INTRODUCTION

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INTRODUCTION

I.1 INTRODUCTION

Ageing is a biological process experienced by mankind in all times; it is inevitable. But what is of importance to sociologists is the fact that this 'biological' process is mediated socially. In other words, society with its structure, culture and norms gives meaning to the process of ageing. Every known society has a named social category of people who are old - chronologically, physiologically or generationally. In every case these people have different rights, duties, privileges and burdens from those enjoyed or suffered by their juniors. This group is defined differently in different places, but it exists everywhere and is the group we refer to as "the old" or "the aged" when speaking of any human society.¹ So individuals survive childhood, grow to maturity and become old in all societies.

However, lately attention has been drawn to the social, economic, political questions raised by the phenomenon of ageing. Prior to this period, while individuals may have lived into advanced stages of their life, their numbers were few. Moreover, although there were individual problems associated with

growing old, it was not until the number of older persons and their proportion of
the population increased significantly world wide that ageing became defined
as a social problem.\textsuperscript{2}

This introductory chapter will deal with the relevance of the problem -
after all since the aged have been there in all societies and at all times then
why is it drawing so much of attention now and why has this study been
undertaken. It will also deal with the conceptual definition of ageing - which
again has many aspects biological, psychological and sociological. It will probe
into the emergence of the problem - look at one, the position of the aged in
simple societies and two, at that of aged in contemporary societies. The review
of literature will highlight the major work done in this field. It will also delineate
the objective and scope of study apart from giving an outline of the scheme of
chapterization.

1.2 RELEVANCE OF THE STUDY

Old age is a universal phenomenon. But in the last few decades ageing of the
population has been of a great concern to both the developed and developing
countries. It has emerged as a social problem.

One of the most significant feature of the twentieth century has been the
world wide growth of the elderly population. As David Macfadyen of the World
Health Organization puts it, "every month the net balance of the world population

aged 55 years or over increases by 1-2 million persons... more than 80 percent of the monthly increase, a gain of nearly one million persons, occurs in developing countries". This is a consequence of the generally improved standards of public health even in developing countries, the improved standard of public health in developed countries and the consequent falls in infant mortality at one end and postponement of adult mortality at the other. For the World as a whole, life expectancy at birth has increased from less than 50 years in 1950-55 to over 60 years in 1991. It is expected to approach 70 years by the year 2000.³

Rapidly expanding numbers of old people represent a social phenomenon without historical precedence and one that is bound to alter the previously held stereotypes of older persons. In the early 1990s, developed nations as a whole had about as many persons over the age of 55 as children under 15 years of age (about 22 percent of the total population in each category). Though, developing countries like India, by contrast, have a high proportion of children under 15 (35 percent) and a relatively low proportion of older persons (10 percent), but it is equally important that the absolute numbers of elderly in developing countries are large and growing fast. Many developing countries will experience a downturn in their rate of natural population growth similar to what has already occurred in developed nations. As this process accelerates, age structures will change and the elderly will be an increasingly larger

proportion of each nation's total population.  

In the 75 years from 1950 to 2025, the world elderly population (persons 60 years of age and above) will have increased from 200 million to 1.2 billion or from 8 to 14 percent of the total global population. Among the elderly, the "old" old (those who are 80 years of age and above) will have grown from 13 million in 1990 to 137 million in 2025. The total world population will have grown by a factor of little more than three, the elderly will have grown by a factor of six and the "old" old by a factor of ten.  

It is also projected that the developing countries may experience the most intense ageing trends during the period 1975-2025. While the developing regions accounted for 52 percent of the world's 347 million persons aged 60 and over in 1975, they are expected to contain 72 percent of all older persons by 2025; with their older population increasing from 180 to 806 million persons. Also as a result of this rapid growth, the share of the world's population aged 65 or over residing in Asia-Pacific region has been projected to increase from 46 percent in 1990 to 55 percent in 2020. The Round Table on the Ageing of Asian Populations, held in Bangalore in May 1992, observed that about two thirds of the region's elderly lived in China and India and that the number of elderly in these two countries was currently larger than the total populations of many countries.  

India's demographic contours suggest a sharp rise in her elderly population in the recent decades. This may be because of increase in life expectation with rapid development of medical sciences, invention of life saving drugs and better condition of health, nutrition and sanitation.

The population aged 60 plus in India as per the 1991 census was 56.7 million which is 6.76 percent of the total population. This shows a doubling of the aged population as compared to 1961 when it was 25.6 million. The proportion of the aged population has been steadily going up in each census though at varying rates. The growth rate of the elderly will accelerate from 3.03 percent in 1981-91 to 3.55 percent in 2011-2016 and the percentage share will go up from 6.84 percent in 1991 to 8.94 percent in 20167. The total picture for over the period 1901-2016 is shown in the table below:-

**POPULATION AGED 60+ BY SEX, INDIA, 1961-2016 (IN 2000)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Population</td>
<td>Percent</td>
<td>Population</td>
</tr>
<tr>
<td>1961</td>
<td>25566</td>
<td>5.82</td>
<td>13224</td>
</tr>
<tr>
<td>1971</td>
<td>32700</td>
<td>5.97</td>
<td>16874</td>
</tr>
<tr>
<td>1981</td>
<td>43167</td>
<td>6.49</td>
<td>22023</td>
</tr>
<tr>
<td>1991</td>
<td>56682</td>
<td>6.76</td>
<td>29364</td>
</tr>
<tr>
<td>2001</td>
<td>70571</td>
<td>6.97</td>
<td>36208</td>
</tr>
<tr>
<td>2011</td>
<td>95921</td>
<td>8.14</td>
<td>48859</td>
</tr>
<tr>
<td>2016</td>
<td>112962</td>
<td>8.94</td>
<td>57362</td>
</tr>
</tbody>
</table>

**Note** 1. Excludes figures for Assam in 1981 and Jammu & Kashmir in 1991 where the census was not conducted due to disturbed conditions.


