SUMMARY AND CONCLUSION

Ageing is an irreversible biological process and may best be defined as the survival of a growing number of people who have completed the adult roles. For census purposes, a cut off age of 60 years is taken for classifying people as aged in India. Ageing is an inevitable consequence of fertility decline. With the gradual fall of mortality rate, awareness, better nutrition, advancement in health technology and the increase in life expectancy, the number of elderly both relative and absolute, are increasing all over the world.

The problem of ageing has been recognized as a major social problem by sociologists all over the world. According to Desai and Naik a large number of people in a group are required to face the problem and are not able to solve it and so have to suffer and therefore becoming problematic to society.

During old age, many seniors undergo difficult transitions in their lives such as retirement, financial problems, declining health, the death of spouses, partners and friends that can strain their social network. This strain is particularly worrisome because it occurs at a time when the aged most urgently need the social support-to help them recognize emerging problems, provide immediate care, and/or facilitate help from outside sources.

Societal developments influence the social structures as well as the social environment in general, and especially the exchange of social support between family members, friends and neighbours. Present world is strongly impacted by globalization, individualization and rationalization. All the three are precursors of social isolation and loneliness. Globalization has led to a remarkable expansion of the social space in which people live thus weakening the personal network and social support. Due to individualization, the traditional, meaningful integration frameworks have dissolved and people are
less able to fall back on social bonds like family and neighbourhood. Social culture is also transformed because of rationalization which leads to a planned life style in which efficiency rules.

In order to ensure that the elderly continue to flourish, it is important to identify and combat the unique characteristics that result in socio-economic problems, social integration in family, financial problems, loneliness, problems in performing daily chores, feelings of irritation, health problems, adjustment in the family, lack of involvement in decision making process in the family.

All this bring us to the conclusion that since ageing is a normal process, we not only can equip ourselves to cope with it, when it comes but can also enjoy the opportunities and challenges it presents. The findings of this study may help the government and private agencies to tackle the problem of all kinds and made ageing a more charming choice and healthy routine. Hence, the present study is an attempt made in this direction with the specific objective: To find out the types and extent of problems faced by old people.

**AIMS AND OBJECTIVES OF THE STUDY**

1. To examine the socio-economic conditions of the aged;
2. To examine the patterns and extent of integration in the family;
3. To examine the problems faced by the aged in day-to-day life;
4. To ascertain the contribution of the aged persons in the family and community; and
5. To examine the government schemes for the welfare of the aged.

**RESEARCH METHODOLOGY**

The present study in exploratory cum descriptive in nature. Keeping in view the objectives of the study, the exploratory research design has been used to analyze the basic issues pertaining to the aged in the family.
DESIGN OF RESEARCH

For the present study multistage stratified random sampling was used for deriving the representative sample. At first stage, all the districts have been divided into two categories, i.e. agriculturally developed zone and moderately developed zone. From these two categories of the districts, two districts were selected. The district Kurukshetra from agriculturally developed zone and Rohtak from moderately developed zone were selected. In the next stage, two wards from each district were selected by using lottery method. All the aged above the age of 60 years were selected for the present study.

For the present study, 378 respondents have been taken from two districts of Haryana i.e. Rohtak and Kurukshetra. Out of total respondents, 192 respondents from Rohtak and 186 respondents from Kurukshetra districts were taken as a sample. Random sampling technique was used to select the sample. The study is essentially a systematized composite of interview schedule and observation method.

TECHNIQUES OF DATA COLLECTION:

For collecting data we have used interview schedule method. In addition to this we also took help of observation method and informal discussion with the different sections of the aged i.e. pensioner, unemployed, destitute section of the society so that the whole scenario for the present society study gets strengthened. The help of secondary data may also have been taken wherever necessary. The use of newspaper, magazines, govt. offices records, has also been made.

