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SUMMARY AND CONCLUSION

"Old age is a universal phenomenon, with varying degrees of probability, individuals survive childhood, grow to maturity, and become old, in all societies" (Shanas and others; 1968). Old age is a fact of life in all societies. All have some arrangements for dealing with it, but these differ greatly from one society to another. In some, the elderly are honored as sages and leaders. In others, the elderly are left along the trail to starve or die of exposure. In modern industrial societies, old age is a peculiar problem from sociological perspective. "What to do with the elderly people" has assumed critical importance in present times. Because of recent advances in public health and medicine, life expectancy has greatly increased. The real problem is not simply that people get old but that modern society neglects the elderly. Because of neglect, they become poor and lonely, which in turn weakens their physical and mental health. Therefore, old age is a problem from various aspects.
In the present thesis I have presented problems of old people by taking the samples of retired persons. The problem of old age is viewed from two angles. One is that of integration and another is that of segregation. The theory of integration is concerned with integrating the old people with the main streams of society. While the theory of integration emphasizes the provision of employment and other things by means of which the old people will be bound in the network of social relationship, the theory of segregation is concerned with slowly removing cross currents of ordinary life. This theory emphasizes disengagement of old people from society. Old people withdraw from active social life due to physical weakness and senility. "Disengagement results into triple withdrawal - loss of roles, limitation of social contacts and relationships, and a much smaller commitment to social norms and values" (Shanas and others; 1968). Integration theory is more applicable to human considerations of family life and particularly in the context of disintegrating family.

It is a common observation that the real problem of old age is loss of roles and relationships. If by any means, the old people get some kind of roles and maintain close relationships with relatives and friends, then the old people will lead a comfortable and happy life. My approach towards the study of old people is to treat the old people as human beings. From this angle I have studied the problems of old people.
In the present research work, I have selected two hundred retired persons for studying the problems of old people, from five vantage points of view - socio-economic dimensions of Retired persons at the time of retirement - Living conditions since retirement - Health status after retirement - socio-psychological stresses in family after retirement - Retired persons commitment for the society and by the society.

I have gathered information about socio-economic dimensions of the retired persons at the time of their retirement. It was revealed in present research work that the proportion of migrant retired persons in Marathwada region is very less due to various reasons. Since 'Aurangabad' city is acceptable as a place to settle down after retirement, many retired persons were found to have made provision of own house of stay after retirement. The findings show that the retired persons were found in age-range of 60 to 70 yrs. and were quite healthy and still fit for work. Retired persons from unorganized sectors are more active. I have also noted that majority of the retired persons are Hindus, educated (very few illiterate), rural and urban; few engaged in private employment in an unorganized sector; the rest are retiring from the jobs in the Government administration. Since most are married, they reported to be living with married and unmarried children and have been apparently
satisfied with semi-joint-family set up so far. Although discussions go on about elderly population living separately and also about their various issues, practically it has not been yet possible for both generations to live separately.

In rural set up, there are still large joint families and the persons retired or not retired are found to have been living with their sons only. As long as property is joint (agriculture or business), there is less likelihood in Marathwada that elderly retired will have to live separately. It was also found, that most the retired persons have been free from responsibilities like children’s education and marriage of children, when they retired. Majority of the retired person’s children have chosen different occupations, fields as well as jobs. The respondents who were class III and IV employees during pre-retirement period, were highest in the sample. The economic conditions of these retired persons was not so better at the stage of retirement.

So far as economic status of the retired persons is concerned it indicates that the majority of the respondents belonged to the middle class of the society. They draw their income from variety of sources, such as: Pension, House-rent, Present-job, Interest from saving, Business, Agriculture etc. Very few respondents are those who have financial problems. It is also noted in my research that the
pension alone cannot support a person economically in the post-retirement life. Therefore majority retired persons even after retirement directly or indirectly get involved in economic activities. I found, one's 'own house' is now an accepted need for every person. It has become a part of the planning for the old age. Majority of the respondents were found to be having their own house and hence they were relieved of the tension of living arrangement after retirement.

There is continuity of tradition in the residence pattern of old people with children and their kin. My sample shows predominance of staying of aged with children and grandchildren. Majority retired persons are living with children, grandchildren, spouse, daughter-in-law. It was revealed in present research work, that the Indian family system is yet highly sensitive and sensible to take care of its older members in all situations of life. Indian family still provides security, protection and reciprocal services to its aged members; today also. Most of the respondents are getting care in illness from family members. Spouses and children were most important caregivers in illness for these persons. Since family members are aware of their role towards the elderly, the retired persons in my sample do not pose very serious psychological problems and their life at home is much more secured, stable and comfortable.
Old values nurtured in family about the role of children towards parents in old age still seem little changed. However, few expressed negative reactions, sense of unhappiness about children's role, especially that of daughters-in-law and as a result are being treated out of obligation or as a burden. Small, urban families with small flats, limited income and working women in the families are some of the factors which are responsible for bringing out change in family level and specifically so with regard to the care of the old parents. As long as retired persons are an asset to the family, they are tolerated but as they deteriorate in health and suffer from disability they are looked differently.

It was found, that retired persons with high socio-economic status, planned old age and less worries at home are found to be actively engaged in a number of recreational activities voluntarily chosen outside home. Participation in activities is found to have been mostly on personal and private level, and not on socio-political and community level. In Indian society, this group of well-to-do retired person's energy need to be utilized for many programmes like adult education, functional literacy for masses, family and health education, counselling to problem persons, libraries for children, propagational activities. In ancient India, as sanyasis used to devote their time for preaching religious
values to community, retired persons shared work for inculcating new modern values of democracy equality, national integration and importance of humanity and education in life. From this point of view the force of retired persons army is found to be yet untapped.