AGE STRUCTURE OF GENERAL POPULATION AND POPULATION 60 YEARS AND ABOVE

India 1951-2001

On comparing the percentage decadal variation of the general population with those aged 60 years and above, it was found that the aged population has grown faster than the general population. In 1961-71 the percentage decadel increase in the general population was 24.70 while the population aged 60 years and above was 27.91. In 1971-81, the percentage was 21.3 for general population while it was 32.01 for the aged population. Again in 1981-91 it was 26.1 for general population and 31.31 for the aged population as shown in table below:-

DECADAL GROWTH RATE OF POPULATION AGED 60+ BY SEX AND RESIDENCE INDIA, 1961-1991

<table>
<thead>
<tr>
<th>Age Group Decade</th>
<th>Total</th>
<th>Rural</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Males</td>
<td>Females</td>
</tr>
<tr>
<td>60+</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1961-71</td>
<td>27.91</td>
<td>27.6</td>
<td>28.2</td>
</tr>
<tr>
<td>1971-81</td>
<td>32.01</td>
<td>30.5</td>
<td>33.6</td>
</tr>
<tr>
<td>1981-91</td>
<td>31.31</td>
<td>34.2</td>
<td>29.8</td>
</tr>
<tr>
<td>All ages</td>
<td>24.7</td>
<td>25.2</td>
<td>24.1</td>
</tr>
<tr>
<td>1961-71</td>
<td>21.3</td>
<td>21.0</td>
<td>21.6</td>
</tr>
<tr>
<td>1981-91</td>
<td>26.1</td>
<td>26.6</td>
<td>25.6</td>
</tr>
</tbody>
</table>

Note: Excludes figures for Assam in 1981 and Jammu & Kashmir in 1991 where the census was not conducted due to disturbed conditions.
DECADAL VARIATION OF GENERAL POPULATION AND POPULATION 60 YEARS AND ABOVE

(PERCENTAGES)

More than the absolute numbers of the elderly that is going to be mind boggling due to the rapid growth rates within a short time span. In India, during hundred years from 1961, while the total population would climb five times, the number of the elderly would soar thirteen times and reach the figure of 340 million. Which means a fourth India being added to the post independence population of the country after crossing the one billion mark at the turn of the century. Another half century later, it would be a fifth india, and the fifth India would be a fully grey India.8

With this dramatic change in the demographic profile-emergence of a large number of elderly section in the population, the problem of ageing has started drawing attention from all quarters, in the last few years. Along with the growing number another problem has been the radical transformation of the society, particularly the changing structure of the family which in the past was the sole caretaker of the aged. The traditional family is undergoing change not only in structure and composition but also in its function. Although, the state has started regarding old age as a social problem and has initiated few steps, there is still not a great deal of literature, either government or academic, in this area thus calling in for more work. Even those available are mostly influenced by western models. The problem gets compounded because of the heterogenity of the Indian Society, which is sharply differentiated, both vertically and horizontally. The process of ageing, its social meaning and associated problems therefore varies. Here in this study the focus in on the retired urban

8. Ibid. p.11.
middle-class. The universe of study is Indira Nagar colony in Lucknow. The sample has been drawn from the retired service middle class population settled in this colony. The study is based on data which has been generated in the field. It tends to be exploratory, one which attempts to find out what exists rather than to predict the relationships that will be found.

1.3 AGEING DEFINED

Human development refers to the series of changes that individuals characteristically show as they progress in time towards maturity and through adult phase towards old age. Ageing is unequivocally an universal and irreversible process, understood differently in different times. Edward J. Stieglitz defines ageing as the element of time in living. According to him:

Ageing is a part of living. Ageing begins with conception and terminates with death. It cannot be arrested unless we arrest life... Ageing shows as we grow older... Ageing change is rapid in youth and even more rapid prenatally in the period between conception and birth.

So, it is a lifelong process. In the words of Tibbitts:

Ageing may best be defined as the survival of a growing number of people who have completed traditional adult roles of making living and child rearing and the years following the completion of these tasks represents an extension of life.¹⁰

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Old age begins at that point in an individual’s life when he ceases to perform all those duties and enjoy all those rights, which were his during mature adulthood, when he begins to take on a new system of rights and duties. In the broadest sense, ageing has been defined as “those changes occurring in an individual as a result of the passage of time. These may be anatomical, physiological, psychological, even social and economic.”

However, ageing cannot be understood apart from societal processes and changes taking place, as any person’s activities, biological capacities, physical fitness, attitude towards life, relationship in family, all are conditioned by their position in the age structure of the society in which they live. As Mckee and Robertson say about the developmental sequence of human beings that it is not simply a biological one; it is also a social process, because of the nature of life cycle - its length, its stages, its problems, its rewards - varies in accordance with the historical and social location of each individual and generation. Therefore, the meaning of ageing emerges from the interaction of the organism with its environment in specific social systems within a culture at a given historical moment.

These definitions of ageing indicate the multidimensional nature of the phenomenon - old age establishing three interrelated terms associated with it

- biological ageing, psychological ageing and social ageing. Birren and Renner describe three types of age: biological age, psychological age and social age.¹⁴

Biological ageing refers to bodily changes that take place in the later part of life of an individual and are most apparent both to individual and society - greying of hair, loss of teeth, decreasing eyesight etc. It is an estimate of the individuals present position with respect to his potential life span. With this, one can predict whether the individual is older or younger than other persons of the same chronological age, and hence whether the individual has a longer or shorter life expectation, compared to other persons of his age. Biological ageing according to Tibbitts refers to the changes in the cellular composition and capacity for growth in the organism.¹⁵

Psychological ageing consists of general decline in the mental abilities that accompany old age. It refers to his adaptive capacities i.e., how well he adapts to changing environmental demands in comparison with the average of his group. The process of ageing is hastened with the feeling of the individual that he is growing old and added to it are the attitudes and behaviour of others towards him.

