

## Chapter 2

### THE AGED IN “LITERATURE”: A REVIEW

In this Chapter I have reviewed some secondary literature, written by both Indian and foreign scholars, on different aspects of ageing and the life of the aged, which I found to be relevant to my study. The important areas I have looked for in the literature are (a) the relationship of the elderly with their children and relatives, (b) the physical, psychological and health problems that the aged encounter, (c) life of the elderly in old-age home, and (d) the impact of various policies and development programmes on the life of the aged.

#### *The relational aspect*

In this section I have covered those literature that deal with the relationship of the aged with their children and extended kin. The treatment of the elderly is largely rooted in relations in the family locale.

Banerjee (2011) observes that people in east are much more respectful towards the elderly, who are treated with dignity, although the Indian media reports are full of heart-breaking incidents of “neglect” and ill-treatment. In U.K., Banerjee observes, the aged living with others are more vulnerable to verbal and physical types and people living alone are more likely to be at financial risk. Old people with severe illness and behavioural disorders are more likely to be abused physically. The atrocities work in the form of verbal berating and psychological pressure. In U.K. a number of well organized charities are doing noteworthy work in the field (Banerjee 2011: 280-284).

Mukhopadhyay (2010) observes that earlier it was the responsibility of the parents to develop values, attitudes and feelings of the growing children but now they find it difficult to adjust with the need of new generation. The traditional norms and values are undergoing drastic changes and the traditional kinship bonds, roles and relationships have undergone changes with the change in the

civic, social, economic and cultural life of the people. Changes can be seen in the role of kinship in specifying the rights, duties, obligations and authority of an individual (Mukhopadhyay 2010: 146-147).

Jain (2011) has found that the elderly are living in distress and loneliness; they always feel rejected and isolated. The elderly neither get emotional nor economic support from their off springs; their sons and daughters-in-law often misbehave with them (Jain 2011: 316).

Shah (1999) has observed an important aspect of parent-child relationship in the urban professional class which is that the parents usually make heavy emotional and material investments in rearing up children. Most sons and daughters reciprocate positively towards parents and repay the investment particularly in the later phases of life. The most critical test of this relationship comes when parents become old and disabled. When one of the parents dies the problem becomes grave and the surviving one becomes ill, requiring constant nursing. In this situation while the son's willingness to look after the parent is not in doubt the daughter-in-law's willingness is, sometimes, questionable. On various situations the elderly in urban areas are left alone, particularly the widowed, divorced, and never married single elderly persons.

Shah notices a difference between the Homes set up by the caste and religious groups on the one hand and those set up by the government. Some castes and sects have set up homes for their aged in pilgrim centres, thus giving a new form the ancient idea of old persons spending the rest of their life in peace away from family obligations. The community institutions, according to Shah, provide a more congenial environment than the government institutions. Arguing that the homes for the aged do not offer a solution to the problems of the elderly Shah finds the future well being of the elderly in the joint households, which ensure a better care system based on traditional family values. Shah calls for a well informed public debate and discussion; both the older and the younger generation need to arrive at a new understanding for which both need a new socialization. Along Durkehimian line Shah argues the mindless, uncontrolled, individualism which is often spread by the media in the younger generation these

days is not likely to be conducive to the well being of the elderly and the creation of a healthy society (Shah 1999: 1180-1182).

Leung and Leung (2011) brought into light the changing loyalty, respect and devotion of children toward their parents in Chinese society. They have observed that people in the East and Southeast Asia express filial piety in a distinct way in response to their societal environment and the challenges to care giving. From their studies in Hong Kong, Korea, and Singapore they have observed that elderly parents and adult children express their mutual affection and responsibility by living near or by maintaining close contact. The study has brought out two important factors. One is that the culture of filial piety is still valued by the Chinese people, although lack of decision making power in patriarchal culture makes it difficult for adult children to meet the demands of the family. Second, filial piety has evolved to mean gratitude, respect and reciprocal support (Leung and Leung 2011: 9-26)

Gupta and Choudhury (2011) provide an assessment of what constitutes elder abuse in a cross cultural context with a special focus on the elderly of South Asian origin living in the United States. They also discuss about various prevention strategies to redress incidents of elder abuse among this population. The study observes that the South Asians who are 65 years or older and originally from Bangladesh, Nepal, Bhutan, Pakistan, India, Sri Lanka experience psychological abuse, exploitation and neglect. The similar studies by Nagpaul (1997), Pablo and Braun (1997) observe that fear of losing family and personal honour was the main reasons for not reporting such experiences. The authors have highlighted that South Asian elderly suffer a lot; their children and grandchildren misbehave with them while the older couples are subjected to insult. Many of them are reluctant to seek physical and mental health services as they do not want to put extra burden on their adult children.

Latha (2011) has pointed out that elder abuse in family setting has increased in recent years for a variety of reasons. It may involve relationships between spouses, adult children, other relatives, and anyone else in whom the older person has placed trust. She has observed that elder abuse is hidden, tragic, and

secret for many (Latha 2011: 340). Abused elders have a poor social support system and numerous conflicts within the family. To prevent elder abuse Latha has suggested building a society in which older people are allowed to live out their lives in dignity, adequately provided with the necessities of life and with genuine opportunities for self fulfilment (Latha 2011: 345).

