

A Study of Elderly Living in Old Age Home and Within Family Set-up in Jammu

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ABSTRACT The last century has witnessed a rapid increase in the population of the elderly people in the developed and industrialized countries. This phenomenon is not restricted to the western world only, but many countries such as ours are now feeling the impact of this transaction. This situation could be attributed to a combination of factors such as increase in age, longevity and decreased death rates due to advancement in the field of medicine, improvement of life expectancy at birth, and enhancement in the average span of life. India ranks 4th in terms of absolute size of elderly population. The country is not adequately equipped to look after their special health needs and the changing traditional value system. A feeling is now growing among the aged persons that the attitude of the younger generation towards them is not as desired. In the above context, a study was conducted to understand the feeling of the elderly residing in the old age homes and within the family setup in Jammu. The sample of elderly women was selected using the "Purposive sampling" technique to select 30 elderly women from the old age home as well as a similar number from the family setups. The data was collected using a specially designed Interview schedule and observation technique through a house- to-house survey for those residing in the families. Non-working status of these women and above 60 years of age was criteria for sample selection. Results of the study revealed that most of the elderly felt the attitude of the younger generation is unsatisfactory towards them especially those who were in old age homes in terms of getting respect, love and affection from the family members instead they were considered as burden for others. Women living in the families had a positive attitude towards old age. The social relationship of the elderly women living in families and those living in old age home also differed. Noticeably; there was a fall in the overall efficiency, sociability, degree of involvement in work and hobbies. On the other hand, better social relations were maintained by the family dwellers because they had regular interaction, expressions of feelings and support from the family.

INTRODUCTION

India like many other developing countries in the world is witnessing the rapid aging of its population. Urbanization, modernization and globalization have led to change in the economic structure, the erosion of societal values, weakening of social values, and social institutions such as the joint family. In this changing economic and social milieu, the younger generation is searching for new identities encompassing economic independence and redefined social roles within, as well as outside, the family. The changing economic structure has reduced the dependence of rural families on land which has provided strength to bonds between generations.

The traditional sense of duty and obligation of the younger generation towards their older generation is being eroded. The older generation is caught between the decline in traditional values on one hand and the absence of adequate social security system on the other (Gormal 2003).

Illness increases with age. All else being equal, an older population has greater needs for health care. This logic has led to dire predictions of skyrocketing costs—"apocalyptic demography" (Smith et al. 2000).

Life satisfaction continues to be an important construct in the psycho-social study of aging. It is one of the commonly accepted subjective conditions of quality of life and seems to be one of the facets of successful aging, both of which are key concepts in aging. Research reports that life satisfaction is strongly related to socio-demographic and psycho-social variables (Iyer 2003).

Old age means reduced physical ability, declining mental ability, the gradual giving up of role playing in socio-economic activities, and a shift in economic status moving from economic independence to economic dependence upon others for support. Old age is called "dark" not

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because the light fails to shine but because people refuse to see it (Gowri 2003).

The expectancy of life in India is much less than 60 years. Psychologically too, most Indians appear to consider themselves old earlier than the chronological age of 60 years and the Indian women regard themselves to be old even much earlier (Montross et al. 2006)

According to Mayor (2006), "Some people use their chronological age as a criterion for their own aging whereas others use such physical symptoms as failing eye-sight or hearing, tendency to increase fatigue, decline in sexual potency etc. Still others assess their aging in terms of their capacity for work, their output in relation to standards set in earlier years, their lack of interest in competing with others, lack of motivation to do things or a tendency to reminisce and turn their thoughts to the past rather than dwell on the present or the future." The acceptance of the fact that they are old develops in the aged an "old age complex" (Antonelli et al. 2002).

In India as elsewhere, life expectancy has improved with better medical care and improved nutrition (Kanwor 1999). As a result, people are living longer. They constitute a vastly experienced human resource with tremendous potential to contribute to national development. Their well-being is the concern of both the society and the state. The traditional Indian family structure provides adequate mechanism for meeting their needs.