While Social ageing refers to the stage in the life of the individual regarded as old age by the group. It refers to the changes in the individuals changing circumstances as a member of family, community and society. So the social age of an individual indicates the roles and social habits of an individual with respect to other members of his society.¹⁶

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¹⁵ Tibbitts, C., (ed.), opp.cit., p....
So, ageing connotes three distinct phenomena - the biological capacity for survival, the psychological capacity for adaptation and the sociological capacity for the fulfilment of social roles. However, by itself chronological age is one of the most useful single items of information to know about an individual. Chronological age is measured for each person from the time of birth in a socially determined way. According to Treichel, chronological ageing refers to the time that elapses from birth, providing others with some clue to the roles and patterns of behaviour that are to be expected of us as members of a particular age group. It provides a convenient marker for locating problems and associated social phenomena and as an indicator it marks substantial variation in both capabilities and behaviour. And though research permits increasing specification of biological, psychological and sociological variables which describe, explain and predict behaviour, chronology persists primarily as a crude but convenient reference for purpose of general discussion. Knowing an individuals chronological age, one can make a number of predictions about his most likely anatomical, physiological and social characteristics.

I.4 EMERGENCE OF THE PROBLEM

Individuals survive childhood, grow to maturity and become old in all societies. So every society has a section of aged population, making the process of ageing both universal and natural. Every age is associated with a set of privileges and problems, but generally there are two stages in which the culture more often accepts dependency needs - at the beginning and at the end. Yet it is conceivable that the problems faced by the old may be more difficult and of a different nature than the problems of young and middle age group because human beings are less prepared both physically and mentally to face problems in old age. So old age is always accompanied by some physical incapacibilities.

However, lately it has emerged as a major issue all over the world, due to the significantly large increase in the number and proportion of aged persons in the society as has been shown in tables and graphs in the beginning of the chapter.

However, the growing number of aged persons is not in itself a social problem, rather it should be considered as a success of advanced technology - triumph of civilization over illness, poverty and misery. The extension of the average life span of human beings should be a matter of gratification because people in all cultures have aspired to live long. The problem is the lack of preparation for the sudden appearance of large number of older people and the lag in adapting social institutions suitable to their needs.  

It has been pointed out that the problem of the aged has emerged as a social one to some extent due to the rising proportion of the aged in the population - making them a visible section of society, but to a larger extent due to the changes taking place in present society, resulting in the declining role and status of the aged.  

The emerging situation of the ageing in the modern world displays two prominent features - the proportion of the ageing in the population is increasing and the mode of adjustment of the ageing in the society is radically changing. It has been pointed out that the aged cannot be treated as a homogeneous category. The process of ageing is not uniform for all persons among all groups.


alike. Changes in life of the aged are necessitated not only by their physical and mental capacities, but also by the social and cultural process. There are certain basic principles that social scientists, anthropologists have outlined for understanding the process of ageing.

- Ageing can be understood only in dynamic terms. The ageing process cannot be separated from the social, cultural and historical changes that surround it. People do not grow up and grow old in laboratories.

- Ageing can be understood only from the perspective of its socio-culturally patterned variability, both within single society and across societies.

- Ageing can be understood only within the framework of the total life course. People do not begin to age at any specific point in life. Rather, ageing occurs from birth until death. And within the total society, people of all ages are interdependent.

- Individual ageing, wherever and whenever it occurs, consists of a complex interplay among biological ageing, psychological ageing and interactions with the changing social and cultural environment.²²

Keeping this in mind, this section would try to understand the patterns of ageing and life of aged in the pre-industrial societies, the western societies and in present changing society. The aim is to trace the emergence of the problem.

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1.4.a Ageing in Pre-Industrial Societies

In the pre-industrial societies, production was carried out by domestic groups. This does not imply the absence of co-operation between such groups, nor of exchange in objects; but unlike industrial societies where the domestic group is largely a consuming unit, the family as a unit carried out the basic productive tasks. This was more so in agricultural societies, even where the domestic group did not own the land it farmed.  

The economic and social structure of traditional societies permitted no clear distinction between labour, which was publicly productive and labour, which was domestic, performed at home. Thus making it impossible to draw a line of demarcation between domestic work and economically productive work. This means that the 'work place' and the 'home' were integrated in the total life of the culture. So, integration of domestic life with productive life was a constant feature. In these societies the individual depended directly upon their older generation for the acquisition of rights in the basic means of production. 

In hunting societies, where economic resources were largely open, these rights and opportunities were somewhat diffused as livelihood depended upon acquiring skills and having generalized rights to exploit a territory. But in the agricultural societies, control over resources became more differentiated. A person acquired right to exploit farmland which had previously been farmed by

a senior kinsman, usually a member of the same unit of production. However, the degree of individualization depended upon the scarcity of resources. The economics based on hoe agriculture, technology placed limits on the area a man could farm; where an open frontier exists, parental control is likely to be less. But the harnessing of animal energy through the plough enabled a man to cultivate a much larger area, and the investment required by irrigation meant increasing the value of that land; both processes lead to shortages for other and greater differentiation lead to greater dependence upon the position and the holdings of one's forefathers. The same was true for the pastoral societies. So, the relative scarcity of resources affected the nature of the control exercised by the senior generation over the junior, whether these resources were used for productive or reproductive purposes. These societies generally being patrilineal, the property was passed on through the male line, the transmission of property between kin encouraged continuity of the land, involving some degree of co-residence ensuring support for the aged. 25

Though ageing invariably lessened one's ability to perform the productive tasks, leading to a measure of withdrawal, still through the control of access to resources, the aged acted as advisors, giving directives. Retirement in the sense of transfer of control was rare. It has been argued that in pre-industrial societies the decline in economic and reproductive capacity that comes with advancing years did not deprive the old of their generational status, their kinship

status. They were not segregated, but remained members of their families, lineages and associations.\textsuperscript{26}

The extended family which was a common feature of these societies gave security, response and recognition to the cultural aspects of life as well as for their skills. Being non-literate societies, majority of communications were face to face. Whatever innovations and changes a new generation succeeded in introducing into a particular society, they were directly dependent on their immediate predecessors for acquiring their language and their culture. In oral societies, the aged were always an important resource for the right way of doing things; they remained useful not simply as repositories of family lore but as repositories of social life itself. This helped in establishing strong grand parent - grand children ties, which again acted as powerful factor in determining the lot of elderly people, thus buttressing their position. Chronological age was seldom formally recognized in these societies. Old age was perceived as a stage in the maturational life cycle marked by declining physical and mental powers but very often counterbalanced by high generational status. The Tallensi are not quite unique in regarding grandparenthood as the finest achievement possible in any lifetime and more than compensating for the inevitable infirmities of old age\textsuperscript{27}.

