CHAPTER-I

INTRODUCTION
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“We stop playing because we grow old; we grow old because we stop playing”

George Bernard Shaw.

The word ‘life’ is the mirror of the world in terms of both inner and outer aspects. The changes in the world, be it objective or subjective, initiates new ripples in the life floor. The desire to have a life, the incidence of zygotic conceptions- the birth of a child, introduces so many changes in the ontogenic process for the given child that alterations in inner and outer realities are possible to a great extent in any moment. All these imply that a small word like ‘life’ is not a simple thing at all; it is pregnant with multidimensional facets to indicate or maintain a continuum of its own. The starting point of it is zygote formation in prenatal state, birth in the postnatal process, having its terminating point at death. Nothing is predictable in ‘life’, but the average functions present a norm. This norm pinpoints major life phases or periods being ornamented by distinct bio-behavioural growth/ developmental processes. Each major period has a landmark, revealing psychological implications of various sorts. Hence, each deserves special attention and analysis.

The focus of the present era is ageing, being the second major developmental phase of life. The reason being available techno-medico advancements resulting in stretched longevity span. In the second half of life, how ‘we,’ the human beings of advanced world, are behaving and causing changes in the outer reality, has become a matter of concern to be analyzed and understood properly. Being accustomed
with comparatively more negativities than the first half in terms of declined socio-biological and psychological components, what type of psychological problems are endangering our adjustment pattern, has proved to be an important issue in the specific parlance of ‘gerontology’.

1.1 The Concept of Aging:

The aging process is of course a biological reality which has its own dynamic, largely beyond human control. However, it is also subject to the constructions on the basis of which each society makes sense of old age. The age of 60 or 65, roughly equivalent to retirement ages in most developed countries is said to be the beginning of old age. In many parts of the developing world, chronological time has little or no importance in the meaning of old age. Other socially constructed meanings of age are more significant such as the roles assigned to older people; in some cases, it is the loss of roles accompanying the physical decline which is significant in defining old age. Thus, in contrast to the chronological milestones which mark life stages in the developed world, old age in many developing countries is seen to begin at the point when active contribution is no longer possible (Gorman, 1999).

Age classification appeared to vary between countries and overtime, reflecting, in many instances, social class differences or functional ability related to workforce, but more often than not, it hinted at a reflection of current political and economic situation. Many times the definition is linked to the retirement age, as has been mentioned before. This translation in livelihood became the basis for the definition of old
age which occurred between the ages of 45 and 55 years for women and between the ages of 55 and 75 years of men (Thane, 1978).

While ageing impacts on everyone and (virtually) everything in society, politics and the economy, its impact differs greatly by country and by policy-area. Ageing is a pervasive phenomenon in that it affects everyone, not only the older parts of the population, and global in that it affects all regions of the world. As a result, ageing has important implications for inter-generational, intra-generational and also international equity. The study of ageing involves examining it from three perspectives, namely, individual ageing, population ageing and qualitative changes in ageing (OECD, 1996).

In the Indian context, the population is ageing very rapidly following the trend of other countries across the globe (Sharma and Xenos, 1997). The age-group of 60-plus in India is projected to increase from the current level of 7% to nearly 9% by 2016 and 21% by 2050 (Sharma, 2007). The elderly are living 15-25 years (or even more) after the age of 60, increasing the period of intergenerational interaction. Hence, the predicament of senior adults is that for them with longevity come physical disabilities and emotional insecurity, loneliness, lack of support and care, acute sense of role loss, unhappiness and loss of confidence (Sharma, 2007; Kaplan and Chadha, 2007).

Rowe and Kahn (1998) propose that there are three components of successful ageing, namely, avoiding disease, engagement with life and maintaining high cognitive and physical function. Well-adjusted individuals tend to have a reasonably accurate evaluation of themselves in relation to their world and hence have a fairly realistic level of aspiration. Senior citizens, who often remain in a blind alley during their frantic search
of meaningfulness in life, owing to their diminished sense of controllability of emotion, end up at a compromise in the canvas of adjustment.

1.1.1 Categories of Definitions of Ageing:

When attention was drawn to older populations in many developing countries, the definition of old age many times followed the same path as that in more developed countries, i.e., the government sets the definition by stating a retirement age. Considering that a majority of old persons in Sub-Saharan Africa live in rural areas and work outside the formal sector, and thus expect no formal retirement or retirement benefits, this imported logic seems quite illogical. Further, when this definition is applied to regions where relative life expectancy is much lower and size of older population is much smaller, the utility of this definition becomes even more limited.

Study results published in 1980 provides a basis for a definition of old age in developing countries (Glascock, 1980). This international autobiographical study was conducted in late 1970s and included multiple areas in Africa. Definitions fell into three main categories: (1) Chronology; (2) Change in social role (i.e. change in work patterns, adult status of children and menopause); and (3) Change in capabilities (i.e., invalid status, senility and change in physical characteristics). Results from this cultural analysis of old age suggested that change in social role is the predominant means of defining old age. When the preferred definition was chronological, it was most often accompanied by additional definition.

These results somewhat contradict the findings of a more recent study conducted in Nigeria regarding perceptions about onset of old age (Tognu-Bickersteth, 1987,1988).Younger and older groups had similar responses regarding the chronological
onset of old age, with differences in the stated age for men and women. The results suggested that the generally accepted definition was similar to westernized definitions of old age; however this was a unique community with culture-related norms that best owed certain privileges and benefits at older ages. If one considers the self-definition of old age, as people enter older age, it seems their self-definitions of old age become increasingly multifaceted and increasingly related to health status (Brubaker, 1976; Johnson, 1976 and Freund, 1997).

The study of aging and the aged has created the need for special vocabulary which contains similar concepts related to the problem. If researchers working in the field of aging wish to communicate effectively with one another, critically analyze any contemporary work in the field, or compare earlier studies, it becomes important that homogeneous concepts be clearly defined so that they can be used consistently.

The first term of which all researchers in the field of aging should be aware of is ‘gerontology’. The term comes from the Greek word Geras, meaning ‘old age’ and “logos” which signifies the study or description of something. Thus, precisely speaking, gerontology is the study of old age. It is a very broad term and encompasses the psychological, sociological as well as physiological aspects of aging (Reed, 1966).

Another term that is quite frequently encountered in the study of aging is ‘senescence’. The term senescence means biological aging. Since all human beings are mortal, senescence is a process through which all individuals completing the life periods will eventually pass. Senescence or biological aging can be distinguished from biological processes in five ways:
(1) The condition must be universal; that is, it must happen to all individuals.

(2) Senescence is a process that comes from within the organisms; that is, it is a ‘natural’ process, not one caused by external factors.

(3) The onset or occurrence of senescence takes place gradually rather than suddenly.

(4) The effects of senescence have a deleterious effect on the individual. Senescence leads to decline in overall functioning and performance of the individual.

(5) The process of senescence is unidirectional, that is, the effects of senescence are in the direction of decline and cannot be reversed by normal body processes.

Other than senescence, periods of old age have another phase named senility (Armstrong, 1978). Senility is the period during old age when more or less complete physical break down takes place and when there is mental disorganization. The individual who becomes eccentric, absentminded, socially withdrawn, and poorly adjusted is usually described as ‘senile’.

Aging is a continuous process which begins with conception and ends with death (Arora and Chadha, 1995). Old age is taken to be a period of decline in the life of an organism. Although it is primarily a physiological phenomenon, it gets reflected in an individual’s economic, psychological and social aspects, and affects them substantially (Hussain and Narain, 1996).
Aging is experienced as an inevitable life-long process; it refers to the process of growing old, or developing qualities of old, maturing, changes that occur as a result of passing time. Aging is often defined biologically, chronologically, socially and psychologically (Neugarten, 1977). Biologically aging is associated with change in the colour of hair, loss of teeth, weak eyesight or inability to attend to personal needs, several physical ailments, and their consequences on individual and the family. Social aging is administratively determined for the purpose of social security, retirement from jobs in organized sector, or for demographic classification, having its consequences on the individual and the community. Psychological aging may be seen as a continuous struggle for identity, i.e., for a sense of coherence and meaning in thoughts, feelings and actions. Success in it depends on a lucky synchronization of changes through life in different parts of personal self (Pedersen, 1993).

Aging is the time for self-perception, looking back on one’s life. For many people it comes as a phase of tranquility and senility, as a phase of life in which a human being can still grow towards completion of his personality and inner values. But it can also be a phase of life which is marked by physical or mental disability, by proneness to disease and steady escalation of misery and suffering (Arora and Chadha, 1995). Whether an individual reacts well or poorly to old age is the result of combination of different factors; his outlook on the life and work, his health, his economic status, his needs for a sense of fulfillment, his flexibility and his personal history (Sinha, 1994).
1.2 The Importance of Aging as Significant Life Phase:

As an individual approaches the end of life’s last stage, the future holds a given outlook for many. They are termed as “senior citizens” and “chronologically gifted” and are respected for their values and knowledge. Older adults are an important, growing segment of the population. They are the survivors, at their highest level of maturity and thus they have much to teach us regarding their experiences during their turn in society’s roles of power and responsibility of leadership. Their angle of acceptance is obvious in this matured age. They are the first to face a number of problems that may have been unrecognized and become dominant social and economic issues of the next half century. They can be the role models in terms of the values and practiced behaviour patterns.

Old age is synonymous with wisdom, values and a host of positive things that are desirable in a community. Changed norms of society can be appraised by them and people may feel accepted and relaxed.

Aging is not an obsession in India, and death itself not so final an event due to the belief in reincarnation. Death is taken in a more philosophical sense and with greater resignation, and acceptance of fading away. We should try to help them to be peaceful in terms of having less pain at the end period of their life.

Older people often exhibit a tendency to become more conservative. This tendency takes the form of behavioural rigidity, unyieldingness and greater consistency in social and political attitudes (Dibney, 1975). They are often viewed by the younger generations as feeling lonely and rejected. At the same time they are seen to perceive themselves as losers. However, this attitude results more from realistic appraisals of
obstacles that society puts in the way of older people rather than from any pessimism inherent in the aging processes. At the same time they also become wiser with age as a result of their experiences (Butler, 1975). They understand what life is about and get a subjective awareness of death.

The physical problems associated with the old age are mainly disability due to slowing down. A greater susceptibility for the infections, inability to cope up with infections, degenerative diseases like arthritis, atherosclerosis, malignance, blindness due to cataract, hearing loss, dementia and a slowing down of intellect are all conditions associated with old age.

The most pronounced problem for the aged is financial uncertainty. An earning member suddenly receives only half his normal income (in case of pensionable jobs) or none (in case of non-pensionable jobs). He/she has to cut down all habitual expenses and has to learn to live within the means. Most of the time this is not possible because the rate of pension as remuneration do not keep up with the cost of living and therefore an aged person has to look from a job (and to improve his earning capacity) even for sustenance.

The impact of economic loss is maximum felt in social life. The person is no more consulted in the house and becomes an object of not much concern in the society. The major impact of the combined loss of earning power and social recognition is a sense of uselessness felt by the individual. Such state of mind tends to aggravate any of the existing medical problems. Some of the important psychological hassles commonly faced by aged individuals are as follows:
Acceptance of Cultural Stereotype of Elderly:

Acceptance of traditional beliefs and cultural stereotypes of the aged encourages the elderly to feel inadequate and inferior. It reduces their motivation to do what they are capable of doing. Women tend to be more affected by such stereotypes than men. This is primarily because the social group judges elderly women in poor health and financially-strapped condition as a result of widowhood. This negative stereotype of elderly women affects their personal and social attitudes and, in turn, their personal and social adjustments (Payne and Whittington, 1976).

Tendency to “Slip” Mentally:

Many elderly suspect or realize that mental decline such as difficulty in memorizing, attention, learning etc. has started to set in. As a result, they start to believe that they are too old to learn anything new. They withdraw from all activities that might involve competition with younger people (Goodrow, 1975).