Sherman, Rosenblatt and Antonucci (2011) have focussed on understanding of elder abuse from relational perspective. They have observed that elder mistreatment is a global phenomenon. In order to identify the genesis of elder abuse one has to look into distinct cultural value systems, religious orientations and expectation of the older adults. The macro socio-economic change, they argue, create potential environment for elder abuse. India and China, for example, are currently experiencing massive socio-economic changes in the face of rapid industrialization, urbanization and globalization. Migration out of village to cities for employment and increased rates of women entering the work force can contribute to overt and covert neglect of elders who have to fend for themselves. They have also argued that the factors like poverty, isolation, alcohol abuse, mental illness, depression and financial dependence on family members can be the potential risk factors for elder abuse (Sherman, Rosenblatt and Antonucci 2011: 201-218).

Shankardass (2011) has discussed why and how the family and community of India are keeping away from their role of “caring for elders” and are being held responsible for perpetuating elder abuse, neglect and violence. She has noticed a general tendency to conceal such incidents. The police, however, have improved mechanisms to record the cases of elder abuse. She has observed that while the incidents neglect get ignored those of violence and abuse get reported by a third party. The older people usually are reluctant to speak about their trauma out of love for the perpetrator or in order to preserve the reputation of the family. The author has observed the existence of many forms of abuse of older persons including physical, emotional, psychological, and financial. Material exploitation in the family is the commonest type of abuse of the elderly which is reported by media. She has concluded by saying that there is a need for

dialogue, consciousness and societal response to redress elder abuse in India (Shankardass 2011: 294-315).

### ***Problems that face the elderly***

The socio-economic, psychological, health and gender related problems that face the elderly have been examined by some scholars.

Kardigudda (2001) examines the problems faced by elderly women in relation to elderly men from three main perspectives - socio economic, psychological and health. In India, she observes, families have become smaller because of the recent fertility decline and out-migration and there have been changes in the value system with the rise in quality of living (p. 292). She further observes that both in urban and rural contexts change in the basic institutions of family, marriage and property ownership has brought about changes in the position of the aged in the context of their families. She observes that where joint family system exists the aged continue to enjoy the respect and authority. However, certain recent developments have given rise to stresses and strains which have made the position of the aged vulnerable. The technological developments have brought about changes in life styles and values and this has created doubts in the minds of younger generation about the utility of past knowledge and experience in solving present day problems; this has reduced their dependence on the aged. The high cost as well as unavailability of rental accommodation in cities work as constraints in keeping the aged together with their migrant sons and daughters, particularly when the latter are married. Modernization in the form of changed values has affected the roots of family relations. With industrialization and urbanization more and more women have joined the labour force and they find little time to care for the elderly, particularly when they have to rear their own children and take care of other domestic chores. Kardigudda further observes that in most of the countries the elderly women either suffer from isolation or have to care for the children of their employed daughters or daughter-in-law (Kardigudda 2001: 294).

Aged women are largely ineligible for positions in higher status because of lack of skill or education, and this makes them more dependent compared to their male counterparts. They become subjects of neglect and abuse by their sons and daughter-in-laws. The status of elderly women also suffers when they lose their husbands/men as widowhood leads to social, emotional and financial insecurity (Kardigudda 2001: 297). Kardigudda concludes by saying that the problems of older women are not so much a product of the ageing process per se as they are products of the subordinate status of women throughout their life cycle.

Bawa (1999) brought in light the various problems faced by elderly women; first, because they are aged and second because they are women. The scholar focuses on the feelings and emotional insecurity of the elderly women, particularly when joint families are breaking down (P. 42). She argues that when the life expectancy of the women is increasing the traditional support system is disintegrating. Overwhelming gender bias affects their health status, education and socio economic status. Exploitation, sexual abuse and discrimination are common experiences of women irrespective of age, but in old age neglect by family and community are additional burdens. The worsening family relation has made caring for the elderly in the family very difficult. The marginalization of elderly women can be traced in the form of withdrawal of privileges, physical and psychological ill treatment, feelings of insignificance and lack of meaningful activity. According to Bawa, all these bring loneliness and marginalisation and depression to the older women. The author also argues that family is the most important social unit which gives support and security to the elderly and old age homes cannot be a solution (Bawa 1999: 43). Considering that the aged are the custodians of our tradition the author proposes that the government and non-governmental agencies should create awareness among the youth to take care of the aged (Bawa 1999: 44)

Halemani and Kazi (2008) have done a comprehensive study of 367 elderly people consisting of 214 males and 153 females living in different rural areas of Yadgir Taluk in Gulbarga district (Karnataka). They have observed that the elders

in the family have always been a medium of cultural transmission as they pass on their experiences and knowledge to the younger people. With the emerging nuclear family system younger generations are becoming deprived of this rich cultural transmission. The aged and elderly people who had an important position in the family and community in the past and had contributed to society's well being with their useful knowledge and experience are very much a part of present society. However with the physical, psychological and socio-cultural and economic changes the senior citizens are out to lose their role and status. The younger people are more attracted towards the cities, leaving the elderly back home. When they take the elderly with them the latter finds it difficult to adjust with city life.