Another factor of great importance was the ritual strength, which was supposed to reside in the old. This factor operated on various levels. Firstly,

\begin{flushleft}
\footnotesize
\textsuperscript{27} Ibid, pp.105-107.
\end{flushleft}
there was accumulation of knowledge, not just confined to religious matters. Secondly, the elderly were seen as natural inter-mediary with the ancestors, and since in ancestor worship the elders were seen as the nearest to the ancestors in genealogical terms and also as progenitors of maximum number of descendants, the apical ancestors of the living. On both these grounds they were considered most appropriate persons to conduct sacrifices and other forms of communication with the other world. So they were not only the present givers - they usually performed sacrifices or the prayers, they were at the same time the future receivers - when they would join the heavenly throng. This statement holds true of most societies that have some notion of the persistence of the human person after death, at least of the soul or spiritual part. Thirdly, the very weakness of the aged made their curses and their blessings more powerful. In other words, the obligations of the young towards the old, which in one sense balanced the obligations of parents towards children earlier in the life cycle, got reinforced by a belief in the ritual powers of the aged, through their knowledge, their closeness to ancestors and their power to curse and bless.28

It was through their control of ritual and religious knowledge, or the knowledge that contributed to the whole enterprise of generating and sustaining meaningful forms, that the old gained a special measure of respect in these societies. It was thought that the aged were more fully encultured, more fully socialized, more fully committed to their own cultural system, its mode of expression, its technology, its dominant themes and its aesthetic values, as

they had the longest time to learn and practice the symbols and meanings of their cultural system. Not only did they represent culture in general, they embodied culture of a particular group most fully. Thus they enjoyed high status. The example of ! Kung offer interesting illustrations to this point.

The ! Kung are hunter-gathers of the Kalahari Desert of Southern Africa. The old people here are highly valued and respected. They act as stewards of rights to water and resources of an area; repositories of knowledge, skills and lore; teachers and minders of children; spiritual specialists and healers; ritually privileged figures. None of these is based on the hoarding or accumulation of power or goods, except in terms of the building up of reciprocal obligations over a lifetime.

The transmission of skills and love to younger people is recognized and honoured by the ! Kung as an important part of the socialization of competent group members. Spiritual discipline and healing powers, which often become highly developed in ageing people, are universally respected among them as they practice very little other medicine. So, the old are valued for the role they play in creating mature men and women to carry on the work of the society. Ritual knowledge, of course, is not the only sort for which older people were valued. In many traditional societies elders were also valued for their technical, social and other skills and knowledge as well. However, it seems that technical knowledge is not as likely to be the special preserve of the elderly as ritual knowledge perhaps because technical knowledge is straightforward, and also is valuable to those who use it directly. While not only is ritual knowledge
complex, secret, or esoteric, and useful to everybody, it also embodies a plan for how people should live - kind of perspective map of the social universe.  

So the aged were considered to be repositories of knowledge and social life and therefore source of wisdom based on rich experiences which was made possible by longevity. Loss in certain spheres were compensated by the gain in other spheres. They were also given the leadership roles and powerful positions of decision makers in family and community as their knowledge and experience were considered to be of great value in proper functioning of the society.

So the traditional value - system placed a lot of emphasis on prestige associated with old age, with the elderly being more responsible members of the family and centres of authority, and being consulted invariably with regard to any important decision in the family. But it has been argued that the traditional family structure, where both old and young were absorbed into mental harmony, is gradually undergoing change, much to the disadvantage of the aged.

1.4.b Ageing in contemporary society

It has been stressed upon that recent decades have witnessed the gradual change in the joint family along with the changes in values due to the forces of industrialization, urbanization and modernization.


Modern societies are societies of constant, rapid and permanent change. In the traditional societies, the past is honoured and the symbols are valued because they contain and perpetuate the experience of generations. Modern societies reflect a form of life in which social practices are constantly examined and made adjustable or flexible in the light of incoming information about the very practices, thus constitutionally altering their character.\textsuperscript{31}

The overall psychological and social impact of the changes, on the aged are manifested through the transformation taking place in the family. The family, the basic social institution is undergoing change in structure, size and function. The extended family of three or more generation tends to shrink to the nuclear family and is accompanied by alteration in living arrangements of horizontally related kinfolk. However, studies like those of A.M. Shah refutes this breakdown. Studies stress that the role of Hindu traditional joint family as a caretaker and support system for the elderly has been weakening. Also radical changes have occurred in size, composition, living arrangements, ownership of property, locus of power, pattern of inter-generational support, relations between members of the family, increasing trend towards nuclearization, erosion of traditional kinship ties and increasing replacement by interest-orientations and weakening of family as a support system.\textsuperscript{32}

With industrialization, the production of goods was transferred to factories, thus specialised economic institutions became differentiated from family. There has been separation of work from home. The family changed from being a unit of production to being a unit of consumption.33

The modern industrial system, with a specialised division of labour demanded considerable geographical mobility from its labour force, resulting in the migration on a large scale of the younger generation, thus increasing the vulnerability of the old who stay back and particularly for families which do not have independent production assets like land, livestock and are dependent primarily on labour.

