Social Work and Human Services Practice*, Vol.2. No.2, pp 56-63.

United Nations Division for the Advancement of Women Department of Economic and Social Affairs (2002). *women 2000*. Available at <https://www.un.org/womenwatch/daw/public/ageing-final.pdf> retrieved on 12-06-2019.

United nations population fund & Help Age International ( 2012). *Ageing in the Twenty-First Century: A Celebration and A Challenge* available at <https://www.unfpa.org/publications/ageing-twenty-first-century>

United Nations, Department of Economic and Social Affairs (2015). *The world's women 2015, trends and statistics*, Chapter 8 available at [https://unstats.un.org/unsd/gender/downloads/WorldsWomen2015\\_chapter8\\_t.pdf](https://unstats.un.org/unsd/gender/downloads/WorldsWomen2015_chapter8_t.pdf)

World Health Organization. (2007). *Women, Ageing and Health: A Framework for Action: focus on gender* available at <https://www.who.int/ageing/publications/Women-ageing-health-lowres.pdf>

World Health Organization. (n.d.). *Gender and Ageing*. Available at <https://www.who.int/ageing/gender/en/> retrieved on 12-06-2019.

---

**Hamid Alam** is an Assistant Professor in the Department of Social Work, University of Malakand.

**Dr. Adnan Khan** is an Assistant Professor in the Department of Sociology, University of Malakand.

**Dr. Tahira Jabeen** is an Associate Professor in the Department of Social Work, University of the Punjab.