Agnihotri and Halemani (2009) conducted a study on the *Programmes for Old Age in India* where they have examined the socio-economic and psychological problems of the aged as well as the usefulness of the old age programmes. The scholars observe that growing population coupled with increasing life expectancy has given rise to larger number and proportion of older people. With this, one can notice a growing dissociation of older people from their traditional roles and positions in the society and in the economy. The kinship system is giving way to nuclear family threatening the traditional care system for the elderly (Agnihotri and Halemani 2009: 38)

The authors argue that the aged people encounter a serious problem as pensioners when they live without medical aid, which they used to receive when they were in service. All the developed countries have undertaken various social legislative reformative and welfare measures like (1) old-age pension scheme for those who have no means to support themselves, (2) financial assistance to various voluntary agencies which take initiative to run various "activity centre", "hobby clubs" or 'golden age centres, (3) setting up of old-age homes which give physical protection, medical aid and economic security to the aged, (4) introduction of welfare schemes in the form of old-age allowance and pension after retirement, accident benefit, free medical aid and so on, (5) introduction of post-retirement benefits like provident fund, gratuity, life insurance etc. (6)

introduction of concessions in train and air fares for senior citizens, and so on. However the state support for the elderly in India falls far short of the benefits the aged in the European countries enjoy (pp. 39-40). The authors conclude by saying that old age problem is one of the major social problems as in this stage of life physical strength deteriorates, mental stability diminishes and eye sight also suffers a setback. For a large number of people it may become a period of disappointment, dejection, disease, and loneliness. Old age thus has its psychological, socio cultural sides (p. 41).

Tyagi and Suneja (1999), in an article on the activities of HelpAge India (a NGO), have observed that industrialization urbanization, Westernization, female employment, changed value system, migration in search of jobs, and better education opportunities have fastened the pace of urban life. These changes have affected the family size and there has been a shift from joint to nuclear family. Moreover rapidly increasing number of aged persons face crises due to inadequate resources, poverty, illiteracy, inadequate health services and so on. The basic requirements of the aged recognized by Help Age India are health security, financial security and emotional security (Ibid: 28).

Phukan (2006) observes that the welfare of the elderly was traditionally embedded in the structure of the joint family. With increasing occupational mobility the joint family structure has undergone changes. The traditional joint family is now giving way to nuclear families. While encountering health problem, the problem of insecurity, and economic problem the aged make many unwilling adjustments (pp. 162-179).

Chinnappan (2015) has discussed about what she has termed as “feminization of ageing” as the elderly women survive longer compared to their male counterparts. Taking note of the increase of widows among the aged and she has observed the growing number of aged who live alone. Reviewing various studies she has observed that elderly women with low economic status and the women of the socially disadvantaged groups are subjected to social discriminations of various forms (Chinnappan 2015: 296).

### *Literature on old-age homes*

Many scholars have studied the elderly in old-age homes and have examined if the Homes provide a solution to the whole lot of problems that face the elderly as outlined above.

Pandya (2011) has argued that in traditional Indian culture, old age was considered as one of the stages of human development wherein a person attains wisdom, maturity, social and economic stability, social recognition. The situation is changing because of the effect of rapid industrialization, urbanization and growing population pressure. The family pattern is changing from joint to nuclear family. Aged parents either live alone or are sent to an old-age home. Money, cars, foreign trips have become the priority of the younger generation and they do not have time for their parents. Pandya observes that changes in lifestyle of the younger generation have made the creation of the old age home a necessity. Old age homes provide a space for the older generation to live life at their peace and on their own terms. (Pandya 2011: 187-206).

Studying the aged in Anand Niketan Vriddhashram, Pande (2011) has found that the old people in home do not feel lonely and depressed despite being away from family. This is due to regular mutual visits of the residents and the family members. Moreover Home residents are made to realize through sermons that they should not feel lonely and crave for family and friends; they rather should engage in religious activities and any other work that interests them (pp. 211-221).

Mishra (2007) has examined how the elderly people live in old age homes in Odisha. His findings indicate to the growing inhumanity and instrumental rationality among the younger family members as a reason for the sufferings of the elderly members (Pp. 561-572).

Rao, Trivedi and Yadav (2015) have studied the life of aged living in old-age homes in Ahmedabad. They have noticed that earlier the aged were treated with great respect and care but now they are subjected to neglect. Those who have retired from their services and other occupations find themselves emotionally, economically and psychologically isolated. Even the relatively rich elderly take

shelter in old-age homes, because there is nobody to take care of them (Rao, Trivedi and Yadav 2015: 155). The conflict with children or with other family members is another reason for the movement of the elderly to the Homes. The elderly seek peace of mind there since family members no longer extend them the necessary support. In majority of cases the respondents were not the ones who took the decision to move, it is other family members, mostly the children leave them to Home. A majority of the residents have claimed that the Homes give a positive and homily feeling (p. 167). The authors propose a need for a comprehensive policy for the care of the elderly and an arrangement for regular counselling for their psycho-emotional and physical health (p. 168).

Lamb (2007) has tracked down how the old-age home living in India is emerging as a new cultural space to imagine and practice gender, aging, family and even national identity. She argues that the old-age homes, which mark formalization of family care system and in existence in the West for some time, have emerged as a solution to social crisis that faces the middle and the upper middle class. At the initial stage the Indian middleclass urban mind reacted negatively to this rather new phenomenon but over time the social perception has changed. Many with reason now support the development since they believe that old-age homes promote new opportunities for women and greater gender equality. Further, they believe that living in old-age home does not mean complete disassociation from traditional Hindu values and life ways (Lamb 2007: 43-44). Her observations are based on a study of 100 older home residents (75 female and 25 male) in Kolkata.