However, it has been pointed out that the nuclearization of the family may not be the only and perhaps most important aspect of family change. Even if extended family form continues loosely, in one way or the other, the content may change. Thus, the role definition, decision making process, etc., may change even if co-residence and commensality continues.34

The function of family in the socialization of the child has diminished as formal educational institutions from pre-nursery school through higher education proliferate and the multiplication of peer group organizations command the interest of the child. Recreation increasingly tends to become commercialized.

Relationships become increasingly segmental, based on utility rather than sentiment. Interpersonal relationships among family members are modified as the role of spouses, parents and children are transformed in the complex social order with various groupings competing for time and attention. Relationships become more a matter of choice than binding obligations.

The shortage of housing accommodation in cities and their high rents acts as a severe constraint in the common residence of the aged with the children. So the nuclear family no longer has physical or social space for older persons. With separate living arrangements, older persons are more on their own in economic and social terms. They tend to be caught up in the vortex of impersonal and slowly diminishing extra familial social contacts.

In modern societies the role of older person's as a source of knowledge and wisdom is greatly reduced because of the rapid technological change which makes the training and education received by them as outmoded and in general, greatly discounted. So the emergence of new and more powerful sources of knowledge diminishes the prestige of the older person thus changing their relationship with younger persons.

With modernization has emerged the value of individualism at the centre of which stands a new concept of the individual subject and its identity. This does not mean that people were not individuals in simple societies, but that individuality was lived, experienced and conceptualised differently. Individual

was seen to be part of whole, which gave primacy to group over individual, facilitating familial collectivism, leading to sharing of resources between members and development of kin orientation.

However, now individualism as a value fosters the autonomy and freedom of individuals in the decision making process in the family, in choice of mates, taking up jobs, establishment of separate households after marriage, questioning the legitimacy of the established authority of old persons.

These changes have brought about social mobility, encouraging rationality. Importance is now placed on achievement which means that the family has less to offer to their members. Earlier strong family ties were supposed to buffer the stresses of isolation and deprivation, and could be mobilised to reduce health risks. However, now as the cohesion is becoming weaker, such support is neither expected nor always forthcoming, thereby putting the individual in a situation of severe stress. The family not only provided economic but also emotional support, and had the role of caring for children and aged. What one seems to be facing now is the disintegration of an effective, spontaneous and rich support system and its replacement by a weaker substitute.37

1.3.c Problems of ageing in western societies and India

Social organization in the west particularly in American Society is dominated by the attributes of husband-wife relationship which shapes the individual

centered orientation in their culture, characterized by self-reliance. For a person born in such society, his family is a sort of nursery to prepare him for a future of his own. The outlook here is linked to individual centred orientation, thus emphasising equality and freedom.

The individuals affiliation here, with the kinship group is loose. Thus in order to ensure his/her desired share of sociability, security and status, the person must resort to a more broader group. So, the problems and care of aged in such societies happens to be somewhat different. The family is non-emotional as far as the conditions of aged are concerned. Voluntary organizations and government agencies work hand in hand to organise and support programmes for the care of the aged. There are not only institutions for the aged but also nursing homes and private health care system for them.

However, the condition of the elderly in a developing country like India, presents a different picture. Here, for an individual his family and its direct and wider social network like caste, etc., are virtually the beginning and end of his activity sphere. He can find in his kinship group his sociability, his security and his status. The social organization here is dominated by father - son relationship and the attribute of this relationship give form to the situation centred orientation, expressed in shape of mutual interdependence. These varying patterns of orientation affect the inter-personal relationships in the two societies. Thus, more stress is given to the social network within the family rather than

institutionalization. However, with modernization and globalization, many of features of the aged in western countries is gaining ground specially among the service middle class population.

1.4.d The aged in India

The aged within India also do not form a homogeneous category due to India being both culturally and economically sharply differentiated. The problem of the affluent old would be quite different from the problem of poor old persons engaged in unorganised sector, particularly those with low and irregular wages. Their problem is acute since they are unable to allocate finances for old age.

In rural communities, there being no set pattern of retirement, the elderly continue to work as long as their physique permits them and even after that they may be required for advice and guidance. Yet, in rural areas also, they have to face a number of hardships. They face more of economic hardship because of lack of proper income sources. Loneliness and isolation are not very acute due to the nature of social life in the villages, smaller communities with primary relationships. Due to the differences existing between the rural and urban way of life, the problems of the aged are also bound to be different. However even in rural areas, the aged form a heterogeneous group - land owners, labourers, skilled workers etc and hence difference in the problems faced by them. Similarly the problems are different for different section of people in urban areas also. The self-employed persons like those in business etc,

engaged in their own pursuits for earning, have advantage over the employees working under a formal retirement system. The former can organise withdrawal from active work according to personal plans, health and other considerations. So the withdrawal for them may not be as sudden. Even for the employees under the retirement scheme, the problem of those not entitled for pension may be different from those entitled for pension after retirement. This in turn demonstrates the complexity of the issue of the portion of the aged in India and also its multidimensional nature.

1.4.e Implications of retirement for the aged

The advent of industrialization, urbanization and modernization in Indian Society, has extended employment opportunities to all levels of people in society, thus restricting the participation of older employees in labour market.

Retirement as understood is a complete withdrawal from employment along with entitlement to income that is based on having being employed over a period of years.  

Retirement is being used as a device for drawing workers out of the labour force and helping to restore the balance between labour supply and what many believe to be restricted labour force requirement. The age at which retirement takes place may vary but it is always an abrupt change from work to non work situation, resulting in a total change of role and status.

So, the mandatory retirement regulations, the reduced relative manpower requirements due to technological change and slow growth of economy, and the obsolescence of old skills, all combine to squeeze the aged out of the labour force, whether or not they are physically, psychologically or economically ready for retirement from their life's major activity.

Work has assumed a central position in the lives of people, both with respect to time and importance as it becomes a source of social and personal identity, a basis for self-esteem. Work provides the worker with associates - few persons work in isolation. Once work is organised, it is social.