Family is the main source of care giving to all its members. One's need for and ability to give care is negotiated by one's place in family life cycle. Ageing of population is an obvious consequence of the process of demographic transition. In a globalizing world, the meaning of old age is changing across cultures and with in countries and families (Bergeron 2001).

Nowadays, the role of families in case of older person has declined due to structural changes which have taken place in the Indian society and the concomitant disintegration of the joint family system, which results in the rejection or neglect of the aged. Life in institutions need not be bad but it commonly is. This holds true everywhere in the world. People go to institutions mainly because they have no relatives to care for them. Thus, the individuals who see alternative accommodation due to isolation or loneliness, relocation of congregate – style accommodation may increase their social contact and have a posi-

tive impact on their well-being (Bergeron 2001). One of the major impacts of globalization is breaking up of traditional family system. In India, migrants from the villages and towns to cities predominate, resulting in breaking up of families into nuclear families. The aged who are left behind have to fend for themselves. This is leading to an increased danger of marginalization of the geriatric population due to migration, urbanization, and globalization. Another impact of the globalization is the increasing economic burden on the elderly, especially the women who have practically non-existent property rights and other social security measures (Bhat 2001).

It is important that the state, civil society and community recognizes the rights and needs of the elderly women and make suitable policies legislations and effective implementation of health and security schemes which already exist. Specific state interventions are required for the aged women, they being most vulnerable and for the aged who are below the poverty line. There is a need to protect the human rights of the elderly and have gender just laws and policies to ensure adequate economic and social protection during disability and old age, especially where the aged lack adequate family support (Bhat 2001).

The elderly citizens are in need of urgent attention. They do not need our pity, but the understanding love and care of their fellow human-beings. It is our duty to see that they do not spend the twilight years of their life in isolation, pain and misery. Older persons are, therefore, in need of vital support that will keep important aspects of their lifestyles intact while improving their over-all quality of life (Dandekar 1993).

Hence, the present study was conducted to compare the general feelings, social relationships and personal likings of the elderly residing with families and in old age homes, with the following objective in view:-

The present study was undertaken with the following main objectives:-

1. To study the background profile of elderly staying at old age homes and within the family.
2. To compare the environment of elderly women residing in old age homes and within the family environment in terms of.
3. General feelings.
4. Social relationships.
5. Personal likings.
6. To assess the attitude of elderly.

METHODOLOGY

The present study is based on an urban sample of 60 individuals aged 60 years and over. Out of these, 30 were institutionalized and 30 were from family set-up. The data were collected from Jammu city. Jammu is spread over an area of 222236 sq. kms. and has a total population of 10143700 (Census 2001) with literacy rate of 55.52 percent. The data was collected using a specially designed Interview schedule and observation technique through a house-to-house survey for those residing in the family. The data on institutionalized aged was collected from, "Home for the Aged", Ambphalla, Jammu.

Most of the individuals included in the present study were sixty years of age or above and non-working. The non-institutionalized elderly persons provided information about their age, while the age of the institutionalized individuals was ascertained from old age home records. The data was collected using a specially designed interview schedule and observation technique through a house-to-house survey for those residing in the family. Prior to final data collection, the interview schedule was tested on a small subsample and subsequently finalized, upon successful testing and minor modifications. The interview schedule was divided into four sections. The first section included questions regarding general information of the respondents. The second section included questions pertaining to general feelings of old age people to happiness, loneliness, depression, security, insecurity, different moods. The third section included questions regarding social relations of old people with friends, relatives and family members and the fourth section included questions regarding the personal interests and hobbies of old age people.

The data were collected in the months of April and May 2008. The information, thus, obtained was analyzed according to the objectives of the study, coded and tabulated. The results have been presented in the form of numbers and percentages.

RESULTS AND DISCUSSION

The problems of the aged vary from society to society and have many dimensions in our country. Old age had never been a problem for India where a value based joint family system is

supposed to prevail. Indian culture is automatically respectful and supportive of elders. Ageing as a natural phenomenon has all along engaged the attention of the civilized world. Provision for the aged in the society has become one of the constitutive themes of our modern welfare state. However the disintegration of the joint family system and the impact of economic change have brought into sharp focus the peculiar problems which the old people now face in our country.