For Lamb, old-age home living involves quite a significant transformation of gender and personhood, especially for women of both senior and junior generations. She has tried to capture two significantly different situations. First, there are cases where the elders are simply thrown away by their sons or other male kin while the formers do not question the decision of the male members, although they might dislike the decision intensely. In contrast, the male residents had the freedom and privilege to take their own decision to move to old-age

home. The women, according to Lamb, experience a traditional passivity and dependence within conventional families (Pp. 48, 49).

Second, as Lamb observes, not all the women living in elder abodes were living submissive lives controlled by male kin; many have broken free of such traditional patriarchal structures (Lamb 2007: 54). Lamb concludes by saying that moving to an old-age home in India entails a radical transformation of self and the forms of gender and aging. Those participating in India's new old age homes are striving to maintain older needs, desires and values, while also producing and fulfilling and sometimes resisting new ones, wrestling strategically with what they see as the changing conditions of the society and lives (Ibid 56, 57). In a later study Lamb has reiterated her position arguing that old-age homes liberate both older and younger generations to live independently, without interference (Lamb 2012a: 56).

Lamb (Lamb 2012a: 56) finds out that the some Christian organizations took the early initiative in setting up old-age homes in India. In Kolkata the first home established in 1882. The Christian organizations set up homes with a view to serve two groups of people: (1) the very poor who have no kin to rely on and (2) the ageing community of Anglo Indians (p. 57) In recent years, however, a new generation of old-age homes have been set up by Indian entrepreneurs and NGOs to cater to the needs of middle and upper middle class urbanites, who are facing a crisis due to changes in the family institution. Lamb describes this as a middleclass phenomenon as they primarily serve the retired people with pension, professional and dispersed children, and with considerable savings (p. 58). However, there are a number of Christian Charity homes and several new homes founded by Indian Philanthropic organizations which offer free or subsidized accommodation to the poor people (p. 59).

Lamb has found two types of homes: (1) the larger and fancier homes, which are funded by philanthropic nongovernmental organizations, and (2) the smaller and more numerous homes which are run by minor NGO-s and private entrepreneurs (p. 62). At the time of joining the residents need to be in good mental and physical health condition, able to walk, talk and perform basic

activities of daily living such as eating, dressing, and bathing. In many cases an interview or medical examination is done at the entry point (p. 63). The government does not regulate the old age homes in India; however, it provides minimal financial support to some institutions serving the poor, through the organization like Help Age India. The homes run by large philanthropic organizations are regulated and scrutinized by their own regulatory committees or board of directors, presidents, and donors. In the small, private old age homes the residents are completely dependent on the goodness, knowledge, and skills of the proprietors (p.65).

Lamb explores the reasons for the emergence of old-age homes. Some opt cited reasons, she records, are breaking down of joint families and nuclearization of families, downsizing of families, space crisis in small flats, dispersal of children, younger generation becoming careerist, lust for material prosperity, growing selfishness and individualism, global spread of Western values, daughters-in-law becoming educated, career bound and assertive, inability of the older generation to adjust with fast changing life and the resulting generation gaps, loosening of family and moral obligations (p. 68). Lamb has noticed that while some people look at such contemporary changes in critical terms there are others who welcome these changes with a degree of celebration (p. 69). For Lamb, the conflicting responses to the forces of Westernization and modernization and the associated changes are rooted in tradition-modernity debate which is far from settling down in India. The nuclear families, small flats, transnational living, consumerism, lack of time, efficiency, rationality, materialism and individualism are placed in binary opposition to more 'traditionally' Indian characteristics like family bonds, intimacy, plentiful time, spirituality, large houses and families, care and respect for elders (p. 71).

Lamb observes that changing position of women plays an important part in the rise of old age homes; while some speak in favour of gendered social changes viewing them as liberatory, especially for younger women, while others blame women of younger generation, who share a "modernist" outlook for the plight of the elderly (p.73).

Lamb finds that some family tensions like problems with daughters in law and neglect at the hands of the sons and creation of new possibilities for living also act as important reasons for the development of old age homes in India. She finds out that the incidents of elder abuse are not uncommon. She observes, modern consumerism, professional success, and the self-centeredness of the “me” generation are alluring, yet ultimately void of real social, moral and spiritual value. However, the celebration of life by the elderly in their new abode often gives evidences of agency (Lamb 2012a: 89).

Lamb (2012b) has identified three situations for the elder people to move to old-age homes: (a) when they are thrown away by family members, (b) when they choose home living amidst anguish and family turmoil, and (c) when they want to pursue a new way of living. In the first case the respondents are passive objects, being acted upon rather than acting (p. 93). Second, in many cases the respondents choose to live in an old-age home under very painful and constraint circumstances. Most of the women had faced this before their shift to Home (p. 106). Men also had tensions with their sons and daughters in law but they usually do not talk about their private emotional problems. Many young married women have admitted that their mother-in-law are more interfering while the father-in-law keep away from the internal household affairs and are less demanding (p. 106). The third reason for moving to the old age home is to look for a new way of life. Lamb has found that the elderly with no sons (p.108). The elderly driven by spirituality and inspired by the old institution of *banaprastha* also choose a life in the Home. Many home-inmates, Lamb has observed, have been used to an independent, egalitarian, nuclear family oriented lifestyle and believe that elder residences would be the best place to live such a lifestyle (p. 110). The secure life and the well-planned care system is another factor that attracts the elderly to Home while many others come for companionship and freedom from loneliness (p. 111).