Retirement suddenly forces them with the prospect of nothing to do. After a short period of leisure and relaxation, they find it difficult to spend their time. So, retirement in turn leads to many other deteriorative changes socio-psychological in nature statuslessness, problem of use of leisure time, cultural devaluation - sense of uselessness, isolation and loneliness, alienation and segregation. The loss of the status of bread winner for the family, brings in them a feeling of worthlessness.

Loss of employment of the older people also result in reducing his economic status. Though he may have some savings, a life insurance policy, a provident fund, pension, however, inflation, overtime, which has characterized modern societies, erode the value of savings and pensions to alarmingly low levels.

44. Sati, P.N., Retired and Aged People : A Study of their Problems, Delhi : Mittal, 1988 pp.4-5.
However, this problem of change to an ill-defined role is less abrupt for a woman as she is expected to fulfil several roles as spouse, mother as well as in terms of any occupation which she may have outside the home. So she does not lose her self image as abruptly as men, if she had to retire from work. But men have often defined himself as the breadwinner at his job. The role of worker is central to their self-conception. Though retirement means reduced income it is also a problem of loss of role and status.

So, it is within this frame work, that the problems arising from retirement, ageing and the extension of life will be considered.

1.5 REVIEW OF LITERATURE

The number of old people is increasing all over the world, both in absolute terms and in proportion to the population. The changes in the demographic structure of societies during the last few decades have made the aged a socially more visible section of the population. Public curiosity about aspects of the human life cycle is quite old, but the systematic study of ageing is quite new. However, there is still a Paucity of literature and most of them are based on studies of western countries.

Medical and biological scientists were the first to acknowledge the specific nature and problems of the aged. Geriatrics - the care and diseases of the old came up as a special branch in medical science, much before the social aspects of ageing. The father of modern geriatric medical research and practice, J.L. Nascher, coined the word "geriatrics" in 1909 and gave a new name in the medical field. Nascher, pioneer in social medicine, concerned himself with social
conditions of the aged as much as with pure medicine. The field was still called 'ageing' and apparently unnoticed was N.A. Rybnikov, the originator of term gerontology in 1929. However, the discipline of gerontology was not formally recognised nor was the name used in any form until 1940. In 1945, 'Gerontological Society' was organised and in 1946 the 'Journal of Gerontology' made its appearance. The first issue carried as its head article an articulation of the new field.

Gerontology is the study of ageing and has three core components - the biological, the psychological and the social. It is a multi disciplinary field of investigation in which each of these perspectives has a valuable contribution. The biological approach stresses the impact of ageing upon physiological system; the psychological concentrates upon mental functions, and the social concerned with social aspect of ageing is usually referred to as social gerontology.45 It may be defined as the scientific approach to all aspects of ageing. The expression of 'Social Gerontology' was used by Edward J., Stieglitz46 in the initial chapter of his book on 'Geriatric Medicine'. He stated summarily that 'social gerontology' regards man as a social organism existing in a social environment and being affected by it as well as affecting it. The expansion of this field was done by C. Tibbitts and W. Donahue.

Social gerontology is a new field of research and has come to be a broad and many faceted field concerned with both individual and societal aspects

of ageing. As the field has developed, four principal faces have conveyed: biological changes, changes in psychological capacities and performance, change in position of the individual in society, and the manner in which the ageing individual organizes the feelings, self-concepts and behaviour in response to pressures of society and also to internal changes.

According to Burgess, social gerontology is concerned with the changes in the characteristics, circumstances, status and roles of individuals in later period of life, with the nature and purpose of adjustment, personality development and mental health in the ageing individuals and in the biological and psychological process of ageing in so far as they influence social capacity and performance in later life.

Social scientific interest in human ageing is evident in the early 1940's. The earliest social scientific discussions of adjustment in later life never concentrated only on chronological age as a simple predictor, rather it consistently stressed upon the necessity of a multivariate approach to understanding behaviour in later life.

Tibbitts47 documents that while a number of studies of ageing were undertaken prior to 1950, these tended to be inventories, surveys primarily concerned in aiding in the solution of practical problems of welfare and health among the aged. Among social and behavioural scientists, only in psychology

did an identifiable professional group, specifically interested in ageing emerge, and this was the division of later maturity and old age created by the American Psychological Association in 1946. The Social Science Research Council appointed a multidisciplinary committee on social adjustment in late life. Although conceptualization of ageing as a social scientific issue in the 1940's was there, the literature of the late 1940's and 1950's eventually proved to be sound.

The publication in 1948 of the Social Science Research Council's research planning report 'Social Adjustment in Old Age' advised by Otto Pollak marked an important transition from concern about the aged to the study of ageing as a process. The report reflected almost a decade of work by an interdisciplinary committee, which began in 1941. It intended to provide a common frame of reference to research investigators.

By the end of 1950's came a multi university consortium which had three volumes which would document the scope methods and conceptualization of studies on ageing. The first of these volumes was 'Hand book of Ageing and the Individual: Psychological and Biological Aspects' edited by J.E. Birren in 1959. Two additional volume'Handbook of Social Gerontology which appeared shortly afterwards were, 'Societal Aspects of Ageing' edited by C. Tibbitts in 1960 and 'Ageing in Western Societies' edited by E.W. Burgess in 1960. These are landmarks in social scientific research on ageing and consistute an excellent bibliographic coverage on studies on ageing atleast two decades prior to its publication.
The first journal devoted to the study of ageing, which came out in 1949 was 'Journal of Gerontology'. The second in the field - 'Gerontologist' followed in 1968. A programme of socio-economic studies of ageing was established at Duke University in 1959. Some major publications under this programme during the period 1959-64 were 'Employment, Income and Retirement problems of Aged' edited by J.M. Kreps, 'Social Structure and the Family Generational Relations' by Shanas and Streib.