General Information

Table 1 reveals that 47 percent of the total respondents belonged to the age group of 65-70 years. The family size of the respondents varied from 2- 13 family members in the family setup, whereas for most of the aged in old age home, the family size varied from 2-9 members. Extended form of family seemed to be the most popular form now in both the setups.

Table 1: General information of the respondents

Variables	Living in the family		Living in the institution	
	N	%	N	%
<i>Age</i>				
+60-65yrs	10	33.3	1	3.3
+65-70 yrs	14	47	5	16.6
+70-75 yrs	4	13.3	14	47
Above 75 yrs	2	6.6	10	33.3
<i>Education</i>				
Illiterate	11	36.6	28	93.3
Primary	9	30	1	3.3
Middle	5	16.6	-	-
Matric	3	10	1	3.3
Hr.sec.	-	-	-	-
Graduation	2	6.6	-	-
<i>Type of Family</i>				
Joint family	11	36.6	10	33.3
Extended family	19	63.3	20	66.6
<i>Number of Family Members</i>				
2-5	7	23.3	18	60
6-9	14	46.6	12	40
10-13	4	13.3	-	-
13-above.	5	16.6	-	-

General Feelings of Elderly Women

This section tries to study the internal general feelings of old age people like: happiness, loneliness, depression, different moods, security and insecurity – social, emotional, economical, physical, help and support. The perception of the aged at youth was that 'old age' was a period of relax-

ation in life. About 60 percent of the elderly women living in the families had a positive attitude towards old age, while negative views regarding old age and the perception of old age as last stage of life which lacked in social security was observed in views both in family setup and old age home.

Figure 1 reveals that majority (63.3 percent) of the elderly women living in families felt that it was a period of dependency because they were dependent upon their family for support, 16.6 percent of them felt economically insecure, whereas 20 percent of the respondents now perceived old age as a stage of loneliness. In case of institutionalized inmates 40 percent stated economic insecurity and loneliness as the reason for their negative perceptions.

Stressful family relationships and lack of family care precipitates the elderly's poor psychological well-being (Litwin and Shiovitz 2006). Twenty-seven percent respondents stated that they felt neglected in the family but the respondents kept themselves busy by taking up various household activities like looking after their grandchildren, doing small household chores etc. and only 3.3 percent of them reported that they were humiliated by their daughters-in-law and their sons did not care for them. As is true of our culture, 70 percent of the elderly women living in the families were looked after by their family members and the respondents stated that their children gave them respect, proper care and comfort. On the other hand, 63.3 percent of the elderly women living in the families got support from their family members. They also received financial, social and emotional support from their children.

A study conducted by Chou and Chi (2001) revealed that elderly people living alone have a higher level of financial strain, more depressive symptoms than others and have a lower level of satisfaction with life. Similarly in the present study too, respondents have reported financial crisis, due to lack of the source of income both in family setups as well as in the institution. Institutionalized elderly women felt helpless because they had no money to meet their material needs.

Many people think that ageing is a completely negative final segment of the human life span, but it is not so. Awareness and acceptance of the fact that ageing has physiological, psychological and social determinants would make the ageing process acceptable, cheerful perhaps even desirable by making living meaningful. Nalini (2000) also reveals that some of the respondents, had "feeling of insecurity," "Loss of dignity" and "Lack of emotional support" when neglected or ignored by the family. Whereas a similar opinion was expressed by the institutionalized elderly -a more negative self-concept, lower level of self-esteem and a restricted interpersonal-self as compared to the non-institutionalized elders as has been reported by Antonelli et al. (2002).