Social Disengagement:

Some elderly gain adequate satisfaction from social contacts with family members and relatives and consequently do not experience the ill effects of social disengagement (Brown, 1974). But the aged who are disengaged either voluntarily or involuntarily become socially isolated. As a result they lack the social support they had in times of trouble and stress when they were younger. This is especially serious if they are widowed or have few family members to turn to with their problems.
• **Reduced Income:**

Aged individuals are unable to afford leisure time activities they consider worthwhile, such as, attending lectures, or participating in various community activities. Reduced income due to widowhood or total dependency on their children makes them feel inferior and sometimes helpless.

• **Changes in Life Patterns:**

Elderly due to their physical weakness and psychological depression associated with aging, no longer need as large a home as they lived before. Their physical weakness and other problems associated with health prevent them from doing things they would like to do such as taking a trip, visiting a relative, friend etc. (Streib, 1968).

• **Sexual Deprivation:**

Sexual deprivation or unfavorable attitude toward sex in aged individuals affects their adjustive process. Happily married elderly women are healthier and live longer than those who never married or have lost spouse. (Hurlock, 1997).

• **Imaginary Disease:**

Many older individuals suffer from imaginary illness(es) and concentrate mainly on pain that they may have. Kassel (1966) pointed out “their disabilities become status symbol, a means whereby they can obtain attention and control their families”.
• Malnutrition:

Malnutrition is due to psychological than economic causes. The most common psychological causes are lack of appetite resulting from anxiety and depression, not wanting to eat alone and food aversions stemming from earlier prejudice. Even when food intake is not deficient both qualitatively and quantitatively, due to digestive and intestinal disturbances they suffer from malnutrition.

1.2.1 Grades in Aging:

Aging is a phenomenon encountered in every country and long-life expectancy presents problems both for the individual and the society. To understand the process of aging, one must understand the concept of grades in aging. Grades in aging can be considered as a grouping of years during which certain psychological, physiological and social characteristics exist. Each developmental stage demands different behaviour pattern from an individual. As individuals mature, they pass through separate and distinct phases in the course of their lives. Throughout their lives, individuals move in and out of developmental stages as a result of their respective increasing chronological ages, as well as physical, psychological or social changes.

Generally speaking, developmental stages can be broken down into three stages, with stage being further sub-divided. The first is infancy which includes the neonate (birth to two weeks), infant (up to one year), toddler (one to three years) and pre-school child (three to five years). The second stage is juvenile stage which is subdivided into childhood (five to ten), early adolescence (eleven to fifteen). The last stage, and
perhaps a comparatively neglected one in the field of psychology, which makes almost three-fourths of the human life cycle is adulthood. This stage has the maximum number of subdivisions since it is the longest period in human life-cycle. Adulthood is subdivided into early adulthood (twenty to twenty-five), middle adulthood (twenty-five to forty) late adulthood (forty to sixty), pre-retirement (sixty to sixty-five), retirement (sixty-five to seventy) and old age (seventy plus) (Bromley, 1974).

Ages can also be divided decade-wise as follows: (Wikipedia, 2010)

<table>
<thead>
<tr>
<th>Term</th>
<th>Age (years, inclusive)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denarian</td>
<td>10 to 19</td>
</tr>
<tr>
<td>Vicenarian</td>
<td>20 to 20</td>
</tr>
<tr>
<td>Tricenarian</td>
<td>30 to 39</td>
</tr>
<tr>
<td>Quadragenarian</td>
<td>40 to 49</td>
</tr>
<tr>
<td>Quinquagenarian</td>
<td>50 to 59</td>
</tr>
<tr>
<td>Sexagenarian</td>
<td>60 to 69</td>
</tr>
<tr>
<td>Septuagenarian</td>
<td>70 to 79</td>
</tr>
<tr>
<td>Octogenarian</td>
<td>80 to 89</td>
</tr>
<tr>
<td>Nonagenarian</td>
<td>90 to 99</td>
</tr>
<tr>
<td>Centenarian</td>
<td>100 to 109</td>
</tr>
<tr>
<td>Super centenarian</td>
<td>110 and older</td>
</tr>
</tbody>
</table>

Old age extends from approximately sixty years of age until death. It is a time for adjusting to decreased health and strength and to retirement. Establishing affiliations with a number of one’s age mates and adapting to social roles are important during this period. It however, may be mentioned that these age guidelines do not always accurately indicate a person’s internalized judgement of behaviour. Socio-economic
status, rural or urban settings, ethnic background, historical periods and many other factors may strongly influence the definitions, expectations and pressures of old age.

Erik Erikson (1963) has been the first psychologist to treat the developmental stage approach systematically. Erikson saw human development as a continuum, but as a series of predetermined steps or stages by which individual seeks contact in an ever-widening radius with the society, which welcomes and regulates his unfolding. Each phase of this development has a turning point, a crisis, which poses the solutions of a specific task, a solution which is prepared in the preceding stages and is worked out further in the succeeding ones.

In Erikson’s account of developmental stage old age brings on a core developmental conflict: integrity versus despair. To achieve integrity, in Erikson’s sense of this term, means to integrate one’s attitudes, beliefs, motives and experiences in such a way that they fit together comfortably and form a coherent whole. One result is a feeling of satisfaction with a life well-lived. Such integrity, Erikson believed, is most likely among those who have “taken care of things and people” and have adapted themselves “to triumphs and disappointment adherent to being” (Erikson, 1963). Without this integrity, the older person feels a growing sense of despair, a fear that time is running out before the pieces of life’s puzzle can be assembled in a satisfying way. This despair can show up in various ways—as perceptual irritability and disgust or as a nagging fear of death—but at its core is a sense of incompleteness, of a life that is not yet whole.

In order to understand the manifold implications of such stretched life span in direct reality; we need to go through several dimensional achievements in
different theoretical framework. Hence, the following fold delves with a detailed sketch of the theoretical perspectives of ageing:

**1.3 Theories of Aging:**

Researchers in the field of aging have aimed to analyze adult aging and have formulated several theories which aim to explain the complexities embedded in aging process and its related changes.

It may be relevant here to discuss what a theory is. All scientific theories have their origin in observation and are evaluated ultimately in terms of observation. From causal situations in everyday life, from clinical studies and field surveys, and from controlled experiments, there gradually emerges a collection of observations. Associated with these observations, is a group of ideas that attempt to interpret these observations. A scientific theory deals with the objects, events or situations that are found in nature and that, as natural phenomena, belong to a particular class as specifiable characteristics. The scope of theory is directly related to range of phenomena encompassed.

Theories can be considered to be of two types. The first type of theory is known as the macro-theory. It presents a very broad and general explanation of human behaviour. The second type of theory is known as micro-theory which is a very specialized theory that attempts at explaining human behaviour in certain situations and in particular groups. In the study of aging macro-theories began to emerge since 1960. Since then, several theories have been adopted or used by gerontologists. Some have been discarded, while others have received support from a cross-section of the research community on aging.
1.3.1. Psychological theories

The process of ageing is explained by two major viewpoints – by stage theories or through contextual approach.

1.3.1.1 Stage theories – These theories suggest that all human beings, no matter where or when they live, move through an orderly progression of different stages in their development. Piaget’s (1965) theory of cognitive development and Freud’s (1905) stage theory fall under this group. Erikson (1987) proposed that development proceeds through a series of distinct stages, each defined by a specific crisis. This crisis results from the fact that as individuals grow older, they confront new combinations of biological drives and societal demands. The biological drives reflect individual growth and physical change, while the societal demands reflect the expectations and requirements of society for people at different ages. Erikson’s perspective of old age relates to the stage of Integrity versus Despair where integrity results from feeling that life was worth-living as it happened, while old people who are dissatisfied with their lives fear death.

Erikson (1987) termed that late adult development chiefly involves the main psychosocial conflict of “integrity versus despair” where the adult looks back or adopts a retrospective glance towards life in general and evaluates whether his/ her life was a satisfied one, had meaning and was worth it. If the answer is yes, and they feel they have reached many of their goals, they attain a sense of integrity, otherwise they may experience despair. Successful resolution of this crisis can have positive effects on how the person comes to accept his own mortality, and also his/ her physical and psychological health during the final year of life. According to the developmental
process, Gould (1987) has stated the stage of later adulthood (classified by stage VI which is from 45-53 years), where the main developmental tasks are settling down, and accepting one’s own life. Stage VII ranges from 53-60 years, where the major developmental task involves increasing tolerance, acceptance of past life and decreased negativism to general mellowing. Levinson (1978) classified middle adulthood (40-60 years) where 50 to 55 years was considered by him to be transition years, and 55-60 years were stated as culmination of middle adulthood. Late-life transition according to him was 60 to 65 years, and 65 years onwards was regarded to be late adulthood. In Levinson’s studies where he focused more on adolescence and early adulthood, he stated four major developmental tasks, namely:

- finding a mentor,
- developing a career,
- establishing intimacy and defining a dream of adult accomplishment.

Havighurst (1968) classified adulthood into three parts, where later adulthood was 55 years and above where the developmental tasks were:

- adjustment to decreased strength,
- to retirement and less money,
- to death of spouse,
- to relate to age group
- And meet social and civic needs.

Bromley (1974) stated that adulthood can be classified as:
Table 1.1: Developmental stages and the corresponding years as proposed by Bromley (1974).

<table>
<thead>
<tr>
<th>DEVELOPMENTAL STAGES</th>
<th>YEARS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early adulthood</td>
<td>(20-25)</td>
</tr>
<tr>
<td>Middle adulthood</td>
<td>(20 to 40)</td>
</tr>
<tr>
<td>Late adulthood</td>
<td>(40 to 60)</td>
</tr>
<tr>
<td>Pre-retirement</td>
<td>(60 to 65)</td>
</tr>
<tr>
<td>Retirement</td>
<td>(65 to 70)</td>
</tr>
<tr>
<td>Old age</td>
<td>(70+)</td>
</tr>
</tbody>
</table>

Neugarten & Moore (1968) defined three age groups, namely, young adulthood (20's & 30's), middle adulthood (40's and 50's), and senescence (65 and seventy's). Santrock (1985) used the label of early, middle and late adulthood, where late adulthood extends approximately from 60 to 70 years until death. According to him it is a time for adjusting to decreased health and strength and to retirement. Establishing affiliations with members of one's group and adapting to social role are important during this period.

1.3.1.2 Contextual theories – They focus on developmental process on the basis of the specific response(s) which the individual gets from his environment, i.e., ideas, views and approach towards that age in that particular society or culture that influence the process of development itself. These theories suggest that as life events and conditions may vary from culture to culture and over time, adult development must be viewed against this backdrop of social and historical factors. Under this group falls Neugarten's (1987) theory of *social age clocks*, or internalized calendars telling individuals when certain events should occur in one's lives and what one should be doing at certain ages. According to Neugarten, these clocks vary greatly depending on the environment, i.e. our occupation, socio-economic status, or the cultural bindings in that particular society.
The transactional viewpoint comes under the contextual theories where successful ageing is defined as the point of intersection between the developing person and the changing societal context.

1.3.1.3 Personality Theory:

This is a psychological theory that aims to explain certain contradictions noted in the disengagement theory. It can loosely be termed as the personality or psychological theory of aging.