The notable review of gerontological research which marked the beginning of the 1960's was brought out by end of the decade with 3 volumes edited by Matilda W. Riley and supported by the Russell Sage Foundation. 'Ageing and Society : An Inventory of Research Findings' by Riley and Foner in 1968 organised an enormous body of empirical research on social scientific aspects of human ageing. The other two were - 'Ageing and the Professions' by Riley and Johnson in 1969 and 'A Sociology of Age Stratification' by Riley, Johnson and Foner in 1971. It constitutes an integrated effort to explain the significance of age for the allocation of social resources and opportunities over the life span. These volumes are largely interdisciplinary.

'Old people in three industrial societies' 1968 by E. Shanas, Townsend et. al48, is a good piece of cross national survey of Denmark, Britain and United States of America, in studying the old people in these three industrial societies for their physical capacities, their relationship with relatives and others, the roles they perform whether in employment or at home, the income they depend

on, the services they receive their attitudes towards retirement. The interviews were conducted with national samples of 2500 persons in each country aged 65 and over, living in private households. The findings show that only a small minority of the elderly live in extreme isolation and feel lonely. Their health is attributed to retirement from work. The health condition of these was also reported good; and the only marked difference noted was that more elderly people were institutionalised in Denmark than in Britain and USA.

Attempts have been made to determine the role of individual, family and group factors in the process of adjustment. Relevance of such factors as marital status, living arrangements, social integration and isolation in terms of nature of contact with children, siblings, friends and relatives, economic independence, pattern of interaction in the family, experience of loneliness etc. have been studied in different societies. Atchley⁴⁹ in his article - 'The leisure of the elderly', studied the leisure of the elderly. He noted that the aged made effective use of their leisure times since most of them had a sense of inner fulfilment. Though they had freedom of choice, they were limited by physical, financial and transportational factors. He concluded that the aged found their self-actualization in a sense of personal work rather than in leisure time activities.

Recent theoretical discussions have revolved around the themes of social integration of the aged and their segregation in the society in which they live. It has generally been assumed that the old people used to be separated into the family and society, and that they were now being increasingly segregated. Other

assumption made by scientists is that of engagement and disengagement. Empirical studies focussing on themes of integration and disengagement of old people both support and contradict the assumptions and emphasized the need for further refinement in these theoritical formulations.  

Considerable work been done in the field of social security measures to meet the needs of the aged in different parts of the world.  

However, gerontology in India is still in its initial stage's. Few studies have been conducted in India as compared to the west. The paucity of such studies in India is due to the fact that interest in research in the field of gerontology has gained importance only recently with the gradual rise in the number of aged persons amounting to almost 6.5 percent of the population, indicating the fast approaching problem of old age. 

Thus the period between 1925 to 1950 was characterized by the virtual absence of interest on the part of social scientists in the problems of the elderly; this being partly attributable to this fact. The initiation of research in this field in India started late in the 1960's by a few psychologists, medical and biological scientists and sociologists. During the same period the publication of 'Indian Journal of Gerontology' was started at Jaipur, to cover the studies of ageing population in rural and urban setting. However, the publication of the journal was discontinued after sometime. 

An important landmark in geriatric research in India was the setting up of the Association of Gerontology, India in 1982 at Varanasi. A few years earlier the Geriatric Society of India was formed in 1979. In 1983 the centre for Research on Ageing under the aegis of the Department of Psychology at Sri Venkateshwara University, Tirupati. An examination of available social science literature in the area of social gerontology shows that themes such as health status, psychological studies, general studies concerning the aged and ageing, socio-economic status of the aged, welfare schemes pertaining to elderly, elderly in rural sector etc. have attracted the attention.

There are few studies which provide information about the social conditions of the aged in India and those who have tried to explore the correlates of good adjustment to the problem of ageing. Some general surveys of the aged population has been conducted in Delhi, Lucknow and Karnataka.

The Status of the elderly in different economic and social situations has also formed the subject matter of several studies. Here studies by Marulasiddaiah\textsuperscript{52} and Dak and Sharma\textsuperscript{53} can be mentioned. Marulasiddaiah found that the old in the village felt that they are neither properly cared for while they are ailing nor well fed and cared by their sons and relatives. Dak and Sharma observe that the authority and prestige of the elderly person in his family and community is decided by his caste and economic position. With advancing age there is a dominant shift from the position of domination to subordination.

\textsuperscript{52} Marulasiddaiah, H.M. \textit{Old People of Makunti}, Dharwar : Karnataka University, 1969
Alfred D'Souza\textsuperscript{54} tried to explore the social organization of old age among the urban poor, with a focus on the changing patterns of the family as a result of the process of urbanization and migration. He states that since the family is the key factor for the understanding of social behaviour of individuals and groups in a given culture, the welfare needs of the old people are best understood in relation to and not in isolation from the family in which they live. He further explains the kinds of changes that can be identified in the family structure which refers to the developmental cycle wherein the roles played by parents change in family and this is caused by the influence of changing social environment. He shows that illiteracy is the main cause of the old people's insecurity and dependence. Because of low level of education, the urban poor are concentrated in occupations of low status. High value is attached to the presence of ageing parents in the family because they would take care of the children while they are away at work.

However, the situation with regards to the aged in India with its heterogeneous population is likely to vary on the basis of region, class and caste.

Some studies have been done to bring out the condition of the aged in rural areas. M.S. Randhawa\textsuperscript{55} has undertaken a scientific study about the problems of the aged in the rural and urban areas of Patiala District of Punjab. Besides dealing with the problem, he also investigated the levels of social

\textsuperscript{54} D'Souza, A., \textit{The Social Organisation of Ageing among teh Poor}, New Delhi: Indian Social Institute, 1982

adjustments, the family life and the attitudes and beliefs of the older people. The major contribution of the study is that it has highlighted the rural–urban differences with regard to different aspects of the problems of aged. While in A. Mahajan's study, elderly poor population has been mostly drawn from the unorganised sector of the economy, which hardly provides a living wage to its workers let alone any financial security for old age. Since the younger members of such household live on the margin of subsistence themselves, they can ill afford the burden of looking after their elderly relatives. The old age pension scheme introduced by the State Government as a recognition of the miserable condition of the elderly poor hardly scratch the surface of the problem. He tries to highlight the fact that many of the elderly poor are not totally incapacitated to earn their livelihood. Since they are accustomed to do only physical manual work they become unfit for such work in old age because of their diminishing strength. It attempts to evaluate the old age pension scheme of the Haryana State Government, so as to help in more constructive steps for helping the elderly poor.