Social Relationship of the Respondents

Children are expected to take care of their elderly parents. However, the processes of social change, such as industrialization, urbanization, and migration, can have a negative impact on care for elderly people. In the present study, it was observed that 96.6 percent of the elderly women living in the families had social support

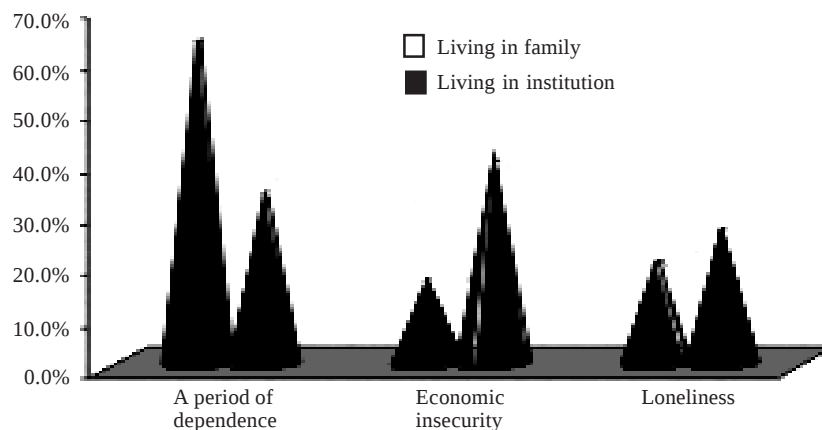


Fig. 1. Present feelings towards oldage

from their sons and daughters-in-law during their illness. The effect of this phenomenon is evident from the weakening of the traditional bond of joint family. The elderly have been the biggest sufferers of this change of values and family system. Many of them feel that the attitude of younger generation towards them has undergone a tremendous change and become less satisfactory.

There is a common belief that in old age people tend to become more and more inclined towards religion. To an extent, religion provides a sort of social support in the form of personal contact with other people at religious gatherings with whom they could share their thoughts. It is believed that, 'it is around this social and religious participation that the life of the old revolves'. It was observed that 33.3 percent of those living in families reported participation in social and religious ceremonies. They expressed that their interaction to relatives and friends was due to their involvement in the religious functions.

Table 2: Company preferred by the elderly women

Company preferred	Living in the family		Living in the institution	
	N	%	N	%
Family member	13	43.3	5	16.6
Relatives	10	33.3	-	-
Neighbours	3	10	-	-
Others (attendant, visitor, friends etc.)	-	-	5	16.6
Inmates	-	-	16	53.3
Want to live alone	4	13.3	4	13.3

It is apparent that the number of respondents who got the chance for religious involvement was less in the institution than in the familial setup. Montross et al. (2006) pointed towards a positive relationship between friendship and successful ageing. It suggests that larger the number of close relatives and the more frequent is the contact with friends, the higher is the score of successful ageing indicators among elders (Table 2).

Personal Likings of the Respondents

Life satisfaction continues to be an important construct in the psychosocial study of aging. It is one of the commonly accepted subjective conditions of quality of life and seems to be one of

the facets of successful aging, both of which are key concepts in aging. Research reports that life satisfaction is strongly related to socio-demographic and psycho-social variables. It has been found that two socio-demographic characteristics (income and education) influence life satisfaction both directly and also indirectly through psychosocial factors such as activity-physical activity level, satisfaction with leisure activities, and social contacts, Perceived health, and physical illness (Huoliqin 2002). As regards the personal likings of the elderly women living in the families and old age institution, it was analyzed that 43.3 percent of the elderly women living in the families had more interest towards reading religious books, magazines and newspapers for passing their time, while 33.3 percent of them had interest towards watching T.V. and the others (23.3 percent) listened to music for peace of mind. 33 percent of the elderly women living in the institutions stated that listening to music relaxed them and helped forget their tensions, worries and stress. Only 6.6 percent were religious minded. However, 87 percent of institutionalized elderly women revealed that they worshiped at the institution because a temple already existed inside the institution (Table 3).