Havighurst (1968), one of the major proponents of this theory, holds that disengagement and activity theories are inadequate to explain the process of aging quite successfully. According to him both the theories have inappropriately focused on the amount of activity as the major variable in determining life satisfaction. In Havighurst’s opinion different levels of activity need to be ascribed to different personality types for high life satisfaction. For example, the ‘recognizers’ try to remain middle aged by finding new roles to replace lost roles. In so doing, they maintain high activity as well as high satisfaction levels. Therefore, it can be said that the recognizers support the activity theory but not the disengagement theory. In contrast, the “disengaged”, according to Havighurst, are those who voluntarily give up most of their activities and roles. The group of people seems to enjoy ‘rocking chair’ approach to life and have low levels of activity but high levels of life-satisfaction. Thus, the disengaged ones support the disengaged theory and contradict the activity theory.
1.3.1.4 Phenomenological theory:

This theory first appeared in 1941 in an article by Snygg and later was elaborated by Combs and Snygg (1959), which contained the basic notion that human behaviour is best understood in light of his perceptual world. The basic assumption behind this theory is that to understand human behaviour one must understand the individuals’ perceptual world. The major idea is that through life experiences and socialization, individuals develop a perceptual framework through which they selectively perceive and interpret the world. Thus different individuals perceive the same phenomenon differently, and respond differently to experiences of retirement, health changes, or death of a spouse. This perceptual framework is developed through a variety of experiences and also as a result of the socialization process which helps the individual in interpreting the world around him. It perhaps becomes apparent that the phenomenological theory is born from the concept of socialization. However, the theory does not consider age as the single determinant of behaviour. The phenomenological theorists suggest that in order to explain behaviour, one must make use not of age but of the perceptual framework of the individual in question. The age at which a particular event does take place is not considered of any importance by this group of thinkers. Once again, it must be noted that, it is not the event that is important, but the individual’s interpretation of the event is considered of greater importance than anything else.

Phenomenological theory mainly emphasizes on the individual’s perceptual framework. By doing so, they feel, predicting and explaining individual behaviour becomes easier than before. In many ways, the phenomenological theory seems to be satisfactorily complete because there are few, if any, exceptions. In other theories, researchers consider
the majority of the individuals. Phenomenological theory, on the contrary, claims that if one is able to understand a particular individual’s perceptual frame, then one can successfully explain and predict behaviour.

The perceptual framework is based on socialization experiences. Through socialization, individuals learn to selectively perceive the environment and interpret their perceptions. The socialization process takes place during social interaction. The degree and nature of socialization, however, will tend to vary depending on the individual’s reaction to the interaction. The socialization process, thereby helps to form the perceptual framework of an individual.

Phenomenological theory is perhaps so far the most complete and comprehensive among the contemporary theories of ageing. The theory, however, is highly abstract in nature, and it seems difficult for researchers to conduct appropriate researches in these lines.

1.3.2 Sociological Theories:

- Disengagement theory:

The disengagement theory was propounded by Cumming & Henry (1960). This theory originally emerged in 1960 and has been attacked and revised several times over the years. This theory is a functionalist theory, according to this theory people entering advanced age must gradually be phased out of important roles in order for society to function. By side-tracking older individuals of important roles, their death will not affect the functioning of the society. They believe that although the disengagement process is quite inevitable, variations will occur owing to individual differences in health and personality. Disengagement therefore is a process where society and individual separate themselves from each other and thereby results in “disenchantment.”
High level of life-satisfaction has been found to be associated with the process of disengagement when the aging individual outs down the member and importance of his role and activities. The Disengagement theory was formulated through the Kansas City studies. In early studies, a significant decline in social interaction, current role activity, age involvement in current roles was noted with increasing age (Cumming & Henry, 1961). The roles that demanded too much time and energy or those that offered too little satisfaction or reward could be dropped by aged individuals as with increasing age, such individuals seemed to be more selective in their roles. Individuals would prefer to retain those roles that provided them with reward or satisfaction (Cumming, Dean, Newell and McCaffrey, 1960; Cumming, 1963; Lipman and Smith, 1968). The proponents of disengagement believe that it is distinguished by four major characteristics (Crandall, 1980):

1. Disengagement is a gradual process, that is, it happens in a series of events.
2. It is inevitable and all individuals completing the life periods will experience it.
3. Disengagement is a mutually satisfying process for both the society and the individual.
4. Disengagement is a norm; according to them, this fact is demonstrated by mandatory retirement laws.

• Activity theory:

It was stated by Neugarten, Havighurst and Tobin (1968). They associated activity with happiness or in other words, they stated that individuals needed to be active in order to be happy in the old age. Activity theory is referred to as the 'golden-years' concept of ageing. Happiness is achieved by maintaining the middle-aged way of life, values, and
beliefs for as long as possible. According to them if existing roles or relationships are lost, it is important to replace them, because if activity drops, there is a corresponding drop in life satisfaction. Havighurst (1961, 1963) claims that both disengagement and activity theories are inadequate to explain the ageing process. They both incorrectly focus on the amount of activity as the important variable in determining life satisfaction. He suggested that successful aging might be interpreted as continued adherence to the activities and attitudes of middle age and the substitution of roles, lost by changes associated with aging, in order to maintain a positive sense of ‘oneself’. He defined successful aging as having inner feelings of happiness and satisfaction with one's present and past life. However, as a limitation, the activity theorists admit that the theory is simple and is unlikely to explain the behaviour of all adults (Havighurst and Albrecht, 1953; Havighurst, 1961; 1968; Maddox and Eisdorfer, 1962; Maddox, 1965).

- **Selectivity theory:**

  Balancing these two theoretical perspectives, namely, the disengagement theory and the activity theory, forms the essence of selectivity theory which adjusts between the two by emphasizing on increasing activity in certain aspects of our lives in our old age and more disengagement in other aspects.

- **Continuity theory:**

  The mid-path would be the Continuity theory that emphasized that individuals in their later-lives tend to make adaptations to enable them to continue the same style of life, personality and habits that they develop in earlier years (Bowling, 2005). This continuity helps them in being better satisfied. It holds that, in making adaptive choices, middle-
aged and older adults attempt to preserve and maintain existing internal and external structures; and they prefer to accomplish this objective by using strategies tied to their past experiences of themselves and their social world. Change is thereby linked to the person's perceived past, producing continuity in inner psychological characteristics as well as in social behavior and in social circumstances. Continuity is thus a grand adaptive strategy that is promoted by both individual preference and social approval (Atchley, 1989).

- Sub-culture theory:
The sub-culture theory by Rose (1965) stated that different sub-cultures are formed by ageing and this defines and directs their behaviour. A sub-culture is a group within the general society; it also exhibits certain characteristics that are unique to it alone and are generally not found in other segments of the society. A sub-culture may be formed on the basis of such variables as age, gender, race, ethnicity, religion, or social class. According to Crandall (1980), the increase in the percentage of aged has facilitated the formation of an aged sub-culture, and with mandatory retirement laws, health factors and an emphasis on 'youth' has served to separate the aged from the rest of the society, which has resulted in an enhanced age-consciousness, leading to distinct behaviours of the aged which override the common subcultures of ethnic and religious groups, gender etc. The proponents of the aged sub-culture recognize the fact that a combination of several factors keep the aged individuals in touch with the general society. The factors include family contact, mass media, welfare organizations, and an attitude of resentment towards growing old.
The sub-culture of the aged is characterized by two different statuses.

1. The first is conferred by the society. Some of the variables that contribute to an individual's status are amount of money, education, occupation and level of achievement. The importance of these variables changes with increasing age.

2. The second type of status is conferred by the aged sub-culture and involves two variables. The first variable is physical and mental health. Those with good health are ascribed higher status than those with poor health. The second variable is social activity which is partially influenced by health. Individuals who occupy leadership roles or influence other individuals and exhibit greater social activity have higher status in the aged sub-culture.

Thus the sub-culture theory of ageing makes an important contribution towards the understanding of the ageing and the aged in the society.

**Role theory:**

The *role theory* (Phillips, 1957; Cavan, 1962) states that individual behaviour at any age is determined by the roles of those with whom one interacts and how he interprets them, creating individual differences among them. The basic notions in role theory are:

- The first concept of this theory is "Definition of the situation" (Thomas, 1972), which is explained by him as the stage of examination and deliberation that a person enters into before responding to a stimulus.

- The second concept is that of "looking-glass self", which was first conceived by Cooley (1972), which consisted of three parts, namely, imagining how one appears to other individuals, imagining how others judge or evaluate their appearance, and have some sort of feeling such as pride or mortification as a result of the evaluation. The basic
concept here is that individuals subjectively interpret the behaviour of those with whom they interact in order to ascertain if they are playing their roles correctly.

- The third concept of 'presentation of self' was set forth by Goffman (1959), which assumed that whenever individuals enter into social interaction, they commonly seek information about those with whom they are interacting, which helps them in defining the situation.

Most role theorists believe that in everyday life an individual’s behaviour is almost as strictly determined as the behaviour of an actor on stage (Biddle and Thomas, 1966; Goffman, 1959). The role theory can be useful in explaining the wide fluctuations of behaviour found among aged individuals. These variations result from the fact that each individual seems to define a particular situation differently, interprets and responds to the looking-glass self in different ways, or has considered different selves for certain situations (Thomas and Biddle, 1966). Although a very general theory of old age, role theory may be used to explain the wide fluctuations of behaviour seen among the aged.

- Labeling theory:

Labeling theory has been traditionally used by sociologists to explain criminal behaviour and mental illness, Bengtson (1973) had suggested that this theory may be used to explain some of the behaviour of the aged. It suggests that when individuals are given a label such as 'senile', or 'old', it has a significant impact on the way they will be treated and perceived by others. As labeled individuals, one thus needs to take on new identities, positions and roles. Labeling theory simply points to the fact that these labels given to the aged tends to have a tremendous impact on the way individuals react to others. This
newly acquired identity may be termed as the “master status” which is the status that overrides all others. Once labeled, it becomes rather difficult for an individual to come out of that label or change the label, because all the consequent behaviour of an individual is interpreted in the light of his new identity.

A related model which explains the behaviour of the aged is the age-stratification model (Riley, Johnson, and Foner, 1972; Riley, 1971; Foner, 1975), which has received considerable support and attention from gerontologists. It perceives age as an important determinant of behaviour for two reasons. Firstly, age may limit the ability of the individual to perform in certain roles. Secondly, society differentially allocates rights, roles, privileges, and opportunities on the basis of age. According to them, age is a variable that determines the types of roles and options available to us. Chronological age can affect role performance because of biological, legal, or social restrictions; that is, biological age limits role alternatives and chronological age separates or stratifies the population into age strata. (Crandall, 1980).

1.3.3 Biological Theories of ageing

- Telomere Theory:
  Telomeres have experimentally been shown to shorten with each successive cell-division. Shortened telomeres activate a mechanism that prevent further multiplication. This may be an important mechanism of ageing in tissues like bone marrow and the arterial lining where active cell-division is necessary.
• Reproductive Cell-Cycle Theory:

The idea that aging is regulated by reproductive hormones that act in an antagonistic pleiotropic manner via cell-cycle signaling, promoting growth and development early in life in order to achieve reproduction, but later in life, in a futile attempt to maintain reproduction, become dys-regulated and result in senescence.

• Wear-and-Tear Theory:

It has the very general idea that changes associated with ageing are the result of chance damage that tend to accumulate over time.

• Somatic Mutation Theory:

The biological theory opines that ageing results from damage to the genetic integrity of the body’s cells.

• Error Accumulation Theory:

It suggests that ageing results from chance events that escape proof reading mechanisms, which gradually damages the genetic code.

• Accumulative-Waste Theory:

The biological theory of ageing points out at a build-up of cells of waste products that presumably interfere with metabolism.

• Autoimmune Theory:

It has the idea that ageing results from an increase in auto antibodies that attack the body’s tissues.

• Ageing-Clock Theory:

The theory opines that ageing results from a programmed sequence, as in a clock, built into the operation of the nervous or endocrine system of the body.
- **Cross-Linkage Theory:**

  It has the idea that ageing results from accumulation of cross-linked compounds that interfere with normal cell function.