In order to collect information, interview schedule was prepared and questions were framed in both open ended and close ended. Qualitative and quantitative data was collected. The questions were framed in such a way that they could be easily understood by the respondents. Besides, interview schedule, information was also collected through observation method to make
the study more comprehensive. The people above 60 years of age were interviewed as units of investigation. The questions were arranged relating to the difficulties in performing daily chores, decision making in family, contribution to household work, feeling of loneliness, participation in family ceremonies, change in the attitude of family members, social integration with the family members, family composition and satisfaction, frequency of illness and care taken by family members, head of the family, status in the family, economic dependency and status in the family, leisure time and activities, health status, nature of problem, feeling of irritation, type of treatment, physical ailments, consultation with doctors, old age pension, old age government policies, awareness about government old age policies, facilities provided by the family members and government, healthcare programmes, problems of adjustment, etc. The secondary data was used regarding history of city, Censuses, District Gazetteers, Various Surveys, Books, Magazines and Municipal Committee was also contacted for this purpose.

**DATA ANALYSIS**

According to the need of the study, the relevant tables were constructed by using questionnaires. The inferences have been drawn on the basis of these tables. The graphical representations of the information received have been done to make understand the information more easily and percentage was calculated.

**CONCLUSION AND FINDINGS**

It is concluded that out of 378 respondents taken for the study, majority of the respondents belong to the age group between 60-65 years in both the districts. Regarding sex composition, majority of the respondents belong to male. On the basis of caste analysis, majority of the respondents belong to upper caste. Regarding educational level of the respondents, most of the respondents have studied upto primary or having lower literacy level, but
number of respondents, who were highly educated, were large in number in district Rohtak as compared to Kurukshetra district. It has been noticed from our data that majority of the respondents in both the districts belong to Hindu religion. On the basis of type of family, it is obvious from the data that the majority of respondents in both the districts belong to nuclear family. But respondents, who belonged to joint family, are large in number in Kurukshetra as compared to respondents of Rohtak district. Analysis of marital status showed that majority of the respondents were married, while a considerable number of them were widow/widower. On the basis of monthly income analysis, it was found that the respondents, who belong to the lower income group, i.e. upto 8000/- were more in number in Kurukshetra district, while in higher income of above 8000/- the respondents of Rohtak district were large in number as compared to the respondents of Kurukshetra district. Regarding source of income, it was found that the majority of the respondents of both the districts, were depends on service pension or old age pension. When we threw a light on respondents’ past occupation, the majority of the respondents of Rohtak district, were engaged in government/private services, while in district Kurukshetra, majority of the respondents were engaged in agriculture and allied services in their past.

After analyzing the adequacy of money sources of the aged, they had to live, majority of the respondents in Rohtak district were having enough assets for their livelihood as compared to the respondents of Kurukshetra district. When the dependency of the respondents was analyzed, the respondents of Kurukshetra district were found more dependent as compared to respondents of Rohtak district. After analysis of financial support, it was found that financial support was more in respondents of Kurukshetra district as compared to the respondents of Rohtak district, whereas, in the district Kurukshetra, majority of respondents did not have enough assets to live their livelihood independently. Regarding assets of the respondents, the response was almost the same, the
respondents of both the districts were having insurance policies, savings in banks/post offices and had agricultural land in their name.

Regarding the head of the family, it was found that in most of the families, the son was the head of the family in both the districts. When compared the respondents of both the districts, the number of respondents of Kurukshetra district who were self head in the family were large in number as compared to respondents of Rohtak district. When satisfaction and type of family was analyzed, it was found that the respondents, who belong to joint family were completely satisfied as compare to the respondents belonged to nuclear families. This showed the fact that the greater the numbers in the family, the greater was the attention received by the old.

Regarding the satisfaction of respondents with the facilities provided by their family members, it was found that majority of the respondents belonged to the lower age group of both the districts i.e., Rohtak and Kurukshetra have somewhat satisfaction, but in the upper age group, most of the respondents were not satisfied with the facilities provided by their family members. After examining the care taken by the family members of the respondents, it was found that the majority of the respondents of both the districts have been cared by their grand children. When compared the attitude of family members of respondents, it was found that the majority of the respondents in both the districts, i.e. Rohtak and Kurukshetra were disliked by their family members. When the attitude of family was analyzed with age, it was found that the respondents, who belong to the upper age group of both the districts, i.e., Rohtak and Kurukshetra were disliked by their family members respectively.