Lamb addresses the question why so many aged women go to old-age homes against their will and why so many women feel trapped and isolated from outer worlds in the homes. She finds out that the women in old age homes wait

for their sons, son-in-law, nephews and grandsons to take them to their families, although for a short spell. Sometimes, daughters, especially those who have achieved a high degree of independence through their own earning, take on the role of escort. Male residents more often than female residents go out on a daily basis on marketing, morning and evening walks. Women largely confine their movements within the walls of the Home. However, the women who are from elite background, highly educated, economically independent did travel on their own (Lamb 2012b: 122).

Lamb has observed that the old-age homes bring a whole lot of freedom to the women and help some break free of traditional patriarchal structures. In support of her observation the author has quoted some elderly women saying 'it is like living among friends' or 'this is like living in a college hostel' (p. 127). The women residents feel like 'living among equals'. They manage their own expenses, go out on their own without being restricted by the male members as was the case in family life. The women who take the decision to move to Home demonstrate their "agency"; the economic self-reliance help them in their pursuit of independent life. For most of the people moving to an old-age home entails a radical transformation of self, from an intensely family focused to a much more individual centered way of being (Lamb 2012b: 132).

### *Other issues*

There are studies that deal with the status and authority of the elderly, the life satisfaction, the demand for special types of household, family life, economic background, psychological and health problems of elderly, their living arrangements and so on.

Pathak, Bora and Borah (2011) observe that traditionally in India, the aged enjoyed place of honour and respect in the family and were treated as repositories of experience, skill and wisdom. With the breaking up of the joint family system the knowledge and the experience of the old people remain underutilized, which is serious loss to the society. The younger generation control the authority in the family, leaving the elderly functionless. This results in loss of

role and status of aged population; a sizeable section of them are viewed as non productive and dependent. The authors have suggested that efforts should be made for fruitful engagement of the elderly. The women with specialized skills and experience need to be engaged in various social welfare programmes (pp. 171-181).

Rayanagoudar, Gaonkar and Itagi (2001) have conducted a study in Dharwad and Hubli on the effect of income, education and religion on the life satisfaction of the elderly retired woman. Among the important findings are: (1) income is an important factor that influences the life satisfaction of the elderly women; the respondents with higher income have greater satisfaction in life, (2) the life satisfaction of the elderly women does not vary according to educational level, (3) the Christian respondents had a lower level satisfaction than the Hindu respondents since the former were relatively more aged and had greater health problems, (4) the widows and those living alone, who were deprived of care and protection from their children, had lower level of life satisfaction. On the whole, the authors observe that deterioration of health, reduced flow of income, loss of spouses, and dispersal of children are some of the unavoidable things in the life of the aged (pp.303-304).

Kumar (1999) has noticed growing demand of special types of housing for the aged both in urban and in rural areas as the greying population is fast increasing both among the rich and the poor. It is thus important for the state to formulate special housing for them and to adopt a suitable social policy for age care services. Kumar divides age care services into two parts (a) institutional care which includes old-age home, paid/rent home, destitute homes, and (b) non-institutional day care centres, old age pensions, free eye care services, free health care services, voluntary help etc. He prescribes that the promotion of senior citizens' housing with special design and space standards should be an integral part of the development process. Elderly citizens may have disabilities such as non ambulatory (chair bound), semi ambulatory (lower limb impairments), sight (visual) and hearing handicaps. The space design for the older population with disabilities has to be formulated keeping in mind the

following factors. (1) bed room, (2) living room, (3) kitchen, (4) bathroom and toilet, (5) window openings, electric outlets/ power points, (6) entrance/exit door, (7) entrance landing and stairways, (8) lifts, (9) availability of crutches and canes and installation of handrail to support the body weight at the critical places.

Kumar makes the following recommendations considering that the economic status affects the level of services the elderly can ask for: (a) there should be provision of special housing schemes at the national level for the senior citizens under the National Housing and Habitat Policy where the government should provide the houses with liberal terms and conditions according to their affordability and economic conditions; (b) the urban local authority should reserve some percentage of sites under any development scheme/plan for the housing of senior citizens with subsidised essential services; (c) in the rural areas financial assistance should be given to the senior citizens through the village *panchayat* to renovate their houses, to set up “retirement village” or “old age homes”; (d) institutional care centres should be associated with age care services like day care centres, old age pension, free health services and income generating programmes; (e) ‘Housing for Senior Citizens’ should be considered as the fundamental right through proper amendments to the Constitution, and so on. The author also proposes that housing for the senior citizens must respond to a new awareness about their special needs within the society. It must serve social and human feelings about the home and its environment with security, comfort, pleasure, happiness, integrity with the family (Kumar 1999: 32).