  Thus, the chief theories of ageing may be schematically represented as follows:
<table>
<thead>
<tr>
<th>Theories of Ageing</th>
</tr>
</thead>
</table>
| **1. SOCIAL DISENGAGEMENT THEORY** - Gumming & Henry (1960)  
People entering advanced age must gradually be phased out of important roles in order for society to function. |
| **2. ACTIVITY THEORY** - Neugarten, Havighurst & Tobin (1968)  
Activity and involvement are often associated with life satisfaction. |
| **3. CONTINUITY THEORY** - Bowling (2005)  
Elderly individuals make adaptations to enable them to continue the same style of life, personality and habits that they develop in earlier years, to be satisfied with their lives. |
| **4. SUB-CULTURE THEORY** - Rose (1962, 1965)  
A different sub-culture is formed by the aged, which defines and directs their behaviour. |
| **5. ROLE THEORY** - Phillips (1957); Cavan (1962).  
Behaviour of elderlies can be explained by their specific roles. |
| **6. LABELLING THEORY** - Bengtson (1973)  
Labels given to elderly individuals mould their overall personality. |
| **7. PERSONALITY THEORY** - Havighurst (1968)  
Different levels of activity need to be ascribed to different personality types for high life-satisfaction. |
| **8. PHENOMENOLOGICAL THEORY** - Combs & Snygg (1959)  
Human behaviour is best understood in light of his perceptual world. |

Fig. 1: Theories of ageing
### OTHER IMPORTANT THEORETICAL NOTIONS OF AGEING

<table>
<thead>
<tr>
<th>Category</th>
<th>Theory</th>
<th>Authors and Year</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SEASONS OF A MAN'S LIFE</strong> - Levinson et al. (1978)</td>
<td>Focuses on developmental course of life</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>THEORY OF SOCIAL AGE CLOCKS</strong> - Neugarten's (1987)</td>
<td>Life-span theory of socio-emotional selectivity</td>
<td>Other stage theories - Erickson: integrity vs. despair</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Butler: reminiscing</td>
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<td></td>
<td></td>
<td></td>
<td>Kubler-Ross: anticipatory grief</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Raphael: death of self</td>
</tr>
</tbody>
</table>

Fig. 2: Other important theoretical notions of ageing
1.4 Eastern and Western connotations of Ageing

On the basis of such theoretical frameworks, we need to probe into the specific concept of 'aging' as it has developed in eastern and western culture. The population of senior citizens and its ratio to total population has been increasing rapidly in both developed and developing countries. The developed world has been facing the problem of looking after its growing number of senior citizens, and taking effective measures to cope with it. The seriousness of this problem so far, however, has hardly been noticed in developing countries. Plans to support the elderly are generally inadequate. Many thousands of them are still neglected by society, their final years grim and cheerless.

The dominant cultural beliefs and attitudes about aging and the aged largely determine how the aged segments of the society are treated. The beliefs that a
society has about aging and the aged are not formed in vacuum. They are often survivals from the past, at times vestiges of ancient or dead civilizations.

Different countries have felt the importance of old age differently, based on their socio-cultural and economic conditions (Nayar, 1987). In developing countries there remains the problem of bringing aged into social and political mainstream, owing to problems of poverty, dependence and morbidity in aged person (Souza et.al, 1982). The problems of the aged differ not only between nations but also within nations and between groups.

Aging in American society is not always a time of happiness, even with money and respect. It is characterized by loss of roles, social isolation and cultural glorification of youth. The aged are not automatically respected or venerated, but are instead more often treated with contempt and disgust.

In India, the aged have traditionally been considered as wisdom banks, are the best source of education, for solving social problems and developing national integration. They are endowed with patience, can apply themselves to analyze socio-economic political events, trends with detachment, moderate extremist view points to monitor the wily schemes of unscrupulous politicians. Old age is considered as having arrived at a 'golden period' of life, a period of self-awareness, wisdom, reflection, adventure and sharing, it offers as opportunity to humanize the present sick and pallid society with the acquired detached outlook and clean eyed wisdom.

But old people are increasingly losing their status and security which they enjoyed in traditional Indian society. The traditional joint family system provided a place of honour and security to the aged. There is a gradual shift from joint family norms to
nuclear families. The aged ones feel neglected and lost in their own homes where they once wielded an authority in the not too distant past. The aged livings in enforced retirement not only suffer from chronic diseases and frailties of the age but also from unhappiness caused by their feeling of uselessness, loneliness and despair.

1.4.1 Ageing in the Indian context

The social aspect of ageing includes the extent to which old age is valued in any society, depending on their cultural values. In past-oriented societies like India, the aged were meaningful links to tradition and ensured historical continuity. Elder aunts/uncles were in charge of giving or passing information about ceremonies and conducting them. Their role was particularly important in societies where continuity has a religious connotation. But in today's India a present-day orientation towards urban lifestyle has changed their long-term concerns to short-range concerns which actually devalue old age (Dhooper, 2007).

Thus the position of the aged in India is dependent on a complex set of factors, associating itself with the rapid change in the social studies of modern urban influences which may be in a state of half-baked concept of self-preservation. Due to the emerging shift of family values, conjugal relationship, the sense of well-being and quality of life of the aged is also shifting. A new concept of single/independent living for ageing (with the greater family support), is instead encouraged and hyped (Chadha and Malik, 2007; Prakash, 2007).
Parent–child relationships are also changing with a drastic shift of value systems where, total obedience of middle aged children to the dictums of elderly parent(s) has changed into a new role play for the aged, as the intergenerational discontinuity brought about by emerging patterns of living has engendered strain on joint family setups. Thus, there is a considerable significance of culture and social environment to understand the ‘wiser’ generation (Batra and Bhowmik, 2007; Kaushal and Teja, 2007; Dhooper, 2007).

1.4.1.1 Aging of Men in India:

Old age has different implications for men and women. For male, his role as a major earner in the family is critical and he is likely to suffer in self-esteem if he sees himself as dependent. A man who is dependent on her son is likely to experience a sense of inadequacy in the non-traditional, urban setting (Muttagi, 1997). Urban older males are in most advantageous position compared to females. Urban men are better educated, likely to work in organized sector, to retire with a pension-scheme and are more likely to be insured. They are also more likely to use health facilities often, have a better health status (Prakash, 1997). Senior citizens’ clubs are becoming popular in cities. In metropolitan areas, older people organize themselves to fight better facilities and pressurize the government for tax benefits and user-friendly public services. Another factor may be just as important. As men retire, they abruptly loose power and influence in public sphere. They may indeed feel less dominant. When self-concept and self-esteem suffer older men and women tend to respond in different ways. Men are more likely to use alcohol than women, whereas, older women are more likely than men to become depressed (NIH Consensus Development Conference, 1991).
1.4.1.2 Aging of Women in India:

Most women perceive themselves as ‘old’ by the time they are 50 years old. The perception of self as old is based on the presence of grandchildren, shrinkage of social roles and post menopausal status (Prakash, 1997). Marriage of a son and arrival of a daughter-in-law into the joint family often marked as a major transition in the life of a woman. The effect of a family cycle is more traumatic for women than for men because of deeper involvements of female roles in the domestic sphere (Butler et al., 1976). Thus, the change of role induced by marriage of older son implies a greater identity crisis for women. One of the main social effects of extension of life in later years is the extended period of widowhood for women. Widowhood has much more greater impact on women as it makes them totally dependent on their sons, involving not only emotional deprivation but also a loss of status within the family (Muttagi, 1997). It is possible that a woman does not experience the same loss of status as the male does (Kover and Stone, 1992). For one thing the women’s status does not depend directly on her own ability to support herself though her husband’s abilities to do is a major factor in determining her status (Brozen, 1978). However, the mother enjoys a special status in the eyes of her son and does not experience feelings of inadequacy as men commonly experience. As women tend to marry men older than themselves and are likely to outlive their male counterparts, a married woman can expect to care for her husband in his last years. Wives who provide care for their disabled spouses contribute a risk for deteriorating health, especially if the couple is childless. With the death of her husband a woman becomes designated as a widow. Widowhood often lowers the socio-economic level of women. Urban widows
sometimes get the pension and life insurance money of their diseased spouse. Rural women rarely have this advantage. These factors tend to increase the dependency of women on others in old age. All these contribute to women’s total dependency on the family for mere survival.

1.5 The Problem of Ageing in relation to the Society

The problem of old age has gained importance in the contemporary society due to the rapid growth in number of aged individuals in the society. Although the dynamics of old age are primarily physiological, they are continued by the social customs, norms, culture and value systems to a considerable extent. The far-reaching and rapid changes of the modern society have profoundly affected the position of the old people and their ability to deal with their own problems. The transition from the role of bread earner to a dependent causes problems among the aged in our country. The isolation of old people within their family sometimes constitutes a source of frustration for many aged persons.

In the past, joint family was the common pattern that existed, with the head of the family enjoying rights, responsibilities, commanding obedience and respect from other members of the family. It still exists in rural areas of the country and provides the necessary care to the families. Under the impact of industrialization and urbanization, the traditional joint family system is fast breaking down. The position of the aged in the family system is becoming more precarious. Apart from facing specific difficulties like scarce accommodation, high cost of living and expensive medical care many elderly people also await the grim prospect of being unsolved and becoming unwanted.
The various factors such as change in living arrangements, family structure and mode of sudden retirement adversely affect the old people. Further, old people are increasingly losing their status and security which they enjoyed in the traditional Indian Society. Investigations with regard to the status of the aged in the changing social structure have more or less conducted on breaking down of kinship and family organizations, which has put the elderly in a state of helplessness, isolation and economic dependence. The prime reason for the aged moving into old age homes is due to lack of proper care for them within the family set-up.

Also, friends, families and neighbours are also important components in the case of elderly. A random sample of older adults indicated that two-thirds of their support networks consisted of family members. Chappell, et al., (1989) emphasized that social relations with non-family peers are critical and that confident relationship array may be more important to the quality of life and well-being than the quantity of interaction with either family or friends. Another important aspect of this relationship is trust. Good relationship with neighbours and peers are a source of pleasure.

Ward (1984) assessed the association of both objective and subjective network characteristics with measures of subjective well-being. He too, found that besides the family contacts with children are important for well-being in the elderly, and that they are important for the understanding of quality of social ties which help in clarifying social involvement of the elderly.

Ageing may be understood in the context of different elderly samples like those of married, widowed, divorcees and spinsters to have a better view of their differential ageing profiles, with effectiveness or ineffectiveness in certain respects. The
present research endeavour provides an attempt to decipher into the intricacies of these selected samples from personality purview so as to understand their relative standing in the context of their ageing patterns. The following fold delves into a detailed discourse of the selected samples in relation to their relevance in the present research.

1.6 Selected Samples for the Present Study:

1.6.1 Married Partners:

Married elderly partners constitute a bulk of the elderly population. To unfurl their psyche from the personality perspective, they form a chunk of the sample in the present investigation. In fact, marriage has been defined as a more or less durable connection between male and female, lasting beyond the mere act of propagation till after birth of offspring. This definition has been much criticized, and not without reason. In ordinary sense of the term, marriage is a social institution which may be defined as a relation of one or more men to one or more women that is recognized by the custom or law, and involves certain rights and duties both in case of parties entering the union and in case of the children born of it. These rights and duties vary among different people and cannot, therefore, all be included in a general definition; but there must, of course, be something that they have in common. For the most part, it is not yet discovered that marriage has moved out of the realm of the physical and into the realm of a spiritual partnership. Basically, today there are two purposes of marriage:

(i) To heal the wounded child that exists within each of us.

(ii) To touch the face of God.
When two people really understand that a commitment within a spiritual marriage must be made in order for the marriage to survive, there is hope for a successful marriage to occur. Without the dynamic element of commitment you cannot serve one another in the growth of the soul. Marriage then becomes a conscious journey into one's own spirit.

Marriage, in some form, is now widely recognized as almost universal (Betzig, 1989). Cross-culturally, the main purpose of marriage is to establish a family, produce children, and further the family's economic and social position (Gupta, 1976). In many societies, marriage has also been seen to have social functions, such as enhancing prestige and status. Marriage is a complex phenomenon in today's changing society. People marry for various reasons besides sex and sexual attraction which are primary consideration. Love, economic security, companionship, protection, emotional security, escape from loneliness and unhappy home situation, adventure of common interests, and children are the few reasons that may constitute a person's disposition for marriage (Bowman, 1974). Marital context embraces sexuality as a definite source of health and adjustment in different phases of life.

