

Supplementary material

Supplement to: James, K. S., Sadhu, R., and Bloom, D. E. (2025). Widowhood, gender, and disadvantage in India: Current trends and future trajectories. *Vienna Yearbook of Population Research*, 23. <https://doi.org/10.1553/p-h8jj-e3c5>

Table S.1 Socioeconomic Status and Health Indicators (IIPS, 2020)

Indicator	Description
Household Poverty	The International Institute for Population Sciences team divided all LASI respondents into five monthly per capita household expenditure quintiles: poorest, poor, middle, richer, and richest. Monthly per capita household expenditure is defined as the total monthly household consumption expenditure divided by the household size. This metric includes spending on food and non-food items such as health, education, and utilities. Respondents in the lowest expenditure quintile were classified as experiencing household poverty.
Low Perceived Subjective Socioeconomic Status	Respondents were shown an illustration of a ladder representing where people stand in society (those who have the most money, most education, and best jobs (score of 10) occupy the top of the ladder, while the people who are the worst off are at the bottom (score of 1)). Respondents were asked to rank themselves on a specific rung along the hierarchical order. Respondents who ranked themselves as three or lower were considered to have a low perceived subjective socioeconomic status.
Working Status	Respondents were asked the two following questions in relation to work: 1) Have you ever worked for at least three months during your lifetime? (Yes/No) and 2) If yes, are you currently working? (Yes/No). Respondents were told “work” included agricultural work, wage work, self-employed activities, and unpaid family business work. Work also included all kinds of labour, excluding doing own housework, whether respondents earn wages or not. Respondents who answered no to either of the two questions were classified as currently not working.
Financial Support	Respondents were asked if they had received financial support from family (children, siblings, grandchildren, parents, parents of spouse, or any other family members) or friends during the past 12 months. Respondents were told financial support meant receiving money that helped to pay bills or covered specific types of costs such as those for medical care or insurance, schooling, marriages in family, religious events, down payment for buying a home, and rent. Shared costs for housing and food and monetary support of annual cost totals less than ₹1,000 were excluded. Respondents who answered in the affirmative were considered to be receiving financial support.
Multimorbidity	Respondents were classified as having multimorbidity if they reported having been diagnosed by a health professional with two or more of the following chronic conditions: hypertension, diabetes, cancer, lung disease, chronic heart disease, stroke, bone/joint disease, neurological/psychological disease, and/or high cholesterol.

Indicator	Description
Functional Disability	To determine functional disability status, we aggregated and scored activities of daily living (ADLs) and instrumental activities of daily living (IADLs) that respondents had difficulty with because of a physical, mental, emotional, or memory problem. LASI enquired about six ADLs (dressing, walking, bathing, eating, getting in or out of bed, using the toilet, including sitting down and standing up) and seven IADLs (preparing a hot meal, shopping for groceries, making phone calls, taking medications, doing work around the house or garden, managing finances, navigating or finding locations in unfamiliar places). Respondents with at least one ADL or IADL limitation were classified as having a functional disability.
Reliance on Caregiving	For respondents who had a functional disability, those who answered yes to receiving help from anyone with any of the difficulties they disclosed were considered to rely on caregiving. Of these respondents, 93.4% relied on family members for caregiving.
Health Insurance	Respondents were considered to have health insurance if they answered yes to whether their health costs are currently covered by any form of health insurance.

References

International Institute for Population Sciences (IIPS) (2020). *Longitudinal Ageing Study in India (LASI) Wave Main Wave 1, 2017–18: Individual Schedule*. International Institute for Population Sciences, Mumbai.