Shukla (2011) has pointed out that the aged in India are facing an unpleasant situation in an increasingly industrialized and materialized society. There are few open spaces earmarked for the elderly and their space within their homes is continually shrinking. With deteriorating health they are faced with diminishing finances, social isolation, loneliness, excessive free time and loss of family and friends. Shukla has found that recreation and leisure services have a vital role in improving the lives of people living under adverse conditions (p. 63-72).

Kumari (2015) in a study on 129 elderly persons in Kota city in Rajasthan has identified that loneliness of the aged is closely related to poor psychological

adjustment, dissatisfaction with family and social relationships. People experience loneliness either as a result of living alone, lack of close family ties, reduced connections with their culture of origin or inability to actively participate in the local community activities. When this occurs in combination with physical disablement, demoralization and depression become common accompaniments (p.323). Participation in social, cultural and spiritual activities, leisure time activities and family chores help the older people remain relevant, to enjoy respect and esteem, and establish supportive and caring relationships (Kumari 2015: 329).

Balan and Devi (2015), in their study on the elderly in Kerala have identified the quality of life of aged people as the main concern. The authors have interpreted quality of life as a person's sense of well being that stems of satisfaction or dissatisfaction with the areas of life that are important to her/him (p. 332). The condition of happiness and satisfaction, according to the authors, mostly depends on ability to survive, reasonable state of health and multiplicity of things that permit and cause the achievement and desires, and aspirations. Those who continue to cultivate their minds, participate in creative activities and pass on their life experiences to others enjoy a superior quality of life (p. 333). The elderly person's quality of life improves when he or she feels that he or she is not treated as a burden on the family and society. Even though Kerala state in India claimed to have high literacy rate, today the elderly face miserable conditions in their life, as they are bound to the family and not ready to live in old age homes (p. 346).

Lamb (1997), projects the South Asian notion of "personhood" or "self" in a positive frame. She observes that Indian persons are not thought to be self-contained individuals; rather they are connected substantially with the other people, places, and things of their lived-in worlds. Through sex, childbirth, living together, feeding, touching, and exchanging words, people are thought to absorb and give out parts of themselves (p. 280).

Studying the middle or higher caste Hindus residing in village in South Bengal Lamb (1997) has found that people there see themselves in relational terms; they

share ties with other people (especially kin), places and things, which is locally perceived as Maya. Although the term means illusion the local people understand it as attachment, affection, compassion, love. The people of Mangaldihi (the village she has studied) believe that Maya increases with the length of life i.e. the ties of love, affection and compassion increase in number and intensity throughout life (p. 283).

The reasons behind the growing attachment or Maya with the growing age are many. First, the kin such as children and grandchildren (and a spouse and affines) tend to increase in number as a person grows older, Maya - or emotional and bodily ties-necessarily increase (p. 284). Second, the connections with all things - including possessions, money, houses, and village soil - accumulate and intensify. With growing age a person acquires and experiences more of good food, money, sexual pleasure, nice clothes –and thus she/he acquires stronger desire for them all (p. 284). Third, as people grow closer to death, the fear of impending separation with everything in life intensifies Maya (p. 285).

The greatest problem for the elderly is that of freeing their souls from Maya when they die. Maya, according to people in Mangaldihi, binds a person to his or her body, habitat, and relationships so strongly that they fear death; the aged find death painful because they find it difficult to get rid of Maya (p. 285). The elderly of Mangaldihi apply various strategies to curtail their worldly attachments. The first is their movement from center to periphery. They do it by creating detachment from family centers by moving beyond the confines of household space: spending more of their days at others' houses chatting, playing cards, and drinking tea; resting on the cool platforms of temples; loitering at shops or on roadsides, simply watching people come and go-behaviors that were appropriate for them (p. 287).

Many upper caste widows and men stop taking "hot" food (like meat, fish, onion, garlic, etc.) which is believed to excite their worldly passion and attachments. This is regarded as a "cooling" lifestyle, and many older women and men believe that because of the cooling and drying of their bodies, they would not be able to engage in sexual activity even if they wanted to. They

gradually give up their favorite possessions in late life-giving away property, jewelry, favorite saris and so on (p. 289). For the local people, widowhood acts as another phase of disconnection; limiting rice intake once a day, living in celibacy, avoiding participation in any auspicious ceremony, and often (because of their other dietary restrictions) cooking their food separately (p. 292).

Lamb concludes by saying: (1) in India, personhood is constituted via networks of substantial-emotional ties, and one should study not only how these relations are formed but also how they are loosened and taken apart, (2) conceptions of personhood cannot be understood in isolation from conceptions about gendered selves and (3) there is no single or static model of personhood in India (Lamb 1997: 296).

Sarah Lamb, in another study (2012c) has observed that while many elderly move to the old age homes many others live alone in their own house; a large number of middleclass flats or large ancestral houses in Kolkata are now inhabited by one or two persons. The elder people live in their house/flat with their spouse or a live-in servant. The children of many such families work in global cities (p. 173). Many working children live in separate household arrangement within the city. Lamb notices that the middleclass people look at such living arrangements from different perspectives. For some, living apart from children is an indication of waning of traditional Indian values. For them, living in a multigenerational, reciprocal family is a precious part of spiritual, intimate and emotionally sustained lifestyle. There are some others for whom living away from the children has some positive impacts. Living independently can bring gendered egalitarianism and freedom from traditional mores and tensions. Both age groups find the opportunity to pursue their own interests and engagements with peers (p. 173).