Their health problems are associated with old age. So, I gathered information about the health status of the retired persons. The description of the health status of the respondents indicates that the health condition of the majority of the retired persons is average or ordinary. They have some complaints about health condition. These retired persons suffer more or less from physical disability to perform their routine functions. Hence, old age may be seen as a period of physical decline. When people become old they learn to live with the chronic ailments they suffer from. It has been observed in the present study, that almost all retired persons except few had been suffering from several diseases. Effects of aging and causes of diseases are found to be interrelated. Majority retired persons were patients of the chronic diseases. Blood pressure, Asthma, Arthritis and Diabetes are seen most frequently in retired persons. The impairment of vision is one of the most common health problem among the retired persons. Therefore, majority of retired persons visit physicians. Some retired persons take resort to "Ayurvedic" medicine. Many have to face surgery and hospitalization.
In present research, I found positive relationship between growing age and decline in health. These persons need extra health vigilance and additional support for avoiding physical disabilities. I found almost all retired persons use some pattern for adjustment with falling health. Mostly they keep control over diet, take rest and keep themselves relaxed and take physical exercise regularly. Walking, Jogging, Yoga, Cycling. Manual work, Gardening are their usual physical exercises for their physical fitness. Aging has to accept these changes and for which every person needs to be aware of the life-style, diet, exercise and physical fitness necessary in old age. Socialization, health education and strong will power are necessary sound health may or may not be possible due to old age but sound and matured, happy and contented mind must be developed by every retired person to maintain his or her health status high.

I have also gathered information about family life of the retired persons and found most of the elders feel that the family affection and friendliness are disappearing day-by-day. Many expressed worry about the slow and gradual disappearing of affectionate and friendly atmosphere in the family, numerically only 17% are really dissatisfied. They complained about insulting treatment, no interaction with daughter-in-law disagreement with children. These 17 per cent respondents who stay with children but are unhappy reveal one
direct correlation between stresses and strains on the part of retired old persons' and lack of primary control, influence of outside roles, limited income along with absence of planning either by the retired persons themselves or by their children'. The more lack of planning for the aged results into more loss of happiness and security.

More number of retired persons do have some financial liabilities. Medical bills, daily house expenditure, repaying loan instalments incurred either for daughter's marriages or children's education. However, apart from the strains developed from time to time economic adjustments, many do not face serious problems. This is obviously due more to pension scheme and other savings plan rather than due to a very systematic planning on the part of many.

Majority (76%) retired persons live with their families and children. These are like quasi-joint families. 59 per cent respondents reported that they are respected well, enjoy freedom and authority and agree with children as they have adjusted or rather understood children correctly. This explains very important fact that in all cities with still impact of older traditions, urban semi-joint families have not created so far stresses and strains for their elderly retired parents and parents-in-law. Although this is so with parents, it is noteworthy that their children who are grown up are aware of their old age when they may not get same treatment from their own children.
It was found that the more the adjustment of financial and behavioural patterns of life on the part of old retired person, the less are the stresses and strains of psychological and physical nature of the old persons. There is thus positive correlation between pre-retirement planning, adjustment mechanism and reduced stresses and strains. Thus from these correlations one may see that in Indian urban families retired old persons are living to a great degree of satisfaction level.

It was found that these elders have faith in God and Rebirth, and they are not afraid of death. Since they have completed all responsibilities of their life, they are ready to die any time. At the National plane all most all respondents are worried about the changing features of society. They are anxious about the decreasing hold of morality in all fields. Although these retired persons talked about a need to create 'Homes for the old' and that such institutions will have to provide all facilities to older persons; they themselves do not need such Homes to stay.

These elders have some expectations from government about welfare of the old. They demanded many economic aids, pension to all aged persons, and the other social services for the aged.
The problems of the aged are many, varied and embrace many aspects of social life. It is essential to identify persons who are retired and aged in every part of India. I found that the retired persons with sound economic and educational background can do much for the society even after retirement. Their economic demands are due to rising prices and scarcity of goods and also due to lack of planning for aging is important for everyone. It is also proved that it is important for the society and family also. The problems of old age may not arise under planned programmes. In case of health and tourism the complaints are common. These older persons demand a sympathetic treatment from the society. The problems of the Indian older persons are not as complicated as those of the west. It does not mean that there is nothing to do for them. In future, Indian elders might have to face new problems under the changing conditions. For that the Government, society, families, sociologists, voluntary institutions should contribute.

From global point of view in Indian society, old age does not present severe problems. In India the relationship between parents and their sons is still cardinal. The conflict between generational relationship, is not severe in India. Devotion towards joint-family relationship still continue in Indian families.
SUGGESTIONS:

To improve the conditions of the old people some schemes should be evolved.

1. Old age pension should be given to old people for satisfying their economic needs.

2. Free Medical aid should be given to old people after the age of 60 yrs., if they do not have any economic security.

3. Those old people who are fit for work after sixty, should be given some part-time work and society should be benefitted by their long experiences.

4. Day-care centres, health clubs, walkers' clubs and such other associations should be established in every town in order to render services for the elderly.

5. Old Homes providing rooms for stay on the basis of permanent rent basis should be started either by private Trusts or semi-Government. Bodies where single old persons will be able to live quietly.

6. Elderly's Homes may be attached to orphan children's Homes or destitute Women Homes so that different problem persons could be helpful to each other. Voluntary organizations should aim at building such complexes which can establish institutions interdependent.
7. Subjects/Topics of Old Age, Gerontology, Problems of the old people, Health care in old Age, Socialization for Death, Dying state and old Age life should be introduced at school level and college level with suitable emphasis on contents.