Regarding change in the attitude of their family members towards the respondents, the respondents of Kurukshetra district were large in number, who said that no change have come in the attitude of their family members towards them as compare to respondents of Rohtak district. When adjustment in living
conditions was analysed, it was found that the respondents of Kurukshetra
district, who were adjusted in living conditions were larger in number than that
of the respondents of Rohtak district. When adjustment was analyzed with age,
it was found that the respondents, who belong to the lower age group of both
the districts, had not adjusted, but in the upper age group, most of the
respondents had made their adjustment successfully. Regarding the status of
respondents, it was found that the majority of the respondents had sub-status in
their families in both the districts. It was also found that the main status of the
respondents was more in Rohtak district as compared to the respondents of
Kurukshetra district. It was also found that the respondents, who were
self-dependent were having main status and the respondents, who are partially
or totally dependent were having sub-status in the family.

When we threw a light on educational level of the respondents and their
status in the family, it was found that in both the district, the respondents who
have attained higher qualification were not dependent, while low educated
respondents were dependent on their family members in both the districts.
After analyzing the process of decision-making of the respondents in the
family, it was found that the response of the respondents in both the district
was almost the same, but majority of the respondents have been taking part in
decision making process in the family most of the time. When decision making
process was compared age with decision making, it was found that the majority
of the respondents have always been considered in decision making process
followed by the respondents, who have been considered most of the time in
decision making process. But majority of the respondents, who belong to upper
age group have not been considered in decision making process. It was also
observed that the majority of the respondents of both the districts have taken an
active participation in decision making process most of the time.
Regarding household duties of the respondents, the majority of respondents of Rohtak district have performing their duties in looking after house, while respondents of Kurukshetra district have been engaged in baby caring and shopping followed by agricultural and allied activities. After analyzing the leisure time activities, it was found that there were not much differences in leisure time activities in respondents of Rohtak and Kurukshetra districts, the majority of the respondents of both the districts have passed their leisure time in watching TV followed by the respondents who passed their leisure time in playing cards respectively.

When we threw a light on the difficulties in performing daily chores, it was found that respondents of Rohtak district have felt more difficulties in performing daily chores as compared to the respondents of Kurukshetra district. When we compare these difficulties with age, it was found that the upper age group respondents have felt more difficulties in performing daily chores in comparison to low age group respondents in both the districts. After analyzing loneliness of the respondents, it was observed that majority of the respondents in both the districts have felt loneliness most of the time. When we analyzed loneliness with age, it was found that majority of the respondents in both the districts, have felt loneliness sometimes by the lower age group respondents, but in upper age group, the majority of the respondents have always felt loneliness. Further, analysing with type of family, it was found that the respondents, who belong to nuclear family have felt more loneliness as compared to the respondents, belonged to joint family. It was also found that a considerable number of the respondents, who belonged to joint family have never felt loneliness.

Reviewing the caring of the respondents during their illness, it was found that the respondents of all age groups of both the districts i.e., Rohtak and Kurukshetra have properly been cared. After analysing care with age, it was found that in the upper age group, the number of respondents were larger
who have been cared properly as compared to lower age group respondents. When we analysed the care of family members during illness with type of family, it was found that the respondents, who belonged to joint family have properly being cared by their family members as compared to those respondents, who belong to nuclear family in both the districts.

Regarding nature of problems, it was observed that majority of the respondents from both districts, have faced physical problems as well as economic problems respectively. After analyzing the nature of problems with age group, it was found that in lower age group, there were more economic problems faced by the respondents, while in upper age group, the respondents have faced physical problems in both Rohtak and Kurukshetra districts. Regarding feeling of irritation, it was observed that majority of the respondents have always felt irritated. It was also found that the respondents, who have felt irritation, were large in number in Kurukshetra district as compared to the respondents of Rohtak district. When analyzed the feeling of irritation with age, it was found that the respondents of lower age group have felt irritation most of the times or sometimes, but majority of the respondents, who belonged to upper age group of both the districts, have always felt irritation.

