CHAPTER - VI

CONCLUSIONS
CONCLUSION

The process of aging is a very heterogenous and individual process i.e., each person grows old in a different way. About one-fourth of a man's life is spent in growing up and preparing for active participation in society. Similarly about one half is engaged in a variety of activities in an attempt to gain happiness and the final quarter of life is spent in a progressive process of reduced activity leading to physical decline followed by inevitable death. This process of decline during the last part of life becomes a problem of problematic sequence to the aged in the present modern times.

In ancient societies old people were widely respected. Among the ancient Hebrews, Greeks and Romans, the aged, who were on the threshold of the last phase of their life cycles were believed to have mystical power, dominating wisdom and unquestionable authority. In India also, old age evoked deep respect and honour in the traditional society. In the joint family system a sort of gerontocracy prevailed. It was customary to obey the directions of the eldest members of the family. His decision was final in all matters. They were considered to be the
best source of social education, social service and social cohesion. Their experience and perceptive ideas were invaluable assets for the development of the community.

With the passage of time the position of the aged has been gradually undergoing a change. This can be attributed to the process of industrialization, urbanisation, social mobility, easy communication facilities and individualism. These winds of change brought about by modernisation and technological advances has affected the traditional ties and earlier emotional links. The young people migrate to urban areas leaving behind their congenial rural habitats. They are virtually thrown into a life of uncertainty and anonymity. Under such predicament the old who stay behind can not be taken care of nor do they have the same prestige and honour as they used to enjoy earlier.

With the advancements made in health, the mortality rate has decreased and the average life expectancy has increased the world over. India is no exception. We find that in 1985 the population figure of 60+ consisted of 6.83 per cent of its population and from the projected prediction in 2025 the figure of 60+ will be 14.44 per cent. Thus, during this period of 40 years the population of the aged will be doubling itself.

Keeping the above aspects in view we envisaged to study the problems faced by the aged in both the urban
and the rural settings. Our sample consisted of both male and female. While we were analysing the data we found similarity in the problems faced by men and women respondents. Hence, we clubbed their responses and comparison was made between the urban and the Rural respondents.

From the data presented in Chapters III to V we find that the problems faced by our respondents are quite bleak. In the family front only 4.1 per cent have 'very satisfactory' relationship with their family members. Their health condition is very bad as they lack proper nourishment. Only 5.8 per cent of the urban respondents visit the doctor at the time of illness, compared to 0.6 per cent of the rural respondents. In the rural context medical facilities are not available and even if available it is in a distant place.

Majority of the respondents have unfavourable attitude towards the nuclear family system. This can well be understood as they are facing a crisis because of this system. Attitude towards intercaste marriages, abolition of purdhah, equal rights to women and widow remarriage evoked a favourable opinion predominantly from among the urbanities. The rural people have still to catch up with these new ideas as they are bound by traditional attitudes.

Only one sort of victimization seems to be faced by every four out of ten respondents (39.4 per cent) i.e., dispute with family members. This dispute is higher in
the rural area (49.7 per cent) than in the urban area (28.8 per cent). More than two fifths (42.22 per cent) of the urban respondents and one-third (33.76 per cent) of the rural respondents faced psychological abuse in their family. These were in the form of abuse, threats of isolating from family etc. whereas in the case of 28.90 per cent urban and 30.0 per cent rural respondents suffers from physical abuse like: being overburdened with work and also battering.

During crisis we find that only 13.6 per cent respondents have relatives who are willing to give them a place to stay. In other words the majority are very attached to the place where they stay. Even if they want to shift they do not have a place to go to.

Among the rural respondents only 10.6 per cent were aware of the old age pension scheme compared to 65.5 per cent of the urban respondents. Again we find that some of these rural respondents did apply for the old age pension but were not given as they could not persue the matter. Hence, none of our rural respondents got the pension benefit.

Old age homes, are coming up at snail's pace. Only 18.9 per cent had heard about such homes. If given an opportunity nearly half of them would like to live in such homes as they feel that their day to day problems will be over.
In retrospect, we may state that the objectives of the present study have been achieved to a large extent. In this modern society there are many social problems. The problems of old age should also be given an important place as by 2025 A.D., the world population of 60+ consist of 15 per cent of its total population. In other words the world will soon have to face an 'age quake' problem.

Some of the suggestions which come to mind are:

i) Old age homes should be opened in rural area and the existing trend of opening them in urban areas should be stopped as this would also help to decongest the urban areas;

ii) Wide publicity of pension scheme should be given;

iii) Pension formalities should be simplified and the amount should be increased from its present Rs. 60/- per month to Rs. 500/- per month;

iv) Day care centres for the aged should be opened.

v) Foster care and adoption of the aged should be encouraged; and

vi) An integrated national policy for the aged should be formulated which identifies their needs and their right to share in the fruits of development.

On a final note, the results of this study indicates
an important need for in depth research that examines the role of family dynamics in elderly abuse and neglect. Given that a great number of abusers were adult children or spouses, it is likely that these cases involve complex and long term family problems and unresolved conflicts. One such issue for which there was insufficient information in this study is the possibility that abusers were themselves abused or neglected as children. An examination of family dynamics would also need to identify differences between spouse abuse and abuse by adult children as well as between the various types of abuse.