Some studies have also been done on the problems of the retired personnel. A study sponsored by the Planning Commission of the Government of India was conducted by K.C. Desai and R.D. Naik. Almost 600 retired persons were interviewed who had served as gazetted and non-gazetted government servants in Bombay. The authors came to the conclusion that a majority of the retired persons are protected by their families and respect for old age is still a value in our culture.

56. Mahajan, A., Problems of the Aged in Unorganised Sector, Delhi: Mittal, 1987
While H.S. Bhatia\textsuperscript{57} studied the retired employees of an urban area of Udaipur, Rajasthan. He observed that as a social and economic event, most of the retired people face retirement without any planning and preparation. Reduced income was the greatest deprivation after retirement limiting social activities. However the family, despite the changing situation continued to remain the centre of life's interest and activities of the old persons.

S. Mishra\textsuperscript{58} studied social adjustment among retired government employees of Chandigarh and concluded that old age has started emerging as a social problem in Indian Society due to the socio-cultural changes brought about by industrialization, especially the family structure, negative attitudes of younger generation towards aged and retirement from service. It finally stressed upon the need for active type of life for adjustment.

However, the studies available in India about the aged in relation to their problems are limited as they send to be conducted more on western model. The Indian setting consists of heterogeneous groups which needs caution on the part of researchers to refrain from generalising the studies - variation in the respondents background, retirement age, family composition, status and family life, problems of isolation and loneliness should be taken into consideration within the cultural setting, where the aged resides. It is in this light that this study has been undertaken to study the process of ageing and the aged among the middle class salaried section who have retired from formal service in an urban area.

\textsuperscript{57} Bhatia, H.S., \textit{Ageing and Society}, Udaipur : Aryas Book Centre, 1983  
\textsuperscript{58} Mishra, S., \textit{Social Adjustment in Old Age}, Delhi : B.R. Publications, 1987
I.6 OBJECTIVE AND SCOPE OF STUDY

The focus of this study is on the aged among the retired urban middle class. The place of study is Lucknow. The reason for the selection of retired persons is that compulsory retirement, as a major consequence of industrialization and modernization of society brings forth in a remarkable fashion the problems of old age. It marks a sudden and abrupt change from their active life of work, to a non work situation. Even if the person is physically and mentally fit he is made to retire. While the informal retirees have not been taken into consideration in this study due to the absence of any formal system of their retirement. It is they who decide when to retire keeping in mind their health and other considerations. For them the process of disengaging themselves from work happens to be a conscious and gradual process, thus making them more prepared for the situation.

However, for the persons who fall under the formal system of retirement, there is a sudden change, not giving them much time to prepare for the situation. There is a sudden change in their role performance, income, status, respect and contraction of their social world. Their activities in formal organizations of all kinds is drastically and suddenly reduced, thus creating problems of adjustment.

So, this study is being undertaken to explore the problems of the aged who have retired formally and the extent to which the retired is able to replace the work role, which has assumed a central position in their lives both with respect to time and importance, with other roles, so as to engage himself once
again in the changed circumstances, created by increase in leisure time, the gradually deteriorating health and change of status in family.

It would also look into their daily life activities in the post retirement period and study their adjustment to this changed environment. As adjustment of the ageing person depends upon the degree to which his personal life and the environment in which he lives offer opportunities to satisfy his needs, it would try to delineate the interpersonal relations of the aged.

It has been argued that the main problem of aged in India has been due to the changing family structure and function. This study would deal with this debate in details and try to study the family life of the aged focussing on the perceived attitude of the family members towards the aged after retirement and their living arrangements.

It would look into their physical and mental health conditions, and try so see the effect of retirement on the same.

It has been pointed out that the meaning of ageing itself and impact of changes occurring at this age may differ from culture to culture and that ageing and retirement affects different sections of the society in different ways. This study would specially try to bring out the meaning of ageing and retirement as perceived by the middle class in urban area - who generally comprise the educated salaried class.

Finally, it would look into the programmes and policies in respect to the welfare of the retirees in India and the concern of other organization - national and international towards their problems.
I.7 SCHEME OF CHAPTERISATION

The entire work has been organised into Seven Chapters. The first chapter is an Introduction to the present study. It tries to define ageing and see the relevance of the study, besides outlining the scope and objectives of the research problems along with the detailed review of literature. It also looks into the emergence of the problem of the aged and how the heterogenity of the ageing population changes the nature of their problems.

The second chapter deals with methodology and field experiences. It gives the details of the universe of study, the methodology adopted and the field experience; it also take up issues in field work - that of objectivity and subjectivity.

The third chapter is on the family life of the aged. It deals with the importance of family for the aged, specially after retirement and delineates the living arrangements and their status in family. It also deals with the interpersonnel relations between the respondents and the children. The effect of industrialization, urbanization and modernization on the family structure and composition and their consequent impact on the aged. The conceptual debate on the so called breakdown of joint family and emergence of nuclear family has been dealt with in detail.

The fourth chapter brings out the other problems of aged - health, excess of leisure time, loneliness and isolation. It also deals with how the retirees are adjusting themselves with available economic resources.
The fifth chapter discusses the process of retirement and the policies and programmes of the Government of India and of the national and international organizations especially the United Nations. It also highlights the role played by Non-governmental Organizations in dealing with the problem of ageing.

Finally, the sixth chapter highlights some of the main theories which have talked of how to age successfully. It also discusses the concept of active ageing and how this problem needs a multidimensional approach.

The last chapter summarises the finding of the present study along with the major findings.