Couples who are still together in old age are less likely than younger ones to say that their marriages have a lot of problems. One major reason is that because divorces have been easier to obtain over the past couple of decades, those marriages that have lasted over the years are self-selected. The spouses in them deliberately chose to stay together. The decision to divorce usually comes in early years of marriage, and couples who stay together despite difficulties are often able to work out their differences and eventually arrive at mutually satisfying relationships.
1.6.1.1 Sexual Activity in Later Life:

Many couples continue to enjoy sexual activity well into their later years. Among older adults in a national sample, 53% of the married persons past the age of 60 reported sexual reactions at least one during the past month, as did 25% of those older than 75 years (Marsiglio and Donnelly 1991). Ethnicity had no effect on the presence or frequency of sexual activity (Butler and Levis, 1976). Among couples in the Duke longitudinal study, husbands' declining health and lack of interest were primary reasons given for reducing or stopping sexual activity (Pfeiffer, Verwoerd and Davis, 1972).

Older people tend to find gentler caring, love-making more important than a focus on orgasm. Sexual activity becomes less a matter of compelling passion and more an expression of person. Erikson describes it as generalized sexuality which has something to do with play and the importance of the moment (Erikson and Hall, 1987). One 70 year old woman described sexuality as “not so much how powerful the orgasm is or how many orgasms you have. It’s just touching and being together – loving” (Kotre and Hall, 1990).

In old age, people basically recap, recall all past experiences of the life partner. Success of children gives satisfaction that children were all cared. The loneliness is now for reviewing the past, wishing somebody to share with. This is the time when oldies need support of each other to hang on the rest of the life. The real affection even without sex makes them happy as the past. A memory of their marriage tends to hang on for long, which becomes a purposeful instrument of attachment. Longer relation gives stronger affection and support for old life.
Society does not see older people as sexy, interested in sex or sexually active; some healthy adults give up sexual activity during their later years (Masters and Johnson, 1968). For these people sexless elderlies are the result of a self-fulfilling prophecy; they lose their desire for sex because they are supposed to. In some cases, this is an acceptable excuse for ending sexual relations (Hurlock 1997).

Whether or not they continue regular sexual activity, most elderly couples describe their marriages as 'happy' or very happy. Only newly weds find their marriages as if they have been blissful from the beginning. But a study has followed adults more than a half century which indicates that people tend to rewrite their memories of early years. When researchers looked back over years of interviews with adults who were between 75 and 95 years, they discovered that couples who consistently spoke of life long affection, supportiveness and understanding frequently had gone through periods of bitter experience and some had even considered divorce (Erikson, Erikson and Kivnick 1986).

1.6.1.2 Quality of Marital Relationship over the Life Cycle:

The variation in the quality of marital relationship over the family life cycle has commanded and considered research attention but yielded inconsistent finding. Three patterns of marital adjustment across time have been identified (Ade-Ridden and Brunbankar, 1983). Earlier studies reported a gradual decline in marital satisfaction over the life cycle (Hicks and Platt 1970). More recent studies have identified marital satisfaction to decrease in middle years and to increase in later years (Anderson, Russell and Schumm 1983; Rollins and Cannon 1974).
People who feel generally happily married find their marriages more satisfying to them as they grow older. With time mutual interests are developed; children grow up and leave home, thus drawing the partners' love together. Illness or retirement on the part of the husbands may make the wife useful again, as she did when the children were young, and the death of demanding and dominating power in law may remove a source of friction between husband and wife (Hurlock 1997).

1.6.1.3 Marital Satisfaction in Later Life:

Studies of marital satisfaction may be measuring individual adjustment, and individuals may be reporting more satisfaction with marriage because they are more satisfied with life in general. This satisfaction may stem from the factors other than the marriage; such as work, the alleviation of the pressures of raising children, or more comfortable financial circumstance. Another possibility is that people may unconsciously feel that they have to justify having remained in a marriage for many years by saying that they are happy.

The most rewarding aspects, according to older people, are usually companionship and being able to express their true feelings to each other. Many are still romantics, stating that being in love is the most important factor in achieving a successful marriage. Satisfaction with marriage is increased, if their children are successfully and happily married and if they have good relationship with their grand children.

The changes that occur with aging have a mellowing effect on marriage. As the husband and wife loose roles of bread-winner and child rearer, many couples become more interested in each other’s personality rather than in the functions each
performs, and enjoyment of each other’s company becomes a prime part of marriage (Zube, 1982).

1.6.2 Widowhood:

The last stage of marriage is overwhelmingly one of widowhood, especially for women. In fact, widowhood constitutes a chunk of the elderly population which necessitates its inclusion in the present investigation, to reveal their psyche from mental health perspective. Widowhood is the status of person whose spouse has died and who has not remarried. Becoming a widow or widower is a process that may involve the spouse’s illness to die (it is not a sudden death), the event of death and funeral and a period of grief. The effects of this process on widowed person vary considerably depending upon several factors. The society, its structure and culture and the striving spouse within it tend to influence the form and timing of death, rituals surrounding it and the roles, relations and life styles available to widow and widower. There are approximately five times more widows over the age of sixty five than there are widowers (Glick, 1979). A recent study also shows that widowers overall mortality rate is 26 percent higher than that for matching married men. For widows the mortality rate is only 3.8 percent higher than for matching married women. It is interesting to note there is no evidence that either men or women are significantly more likely to die in the early months of bereavement. Hali, the women in United States who are over 65 yrs. and are nearly 7 out of 10 times over 75 yrs., are widowed compared with only 1 out of every 8 men over 65 and 1 out of 5 men aged 75 yrs. or older (U.S. Bureau of census, 1983). This is largely because women live longer than men and usually marry men older than themselves. At all ages black women are more likely to be widowed than white women,
reflecting higher mortality rates among black men. The personal resources of the survivor including the level of economic independence, the role cluster in which she is involved, health, self concept and areas of competence help to determine whether becoming a widow or widower results in disengagement from the social world (Cumming and Henry, 1961) or in the restructuring of self identified and supportive system (Lopata, 1973, 1979).

1.6.2.1 The Situation of Widows’ and Widowers’ World:

The situation of widows’ world over is symbolic of the status of women and of the specific characteristics of society. Social development has modified the structures creating high levels of urbanization and industrialization (Inkeles, 1983).

“As long as you have your husband, you’re not old,” said one recently widowed 75 year old woman. “But once he dies, old age sets in fast”. One significant effort of prolonged life span of women is widowhood. Widowers in contrast to widows, generally exhibit more severe problems of disorganization. They have higher rates of suicide, physical illness, mental illness, alcoholism and accidents (“The Plight...” 1974). If the marriage has been good, there is a great emotional void. The survivor has lost a lover, a confidant, a good friend, a steady companion. Even, in bad marriages, the loss is felt. For one thing the role of spouse no longer exists. Social life changes for widows while friends and family usually rally to mourner’s side immediately after the death, eventually they all return home and go about their own lives, leaving the survivor alone to curve out an entirely new life structure. Friends sometimes become upset when bereaved people talk about their grief, because they can not deal with the thought that this
could happen to them, too. As a result, they may avoid the widow or widower when their friendship is most sorely needed.

Following table 1.2 shows that the percentage of widows in India is disproportionately higher than that of widowers due to cultural practice of men marrying younger women and widow remarriage being uncommon.

<table>
<thead>
<tr>
<th>Age (years)</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-64</td>
<td>14.13</td>
<td>55.98</td>
</tr>
<tr>
<td>65-69</td>
<td>17.06</td>
<td>58.41</td>
</tr>
<tr>
<td>70+</td>
<td>27.12</td>
<td>77.57</td>
</tr>
</tbody>
</table>

More than 65% of women live without a spouse as compared to 29% of men. According to the last census, there were 33 million widows in India and 64% of them were above 80 years. In older years widowhood brings not only loneliness and depression but also economic dependence (Silverman and Cooperband, 1975).

The incidence of widowhood increases sharply with age. The overlap between incidence of widowhood and aging is strikingly high among women with serious economic and social consequences. Large number of elderly widows without much access to income may be totally dependent on family member support. In added concern is the fact that mortality rates are 85% higher among widows than among married women of similar age. This continues the notion that widows in India experience particularly
high level of deprivation (Bhatt, 1998). From a review of several studies, Chen (1998) points out in India, the experience of losing one's spouse is overwhelmingly intense among females. Widows face difficulties in exercising their poverty rights; they are likely to be pushed into poverty and are often ignored by the social securing schemes of the state.

1.6.2.2 Adjustment Pattern of Widowhood:

Women seem to adapt to the solitary life of a widow much better than men adjust of a life as widower. Like any other life crisis, widowhood affects people in different ways, depending on their personalities and their circumstance.

Those who seem to make the best adjustment to widowhood keep themselves busy, develop new roles (taking on new paid or volunteer activities) or focus on pre-existing ones (involving themselves more with the activities they have already begun), see a lot of their friends (which seems more helpful than seeing a lot of their children), and take the advantage of such programmes in the community as widow support groups (Balkwell, 1981; Vachon et. al; 1980, Barrett, 1978).

One of the big problems faced by both sexes is economic hardship. As the husband was the bread-winner, his widow is now deprived of his income. The widowed man, on the other hand, now has to buy many of the services his wife had provided. Even when both spouses were employed, the loss of one income is often major (Lopata, 1977; 1979).

The biggest problem, though is still the emotional one, it takes time to heal the pain of loss. People can, however, prepare themselves better for life in general if they
begin early to gain a strong sense of their own identity. A woman is less likely to be devastated by her husband’s death if she is used to pursuing her own interests and knows how to manage the financial and practical details of her life. A man will cope better if he knows how to cook, do laundry, and make his own social plans.

1.6.2.3 Widowhood in Modern Societies:

In modern societies many women who are widowed live independently, free from control of the family and are able to maintain themselves economically through paid employment or the social security system in case of United States (Berardo, 1971). This picture is assumed to vary in Indian culture, owing to its culture-specific conditions and attitude to older widows.

1.6.3 Divorce:

Divorced elderlies do form a significant portion of the elderly population. The process of divorce calls forth a number of constituent changes in the personality of individuals in the long run. This necessitates their inclusion in the present sample in the current investigation to disentangle and understand their psyche from mental health perspective. In fact, one instructive means of thinking about divorce is to consider divorce not as a single event that influences people’s lives, but rather as a process. The rising divorce rate is a circular phenomenon. It is spurred by changes in societal attitudes, and these changes come about because more and more people get divorced. The rise in the divorce rate appears to result largely from people’s increasing expectations for marriage. As the economic and social bases have become less important, emotional reasons have become more so. As more people live farther away from their extended
families, they turn to their spouses for functions that parents, other relatives, and old friends used to fill. People today expect a marriage partner to make their lives richer, to help them develop their potential, and to be a loving companion and best friend. These increased demands cannot always be met—but people keep trying.

When a marriage falls short of the partners’ expectations, few people consider it shameful or immoral for them to seek a divorce. Divorce does not carry the social stigma it once did. Yet separation is still not taken casually. The breakup of any intimate relationship is painful, especially a marriage for which both partners once held such high hopes, and especially when children are involved. Individuals in an unhappy marriage are concerned with failure, ranging from their inability to select the right mate to their inability to make the marriage work. The difference now is that people in an unhappy marriage are less likely to accept the situation than they might have done years ago. They are more likely to recognize that the marriage will not get better by itself and that the present situation is likely to damage the personalities of both spouses and their children; and that they are more likely to do something. Some couples try professional marriage counseling. This may help them work out their difficulties and save the marriage, or it may help both the individuals to decide that separation is best for everyone and to handle it in the best way possible.

