International Journal of Research in Social Sciences

Vol. 7 Issue 9, September 2017,

ISSN: 2249-2496 Impact Factor: 7.081

Journal Homepage: http://www.ijmra.us, Email: editorijmie@gmail.com

Double-Blind Peer Reviewed Refereed Open Access International Journal - Included in the International Serial Directories Indexed & Listed at: Ulrich's Periodicals Directory ©, U.S.A., Open J-Gage as well as in Cabell's

Directories of Publishing Opportunities, U.S.A

THE STUDY OF THE ELDERLY LIVES: THEIR CONCERNS AND SUGGESTIONS

Diljott Kaurr *

Abstract

Life is a cluster of various stages and old age forms the final phase of one's life cycle. The stage is marked by lifetime of experience. During old age, one is drained of the vitality, is compelled to become dependent on children and besides this there are number of physical, social, mental, emotional problems which act as a roadblock in smooth and comfortable living. Elderly people have given their youth, energy and skills to the nation and their families and an attempt should be made to lessed their difficulties and problems faced by them. The present study focuses on studying the problems faced by the elderly, the societial influences escalating their difficulties, evaluating the present administrative policies and provisions and after analyzing them, further suggesting measures which shall lead to positive changes in the lives of the elderly and help them live more satisfying and happier lives.

^{*} University Gold Medalist), Masters of Arts (Human Rights, Panjab University, Chandigarh

1. Introduction

Aging is a natural process of becoming older, it is a universal reality. The human life could be divided into different stages such as childhood, adolescence, adulthood and old age. Traditionally 'Elderly' refers to people who have attained a certain age chronologically. World Health Organization (WHO) calls all persons who are 60 years and above as 'Elderly' or 'aged' Ageing can be biological (bodily changes occurring in an individual), psychological (changes in individual, changing circumstances in the society).

There is not a single age specification that is accepted worldwide at which point a person could be treated as aged or old. Aging has three broad dimensions: Physiological, Psychological and Social ageing². There are various theories of aging which preview the old age from different perspectives. The modernization theory portrays that the status of the elderly declines as societies become more modern. The disengagement theory looks at old age as a time when both elder people and society engage in mutual separation. The activity theory of aging assumes that how we think of ourselves is based on the roles or activities. The continuity theory points that as people grow old, they are inclined to maintain same habits, personality and style of life.

Depending on the cultural and personal philosophy, aging can be seen as an undesirable phenomenon. Whatever is the race or the country, there are multifactor problems faced by the elderly. There could be physical problems such as visual impairment, dementia, hearing loss, heart diseases, cancer, stroke or mental/psychological problems such as neglect, ignorance, facing loss of control, lack of preparedness for old age or frustration³. There could be poor accessibility, lack of information and support, high cost could make medical facility beyond reach or there could be social problems such as disintegration of joint family system, isolation, loss of social circle and lack of knowledge of technology makes them feel redundant⁴.

¹ Harry.R.Moody.2010. 'Aging: Concepts and Controversies'.Pine Forge Press.

² Ramamurti. PV and Jamune. D.1993. 'Psychological Dimension of Aging in India: Indian Journal of Social Sciences'.

³ World Health Organization.1959 'Mental Health Problems of Aging and the aged'.

⁴ Atchley Robert.1985. 'Social Forces and Aging: An Introduction to Social Gerontology; Belmont,CA: Woodsworth'

The present study focuses on understanding the common problems faced by the elderly; regarding the current health status of the elderly, their treatment thereof, how contented and satisfied they are with their lives, the sensitivity of their families to their current needs and emotions and how effective are the Government policies for the elderly.

LITERATURE REVIEW:

There are few books, journals and articles that have been referred during the course of this study which also helped gain a detailed insight into the lives of the elderly people, various difficulties faced by them across the globe. Some of the referred ones are:

According to content present in "Aging: Concepts and Controversies", Pine Forge Press,2010, the author has covered the course of life and social contacts, stratification and inter generational relations, work and economy, politics and have applied to aging along with social interventions. It has been tried to make a beautiful comparative analysis of the lives of the elderly of different age groups.

According to content present in "Psychological Dimension of Aging in India Indian Journal of Social Sciences", Indian Journal of Social Science, 1993, the authors have tried to study various dimensional perspectives of the elderly population and collaborated all the information relevant to the aged in a way that it is of use to policy makers, planners, researchers and social workers in the field of aging and would help them obtain relevant information to meet human needs of aging.

According to content present in "International Journal of Aging and Human Development", Baywood, 1986 consists of clinical and practical application of various problems of the elderly. It has an international appeal and explains the process of development and the life cycle of a human life, emphasizing on the elderly.

According to the content present in "Aging Almanac", 2001 gives up to date overview of different special subject areas in the field of aging. The various details about aging have been

based on solid academic sources. The surveys of various areas in the world have been done and analysis of various situations have been made and compared.

