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AGING, CARE AND DEPENDENCY IN MULTIMORBIDITY: HOW RELATIONSHIPS AFFECT ELDERLY WOMEN'S HOMECARE AND HEALTH SERVICE USE

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Relationships are multidimensional, and we know little about the facets of relationships in the way elderly patients' with multimorbidity utilise homecare and health services. Gerontology literatures emphasize the importance of place of care, inequalities, availability of health services and

affordability. However, the diversity of relationships and associated dependency in elderly care remain underassessed.

A qualitative study involving a demographic survey and interviews was conducted to explore relationship experiences of elderly women with multimorbidity in homecare and health services utilization. Civil Surgeon of Sylhet District in Bangladesh was contacted to recruit participants for the study, and this resulted in 33 interviews [11 staff and 22 elderly women with multimorbidity]. Three domains of Axel Honneth's Theory of Recognition and Misrecognition [i.e. intimate, community and legal relationships] were used to underpin the study findings. Data was analysed using critical thematic discourse method. Four themes were emerged: nature of caregiving involved; intimate affairs [marital marginalization, and parent-children-in law dynamics]; alienation in peer-relationships and neighbourhood [siblings' overlook, neighbourhood challenges, and gender inequality in interactions]; and legal connections [ignorance of rights, and missed communication]. A marginalization in family relationships, together with poor peer supports and a misrecognition from service providers, resulted in a lack of care for elderly women with multimorbidity.

Understanding the complexities of elderly women's relationships may assist in policy making with better attention to their health and well-being support needs. Staff training on building relationships, and counselling services for family and relatives are essential to improve the quality of care for the women. ■