Edwards and Saunders (1981) proposes a model of marital dissolution decision that incorporates much of the previous research on divorce. First, they point out that each marriage exists within a social context, a context that influences the decision to terminate a marriage. The figure below represents some of these general social factors that influence marital dissolution. Such social factors become part of the predisposing
background characteristics each person brings to marriage. In general the largest and most consistent body of research dealing with marital dissolution indicates that the greater the discrepancy between individual background characteristics of the partners, the greater chance of divorce. It is interesting to note that our socialization as men or women greatly influence our expectations about marriage. The expectations are sometimes so different between the sexes that some researchers have suggested, “there are two marriages in every marital union, his and hers” (Bernard, 1972).
Fig. 4: A Social – psychological model of the dissolution decision
(Edwards and Saunders, 1981)
The predisposing background characteristics of each marital partner represents stage A in the model diagram. Stage B is represented by the degree of adjustment achieved by the partners during their courtship. Essentially it means that the better the mate selection process, the greater the chances of successful marriage. Stage C represents the state of marital relationship. Marital congruity means that the couple is in agreement on most aspects of their relationship. To have high congruity in a marriage does not necessarily mean the relationship is conflict-free. If both spouses agree that conflict is an acceptable part of their relationship, then conflict will not cause them great marital problems. Stage D represents the spouses' evaluation of their relationship, the perceived barriers to divorce, and the perceived goodness of their alternatives to the present relationship (Levinger, 1965, 1979; Udry, 1981). Stage E represents one's commitment to the marriage. It indicates the extent to which one's personal needs and self-interests are bound up in and met by a particular relationship and no other (Reiss, 1980; Etzioni, 1983). Stage F represents one's decision to remain or not in a given marriage. A model of divorce such as this is useful in helping us to realize that many factors influence marital stability.

Bohannon (1971), has described six aspects of every divorce, namely, the emotional (the deterioration of marital relationship); the legal; the economic, the co-parental (revolving around the children's needs); the community (changes in relationships with people and institutions outside the family); and psychic (the individual's need to regain personal autonomy). In any marriage, some of these aspects are more intense than others but all cause stress. Bohannon (1971) says: "They are more painful and puzzling
as personal experiences because society is not equipped to handle any of them well, and some of them not at all”.

According to Bohannon, “A ‘successful’ divorce begins with the realization by two people that they do not have any constructive future together”. The decision to separate may be a positive one that represents growth and maturity, a new understanding of oneself and one’s needs, and new appreciation of what one must do to take a marriage work. A person’s adjustment afterwards depends largely on feelings toward the self, toward the partner and toward the way divorce was handled.

No matter how “successful” the divorce, there is always a painful period of adjustment. The divorcee is somewhat estranged from previous friends, especially those who had been friendly with both spouses, and from in-laws with whom one may have been close. She or he faces a certain degree of ambiguity and isolation in the community, as well as a host of practical problems revolving around caring for the children, meeting financial obligation, making new friends, developing new relationships with members of the opposite sex, and coming to terms with the personal psychological significance of the divorce.

Provisions for divorce exist in almost all societies, and from a historical perspective the relationship breakdown figures currently are of so much concern in the United States and Western Europe that they may be comparatively modest (Eriksen, 1995; Lee, 1982; Mckenry and Price, 1995). All industrialized nations have undergone recent rises in divorce rates (Goode, 1993), with divorce rates varying greatly even within Europe. For example, in 1991 there was an annual divorce rate of 13.3 per thousand
married couples in the UK compared to only 2.3 per thousand in Greece (United Nations 1995).

Certain common grounds for divorce can be found across cultures. These include adultery, sterility, desertion and cruelty (Kephart and Jedlicka, 1988). Betzig (1989) examined reasons for divorce in 160 societies using the standard cross-cultural sample developed by Murdock and White (1969). She found the prime reason for conjugal dissolution to be infidelity, although it was women’s infidelity more than men which put the marriage at greatest risk. Betzig interprets this from an evolutionary perspective, with women’s infidelity being more threatening to the reproductive potential of married couple. The second most cited reason for divorce was sterility, and the third cruelty or maltreatment. In the vast majority of cases this cruelty involved the husband’s maltreatment of his wife. Betzig’s analysis focused primarily on pre-industrial societies extending this to more modern societies. Betzig noted how couples with fewer children are more likely to divorce even when the study was controlled for the length of the marriage.

In addition to these common causes for divorce, important local factors are also important in relationship breakdown. In Japan, the increase in divorce rates over the past thirty years has been partly attributed to the Japanese economy and corresponding increased employment opportunities for women (which has made independent living more practical). This has combined with more favorable societal attitudes towards divorce and the decreased role of extended family (Mckenry and Price, 1995).
In Poland, where divorce figures are low by European standards, it is women who usually file for divorce (Fuszara, 1997). This often follows psychological or physical abuse associated with the misuse of alcohol by their male partner. Unusually, women in Poland claim that they are both emotionally and materially better off following the divorce, with many women in Poland being professionally employed and not dependent on their male partner.

The high rate of marital dissolution in Russia is also often linked to the husband’s alcoholism (Perevedentseva, 1978). However, low remarriage rates also reported in Russia, with less than half of all divorced individuals remarrying (compared to 80% in the US), leading to a marked loneliness among divorcees (Mckenry and Price, 1995). These low remarriage rates are linked to the lack of available housing as well as the desire of women to retain professional and independent lifestyles (Moskoff, 1983).

Xiaohe and Whyte (1990) report that divorce is still uncommon in China, with less than 4 percent of their respondents having divorced (compared to more than a quarter of respondents in a similar study in the US conducted by White, 1990). However, there is evidence of a recent increase in divorce rates, with divorce figures doubling following the introduction of the 1980 Marriage Law (which made absence of love relationship, being the primary criterion for relationship breakdown). A large number of divorce cases resulted from unhappy marriages that were formed in the turmoil of the Cultural Revolution period (Honig and Gail, 1988). Urban women ‘sent down’ to the countryside may have married a youth League or Party member as a means of securing their survival, and the new social policies of the later 1970s (which allowed educated youths to return to the cities) called into doubt many rural marriages made during the
cultural Revolutionary period. Sudden changes in status and role, particularly pronounced in the turmoil in the years following the Cultural Revolution, also led to widening gulf in the social status of the couple, and strained previously egalitarian relationships.

The social constraints and taboo against the divorced normally associated with traditional arranged marriages, freedom of partner choice in China has a small but significantly positive correlation with marital stability, with love marriages being more stable than arranged marriages (White, 1990). Although reasons for divorce vary between rural and urban areas (Naltao, 1990), as in case of many countries, those who marry young are more likely to become divorced (Mckenry and Price, 1995).

1.6.3.1 Problems of Divorced Persons:

The major danger facing by the divorced are prolonged retreat from social contact, jumping quickly into new marriage, leading a life based on hope that the spouse will return, or leading a life based on hostility and getting back at the former mate. Certainly the first step after any loss may be one of momentary retreat, a turn inward, a time of contemplation, of avoidance of all situations reminding one of the hurt and disappointment, guilt and shame of failure. A large group of divorced persons seek a new relationship as quickly as possible. Discounting those who had a satisfying relationship with someone else before their divorce and are now fulfilling it as soon as possible, there are many who can’t stand the thought of failure and / or being alone thus rush into the first available relationship. These people usually have not had time to reassess themselves or their motives. The idea of facing themselves and the challenges of becoming an independent person are simply too frightening. These are often people who have never
really been alone. They married early, and in a sense they may never grow up psychologically. Even though their first marriage may have been unsatisfying, marriage is still preferable to assuming responsibility for oneself. By rushing into a new marriage, they are likely make the same mistakes all over again.

Living by false hope serves only to lock the person's life into a kind of prolonged alteration of hope and disappointment. However, life based on continuing anger and harassment of a former spouse may be the most destructive reaction of all, because the former spouse is harmed along with the mate seeking revenge. The horror stories connected with this reaction to divorce are enough to keep people forever marrying. When one divorces, there is usually another change of friends. Unfortunately changes of friendship after divorce tend to be more complicated both for the person divorced and for the couple's friends. Some friends may side with one or the other person when a couple divorces. Remaining friends with newly divorced person is difficult for at least two reasons. The divorcing couple causes their married friends to reexamine their own marriages. Often a divorcing couple will inadvertently cause trouble in the marriages of their friends. There is conflict over which partner to remain friends with. Generally the divorced person will find that old friendships tend to fade and to be replaced by new friendships, often ones in which the new friends share some of the same kinds of problems as the divorced.

Divorce affects the couple economically, mentally, emotionally and physically. It also influences the current and future relationships of the couple. Despite the predominant belief that only negative outcomes exist, divorce also benefits some
individuals. But viewed as a process rather than a discrete event, it influences the individual before the divorce occurs, immediately following the divorce, and years later.

1.6.3.2 Economic Outcomes:

Because of the political and policy implications of the economic situations associated with divorce, much attention has focused on its economic impact. It is important to note that the differences in both the magnitude of these changes and the disparity between men and women’s post divorce economic outcomes have been debated (Braver and O’Connell, 1998). Indian divorced elderlies generally face worse economical conditions than Indian men (Amato, 1994). Because divorce divides resources that originally went to one house-hold, an immediate decline in standard of living for both spouses results. How severe and how long the decline lasts affects the couples’ post divorce adjustment due to the hardship imposed. It is also important to understand individuals’ perceptions of the degree of economic hardship, as these perceptions affect adjustment more than objective measures of their economic situations.

1.6.3.3 Mental and Emotional Outcomes of Divorce:

Studies demonstrate that divorced individuals exhibit higher levels of depression and anxiety than do individuals who are married, and those divorced also tend to have poorer self-concept and exhibit more symptoms of psychological distress. Those with a history of two or more divorces report significantly more depression than either those with one divorce or those who are not divorced (Kurdeck, 1991).
1.6.3.4 Physical Outcomes of Divorce:

Divorced individuals also have more health problems and higher mortality rates than married or other non-divorced persons. Divorced adults exhibit more risk-taking behaviours (e.g., elevated rates of drugs and alcohol use/abuse). Particularly among those recently divorced, there is an increased risk for illness, which is likely due to poorer immune system functioning from the stress associated with divorce (Kitson and Morgan, 1990).

1.6.3.5 Relationship Outcomes of Divorces:

Relationships and social networks are influenced in various ways by divorce. Divorced individuals generally experience more social isolation and have similar social networks than do married individuals. This is explained in terms of them having less common interests with married friends following divorce. Moreover, friendships can become divided between the couple like other marital assets, as friends may choose sides.

1.6.3.6 Positive Outcomes of Divorces:

Most studies to date have looked for and found, primarily negative outcomes from divorce. The few studies that have investigated the potential benefits of divorce show that, particularly for women, divorce can be a positive experience (Amato, 2000). If the marriage was highly conflictual, ending the marriage can relieve stress in all family members. Also an individual’s sense of having successfully survived divorce is associated with increased self-confidence and efficacy, particularly for women.
1.6.3.7 Factors Influencing Adjustment:

Numerous factors affect the ways in which couples adjust to divorce. These include both personal factors (those that reside within or are inherent to individuals) and contextual factors (those that reside outside individuals).

• Personal Factors:

Several personal characteristics influence adjustment to divorce, such as demographic characteristics (i.e. age, educational level, employment and socio-economic status). For example, some studies have found that older individuals have more difficulty in adjusting due to their limited post-divorce options (e.g., employment, remarriage) (Kitson and Morgan, 1990). Other studies found better adjustment among older individuals, because they had fewer co-parenting issues and conflicts due to children being older. Higher education, socio-economic status and being employed are consistently associated with post divorce adjustments. It is likely that employment contributes positively to adjustment because more sources of social support are available and less economic hardship is experienced.