2. Research Method

The objectives of my study are to know different kinds of problems faced by the elderly, to know their living conditions, to understand the perceptions of family and society towards the elderly, to study the range of priveleges and facilities available to the elderly and to access whether the elderly are considered an asset to the society or a liability. The chosen area for the study is village Sohana, adjacent to Mohali. Since this village is just on the boundary of Mohali, a well developed city so the income of people of this village has undergone a sea change. The area is dominated by big landlords and rich people and many have sent their children to settle in countries like Canada and USA. As a result, some children either flew abroad with their families, others became drug addicts and eventually the elderly were left alone to look after themselves and this made a necessary study on the elderly people, their problems and frustrations.

A sample of the present study was selected from the total oof 35 aged persons, residing in village Sohana, in the age group of 65 years and above. Out of total 35 respondents, 21 were males, 14 were females. The respondents were of variable age groups ranging between 65-95 years with maximum respondents in the age group of 70-75 years. A stratified random sampling technique was used to select the sample. A visit was paid to the houses of these elderly people and information was collected through a standardized questionnaire, which is a primary method of data collection. Observation and interview methods were also employed.

3. Results and Analysis

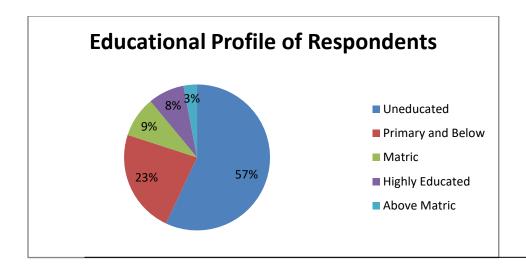
After effectively collecting the data, an analysis was made. For that the segregation of the respondents was required, the age profile of the respondents and totaling up the answers in different categories and finding the percentages of the same was done. The responses have been pictorially represented in the form of graphs, pie diagrams etc. Out of total 35 respondents, 21 were males and 14 were females. The respondents are of variable age groups ranging between 65 years to 95 years with maximum respondents in the age group 70-75 years.

	1
Age	Number of Elderly
<65 years	7
<70 years	9
<75 years	10
<80 years	5
<85 years	2
<90 years	1
<95 years	1
Total	35

Age Profile of the Respondents

3.1. Marital status and families of the respondents: Out of total 35 respondents, 60% were married, 37% were widow/widowers and 3% were divorcee. Then it was observed that 9% respondents are living alone as their spouses had died and children either moved away or detached themselves emotionally, 20% of them lived as paying guests with their relatives with even fulfilling the bare minimum needs themselves. Focussing on the children of the elderly, majority of them, around 54% had both sons and daughters; 40% had son only. The figures clearly depicted preference for a male child but when it came to taking care of the elderly parents, the figures were different. 43% of them were taken care of by the daughters while in comparison just a marginal number of 8% were looked after by the sons. Only 17% children took their parents as an asset and 43% took their care as a matter of social compulsion.

3.2. Education Level of the respondents: Majority of them were uneducated and ignorant. 57 % were uneducated, 23% were educated upto the primary level or below, 9% studied till matriculation and 3% studied above matriculation and 8% were highly educated. Many of them could not even sign properly. But apart from being uneducated, it was observed that they were quite aware about their surroundings and could well describe how satisfied or dissatisfied they were on various issues.



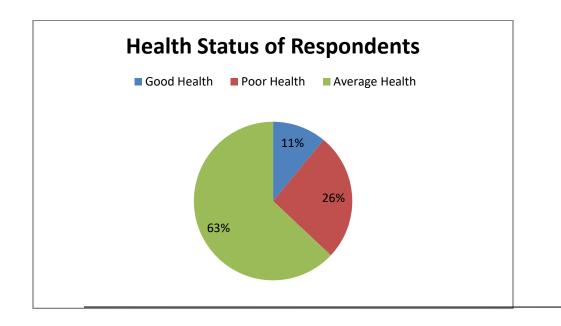
3.3 Mental Health of the respondents: On analyzing the desire to live amongst the respondents, a considerable number of respondents do not want to live any more, which is a shame on the presnt generation and society as a whole. These elderly are the same people who never complained about anything in life when they took care of their children. When the elderly were asked in detail about any unfulfilled dreams they had, 22 respondents replied 'yes' and 13 said they did not have any dreams. There were few unfulfilled desires such as many said that they should have been educated enough to be financially independent to take care of themselves, some believed that they should have educated their daughters well, few had a dream of living in a big city, some also repented of not having given their daughters equal share in the property. Majority of them were circled with feeling of loneliness because 32 respondents said yes and only 3 said they did not feel lonely. They cited multiple reasons such as emotional detachment by children followed by death of a partner and change in environment due to shifting of living base, the families interacted very less with them as they were least bothered, they did not have time to talk, they were busy watching TV and mostly they felt a generation gap with their children.

