the world's total elderly population.

With dramatic changes in climate and demography in recent years, Bangladesh is confronting unprecedented intimidation from disaster and population ageing. Both occurrences are increasing alarmingly and have become a threat to its development. Considering its geography, climate, population, governance, politics and culture, Bangladesh is one of the most severely disaster-prone and elderly-threatened least-developed countries in the world. The cumulative effects of the aforesaid environment affect older persons the most, leading them to distress, vulnerability and helplessness and requiring logical and right-based societal intervention. So, in order to ensure sustainable development, Bangladesh needs to meet the challenges of both frequent disasters and rapidly growing older persons.

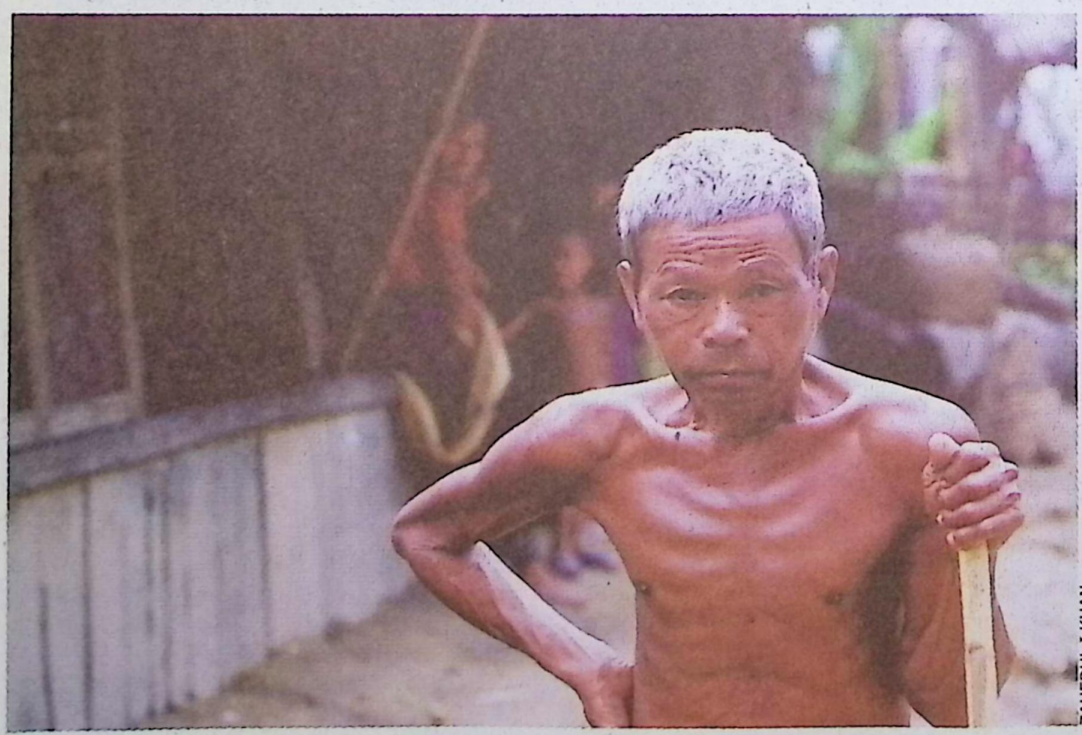
The older section of the population is increasing much faster than the total population, their vulnerability multiplying the dimension of the problem. Most of them are seriously suffering from some basic human needs related challenges, viz. lack of minimum income and employment opportunities, extreme poverty, senile diseases accompanied by absence of proper health, medical care, food, nutrition and comfortable living arrangements, isolation, exclusion, loneliness, negligence, psychosocial and cultural complexities, etc.

Their capacity for doing creative and socially useful work is underestimated. Feeling of proximity of loss of status in the family and society, spectre of reduced income, insecurity and deprivation in the later life often cause depression, calling for proper action programmes to reduce their vulnerabilities and bring them into mainstream social life as active, productive, healthy and dignified members of society.

In Bangladesh, the situation of older women is much worse than older men because of their longer life expectancy and extreme vulnerability due to social and economic marginalisation. Other reasons behind the feminisation of poverty in old age include gender discrimination, pattern of economic dependency, reproductive and family responsibilities, widowhood, rural and religious tradition etc.

Older women also own fewer assets and have less control over family income, and are more willing to endure more chronic disease and disability than their male counterparts. Antagonistic relationship between daughters-in-law is a very common feature in this society, which affects care of the older persons especially in the case of older women.

Moreover, widowed, divorced, single or even uprooted older women and men live in severe destitution. This humiliated life sometimes encourages them to commit suicide or, more frequently, to depend on begging. The majority (68 percent) of older women in Ban-



ZAHEDUL I KHAN