Individuals' levels of pre separation-psychological functioning also affect divorce adjustment (Hetherington, Law and O'Connor, 1997; Tschann, Johnston and Wallerstein, 1989). Individuals who have better coping skills and higher levels of emotional stability and psychological functioning before the divorce are generally more well-adjusted afterwards. Individuals who have higher sense of self-mastery and self-esteem also experience higher levels of well-being following divorce.
Whether the individual initiated the divorce is another factor affecting adjustment. Spouses typically do not emotionally leave the marriage simultaneously and, therefore may experience different trajectories in their adjustment. The person who initiates divorce often mourns the loss of marriage before the legal divorce takes place; however non-initiators can experience surprise when the request for a divorce surfaces, and they then begin to consider the end of the marriage, when the initiator is already on the road to recovery.

The degree of attachment to the former spouse can affect adjustment. Research shows that co-operative post-divorce relationships are both possible and healthy for the couple, and particularly for the parents (Ahrons, 1994). However, when one or both spouses remain preoccupied with their former spouse, post-divorce adjustment is hindered.

- **Contextual Factors:**

There are a number of contextual factors that affect post-divorce adjustment, such as the amount of social support, both perceived and received by divorced individuals. Those who are less socially involved and more socially isolated following divorce generally have a more difficult time adjusting. Some research has proposed that benefit of social involvement stems from the link between social involvement and attachment to the former spouse (Tschann, Johnston and Wallerstein, 1989). Higher levels of social involvement generally are associated with lessened attachment to the former spouse, and as noted, less attachment facilities are available in healthy post divorce adjustment. However, Wang and Amato (2000) suggested that some
social support comes with a price, including feelings of guilt, dependence on others or criticism from the giver of the support, particularly if the support comes from kin.

Despite variations in the structure and function of the families in different countries, divorced is experienced by an increasing number of families. Divorce and its impact on divorcing couples continue to be an area worthy of investigation. Because of policy and political implications, greater care is warranted in examining the complexity inherent in this process.

1.6.4 Singlehood:

The never married are a diverse and complex group of individuals and form an important chunk of the elderly population. They differ by sexual orientation, age, ethnicity, and living arrangements, and are as varied as married persons by social class background, education, occupation and income level. In later life, the never married are likely to face economic problems (particularly for older women) and weaker social support networks (particularly for older men) than married counterparts. Bedard (1992) and others contend that the happiness of singlehood is related to meeting their social and economic needs, and is not associated to the issue of being single. This makes it necessary to understand their personality profile from mental health perspective, and hence underlies the relevance of the current investigation.

People who prefer the single life say that it has many advantages like obtaining personal freedom, career opportunities, sexual availability and diversity and a chance for self-improvement. In one study, single individuals were as physically and emotionally healthy as those who married (Rubenstein, Shaver and Peplau, 1979). In
some ways, single women are better off than single men. Women who have never married have more education, higher incomes and better mental health than single men (Macklin, 1980).

The problems of single people range from practical ones like finding a job, getting a place to live, and being totally responsible for themselves to the intangibles of wondering where they fit into the social world; how well they are accepted by friends and family, and how their single status affect their self-esteem. Single people may be stereotyped as being single because they are sexually unattractive, or have unresolved psychosocial conflicts, or cannot make an emotional commitment, or are homosexual, although these views seem to be diminishing.

Two other common stereotypes of single individuals are that they are lonelier than married people because they do not have a steady companion and that they have many different sexual partners. When 400 single, divorced, never married and remarried Ohioans were interviewed, most single did not express great feelings of loneliness and fewer than 20% had multiple sexual partners. On both these criteria, divorced people came almost closer to the stereotype than those who had never married (Cargan, 1981).

Single people who want to enjoy some of the benefits of family life without being married are meeting their needs in a number of ingenious ways. Some are developing informal “communes of unattached individuals who are not close and intimate friends but operate among each other on the basis of shared needs and reciprocal services” (Adams, 1971).
Singlehood is on the rise in different states, in part because people are postponing marriage. So many people are marrying so late that demographers cannot agree on the ultimate size of the single population. The following table 1.3 represents the percentage of never married persons in India.

<table>
<thead>
<tr>
<th>Ages (years)</th>
<th>40-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75-84</th>
<th>&gt;84</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>8.3</td>
<td>6.7</td>
<td>5.6</td>
<td>4.9</td>
<td>4.6</td>
<td>3.2</td>
</tr>
<tr>
<td>Women</td>
<td>6.3</td>
<td>5.4</td>
<td>4.4</td>
<td>4.5</td>
<td>5.8</td>
<td>5.6</td>
</tr>
</tbody>
</table>

Sources of Data from U.S Bureau of the Census, 1990a.

The literature finds other gender differences in how singlehood is experienced, and tends to be complicated by age. Many men who remain unmarried are often those at the very bottom of the social scale, who are sufficiently low in status (Ungar and Crawford, 1992). Never married women tend to manage their lives better than do single men. Studies suggest that men are more depressed, report lower levels of well-being and life satisfaction and are more likely to commit suicide than single women. It may be that single women’s greater ability to maintain close and supportive ties over their lifetime with family members, particularly with siblings, friends contributes to their greater overall well-being.

In general, however, never married people report satisfaction in terms of friendships, general standard of living and finances. Although the social networks of the never married tend to be smaller than married, the majority of never married individuals are socially active, with friends, neighbours, relatives as well as dating partners. Family
ties are often central in the lives of never married, particularly for never married women, whose roles include caring for partners, being a life-long surrogate mother to the siblings’ children (Allen and Pickett, 1987).

An interpretation given by Pearlin and Johnson (1977), perhaps less convincing now than in earlier years, attributes the physiological distress of the unmarried to the powerful norms defining marriage as the most desirable state an adult can attain. According to this view, individuals who remain single are moving against the grain of these norms, eventually running the risk of being treated as people either unwilling or unable to conform to accepting practices. They are considered as being outside the normal pattern of living, and come to be seen as unfit and deviant (Gurin, et al., 1960)

As the above mentioned four samples highlight various shades of marital status thus they have been selected for the present venture. The psychosocial changes that take place with the ageing process are numerous. In the present context, this issue is attempted to be verified with regard to the selected set of psychiatric morbidity, anxiety, happiness and narcissism, relationship profile and personality dimensions.

1.7 Selected variables of the study

1.7.1 Psychiatric morbidity among the Elderly:

It refers to psychopathology manifested in any individual. Research findings suggest that in old age entrance of psychopathology is much more prevalent. Keeping this point in mind, Wernicke, Linden, Gilberg and Helmchen (2000) indicated
that psychopathological syndromes occurred in 72.7% of the elderly and clinically defined psychiatric disorder was found in 49.4% of elderly. Excluding insomnia, the overall psychiatric morbidity was 40.4%.

1.7.2 Anxiety in Elderly:

Anxiety is a defused, highly unpleasant, often vague feeling or apprehension accompanied by one or more bodily sensations for example, an empty feeling in the pit of the stomach, tightness in the chest, headache etc (Hurlock, 1997). Anxiety is a psychological and physiological state characterized by somatic, emotional, cognitive and behavioral components (Seligman, Walker, & Rosenhan, 2000). It is considered to be a survival mechanism for facing the world of stressors, as it acts as a signal to help in preparation and dealing with conflict situations, but at times, it comes out of control and leads to excessive anxiety and leads to anxiety disorders. It has distinct physical, emotional, cognitive and behavioral components. According to May (1977), the chief features of anxiety are feelings of uncertainty and helplessness in the face of danger. Anxiety affects one's adjustment in life situations in several ways. Mandler (1972), stated three schemas of anxiety - emphasizing on the antecedent conditions or the conditions which give rise to anxiety, the organismic conditions which can be observed in the individual and consequent conditions or response aspect of anxiety. Barlow (2002), defines anxiety as "a future-oriented mood state in which one is ready or prepared to attempt to cope with upcoming negative events". Schwarzer (1997), classified anxiety research within two separate traditions:
As an acute emotion and as a personality construct - The first line of research is mainly done by psychologists based on psychometric tools with a major focus on individual differences and,

As a mental disorder or an illness - The second line of research is mainly done by psychiatrists based on qualitative categories (such as those given by the DSM) with a focus on case studies.

Different theoretical positions were expressed in defining anxiety. Under the psychoanalytic theory, Freud (1894) in his earlier formulations considered anxiety to be the outcome of repressed somatic sexual tension, or as transformed libido. This transformation occurred as a result of repression. He later replaced their notion with the much broader conception of anxiety where he reversed the relationship between repression and anxiety and it became a signal from the ego and as a signal for danger, distinguishing now between objective anxiety (fear) and neurotic anxiety, depending on whether the danger comes from the outside world or from internal impulsion (Freud, 1936). Freud’s followers put forward with modifications and prominent among them were May (1950), who characterized anxiety as “the apprehension cued off by a threat to same value the individual holds essential to his existence as a personality” and Sullivan, (1953) referred to it as the state of tension arising from the experience of disapproval in interpersonal relations. Ohman (2000), separated anxiety from fear by stating one as a generalized mood condition that can often occur without an identifiable triggering stimulus while fear is an emotional response to a perceived threat. Additionally, fear is related to the specific behaviors of escape and avoidance, whereas anxiety is related to situations perceived as uncontrollable or unavoidable.
Under Learning theory, the role of anxiety is mainly derived from nature and consequences of punishment and praise. Accordingly it is an acquired drive -due to conditioning, and avoidance learning. In existential theory the concept of anxiety has remained the same from Kierkgaard's path breaking concept in 1844 which had the notions of freedom and anxiety and is intimately tied with this existence of possibility and potential freedom. The philosopher, Kierkegaard, described anxiety or dread in *The Concept of dread*, associated with the "dizziness of freedom" and suggested the possibility for positive resolution of anxiety through the self-conscious exercise of responsibility and choosing. Another theologian, Tillich (1952), characterized existential anxiety as "the state in which a being is aware of its possible non-being" and he listed three categories for the non-being and resulting anxiety:

- ontic (fate and death),
- moral (guilt and condemnation), and
- Spiritual (emptiness and meaninglessness).

According to Tillich, spiritual anxiety is predominant in modern times while the others were predominant in earlier periods. Tillich argues that this anxiety can be accepted as part of the human condition or it can be resisted but with negative consequences. In its pathological form, spiritual anxiety may tend to "drive the person toward the creation of certitude in systems of meaning which are supported by tradition and authority" even though such "undoubted certitude is not built on the rock of reality".

Spielberger (1972, 1983) made a distinction between state and trait anxiety where short term or State anxiety, is defined as an unpleasant emotional arousal in the face of threatening demands or dangers. A cognitive appraisal of threat is a prerequisite
for the experience of this emotion (Lazarus, 1991). While, long term or trait anxiety reflects the existence of stable individual differences, the short term tendency is to respond with state anxiety and in the anticipation of threatening situations. In positive psychology, anxiety is described as the mental state that results from a difficult challenge for which the subject has insufficient coping skills (Csikszentmihalyi, 1997).

Speilberger (1970), defined state anxiety as a reaction consisting of unconsciously perceived feelings of tension and apprehension with associated activation or arousal of the autonomic nervous system. Trait anxiety refers to relatively stable individual differences in anxiety proneness, i.e., to differentiate among the situation on threatening and to respond to these situations with differential elevation in state anxiety.

Patel and Broota (2000) studied loneliness and death anxiety among elderly subjects. The study showed that elderly individuals experience loneliness and death anxiety irrespective of their family set up. However, religious elderly individuals experience significantly less loneliness than non-religious elderly individuals. It is thus evident that the study of anxiety with special reference to elderly groups provides a fascinating field for further research. It may also be stated that with regard to the psychosocial study of ageing, personality may be regarded as a pivotal dimension in describing patterns of ageing and in predicting relationships between general mental health, loneliness, adjustment pattern, anxiety and the like.