Table 3: Interest in different activities

Recreational activities	Living in the family		Living in the institution	
	N	%	N	%
<i>Recreational Activities</i>				
Listening music	7	23.3	10	33.3
Reading books, magazine etc.	13	43.3	2	6.6
Watching T.V	10	33.3	9	30.0
<i>Outdoor Activities</i>				
Visit the temple	20	66.0	26	86.6
Go for shopping	7	23.3	4	13.3
Go for satsang, kirtan etc.	3	10.0	-	-
<i>Lesiure Time Activities</i>				
Talking to others	16	53.0	19	63.3
Meditation	3	10.0	1	3.3
Writing personal dairy	-	-	-	-
Recapitulate memories	4	13.3	10	33.3

Talking about the family members seemed to be a favourite pass time for the residents of both the settings, especially for those living in the institution. Remembering the old happy memories and sharing these with their inmates gives nostalgia about feeling of accomplishment. It acts as a catharsis for the elderly. As few as 3.3 percent were resorting to meditation to keep themselves relaxed, tension free and refreshed.

CONCLUSION

Old age had never been a problem for India where a value-based joint family system is supposed to prevail. Indian culture is automatically respectful and supportive of elders. Ageing as a natural phenomenon has all along engaged the attention of the civilized world. Provision for the aged in the society has become one of the constitutive themes of our modern welfare state. The problems of the aged vary from society to society and have many dimensions in our country. However, the disintegration of the joint family system and the impact of economic change have brought into sharp focus the peculiar problems which the old people now face in our country. And in the traditional sense, the duty and obligation of the younger generation towards the older generation is being eroded. The older generation is caught between the decline in traditional values on one hand and the absence of an adequate social security system on the other hand thus, finding it difficult to adjust in the family.

Ultimately, it could be concluded that the general feelings of the elderly women living in the families had better position than that of the elderly women of the institution. Better social relations were maintained by the family dwellers because they had regular interaction, expressions of feelings and support from the family. The existing condition of the elderly women living in the institution was that they felt lonelier, depressive and had a lower level of satisfaction with life. In this context, the need for preserving our tradition of a joint family and the mutual cooperation and understanding between the younger and the older generations could be more pressing. The situation calls for concerted efforts of the government, non-governmental organizations, religious institutions and individuals not only to understand but also to solve or at least

mitigate the whole gamut of problems resulting from a graying society so that the aged people can lead a dignified and meaningful life.

REFERENCES

- Antonelli E, Rubini V, Fassona C 2000. The self-concept in institutionalized and non-institutionalized elderly people. *Journal of Environmental Psychology*, 20: 151-164.
- Bergeron LR 2001. An elderly abuse case study: Case gives stress or domestic violence. *Journal of Gerontological Social Work*, 34(3): 47-63.
- Bhat K 2001. Ageing in India: Drifting international relations, challenges and option. *Cambridge Journal Online*, 21: 621-640.
- Chou K, Chi L 2000. Comparison between elderly persons living alone and those living with other. *Journal of Gerontology Social Work*, 33: 51-56.
- Dandekar K 1993. *The Elderly in India*. New Delhi: Sage publishers.
- Gowri GB 2003. Attitudes towards old age and ageing as shown by humor. *Gerontologist*, 17(2): 220-226.
- Gormal K 2003. *Aged in India*. Mumbai: TISS Publishers.
- Huoliqin Y 2002. Adding life to years: Predicting subjective quality of life among Chinese oldest-old. *Demographic Research*, 9(2): 52-69.
- Iyer V 2003. Old age protection in urban agglomeration of a developing economy: An integration analysis. *Aging and Human Development*, 1(3): 241-250.
- Kanwor P 1999. Psychosocial determinants of institutionalized elderly. *Indian Journal of Gerontology*, 12(3): 27-39.
- Litwin H, Shiovitz E 2006. Association between activity and well-being in later life: What really matters? *Ageing and society*, 26: 255-242.
- Mayor R 2006. Significance of grandparents: Perceptions of young adult grandchildren. *Gerontologist*, 16(1): 137-140.
- Montross L, Depp C, Daly J, Golshan S, Moore D 2006. Correlates of self-rated successful ageing among community dwelling older adults. *The American Journal of Geriatric Psychiatry*, 14 (1): 43 – 51.
- Nalini B 2000. Institutional care for the aged: Life twilight years. *Indian Journal of Community Guidance Service*, 6(1): 27-29.
- Smith J, Borchelt M, Jopp D 2000. Health and well-being in the young old and oldest old. *Journal of Social Issues*, 58(4):733.