Among the parents whose children stay abroad, Lamb has observed that there is a sense of pride and accomplishment about their own and their children's mutual independence. They had promoted such independence by raising their children in cosmopolitan households, sending them to elite English medium schools, funding higher education abroad, encouraging the pursuit of prestigious

professional careers, and espousing bourgeois principles such as independence, freedom, self actualization and personal fulfilment (p. 189). Rather than settling permanently with their children the aged parents deliberately choose to remain in India defying their children's request to join them because that would mean sacrificing their self-esteem and freedom. Independence, for them, does not signify lack of love. Although there is an absence of daily material exchanges and co-residence, long distance love is very much in existence (p. 193).

The author also talks about the commodification of care and the outsourcing of *seva*. To provide social, emotional and practical support for elders living away from their junior kin, a new industry of extra – family ageing is emerging in India. Old age homes in India are mostly market based institutional form of non family ageing. An increasing number of both charitable and for profit elder care organizations are also materializing to offer support to financially well off elders living in their own homes (p.194)

According to Lamb, many aged people are against commodification of care or *seva*, which has been the responsibility or prerogative of the family members and close kin (p. 196). *Seva* has been a part of long term intimate kinship relationship of reciprocal interdependence. However, under changed circumstances, a large majority of middle and upper class families in both rural and urban area hire servants who help them in their household works. This kind of arrangement has long existed in India and is not interpreted as a particular feature of modernity (p. 198). Indians regard it as perfectly acceptable for the servants to provide child and elder care, if the serving takes place in the context of a household where the adult householders also live (p. 199).

The author also brought to light the role of friends and various clubs in the life of the aged. She argues that living alone requires not only negotiating care arrangements, for many it also demands new modes of meaning beyond family. The NGOs working for the aged emphasize the cultivation of peer friendships, active aging, volunteer work, lifelong hobbies, fit bodies, age specific magazines, and political awareness of having distinct rights and identity as an international group of senior citizens (p. 200). My study and observations bear close

resemblance with those of Lamb, although I studied her writings only in my final writing stage.

Singh (2015), studying chronic morbidity among the elderly women in an urban setting in Tamil Nadu, has observed that health status impacts upon the quality of life of the elderly people in a significant way. The major elements of health status are perceived health, chronic illnesses, and functional status. As age advances, due to deteriorating physiological conditions, the body becomes more prone to illness. The illnesses of the elderly are multiple and chronic in nature. Aged women tend to be less healthy than their male counterparts. Their living conditions are not conducive to good health. Compared to their wealthier peers, they are more likely to be living alone, to have inadequate diets, to have lesser access to information about how to maintain their health and to have fewer physician contacts (p. 348).

The study has found out that a large section of the elderly women are suffering from one or the other chronic morbidity conditions – 44 per cent with only one chronic morbidity, 43 per cent from two or more chronic morbidities. The prevalence of eye problem, rheumatism/arthritis and blood pressure appear to be the major chronic ailments among the sample elderly. The prevalence of elderly women suffering from two or more chronic morbidities is comparatively higher among old-old, widowed and those belonging to scheduled caste/tribe communities than their counterparts. Conversely, the prevalence of elderly women suffering from higher number of chronic morbidities is lower among those who have higher education or belong to households with higher income and higher standard of living index (SLI). Further, the percentage of elderly women suffering from two or more chronic morbidities is higher among those who have greater number of sons and living with children/others. Among the policy prescriptions that the author makes are: (1) the elderly have to be educated about preventive measures at the earliest to delay the morbid condition, (2) steps to be taken to establish geriatric wards in government hospitals, (3) to organise medical camps for the elderly residing in slums and semi-urban areas, (4) to motivate the adults to save and/or invest in a way to avoid financial crisis in

old-age, and (5) those who are suffering from chronic morbidity conditions may be given concessions in transportation to visit hospitals with at least one accompanying person by the government (Singh 2015: 361).

In her study in Navi Mumbai, Gupta (2015) has looked into the physical and psychological health of older women across three economic classes - poor, middle income group and well to do group and the factors influencing their health. The author has found that the factors that significantly impact upon the psychological well being of older women across class groups are marital status, formal education, living arrangement, experience of abuse, change in decision making, acute and chronic morbidity, general health and the support from family and friends. The older women from upper class suffer more from lifestyle diseases and chronic diseases while older women from poorer strata suffer from severe stress emanating from financial insecurities and work pressure. Majority of older women across all class groups utilise healthcare, however majority of older women from poor strata utilise care from public facilities in order to minimise their out-of-pocket expenditure while older women from upper strata usually seek treatment from private providers. The majority of older women from well-to-do class have reported that their ill health has affected their activities of daily living followed by older women from poor class and MIG class (p. 44).

Kumar (2015) examines the psychological wellbeing and marital satisfaction of the elderly couples in the post marital stage of life. From the study of 30 elderly couples in Kottayam city in Kerala the author finds out the psychological wellbeing and marital adjustment among couples in the post parental stages of life are affected by the factors such as age, education, occupational status, number of children, retirement and so on (p. 89). Similar factors such as autonomy, personal growth, positive relation with others, purpose in life, self acceptance, the expression of affection, communication skills, the skill of problem solving and so on also impact diversely upon their psyche and quality of relations. The author has used a term “empty nest stage of life” to refer to the phase of life when the children are grown up, but no longer live at home. Kumar observes that the empty nest phase promotes freedom and improved

relationship, and also have a more mature, more emotionally meaningful and deeper relationship between the aging couples (p. 90).