Research also indicated that anxiety is one of the prominent features of elderly people. Most of the common factor of elderly people is feeling of 'empty-nest' (Hurlock, 1997). Death is very high among elderly individuals. Anxiety also comes from low-socio-
economic status, poor health condition, loss of spouse, loss of friends, change of appearance, change of sensory abilities, change of physiological functioning, change in sexual functioning. Most of the elderly women suffer from anxiety because they feel that they are impotent, and that they are useless. Anxiety rate is higher in women than men (Schneider, 1996). Researchers suggest that 70% of old people were found suffering from anxiety because their ill health, economic dependence, strained social relations and contradictory life values. 30% of old people were not suffering from anxiety because their good health, economic independence, co-operative harmonious relations with members of the family (Patel, 1998).

1.7.3 Happiness among the Elderly:

Seligman (2002) describes happiness as consisting of 'positive emotions' and 'positive activities'. Positive emotions include satisfaction, pride, optimism, hope, trust, pleasure, gratifications. Literature survey about happiness and unhappiness in old age revealed that aged persons are carry-overs of attitudes formed earlier as a result of success and failure of their past achievements and adjustments. As a result, unsuccessful past adjustments make present adjustments as difficult as in old age. This means that unless elderly have made reasonably good adjustments in the past, they have far less chances for happiness (Barrett, 1972). The pursuit of happiness is an important goal for many people. However, surprisingly little scientific research has focused on the question of how happiness can be increased and then sustained, probably because of pessimism engendered by the concepts of genetic determinism and hedonic adaptation. Nevertheless, emerging sources of optimism exist regarding the possibility of permanent increases in happiness. Drawing on the past well-being literature, the authors propose that a person’s
chronic happiness level is governed by three major factors: a genetically determined set point for happiness, happiness-relevant circumstantial factors, and happiness-relevant activities and practices. They consider adaptation and dynamic processes to show why the activity category offers the best opportunities for sustainable increasing happiness (Lyubomirsky, Sheldon and Schkade, 2005).

1.7.4 Narcissism and its relation to the Elderly:

It refers to a “pervasive pattern of grandiosity” that is characterized by arrogant behaviours, feelings of entitlement and superiority and a lack of sympathy for or concern about others (APA, 1994). A current investigation examined the association among narcissism, age, ethnicity, world region, gender using a large (n=3445) sample, suggesting that narcissism declines in older participants and males report being more narcissistic than females (Foster, Campbell and Twenge, 2003). Hotchkiss (2005), summarizes the history of narcissism theory and offers thumbnail sketches of what narcissism looks like from the respective of several major theorists. From these conceptualizations are derived six key concepts that recur in narcissism theory, which are as follows:

(1) differentiation

(2) internal objects

(3) primitive defenses;

(4) envy;

(5) superego development

(6) affect regulation.
The word narcissism is derived from a great myth which is about Narcissus, a handsome Greek Youth, who rejected the desperate advance of the nymph Echo. As punishment, he was deemed to fall in love with his own reflection in a pool of water. Unable to consummate his love, Narcissus pined away and changed into the flower that bears his name, the Narcissus (Sanyal, 2005). In other words, it relates to an exaggerated self love. However the term may consist of a variety of meaning depending on the orientation

Lubit (2002), compared healthy and destructive narcissism in relation to their long-term impact on organizations.

Table 1.4: Chief personality features of healthy versus destructive narcissists.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Healthy Narcissism</th>
<th>Destructive Narcissism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-confidence</td>
<td>High outward self-confidence in line with reality</td>
<td>An unrealistic sense of superiority (“Grandiose”)</td>
</tr>
<tr>
<td>Desire for power, wealth and admiration</td>
<td>May enjoy power</td>
<td>Pursues power at all costs, lacks normal inhibitions in its pursuit</td>
</tr>
<tr>
<td>Relationships</td>
<td>Real concern for others and their ideas; does not exploit or devalue others</td>
<td>Concerns limited to expressing socially appropriate response when convenient; devalues and exploits others without remorse</td>
</tr>
<tr>
<td>Ability to follow a consistent path</td>
<td>Has values; follows through on plans</td>
<td>Lacks values; easily bored; often changes course</td>
</tr>
<tr>
<td>Foundation</td>
<td>Healthy childhood with support for self-esteem and appropriate limits on behaviour towards others</td>
<td>Traumatic childhood undercutting true sense of self-esteem and/or learning that he/she doesn't need to be considerate of others</td>
</tr>
</tbody>
</table>
Foster, Campbell and Twenge (2003), studied individual differences in narcissism and their results showed that:

- narcissism declines in older participants
- which was consistent with previous findings where males report being more narcissistic than females,
- that ethnic differences in reported narcissism are generally comparable to those found in the self-esteem literature, and
- that world region appears to exert influence on narcissism, with participants from more individualistic societies reporting more narcissism than collectivistic ones.

In this present context, the study of narcissism is felt to be important as its concept has been extended from the restricted domain of mental illness to encompass many tendencies among ostensibly normal individuals (Wallace and Baumeister, 2002). The construct has been found to be closely related with performance and self regard. Different types of work styles and consequent professional demands have been found to influence their narcissistic compositions among other personality traits.

1.7.5 Relationship among Elderly:

Close relationships are the sine qua of non human existence. The desire to establish and maintain intimate ties with others is considered by some to be a basic human motive (Baumeister and Leary, 1995; Deci and Ryan, 1991). Consistent with the fundamental nature of motive, the success and failure of interpersonal relations have a profound impact on our life satisfaction (Argyle, 1987; Myers and Deiner, 1995). In this context, Hansson (1986), indicated that young-old (60-72 years) person’s relational
competence, involvement and satisfaction with social support relationships were associated with morale, self-esteem and adjustment to widowhood. Price and Joo (2005), explored that retirement satisfaction and perceived health differed by marital status. Psychological well-being, however, did not differ significantly between marital groups.

1.7.6 Elderly and Personality Dimensions:

Mischel (1976), mentioned personality consists of distinctive patterns of behaviour that characterize each individual’s adaptation of his or her life. In this present study psychoticism, neuroticism, extraversion and lie scores as personality dimensions would be assessed. Literature ascribes many personality changes to the last period of life. Robert Brooke says, “The years had given them kindness”, Mathew Arnold describe the absence of emotional feeling, and Shakespeare writes of old age as “cold” or “crabbed”. Beginning with experimental and statistical studies, Pollack (1929), studying first offenders in higher age brackets revealed a relative increase in sex crimes, violations of narcotic and drug laws and embezzlement. He noted tendencies of fatigability, stubbornness, narrowing of emotions, weakness of fantasy and increasing egotism in personalities of the groups he studied. Betzendahl considered the materialistic egotism of age to be necessary and self-protective and pointed out that anxiety in male and jealousy in female become rather prominent at this time. Morgan (1938), analyzed the “comforts and worries” of age and found among the former: family relationships, friends, material comforts, religion, own home, reverie, good health, work and reading in that declining order of frequency reference. Worries in diminishing order were fear of dependence, concern for wife or family, poor health, inability to work, defective family relationships and death. In another research, Maiden, Peterson, Caya, Hayslip (2003) indicated that
decreased social support and unmet needs were associated with more neuroticism, with less extroversion being associated with greater psychological needs. However, openness was very stable and was least affected by life events.

1.7.7 Associated Psychosocial Variables:

In addition to the psychosocial variables discussed, some more associated variables, in old age have been found to be boredom, depression, alienation self-esteem, value system, adjustment and life satisfaction.

With regard to **boredom**, it follows naturally that the pattern of boredom does change with age. The varieties of activities that keep a young individual busy prevent them from being bored very easily. Middle aged adults, in contrast, tend to get bored quite easily with a routine job and a family that offers little excitement. Older individuals, though expected to be highly bored, have been found to be less prone towards boredom compared to younger people (Farmer and Sundberg, 1986).

**Alienation** in elderly is generally characterized by emptiness, loneliness and isolation. Although some men and women are favoured with large and loving families or have developed friendships and other association which guarantee against loneliness, however many elderly people grow old in isolation. Families have drifted apart, friends have died, and no one has taken their place.

**Late-life depression** has been shown to be influenced by genetic, situational, illness-related biological and psychological factors. However, relative to early onset depression is less influenced by environmental events. Indeed, the psychological model of mental health posits that late life depression arises from the loss of self-esteem,
loss of meaningful roles, loss of significant others, declining social contacts owing to health limitations and reduced functional status, dwindling financial resources and a decreasing range of coping options.

**Self-esteem** is related to the discrepancy between self-concept and self-idea, both of which are acquired in the process of growing up and the family is an important influence on the process.

**Value system** of an individual, too, tends to change with increasing age. In a study by Kundu, Sanyal and Das (1989), it was found that value preferences of individuals change over the years with passage of time. While the young individuals placed high preferences on the economic and social values, the elderly showed their preferences with regard to religious value in particular.

Several factors influence **adjustment** in old age, a few of which are health, living conditions, economic conditions, living within physical limitations, loss of physical health, adjustment to lower income, achieving security and medical care (Hurlock, 1997; Dunn, 1966, Neugarten, 1968; Cavan, 1952).

**Life satisfaction** can be predicted by the amount of adjustment that a particular individual manages to reflect in certain areas of his life. It has been found that satisfactory familial and occupational adjustments in particular seem to influence the life satisfaction of an individual to quite an extent in later life.

**1.8 Present Approach to the Study of Aging:**

In the present context, there is an ample need to study the process of aging and its consequent changes over the years owing to the increased life span of people. The
approach in the present study to the problem of aging is mainly psycho-social in nature, where the researcher aims to view the psycho-social changes that emerge out of the aging process as in the areas of anxiety, happiness, narcissism, relationship and personality dimensions. It has been the intention of the researcher to study the differences in the psychological frames of married, widow, divorcee and unmarried elderly people. The study aspires to gain knowledge as how the expectations, roles, opportunities and responsibilities of an individual, along with his perceptions towards the self as well as others around him change in different social contexts of the senior citizens of our culture.

On the basis of the given layout of the present project, the expected implications seem to be that in India, marriage, in some form, is now widely recognized as almost universal love, economic security, companionship, protection, emotional security, escape form loneliness and unhappy home situation, adventure of common interests (Bowman, 1974). The newness of the present research design lies in the fact it has aimed to view the changes in several psychosocial dimensions such as anxiety, happiness, narcissism, relationship and personality dimensions between married, widow, divorcee and unmarried elderly counterparts. It is expected that the result of this research work will help to bring forth some new information and will help adult individuals to prepare themselves, physically and mentally, to face the adverse effects of aging which ultimately will provide them means to improve their psychological and social well-being. The work will, no doubt, be a new one in our societal context and it will definitely contribute towards the advancement of the science of psychology of aging in India.
1.9 Objectives of the Present Study:

Embracing all these conceptual discussions, the categorical objectives of the present study are decided to be:

i) whether there exists any significant difference between married, widow, divorcee and unmarried aged groups (irrespective of gender) with regard to their

   a) Anxiety
   b) Happiness
   c) Narcissistic Behaviour Pattern
   d) Interpersonal Relations
   e) Personality Dimensions

ii) whether there exists any significant gender difference (irrespective of the different groups) with regard to their

   a) Anxiety
   b) Happiness
   c) Narcissistic Behaviour Pattern
   d) Interpersonal Relations
   e) Personality Dimensions

iii) To probe, whether there is any intra-group differences with regard to their

   a) Anxiety
   b) Happiness
   c) Narcissistic Behaviour Pattern
   d) Interpersonal Relations
   e) Personality Dimensions.
iv) To probe, whether there is any intra-gender differences with regard to the selected variables and their respective dimensions.

This may be represented by the schematic diagram of personality disposition as follows:

![Schematic representation of different personality correlates taken up by the present research](image)

**Fig. 5: Schematic representation of different personality correlates taken up by the present research**

With these objectives, the study adopts the following procedural steps to be elaborated in the forthcoming chapters to arrive at a conclusion that is expected to impart information which can be used in understanding the link between the different groups on the basis of their marital status and life’s gradual process of advancement in ageing.