Reviewing treatment preferred by the respondents, it was found that the majority of the respondents in both the districts have preferred allopathic treatment during their illness. But a considerable number of them have also preferred Ayurveda treatment. Regarding the source of treatment of the respondents, it was observed that the majority of the respondents from both the districts were dependent on the amount of old age pension for their treatment. After analyzed the physical ailments of the respondents, it was found a large majority of the respondents were suffering from many elderly health problems, but eye-sight and heart problems were found more in the respondents of both the districts.
It was also found that regarding awareness of government facilities/schemes of the respondents, the majority of the respondents from both of the districts were well aware of train ticket concession, higher interest rate on deposits in bank/post offices, but not much aware of income tax rebate, RSBY and MGNREGA schemes.

When we analyzed the awareness of respondents regarding government policies for old age persons, it was found that the respondents of Rohtak district, who were aware of government policies, were more in number as compared to the respondents of Kurukshetra district. When we compare the awareness with age, it was found that the respondents of lower age group of both the districts were aware of the government policies, but respondents of higher age group were not aware of the government policies respectively. Further analyzed this awareness with education, it was found that the respondents who have studied upto matric, graduation/post-graduation or having professional degree were fully aware of the government policies, but the respondents who have studied upto primary level were not aware of the government policies. Regarding attitude of respondents towards implementations of government old age policies, it was found that the majority of the respondents in both the districts were disagree, but quiet a large number of them were agree with this view that policies of the government implemented effectively. When we analyze this attitude with age, it was found that the majority of the respondents of both the districts, were not agree with this view that government policies have been implemented effectively. But a considerable number of the respondents were agreed with this view that government policies are properly implemented. After analyzing the level of satisfaction of the respondents regarding health services provided by the government, it was found that in Rohtak district, majority of the respondents were having somewhat satisfaction, but in Kurukshetra district, majority of the respondents were not satisfied with the health services provided by the
government. After analyzing this satisfaction with age, it was found that the respondents of both districts in all age groups were not satisfied or somewhat satisfied with the health services provided by the government. After analyzing opinion of respondents regarding separate health care programme for old age persons, it was found that the majority of the respondents in both the districts were agree with this view that separate health care programmes for old age person should be run by the government in the welfare old age persons. After examining their opinion with the age of the respondents, it was found that except the lower age group of Rohtak district, all the respondents of all age groups were agree with this view that separate health care programmes for the welfare of old age persons should be run by the government. It was further noticed that as age of the respondents increased, there is an urgent need of provision for separate health care programmes. On reviewing the awareness of respondents of old age pension, a vast majority of the respondents of both the districts were aware of old age pension. It was also found that the respondents of Rohtak district were more in number, who were aware of old age pension as compared to the respondents of Kurukshetra district. When we analyzed the awareness of old age pension with age group, it was found that the respondents of both the districts in all age groups were very well aware of the old age pension. Further analyzing the awareness of old age pension with age of the respondents, it was found that majority of the respondents of all age groups were fully aware of old age pension. It was also found that in higher educated groups, the hundred per cent respondents were aware of old age pension. When we analyzed the level of satisfaction with the amount of old age pension of the respondents, the majority of the respondents in both the districts were not satisfied with the amount of old age pension. After examining the level of satisfaction with age group, it was found that the respondents of both districts belonged to the all age groups have not been satisfied or partially satisfied with the amount of old age pension. Regarding the problems faced by the
respondents in getting pension/old age pension, it was found that the majority of
the respondents in both the districts have always faced problems while
getting pension, but a considerable number of the respondents have felt
problems sometimes in getting old age pension. Regarding suggestions of the
respondents, the majority of respondents from both the districts suggested that
amount of old age pension should be increased so that they should be able to
live their life independently followed by the respondents who suggested that
separate health policies should be formulated by the government for the
welfare of old age persons. A significant number of the respondents also
suggested that old age home, wider publicity and day care centres should be
established by the government.