3.4 Work profile of the Elderly: 15 respondents said that they still work while 20 people did not work. Out of the respondents who lived with their families, 23 took some type of work from them. The work was mostly looking after the house when the family went to visit relatives, taking cattle for grazing, looking after the grand children and other miscellaneous works. They

also disclosed that the day they are unable to work, the family becomes hostile towards them and makes them feel unwanted.

3.5 Social Activity of the elderly: On analyzing the questionnaire of 35 respondents, it was observed that the elderly engaged themselves in various types of social activities which saves them from boredom. Some of the activities they enjoyed were Yoga, watching old movies, listening to religious movies, visiting tourist or religious places, visiting friends, reading books of their taste, meditation. The elderly who engaged themselves in the activities were more happy and contented than the others.

3.6 Health status of the respondents: 11% were in good health, 63% had average health and 26% were sick. It was noteworthy that 60% of respondents were either taking treatment at home or Government dispensaries and hospitals and 14% were being treated by private doctors and 3% were getting good treatment, 3% were untreated and 11% did not need any treatment as they were in good health. It was noteworthy that 69% of the respondents went alone to the doctor for getting treatment as no one accompanied them, no one in the family was ready to accompany them to even their regular medical visits and refused to spend money on the medicines and the related expenditures.



3.7 Elderly's response to the Government support: The respondents were also questioned if they were satisfied with the Government support, to which 21 of them responded in negative as they felt that the benefits extended by the Government were not enough. Few of them were dissatisfied that few of the programmes run by the Government were a mere paper work and practically diid not benefit them. Few changes they would like the Government to bring in are to give them housing units so that they can live independently, old age pension should be increased, to make things cheaper for the elderly. Government should make security arrangements for them and alos introduce recreational centres for them.

The survey findings helped us reach the innermost lives of the elderly and take a deep look into various aspects of their lives. The survey depicted that the status of old people is declining gradually and there is a feeling of loneliness, neglection, insecurity as children are busy in their own fast paced lives. Children prefer socializing and spending time on social media rather then interacting with the elderly and taking their care. Parents are a liability for them and overall elderly remain dissatisfied with their lives.

4. Conclusion and Recommendations:

The elderly population has been on an increase all over the world due to advances in medicine and alongside the rapid progress in industrialization and urbanization and tendency towards dissolution of the joint family system has resulted in condition of elderly taking a turn for the worse. The elderly population is set to account for 32 percent by 2050. Old age is taken to be a period of decline in the life of an individual. Although it is primarily a physiological phenomenon but it gets reflected in an individual's social, psychological, economic aspects and affects them substantially. Old age is characterized by sense of hopelessness towards the world, a sense of loss shadowed by loneliness, lack of care, respect for self and others. Various theories of aging have been discussed which depict aging in a different perspective. One of the major outcome as analyzed is loneliness.

After analyzing the survey findings and observing the lives of the elderly closely, it was realized that there are certain loopholes in the Government, their children and the society. To plug them out there are few recommendations:

- a) Geratic health awareness programmes have to be mandatory.
- b) Interpersonal communication, spouse communication, intergenerational communication should be strengthened for better emotional health of the elderly.
- c) Community day care centres should be scientifically run and professionally equipped.
- d) Frequesnt demographic sureveys to be conducted to determine the nature and extent of problems faced by the elderly.
- e) Proper implementation of constitutional provisions, legislations, policies and programmes issued by Government. Follow up and monitoring up is required.
- f) Police needs to be extra sensitive and take concern if there are any cases related to victimology, elder abuse etc and take stringent action.
- g) The old age homes should be well maintained and create an atmosphere for the elderly that their daily needs are fulfilled.
- h) There needs to be moral awakening in the society as a whole. People need to be sensitive to their needs and treat them as an asset.

The elderly feel devalued in the realm of family relations where they once enjoyed supreme decision making powers. This loss of dominance makes them feel deprived, alienated. In taking steps to provide safeguards and legal provisions for the elderly, number of factors must be taken into consideration.

References:

- [1] Moody, Harry R., "Aging: Concepts and Controversies," *Pine Forge Press*, pp. 51-76, 2010.
- [2] Ramamurti. PV and Jamune. D., "Psychological Dimension of Aging in India." *Indian Journal of Social Sciences*, pp. 309-332, 1993.
- [3] "Mental Health Problems of Aging and the aged." World Health Organization, 1959
- [4] Robert, Atchley, "Social Forces and Aging: An Introduction to Social Gerontology." *Belmont,CA: Woodsworth*,pp. 21-37, 1985
- [5] http://m.thehindu.com/opinion/editorial/ageing-with-dignity
- [6] http://act.gov/Programs/Index.aspx#Adults