Agarwala and Saikia (2014) in their study on the living arrangement of the aged women in Kamrup District of Assam have found that rapid urbanization has brought about in social values and lifestyles, which, in turn, influence the living arrangements of the people (p. 359). The scholars have found that the pattern of living with adult children is still widespread in both urban and rural Kamrup with the proportion being comparatively higher in rural. Living with a married daughter's family is a less preferred alternative for the elderly women (p. 360).

WHO prepared a report on *Ageing in India* (1999) covering various dimensions of ageing like demographic transition, health and morbidity, mental health of the elderly both in urban and rural areas. This report also brings to light the various programmes which promote the wellbeing of the older people. While acknowledging that much progress has been made in the quality and quantity of health care services in India in the last fifty years the study records that the improvements have been uneven with urban areas getting the best advantage of modern technological advances in medicare. Although the elderly people in India have reasonable access to family care, they are inadequately covered by economic and health security. An Old Age Pension Scheme has been introduced to meet the needs of people who have no means to support themselves. The ministry of Welfare makes financial assistance available to voluntary agencies to run day care centres. In 1992 the schemes of giving rebate on the income tax paid by senior citizens were introduced. The law also helps retired citizens in evicting tenants who occupy their houses and refuse to vacate them. Although concessions in train and air fares for senior citizens are made by some states, the environment is not as "elder friendly" as in European countries.

Keeping in mind that the proportion and actual number of the aged population will grow and their problems will compound the WHO report proposes to raise policy makers' awareness of the multiple issues related to ageing in the country. The professionals, politicians and the voluntary workers need to be sensitized. Considering economic security as the prime concern the report proposes to the

state to introduce an old age pension scheme for all needy, especially the rural aged, widows and people in urban slums. Schemes to keep elderly people economically active have also been mooted. NGOs have been encouraged to provide income generating activities so that people feel economically independent and also experience an increase in self esteem. Tax incentives for families providing long term care to elderly family members are also recommended. An examination of culturally relevant strategies for improving the wellbeing of elderly people has been strongly recommended. The report notes that the Indian culture embodies many elder friendly values and practices, which need to be reinforced.

### ***Summary of the observations***

Literature on the aged and their problems is rich and multi-faceted; I could review only a selected few, which I thought would be relevant to my study. The burgeoning literature in the field of social gerontology is a clear indication of the growing concerns of the social scientists, the State, NGOs, the international organization like WHO about the problem of aging and the problems of the aged. The dimensions covered in by the scholars in their studies are relational, economic, social-cultural, psychological, gender, housing, health, neglect and atrocities and policy matters. The studies, done in different parts of India and in other countries, are primarily of empirical nature and application oriented. Most of the literatures are on the elderly with urban middleclass background, which make them useful for my study. The studies have tried to capture the changing life of the aged against the backdrop of demographic, familial, social and cultural changes, which come with the processes like industrialization, urbanization, spread of education, and so on. The literature reviewed represent a commonly shared view that the processes like urbanization and Westernization have contributed to the breakdown of Indian joint family system and erosion of the traditional values which earlier used to protect the elderly from being marginalized and isolated. The focus on material greed, careerism and individualism of the younger generation lead them to neglect and even humiliate

the elderly. Some studies suggest that the old-age homes have come as a welcome solution to some of the problems of the urban elderly as they allow them to live a life of freedom and dignity. Some studies recognize the “agency” and rationality in the senior citizens to take their own decisions when they are faced with social isolation and other kinds of problems. The studies have observed that of late the state has come up with some policies and programmes for the wellbeing of the elderly, particularly the poorer section, but the measures are grossly inadequate. The scholars have come up with innovative policy prescriptions, in the areas of health (physical and mental), financial security, special type of housing, programmes for keeping the aged creative, sensitizing the youth about their responsibilities towards the aged, and many others, which deserve careful consideration by the state.

Sarah Lamb is the one of the very few scholars who has studied the elderly both in rural and urban situations in West Bengal and done some concept-building exercise. She has observed that Western modernity has a limited appeal to the urban middleclass and its penetration is limited to certain areas of urban life and of the life of the aged. India and its regions, Lamb rightly observes, have long and strong traditions and the elderly urbanites (and their family members) cherish and carefully preserve those traditions, which are not necessarily anti-modern. The urban mind is ready to accept the growing individualism and careerism, the dispersal of the younger generation, life in old-age homes and the freedom and self-esteem that it brings to the elderly. The generalization that Lamb draws is that the Indian socio-cultural complex is fundamentally different from that of the West and it would be erroneous to assess the family and social relations, the collective values and the life of the elderly in India in the light of Western discourse of modernity. The Indians are open, logical and pragmatic to embrace change, especially in the light of individual freedom and assertion of “agency”, but they, at the same time, value their social relations even when living alone in old-age homes. Lamb has conceptualized such a situation using the term “alternative modernity”, which I will take up for examination in the concluding chapter of my thesis.