To promote the elderly in taking part in a planned and organized way a
well-planned policy is necessary. For, it cannot be forgotten that the elderly
have valuable contribution to make to the national over all development with
there accumulated wisdom and rich experience during their active participation
in gainful jobs. Thus the younger generation should recognize respect and
support the elderly as their duty. In return for material support and mental
satisfaction, the elderly should provide an encouraging contingent of intellect
to the well-being of younger generation.

The old on their past should also learn to adjust with life in the modern
family. So they also have to prepare to accept old age. Not only the individual
and the family but the society also should prepare to face the problems of the
aged persons.

SUGGESTIONS

1. **Improving the Economic and Social Welfare of Old Age Persons**
   - For alleviating their economic problem, old people who are able to work
     should be helped to find some work, full-time or part-time, in the field
of interest and ability. This will help to reduce their feeling of dependence on others as well as futility in life.

- Many persons who are receiving state pension, under the old age pension scheme. This is a good thing especially for the destitutes. However, there are many inadequacies in the pension scheme. The criteria for eligibility for Government pension, the amount of pension and the method of disbursing pension should be modified in such a way that all the deserving old should get adequate income regularly and without so many formalities.

2. **Improving the Health Status of Old Age Persons**

- The National Programme for the Health Care for the Elderly (NPHCE) was launched by the Ministry of Health and Family Welfare during the 11th Five Year Plan period. This programme has to be effectively implemented by prioritising states having a higher proportion of elderly population.
- The introduced RSBY guidelines will need to be expanded to ensure coverage of all BPL elderly households and the cash limit for these households will need to be enhanced.
- Efforts to ensure a proper diet for the elderly from BPL households will have to be made and there is a need to explore whether the mid-day meal scheme of the Integrated Child Health Scheme can be extended to cover the elderly.
- Geriatric wards are to be opened in every district hospital. Orientation courses should be arranged for the doctors in the field of geriatric medicine. Whenever possible paramedical staff for domiciliary services should be provided for the care of the old.
- The family members should be made aware of the psycho-social and health problems of the old in such a way that they should take sympathetic attitude towards the old.
3. **Enhanced Participation of Old Age Persons**
   - Integrated Programme for Older Persons (IPOP) underscores the need for creating awareness on various schemes for the elderly.
   - The National Council for Older Persons is not active enough to bring multiple stakeholders to the table to hear and respond to the voices and demands of senior citizens.
   - PRI institutions for more focused interventions relating to home-based and community-based care of the elderly.
   - Day care centres should be started where the old can meet and mingle with their peers and spend their time in a socially meaningful manner.
   - A social security programme like the common minimum needs program for the aged employed in both the formal and informal sectors should be involved through special insurance schemes.
   - Voluntary organizations have a vital role to play in the care of the aged. More financial support should be extended to them to set up old age homes, particularly for the downtrodden sections of the elderly persons.

4. **Effective Implementation of National Policy and Programmes for Old Age Persons**
   - While framing policies and programmes, aging population should be given equal importance as other age groups. Voluntary organizations which come forward to provide assistance for the destitute old should be given assistance.
   - Society and the state also should give importance to the old by acknowledging their problems and by framing policies and programmes for their welfare.
   - The Maintenance and Welfare of Parents and Senior Citizens Act (MWPSCA) enacted in December 2007 to ensure need-based
maintenance for parents and senior citizens needs to be more fully and uniformly implemented in all states as awareness of this Act.

Lastly, it is high time that the public should be made aware of this growing problem and be advised to plan ahead for their insurance in old age. Thus the solution to the problem of the aged demands integrated measures to tackle the problem of individuals in different phases of life and not only when they reach their senescence period. The old on their past should also learn to adjust with life in the modern family. So they also have to prepare to accept old age. Not only the individual and the family but the society also should prepare to face the problems of the aged persons.